



DEPARTMENT OF THE NAVY

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TRAINING GROUP PACIFIC FLEET

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FASOTRAGRUPACINST 5100.2A

N72

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FASOTRAGRUPAC INSTRUCTION 5100.2A

Subj: OCCUPATIONAL SAFETY AND HEALTH PROGRAM MANUAL

Ref: (a) OPNAVINST 5100.23D
(b) OPNAVINST 5100.12F
(c) OPNAVINST 5100.25A
(d) FASOTRAGRUPACINST 4110.2
(e) OPNAVINST 5102.1C
(f) SECNAVINST 5100.15

1. Purpose. To implement Navy Occupational Safety and Health (NAVOSH) instructions and to promulgate safety and occupational health regulations pertinent to FASOTRAGRUPAC.

2. Cancellation. FASOTRAGRUPACINST 5100.2., FAOTRAGRUPACINST 5102.1B

3. Policy. It is the policy of this command to provide all personnel a working environment that is free from recognized hazards that are likely to cause serious physical harm or to provide adequate protection in situations when the working environment is not hazard free. The command considers no job or task so important that it cannot be accomplished safely. Each member shall immediately report to their supervisor any injury, occupational illness, or property damage resulting from a mishap. Personnel are also responsible for reporting any unsafe/unhealthy condition encountered or observed. Such reports shall receive prompt attention and the member shall not be subject to reprisals or other punitive action for making the report. All supervisors at every level have the responsibility to provide for the safety and health of each member under their supervision. The command will do everything reasonable to ensure a safe and healthy workplace.

4. Action. An effective safety program, designed to prevent injury, conserve manpower and material, can result with the full cooperation and support of all hands. Department Heads/Staff Assistants, supervisors, civilian employees and military personnel shall actively participate in the safety and occupational health program by enforcing and ensuring strict compliance to safety rules, regulations, procedures and practices.

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5. Changes and Corrections. All recommendations for changes, corrections or additions to this instruction should be forwarded to FASOTRAGRUPAC Safety Office, code N72, via the cognizant Department Head/Staff Assistant.


R. C. OWSLEY

Distribution:
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INTRODUCTION1001. Background

a. The Occupational Safety and Health Act (OSHA) was signed on 31 December 1970 and Federal agencies were directed to establish and maintain comprehensive and effective OSH programs consistent with OSHA standards.

b. A Presidential Executive Order (E.O. 11612), signed July 1971, stated that the Federal government has a special obligation to set an example for safe and healthy employment.

c. In 1974, another Executive Order 11807 tasked the Secretary of Labor to issue guidelines to assist Federal agencies in establishing their programs.

d. On 9 October 1974, these "guidelines" were issued as Title 29, Code of Federal Regulations, Part 1960, "Safety and Health Provisions for Federal Employees."

e. In February and October 1980, revisions were made to executive orders and the "Basic Program Elements for Federal Employee Occupational Safety and Health Programs."

f. DOD Instruction 6055.1 implemented the OSH Program for the Defense Department on 30 September 1981.

g. The Navy Occupational Health Program has traditionally been conducted under the cognizance of the Naval Medical Command (formerly the Bureau of Medicine and Surgery).

h. Reference (a) is the Navy's NAVOSH Program Manual. It contains twenty-seven chapters and is the primary guidance for Navy personnel.

1002. Navy Occupational Safety and Health Policy

a. It is Navy policy to provide a safe and healthy workplace for all personnel. These conditions shall be ensured through an aggressive and comprehensive OSH Program fully endorsed by the Secretary of the Navy and implemented through the appropriate chain of command.

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b. The program shall include the following:

(1) Compliance with applicable standards.

Prompt abatement of identified hazards.

Procedures for reporting suspected hazards.

(4) Appropriate OSH training for safety and health officials.

(5) Procedures to review construction planning to ensure OSH hazards are eliminated or controlled.

(6) Provide OSH data required by higher authority.

7) Comprehensive Occupational Health surveillance programs.

(8) Procedures to recognize superior or deficient OSH performance.

1003. Applicability. The NAVOSH program applies to all civilian and military personnel aboard FASOTRAGRUPAC.

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(8) Procedures to recognize superior or deficient OSH performance.

1003. Applicability. The NAVOSH program applies to all civilian and military personnel aboard FASOTRAGRUPAC.

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RESPONSIBILITIES

2001. Background. A successful NAVOSH Program results when the visibility of the program permeates every level of the organization. The maintenance of safe and healthy working conditions is a line management responsibility. To achieve success, the NAVOSH Program must be fully supported through the chain of command. Responsibilities assigned are not intended to be all encompassing or the exact limit of involvement expected.

2002. OSH Program and Record Review. Personnel can review copies of the NAVOSH standards, records of safety and health committees and their actions and recommendations and various documentation on the Command OSH Program in the Safety Office.

2003. Command Responsibilities

a. The Commanding Officer is responsible for:

- (1) Conducting an aggressive and continuing OSH program.
- (2) Ensuring all responsibilities listed in paragraph 0207 of reference (a) are properly administered in local command programs.

b. The Executive Officer is the chairman of the Safety Policy Council.

2004. Department Head Responsibilities. Responsible for:

a. Complying with NAVOSH standards and guidance contained in this manual; and

b. Disseminating NAVOSH Program information by:

(1) Ensuring poster DD Form 2272 is posted in prominent locations in each work center.

(2) Briefing personnel concerning the protection and obligations provided for in the NAVOSH Program.

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(3) Posting procedures for reporting unsafe or unhealthy working conditions.

(4) Informing personnel that they can review copies of the NAVOSH standards, records of safety council meeting and recommendations made to the commanding officer, and the Hazard Communication Plan located in the Safety Office.

2005. Individual Civilian and Military Personnel Responsibilities. Personal awareness is the key to achieving healthy workplaces. Each individual is responsible for:

- a. Complying with NAVOSH standards and all applicable rules
- b. Reporting observed workplace hazards (see Chapter 10).
- c. Immediately reporting injuries, or occupational illnesses or property damage resulting from an accident to their supervisors.

2006. Division Officers, Managers and Work Center Supervisors Responsibilities. The first line supervisor is the "key" person in the safety program. Supervisory personnel includes all civilian supervisors and military, E-5 and above. As the first line manager of the work force, supervisors have the greatest impact on safety and health matters. Supervisors are responsible for:

- a. Demonstrating good leadership through example by observing safety and health regulations.
- b. Instructing newly assigned personnel in the safety and health aspects and hazards of their jobs and ensure they fully understand their individual safety responsibilities by conducting and supporting required safety training.
- c. Incorporating all safety and health aspects into job planning, taking advance action to minimize hazards that are inherent in their specific job.
- d. Maintaining assigned work spaces in a high state of cleanliness in order to eliminate fire hazards, tripping

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hazards, access and egress problems and free access to emergency equipment and electrical panels and switches.

e. Inspecting all assigned areas daily to identify hazards and unsafe practices. Supervisors do not have the authority to deviate from, or ignore known safety and health regulations.

f. Encouraging personnel to report unsafe/unhealthy conditions and also encourage suggestions on improving safety and health conditions (see Chapter 10).

g. Keeping the Department Head and Safety Manager advised on the status of the safety and health program within divisions and shops.

h. Report mishaps and evaluating corrective measures to prevent future similar occurrences.

i. Informing chain of command when anyone is considered to be physically or mentally unfit to perform the work assigned and enforcing all physical limitations imposed on personnel issued by medical officers or medical personnel.

j. Ensuring corrective action is immediately taken to prevent unnecessary exposure to workers following identification of hazards revealed by mishaps or hazard reports.

k. Authorizing only properly instructed, licensed and fit personnel to operate motor vehicles, weight handling and material handling equipment.

l. Acting as the safety point of contact in coordinating and evaluating the safety and health program, including making "on the spot" corrections to reported deficiencies.

m. Providing the Occupational Safety and Health Office (Code N72) with timely, written and signed reports of actions taken to abate OSH inspection deficiencies, including full explanation of pertinent circumstances of those deficiencies requiring over 30 days to correct.

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n. Measuring and recognizing superior or deficient OSH performance. Performance evaluations shall reflect personal accountability, consistent with the duties of the position, and with appropriate recognition of superior performance, or conversely deficient performance as appropriate.

o. Encouraging a free flow of information and ideas from personnel on methods of improving the safety of their workplace, work practice, and work processes. Developing a reward process for outstanding safety contributions.

2008. OSH Manager responsibilities are listed in paragraph 3005.

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ORGANIZATION AND STAFFING

3001. Background. Each Command is tasked with the responsibility of achieving the objectives of the NAVOSH Program. The commanding officer serves as the activity focal point on all occupational safety and health matters. In order to accomplish this task, commands are required to establish an OSH Office to manage and implement an effective NAVOSH program. Guidance to set up the OSH Office and staff is contained in Chapter 3 of the NAVOSH Program Manual.

3002. OSH Office Staffing. Reference (a) states the NAVOSH Office shall be organized and staffed to manage and implement an efficient program. Staffing guidelines and criteria are provided.

3003. OSH Organizational Functions

a. OSH Program Management. Plan, direct and administer the activity OSH program. Develop policies and directives based on local needs and higher authority requirements; review and evaluate instructions, regulations, procedures, guidelines, manuals, and standards pertaining to OSH, and assure implementation locally. Establish and maintain a current safety and health library of reference materials; establish written goals, objectives and plans for the activity OSH program; coordinate with occupational health professionals on the identification, evaluation, and control of exposures to toxic or hazardous material, substances or harmful physical agents.

b. OSH Reviews. Perform and document reviews and evaluations to ensure appropriate OSH requirements and considerations are incorporated into all operations, facilities, material, equipment. Reviews and evaluations include activity operational, and maintenance policies, procedures, and instructions; proposed repair and alteration plans and projects.

c. OSH Inspections. Plan, conduct and document workplace inspections of all buildings, grounds, facilities, material, equipment, devices, operations and conditions, to ensure

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compliance with applicable policies, laws, regulations and standards. Ensure first line supervisors are trained, briefed, and included in the OSH inspection process. Ensure action is initiated on findings and recommendations, appropriate reports are processed and submitted, deficiencies are incorporated into the activity deficiency abatement plan, notices are processed and posted appropriately, follow up on corrective actions; and maintain files and records of inspection and evaluation reports in accordance with record retention requirements.

d. Deficiency Abatement. Manage the program for the correction of workplace hazards including maintaining records, plans, logs and files, assuring proper processing of forms, providing risk assessment, recommending abatement priorities, preparing plans for review by the activity head and cognizant officials; monitoring status of corrective action, coordinate the development of projects to be submitted for centrally managed NAVOSH funding, and advise and assist those responsible for eliminating and mitigating hazards of recommended actions and status.

e. Consultation. Provide consultative service to all activity organizational elements and all levels of supervision on OSH principles and technical aspects and its application to personnel and workplaces.

f. Investigation, Reporting and Recording of Mishaps. Coordinate the investigation of all mishaps conduct investigations of mishaps resulting in lost time and property damage; analyze reports or occupational injuries, illnesses and property damage to identify causes and determine trends; maintain records and submit required mishap reports; provide appropriate data for the evaluation or claims submitted for occupationally related mishaps.

g. Personnel Hazard Reports. Implement requirements and procedures for personnel hazard reporting, investigate reports, properly process all written reports providing timely replies, make recommendations for the resolution of reports, maintain records and files of reports and corrective actions; and advise employee and managers of the reporting process, appeal rights and procedures.

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- h. Attend and Conduct Meetings. Attend and conduct meetings in accordance with Chapter 4 of this instruction.
- i. OSH Training, Promotion and Education. Conduct and coordinate OSH training and educational programs: provide advise and assistance to supervision and training personnel on OSH training requirements; monitor training to assure schedules are developed and maintained to meet requirements, and subject matter includes appropriate OSH concepts, policies and requirements; maintain copies of training records; develop and participate in safety promotion, awards and incentive programs. Foster safety awareness at all levels of the organization through appropriate promotional methods and channels of communication.
- j. Personal Protective Equipment (PPE). Evaluate all work places under the cognizance of FASOTRAGRUPAC and determine PPE requirements. Establish and maintain appropriate protective equipment programs. Review, recommend and approve all procurement of PPE to ensure it is required, appropriate and meets NAVOSH standards. Ensure the issue, use and maintenance of PPE meets NAVOSH and OSHA standards (includes sight conservation and hearing conservation program management).
- k. Hazardous Material Control and Management. Coordinate OSH aspects of the hazardous material control and management program. Assure a program is developed and maintained to provide material safety data sheets (MSDS) for all hazardous material used at the activity. Review MSDSs for adequacy and establish programs for their proper distribution and maintenance. Assure proper inventories of hazardous material are developed and maintained, and retain copies. Assure appropriate training is provided and coordinate training plans. Develop the activity hazard communication plan. Coordinate the labeling program. Ensure work procedures, PPE, engineering controls are evaluated and monitor compliance.
- l. Asbestos. Develop and implement asbestos control procedures which control or eliminate the exposure of FASOTRAGRUPAC personnel to asbestos. Ensure asbestos is identified and appropriate control actions are implemented

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m. Fire Prevention Program. The Naval Station Federal Fire Department's Battalion Fire Chief manages the day-to-day fire fighting and fire prevention functions.

n. Recreational and Home Safety Program. The Safety Program Manager shall administer the program and provide local assistance to the Morale, Welfare and Recreation Committee.

o. Industrial Hygiene. Industrial Hygiene support is provided by NAVMEDCOM. An Industrial Hygienist is assigned to North Island. That individual assists the OSH Manager in all facets of the Industrial Health Program and shall refer to reference (a) for guidance in the performance of his/her duties.

p. Review monthly zone inspections results for possible Safety discrepancies and follow up with department safety representatives for corrective actions.

3004. Safety Office Organization. The OSH office is organizationally established as a special assistant to the commanding officer. The OSH Manager reports directly to the Executive Officer, in all OSH matters.

3005. Responsibilities. The OSH Manager is responsible for all functions listed in paragraph 3003.

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COUNCILS AND COMMITTEES

4001. Background. Safety Councils and Committees serve as sounding boards for multiple viewpoints and interests of various groups and individuals on matters relating to the NAVOSH and other safety programs. Their purpose is to serve as functioning bodies in identifying, defining and assessing safety problem areas and by recommending corrective measures for policy discrepancies where they may exist. From these recommendations, new or revised policies and procedures may be developed.

4002. Safety Council

a. Function. The Safety Council has three basic functions:

(1) Create and maintain an active interest in occupational safety and health;

(2) Serve as a means of communication regarding occupational safety and health; and

(3) Provide program assistance to the commanding officer in recommending and implementing program deficiency solutions.

b. Membership

The Executive Officer (chairperson).

Department Heads/Staff Assistants.

The OSH Manager shall serve as secretary

(4) Civilian representatives should participate.

(5) Command Master Chief

6) Ordinance Officer

(7) High Safety Officer

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c. Procedures.

(1) Meetings. The Safety Council shall meet at least Quarterly, and minutes shall be maintain by OSH office. Each Council will develop its own rules of operation otherwise directed by the chairperson or the Commanding Officer.

(2) Agenda. Agenda items generated by Safety Committee meetings or other installation activities, rewriting command policy, shall be forwarded to this council for consideration and action. Agenda items shall be presented to the Safety Policy Council recorder no later than three (3) workings days prior to scheduled meetings. Specific agenda items will include discussion of: OSH goals, mishap review and prevention, OSH requirements and initiatives compliance issues and hazards abatement.

d. Reports

(1) A transcript of the meeting minutes, endorsed by the committee chairperson, shall be forwarded to the Commanding Officer for consideration within five (5) working days after the committee meeting.

(2) OSH Manager shall distribute a copy of each meeting minutes, along with the Commanding Officer's comments, to council members as soon as practical.

4003. Safety Representatives Committee

a. Function. The purpose of the Safety Representatives Committee is to provide and encourages direct communications from the deck plates level to identify OSH deficiencies, define problems, suggest improvements, review mishap and injury reports, reviews appropriate OSH rules and regulations, discusses required training and forwards recommendations to the Safety Policy Council.

b. Membership. The following shall attend each meeting of the Safety Representative Committee:

(1 Assistant OSH Manager (Chairperson)

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(2) Department Safety representative from each of the departments.

c. Procedure

(1) Meetings. The Safety Representatives Committee shall meet Monthly. The place and time of this meeting shall be determined by the chairperson.

(2) Agenda. Agenda items shall be submitted to the OSH office at least three (3) working days prior to each scheduled meeting. As a general policy this committee's agenda shall have the same discussion topics as Safety Council.

d. Reports. A transcript of the meeting minutes, endorsed by the committee chairperson, shall be forwarded to the OSH Manager, each member and the Council chairperson within three (3) working days of each meeting.

4004. Process Action Teams. The establishment of Process Action Teams (PAT) is strongly encouraged. The OSH program manager for the specific problem/process being reviewed shall actively participate as a team member.

4005. Responsibilities

a. The Executive Officer, as chairperson of the Safety Policy Council, shall:

(1) Chair all Safety Council meetings.

(2) Brief all members of the purpose of each meeting and provide any necessary information to assist members in their decision making.

(3) Ensure the minutes of each meeting are promptly typed, signed and forwarded to the Commanding Officer within five (5) working days of the meeting.

b. Members of the Policy Council shall:

(1) Sustain staff and supervisory level interest in and support of the installation safety and occupational health programs.

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(2) Address specific safety, occupational health, and traffic problems of concern to the installation.

(3) Review and make recommendations on ways and means of improving the effectiveness and efficiency of installation OSH rules, regulations, procedures, instructions and policies.

c. The OSH Manager shall be responsible for:

Attending all Safety Council meetings.

(2) Acting as advisor and recorder for the Safety Council.

(3) Providing any OSH training requested by the chair person

(4) Providing the chairperson with a typed copy of the minutes of each meeting within five (5) working days after the meeting.

(5) Maintaining minutes of all meetings.

d. The Assistant OSH Manager shall be responsible for:

(1) Chairing all Safety Representatives Committee meetings.

(2) Providing the OSH Manager with a copy of Safety Representatives Committee minutes within five (5) working days of the meeting.

(3) Maintaining minutes of all meetings

(4) Performing OSH Manager responsibilities listed in this chapter during the manager's absence.

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PREVENTION AND CONTROL OF WORKPLACE HAZARDS

5001. Background. Identification of hazardous conditions may be accomplished at the planning and design stage, as a result of workplace inspections or by employee reports. All recognized safety and health hazards shall be eliminated or controlled as quickly as possible, subject to priorities based upon the degree of risk posed by the hazard. This chapter discusses basic principles of hazard control and application of these principles.

5002. Principles of Hazard Control. Hazard control can be defined as the function which is directed toward recognizing, evaluating and eliminating (or at least reducing) the destructive effects of hazards emanating from human errors and the situational and environmental aspects of the workplace. The preferred method of hazard abatement shall be through application of engineering controls or substitution of less hazardous processes or materials. The use of administrative controls is the next preferred method. Total reliance on personal protective equipment is acceptable only when all other methods are proven to be technically and/or economically unfeasible.

a. Engineering Control. The first and perhaps best control alternative is to attack a hazard at its source. Examples of engineering control are isolation of source, blackout procedures, design, process or procedural changes, monitoring and warning equipment, chemical or material substitution.

(1) Isolation

(a) Hazards are controlled by isolation whenever an appropriate barrier or limiter is placed between the hazard and an individual who may be affected by the hazard.

(b) Isolation can be in the form of physical barriers, time separation or distance.

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(2) Substitution. The risk of injury or illness may be reduced by replacement of an existing (or intended) process, material or equipment with a similar item having more limited hazard potential.

(3) Ventilation. The control of a potentially hazardous airborne substance by ventilation can be accomplished by one of two methods:

(a) General or Dilution Ventilation. In this method, uncontaminated air is mixed with the concentration of contaminated air to reduce the overall concentration to a safe level. Large volumes of heated air and low concentrations of nontoxic or low toxicity contaminants can be accomplished using this method.

(b) Local Exhaust Ventilation is the preferred and more economical method of removing the contaminated air from the workplace.

b. Administrative Control. The use of administrative controls, possibly in conjunction with personal protective equipment, is the next preferred method of hazard control. This method of control may take the form of:

(1) Limited access to high hazard areas.

(2) Preventive maintenance programs to reduce potential for leakage of hazardous substances.

(3) Adjusting work schedules in hazard areas

c. Personal Protective Equipment (PPE) is the least preferred method of control.

(1) Protective equipment may be selected for use in two instances:

(a) When there is no immediately feasible way to control the hazard by more effective means and

(b) When it is used as a temporary measure, while more effective solutions are being installed.

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(2) Major shortcomings associated with the use of PPE.

(a) Nothing has been done to eliminate or reduce the hazard.

(b) If PPE fails for any reason, the worker is exposed to the full destructive effects of the hazard.

(c) PPE may be cumbersome and interfere with the worker's ability to perform a task, thus compounding the problem.

5003. Application of Hazard Control Principles. Hazards will arise as a result of the dynamics of the workplace environment. Once hazards are identified, immediate action must be taken to avoid unreasonable danger. Here are some examples of hazard control principles in action:

a. System Safety, Industrial Hygiene, and Environmental Reviews. Safety, health, and environmental concerns shall be addressed during the planning, design, development, acquisition, fitting-out, and operation of systems, facilities, and associated modifications as required by reference (c).

b. Design Reviews. To ensure that appropriate hazard control techniques are applied, safety professionals and industrial hygienists shall participate in the review of plans and specifications for all local projects and submit recommendations in writing. The OSH Office shall maintain records of recommendations for 3 years.

c. Interim Hazard Abatement Measures. It is impossible to immediately correct all identified hazards. Temporary measures are occasionally needed to protect life and property until permanent hazard control measures are implemented. These measures should be developed by the supervisor of the workplace or organization and approved by a safety official.

d. Operating Procedures. Well thought out work procedures enable work to progress safely and efficiently. Departments, where applicable, shall draft Standard Operating Procedures (SOPs) to direct the manner in which work is to be performed.

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These SOPs shall be reviewed by the OSH office prior to issuance. Changes to these procedures should be carefully reviewed to ensure potential hazards do not result. The need for SOPs will be determined by an assessment of the physical and/or chemical hazards present in the workplace.

e. Permanent Hazard Abatement. Engineering control methods are the preferred methods of hazard control, followed by administrative control and PPE. If possible the permanent hazard control method is always preferred. It eliminates the hazard potential without the problems associated with interim control hassles.

5004. Summary of Hazard Control Recommendations. The following recommendations should be initiated:

a. Train employees to recognize hazards and take appropriate action.

b. Avoid, eliminate or reduce deficiencies by engineering design, material selection or substitution.

c. Isolate hazards from other work areas

d. Incorporate "fail safe" systems that shut down or disable equipment in the event of a problem.

e. Relocate equipment to reduce exposure potential

f. Provide adequate warnings to personnel exposed to hazards

g. Provide distinctive identification on hazardous equipment/areas.

h. Monitor exposures to insure controls are effective.

i. Require PPE when controls do not reduce hazards to safe levels.

5005. Responsibilities

a. Department Heads are responsible for

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- (1) Ensuring all supervisors are trained in hazard awareness.
- (2) Maintaining a hazard control program that includes:
 - (a) Hazard identification and evaluation.
 - (b) Ranking hazards by risk, severity and frequency, to determine where action is mandated.
 - (c) Expediting decision making by presenting hazard findings so that the nature of the hazards, their location, their importance, the necessary action and estimated cost is clearly understood.
 - (d) Establishing preventive and corrective measures
 - (e) Monitoring of activities in order to locate new hazards and assess the effectiveness of existing controls
 - (f) Evaluating program effectiveness to see whether it has accomplished its objectives and whether they have been achieved.

b. The Industrial Hygienist is responsible for developing a workplace monitoring program that provides a means of quantifying personnel exposures to toxic substances and/or harmful physical agents.

(1) Walk-thru surveys of each workplace shall be conducted to provide the following:

(a) Descriptions of operations/work practices performed.

A list of potentially hazardous materials present.

A list of potential physical hazards present.

Description of existing controls available

(e) Number of persons assigned

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(2) Based on the information obtained in the walk-thru survey, an assessment shall be made as whether or not there is a potential for employee exposure to the toxic chemicals and/or physical agents present.

(3) If the exposure assessment indicates an employee may be exposed, a workplace monitoring plan shall be developed.

(4) All workplace monitoring shall be conducted by industrial hygienists or certified monitors under the technical direction of an industrial hygienist.

c. OSH Manager is responsible for:

1) Identifying recognized hazards during inspections

(2) Assisting Department Heads/Staff Assistants in their hazard control programs.

(3) Conducting hazard awareness training.

(4) Approving interim measures recommended by Department Heads/Staff Assistants until permanent abatement of hazards can be implemented.

(5) Conducting follow-up inspections of areas where corrective action has been completed.

(6) Reviewing new construction and remodeling planning to ensure physical hazards are controlled.

(7) Inspecting completed construction projects for hazard control.

(8) Keeping the commanding officer informed of hazard control measures that require more than 30 days to abate by placing them on the deficiency abatement plan.

(9) Coordinating with the Supply Officer in hazardous material procurement.

(10) Provides technical support and any required training for PAT's.

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d. The Supply Officer is responsible for ensuring NAVOSH requirements are considered when ordering material. Coordination with the OSH Manager shall be maintained when procuring:

PPE

Hazardous Material

5006. Back Injury Prevention and Control Program

5007. Purpose. To issue Back Injury Prevention Program responsibilities, information and procedures aboard FASOTRAGRUPAC.

5008. Discussion. Back injuries, other than those caused by falls, are in most cases not traumatic injuries, but rather are a result of repeated stress and strain placed on the muscular and skeletal structure of the spine over a period of years. In order to control stress and strain which can result in degenerative back pain and to reduce back injury claims and cost, a special emphasis program is established.

5009. Responsibilities. The Back Injury Prevention Program is monitored by the Safety Office.

a. The Safety Manager will:

(1) Assist Department Head/Staff Assistants, Light Duty Coordinators and supervisors in job analysis and employee placement.

(2) Identify root causes of back injuries, and those areas, processes, operations and personnel with the highest frequency of back injuries.

(3) Provide training and technical assistance to Department Heads/staff Assistants and Light Duty Coordinators

b. Department Heads/Staff Assistants will:

(1) Ensure job descriptions and announcements correctly reflect lifting requirements.

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(2) Ensure a pre-employment muscular/skeletal physical examination is performed prior to employment for jobs with lifting requirements of 25 pounds or more.

c. Supervisors will:

(1) Analyze each work task and report any instance of lifting 25 pounds or more to their respective Department Head/ Staff Assistant and Civilian Personnel Office for incorporation into job descriptions and announcements.

(2) Cooperate with Program Manager and Occupational Health professional in identification and job analysis of employees with a history of back injury.

d. Employees will:

(1) Notify their supervisor and the Safety Office of any history of back injury, so that a statistical and job safety analysis can be performed.

(2) Receive back injury training as part of their new employee orientation.

(3) Obtain assistance when lifting objects greater than 40 Pounds.

CHAPTER 6

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TRAINING6001. Background

a. This chapter summarizes requirements and provides guidelines and recommendations for Occupational Safety and Health (OSH) and hazard communication (HAZCOM) training necessary for employees to perform their work in an occupationally safe and healthful manner. Studies indicate that an individuals past occupational experiences are a significant factor in the incidence of repeated job-related accidents. Training, where properly applied, can cause behavior alteration and/or substitute for certain aspects of this experience. Safety training must be incorporated into efforts at quality management through process improvement and is also a key to successful mishap reduction. Adherence to safe operating practices and procedures can normally be assured, with the full cooperation of personnel, only when there is a clear and defined knowledge of job or work related potential hazards and a practical understanding of the strategies necessary to prevent them. Mishap reduction as part of the quality management program cannot be achieved without a well developed and coordinated training effort that includes safety and health training keyed to all levels and types of personnel.

b. Activity OSH training programs must be designed to instruct individual employees to perform their work in a safe and healthful manner, and shall be tailored to the level of responsibility of the individual. As a minimum, the training must provide personnel with sufficient knowledge for their effective participation in the activity's OSH program.

c. OSHA regulations require employers to train their employees on the specific hazards and safe work practices for the hazardous materials/chemicals they use in the workplace. The regulations include training requirements for personnel involved in hazardous material control and management (HMC&M), and personnel who must handle hazardous material (HM) or hazardous waste (HW).

6002. Policy. All training shall integrate safety into the course material presented. If training is properly conducted,

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safety will automatically be made part of the learning process. When a job is performed safely, everyone benefits - efficiency improves, lost time due to injury is reduced and equipment is properly handled - all of this is accomplished when the job is properly completed. Training can make this happen.

6003. Training Needs. Training is needed:

- a. For new and reassigned employees.
- b. When new equipment or processes are introduced.
- c. When procedures have been revised or updated.
- d. When new information must be made available
- e. When employee performance needs to be improved.

6004. NAVOSH training requirements. The NAVOSH Program Manual mandates the following OSH training requirements: reference (a) Chapter 6

a. Top Management Personnel

(1) New Employee Orientation (1 hour, within 120 days of assignment)

(2) OSH Refresher/Update Training (1 hour/yearly)

b. Supervisor and Employee representatives

(1) New Employee Orientation (1 hour, within 120 days of assignment)

(2) OSH Refresher/Update Training (1 hour/yearly)

3) OSH Topics (1/2 hour/month) (as applicable)

4) Applicable Special Training Requirements:

(a) Hearing & Sight Conservation (1 hour initial plus annual refresher)

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(b) Hazard Communication (1 hour plus annual refresher, plus spill response and emergencies)

c. Non-Supervisory Personnel

(1 New Employee Orientation (1 hour)

(2) OSH Topics (1/2 hour/monthly) (directed to the worksite (as applicable)

3) Applicable Special Training Requirements:

(a) Hearing & Sight Conservation (1 hour initial plus annual refresher)

(b) Asbestos Awareness (1 hour initial)

(c) Hazard Communication (1 hour plus OJT refresher by supervisor)

(d) Standard Operating Procedures (SOPs) specific tasks)

d. Collateral Duty OSH Personnel

(1 Four Continuing Education Units (CEU) (or equivalent per year)

(2) Thirty two hours initial OSH orientation

(3) Collateral Duty Safety Officers Course (A-493-0050)

e. Full Time OSH Professional

(1 Eight CEU's or equivalent per year, or

(2) one college level course

6005. Training Program. The FASOTRAGRUPAC Training Program is designed to instruct supervisory personnel in the proper performance of their duties and provide them with the information and guidelines to instruct persons they supervise.

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The program shall include the minimum NAVOSH requirements listed in paragraph 6004 along with the following:

a. Asbestos Program. Chapter 17 fully discusses the hazards associated with asbestos. The instruction shall include the following information:

The hazards of asbestos

Safe handling and disposal procedures

(3) Proper use of protective equipment and clothing

(4) Association of cigarette smoking and asbestos related diseases

(5) Procedures for reporting actual or suspected exposure to asbestos.

b. Driver Improvement Program. The Navy Traffic Safety Program is promulgated in reference (b). All military personnel under 26 years of age who possess a driver's license or who are required to operate military vehicles shall attend the Driver Improvement Program course. The program is an eight (8) hour classroom course of instruction in traffic safety designed to establish and reinforce positive driving skills. The program also provides the driver education required for persons who have been determined to be at fault in a traffic accident while operating a Navy motor vehicle on base. All military personnel under 26 years of age who are to operate a government owned vehicle (GOV) provided by Naval Air Station must complete the training requirements fully discussed in Chapter 33 and be authorized to operate the GOV.

c. Cardiopulmonary Resuscitation (CPR). Due to the nature of their work and responsibilities, certain personnel require CPR training. Initial training shall be in accordance with the nationally recognized consensus standard type training developed by the American Red Cross or the American Heart Association. Refresher training shall be conducted as necessary to maintain current certification.

(1) CPR training is required for SERE instructors and all Electronic/Electric Technicians.

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d. Hearing Conservation Program. All personnel included in the Hearing Conservation Program shall receive initial instruction plus annual refresher training. Chapter 18 discusses the Hearing Conservation Program and the training includes:

- (1) The elements of, and rationale for a hearing conservation program
- (2) Proper wearing and maintenance of hearing protection devices
- (3) The command program and their responsibilities
- (4) Off duty practices which will aid in protecting their hearing

e. New Employee Orientation. Training for new FASOTRAGRUPAC employees is scheduled during the first two months aboard. Initial training for new employees includes:

- Command Safety Policy
- Work Site OSH Policy*
- Individual OSH Rights and Responsibilities
- Hazard Reporting Procedures
- 5) Hazard Awareness (hazards common to the individuals worksite, trade, occupation or task)
 - Safety Attitudes
- (7) Traffic Safety
- (8) Hazard Communication (specific hazards of chemicals and materials used in the workplace*)
- (9) Recreation, Athletics and Home Safety
 - Ergonomics and Back Injury Prevention

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(11) Occupational Health Program (and procedures to follow in case of an occupational illness or injury)

*Training on hazards specific to the worksite must be given by the individual's supervisor.

f. Sight Conservation. Chapter 19 fully discusses the Sight Conservation Program. All personnel that perform eye hazardous operations shall be trained in the need for, and use of, protective eyewear. Supervisors of workers who perform eye hazardous operations also require this training.

g. Back Injury Prevention Training. Chapter 5 provides detailed information on the Back Injury Prevention Program. All personnel will receive initial training from the OSH staff during their indoc training.

6006. Responsibilities

a. The Administrative Officer will notify the OSH Manager of all new military supervisors assigned.

b. Director of Human Management Services will notify the OSH Manager of all new civilian supervisors assigned.

c. Department Heads are responsible for:

(1) Ensuring supervisors attend and conduct required safety training.

(2) Providing time to accomplish training.

(3) Maintaining training records.

(4) Conducting periodic reviews of training given to ensure it's adequate.

d. All Employees must understand:

(1) Management is sincerely interested in preventing accidents.

(2) Mishaps may occur, but it is possible to prevent them.

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(3) Safeguarding equipment and the workplace has been thoroughly evaluated and management is willing to go further as needs and new methods are discovered.

(4) Each employee is expected to report to his supervisor unsafe conditions encountered in their work.

(5) The supervisor will give job instructions. Employees are not expected to undertake a job until they have learned how to do it and are authorized to do it by their supervisor.

(6) No employee should undertake a job that appears unsafe.

(7) If an employee suffers an injury, even a slight one, it must be reported at once.

(8) Safety rules must be understood and enforced at all times.

e. OSH Manager is responsible for providing:

New employee safety training.

(2) Management training.

Employees with the following NAVOSH training:

(a) Hazards of Asbestos

(b) Hearing Conservation

(c) NAVOSH Program requirements

(d) Respiratory Protection

(e) Hazard Communication (Right-to-Know)

(f) Sight Conservation

f. Supervisors have these principle responsibilities:

1 Establish work methods

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- (2) Give job instruction
- 3) Assign-employees to jobs.
- 4) Supervise employees at work.
- 5) Maintain equipment and the workplace.
- (6) Provide specific job related safety training (material and equipment hazards; work unit policy on safety and occupational health).
- (7) Ensure personnel receive hearing, sight or respiratory protection training prior to performing hazardous operations.

6007. Recordkeeping

- a. The minimum required recordkeeping data for individuals shall include Name, Organization, Code/Shop, Job Title, Signature and Grade/Series or Rate/Rank.
- b. OSH related training shall be documented (course title, date, instructor's name, description and/or lesson plan, length, and attendees) and sent to the OSH Office, Building 646. Records will be maintained for five years.
- c. Training shall also be recorded in employee personnel records where required by and following the Federal Personnel Manual. Military personnel training shall be recorded in the General Military Training Record following applicable regulations.
- d. An Individual Development Plan (IDP) shall be established for each OSH professional. It shall be updated when the employee attends professional training.
- e. Lesson plans for training courses taught by the OSH Staff shall be maintained in the OSH Office.

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HAZARDOUS MATERIAL CONTROL AND MANAGEMENT (HMC & M)

7001. Background. This chapter supplements reference (d) to ensure positive controls are placed on the acquisition and use of Hazardous Materials (HAZMAT) at FASOTRAGRUPAC. This shall be accomplished through a Hazardous Material Control and Management (HMC&M) Program.

7002. Scope. This chapter applies to any chemical product which is known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use or in a foreseeable emergency.

7003. Program Elements. The program elements are summarized as follows:

- a. A Hazardous Material (HM) Inventory and Authorized Use list;
- b. Material Safety Data Sheets (MSDSs);
- c. Labeled HM Containers;
- d. The Safe Use of HM (Employee Information and Training);
- e. Acquisition Controls over HM;
- f. Controlled Receiving, Distribution, Issuing and shipping of HM;
- g. Storage of HM;
- h. Management of HM;
- i. Emergency Response Planning;
- j. Shore Activity Oversight of HM Activities;
- k. Program Plan and Documentation; and
- l. Recordkeeping and Reporting.

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7004. Hazardous Material Control and Management. Per reference (d), procedures shall be established and implemented to control, track and reduce the variety and quantities of HM in use, in storage or stock, or disposal of as hazardous waste. OSH Manager will be supportive in this matter by:

a. Providing reports and recommendations resulting from evaluations of routine and non-routine use of HM to line supervisors, managers and the Hazardous Material Control Committee as appropriate.

b. Performing random, periodic spot checks to verify that HM is approved for use; and that the conditions of use are appropriate and included in OSH surveillance, industrial hygiene baseline surveys, and the workplace monitoring plan.

c. Providing technical assistance and consultation during formation of response plans and actual emergency responses.

d. Ensuring all routine and non-routine uses of HM are evaluated by experienced safety and health professionals and assessed using industrial hygiene risk assessment guidelines.

7005. Written Hazard Communication Plan. The FASOTRAGRUPAC Safety Office will promulgate a Hazardous Communication Plan and review/update plan annually.

7006. Labeling and Other Forms of Warning. Each container of chemical product will be labeled by the manufacturer as to content, appropriate hazard warning, and name and address of manufacturer or distributor. Reference (e) states general labeling requirements for storage, handling, use and disposal of chemical products. It also contains the Department of Transportation (DOT) labeling system used on shipping containers pertinent to employees within the supply system.

7007. Material Safety Data Sheets. Per reference (e), no chemical product may be used by a FASOTRAGRUPAC employee without first obtaining and understanding the MSDS. MSDSs that pertain to the individual worksite shall be kept in the workcenter and be available to employees within five minutes.

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7008. Employee Information and Training. Supervisors will ensure that employees are provided with information and training on chemical products in their work area at the time of their initial assignment, and whenever a new hazard is introduced into their work area. Written records and rosters shall be forwarded to the OSH Office to be maintained for a period of five years.

a. Information. Employees shall be informed of:

(1) Any operations in their work area where chemical products are present and

(2) The location of the written Hazard Communication Plan.

b. Training. Employees shall receive, as a minimum, the following:

(1) MSDS interpretation as it pertains to them; and

(2) Job specific Hazardous communication Training on safe storage, handling, use, spill, leaks, and disposal of chemical products in their work areas, emergency procedures as well as physical and health hazards associated with the chemical procedures to protect against hazards, and non-routine chemical work hazards.

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CHAPTER 8

OCCUPATIONAL HEALTH

8001. Background. occupational health programs are divided into two major specialties:

- a. Industrial Hygiene involves the surveillance of the workplace and the evaluation of any health hazards identified
- b. Occupational Medicine focuses on the medical surveillance of employees potentially exposed to the hazards identified during:
 - 1 The industrial hygiene workplace evaluation; and
 - (2) The diagnostic and treatment of acute occupational injuries and illnesses.

8002. Industrial Hygiene

a. Workplace monitoring provides a means of quantifying personnel exposures to toxic substances and/or harmful physical agents.

- (1) A walk-thru survey of each workplace obtains the following:
 - (a) Descriptions of operations/work performed;
List of potentially hazardous materials present;
 - (c) A list of potential physical hazards present;
 - (d) Description of existing controls available;
 - (e) Number of employees assigned.
- (2) Based on the information obtained in the walk-thru survey, an assessment is made as whether or not there is a potential for employee exposure to the toxic chemicals and/or physical agents in the workplace.

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(3) If the exposure assessment indicates an employee may be exposed, a workplace monitoring plan is developed.

(4) All workplace monitoring must be conducted by industrial hygienists or certified monitors under the technical direction of an industrial hygienist.

b. Periodic evaluations include an annual evaluation plus more frequent evaluations where the degree of the hazard present so demands.

c. Monitoring records are completed and reviewed by the assigned hygienist.

(1) Records pertinent to an individual's exposure are incorporated into their medical record.

(2) Survey, evaluation and monitoring records are retained for a minimum of 40 years.

(3) Access to these records must be made available to the employee and their representatives.

d. The Workplace Monitoring Plan provides the mechanism for recognizing and evaluating the potential employee exposure to toxic chemicals and/or physical agents. The NAVOSH Program Manual directs the Naval Medical Command (NAVMEDCOM) to design a monitoring plan that must:

(1) Be developed in coordination with the serving activity.

(2) Sufficiently detail the division of work between the activity and the NAVMEDCOM activity to allow for measurement of mutual performance.

(3) Provide sufficient guidance to each activity commanding officer to allow for proper implementation and budgeting.

e. The Workplace Monitoring Program requires annual updating of the Workplace Monitoring Schedule by an industrial hygienist.

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8003. Medical Surveillance

a. The purpose of this program is:

- (1) To determine an employee's fitness to begin or continue to perform a job safely and effectively.
- (2) To provide baseline data on the health of an employee against which possible side effects of occupational exposures can be measured.
- (3) To detect early indicators of excessive exposure.
- (4) To comply with the requirements of the certain NAVOSH standards.

b. Medical Examination requirements

(1) Examinations performed to assess the health status of individuals as it relates to their work may include:

Occupational Related Medical History

Physical Examination

(c) Clinical Laboratory Tests

(2) Requirements for examinations are established by the Commander Naval Medical Command.

(3) Types of examinations scheduled are:

- (a) Preplacement or Baseline.
- (b) Special Purpose or Periodic
- c) Termination

8004. Responsibilities

a. The Commanding Officer is charged with providing:

- (1) Coordination with the area NAVMEDCOM.

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(2) Budgeting for resources to execute the program.

b. NAVMEDCOM is charged with the responsibility for providing occupational health support as follows:

(1) A comprehensive industrial hygiene program.

(2) Periodic evaluations (not less than annually) include:

A workplace monitoring program

(b) Technical direction of the program

Training and certification of command monitors

(3) Other support as indicated in paragraph 8301 of the NAVOSH Program Manual.

c. The OSH Manager is responsible for monitoring the necessary action required to ensure that the command meets the requirements of NAVOSH and other directives.

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OCCUPATIONAL SAFETY AND HEALTH INSPECTION PROGRAM

9001. Background. The NAVOSH Inspection Program is necessary to ensure a safe and healthful workplace for all Navy employees. The primary purpose of inspections is to detect potential hazards so that they can be corrected before an accident occurs. Inspections can determine those conditions which need to be corrected or improved to bring operations up to acceptable standards, both from safety and operational standpoints. Secondary purposes of inspections are to improve operations and thus increase efficiency, effectiveness and profitability.

9002. Levels of the Navy Inspection Program

a. Workplace Inspections. These inspections are the responsibility of the Command and are targeted at identifying hazardous conditions, work practices and violations of standards.

b. Occupational Safety and Health Management Evaluation. This inspection is conducted by NAS North Island NAVOSH Department and it's objective is to ensure that workplace inspections are effective. It also ensures that requirements of the NAVOSH Program Manual and other Navy OSH directives are met by the Command.

c. Oversight Inspection. This is an inspection conducted by the Naval Inspector General to evaluate all aspects of the NAVOSH program.

9003. Qualifications for Inspectors

a. Inspectors must be thoroughly familiar with the equipment at the workplace and knowledgeable of the work practices utilized.

b. The qualifications for inspectors shall be based on the degree of hazard and complexibility of the areas or operations to be inspected. Inspectors should have complete the Naval Safety School Occupational safety - General Industry Standards Course (A-493-0061).

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9004. Workplace Inspections. The OSH Manager is responsible for conducting workplace OSH inspections. Requirements of the NAVOSH Program concerning workplace inspections are:

a. Frequency

(1) All workplaces shall be inspected at least monthly in addition to the Monthly Zone Inspections.

Inspections are fact finding and not fault finding.

(3) Inspections shall be conducted in such a manner that precludes unreasonable disruption of the workplace or operation.

b. Inspection Report

(1) Verbal debriefs shall be conducted with a responsible supervisor or Safety Representative assigned to the department where the inspection was conducted.

(2) Written reports of workplace inspections shall be provided to each department within a reasonable time, but not later than 15 working days after the inspection.

9005. Responsibilities

a. Department Heads are responsible for:

(1) Ensuring continuous inspections are conducted by supervisory and maintenance personnel.

(2) Taking proper corrective action, including interim safety measures, to abate deficiencies reported as a result of inspections conducted in operations and workplace assigned to their department.

(3) Following established abatement guidance in correcting safety related deficiencies.

b. The Staff Civil Engineer is responsible for:

(1) Taking prompt and appropriate corrective action on all reported safety deficiencies,

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c. The OSH Manager is responsible for:

- (1) Conducting monthly inspections of all workplace
- (2) Debriefing responsible departmental supervisors of the Workplace inspected.
- (3) Providing Department Heads workplace inspection reports within 15 working days following inspections.
- (4) Monitoring abatement of deficiencies reported during an inspection and assisting Department Heads with appropriate interim controls of those deficiencies not corrected immediately.
- (5) Maintaining a log of safety deficiencies for the Commanding Officer's periodic review.
- (6) Conducting follow up inspections to verify corrective action or to focus on specific problem areas.
- (7) Prepare responses for the Commanding Officer's signature for inspections discussed in paragraphs 9002b and 9002c.
- (8) Developing and maintaining the Command abatement plan.

d. Supervisors are responsible for conducting continuous workplace inspections of their area(s) in order to identify hazardous conditions or unsafe acts. Identified hazards shall be corrected.

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CHAPTER 10

EMPLOYEE REPORTS OF UNSAFE/UNHEALTHFUL WORKING CONDITIONS

10001. Background. The NAVOSH Program Manual provides guidance unhealthful working conditions by military and civilian personnel. Every person is charged with the responsibility to report anything they know or believe to be unsafe or unhealthful to workers or other persons aboard the facility.

10002. Purpose

a. Detection of unsafe or unhealthful working conditions at the earliest possible time and prompt corrective action at the lowest working level is a goal of the NAVOSH Program.

b. All Navy personnel are encouraged to orally report unsafe or unhealthful working conditions so immediate supervisors can take the necessary action to correct the problem before an injury or property damage occurs.

10003. Hazard Reporting System

a. Although verbal reports are encouraged, the NAVOSH Program provides for written reports of unsafe or unhealthful working conditions.

b. Navy Employee Report of Unsafe or Unhealthful Working Condition, OPNAV Form 5100/11, is available in all workplaces, usually located on the workcenter Safety bulletin board, and is to be used for written reports.

c. Employees, who desire anonymity, may file the report directly to the Safety Office and shall so indicate on the form. The OSH Manager handles the report without identifying the reporting employee.

d. The entire program procedure is printed on the backside of the report form for easy reference.

10004. Appeals. Personnel who are not satisfied with actions taken in response to their reports may, in confidence, relate the particulars of the matter to the OSH Manager and discuss

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their continued concern regarding the reported condition with that person. Persons who still are not satisfied that the that person. Persons who still are not satisfied that the condition reported has been correctly evaluated or appropriately acted upon may appeal the matter to the commanding officer. Subsequent appeals may be made to higher authorities if still not satisfied.

Procedures are as follows:

a. If the originator of a report is dissatisfied with the assessment of the alleged hazard made by the Safety Office or with actions taken to abate a confirmed hazard, he/she shall be encouraged to confer with the Safety Office to discuss the matter further. If after this discussion the originator remains dissatisfied, an appeal to the commanding officer may be made. The appeal must be in writing and contain at least the following information:

(1) A description of the alleged hazard including its location and standards violated, if known (a copy of the original hazard report shall suffice).

(2) How, when and to whom the original report of the alleged hazard was submitted.

(3) What actions (if known) were taken as a result of the original report.

b. The Commanding Officer will respond to the originator of the appeal within ten working days. An interim response will be made if an investigation is incomplete at that time. The final response will contain the office and address of the next higher level of appeal.

c. If the person is still dissatisfied or has not received a response within twenty working days, he/she may appeal to the next higher level of command. Subsequent appeals may be submitted if the originator is still not satisfied with the action taken as a result of the previous appeal. The sequence of appeals are as follows:

(1) COMNAVAIRPAC, San Diego, CA 92135-7051

(2) CINCPACFLT, Pearl Harbor, HI 96860-7000

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(3) CNO, Washington, DC 20350-2000

(4) The final appeal authority for military personnel is the Deputy Assistant Secretary of Defense (DASD(E)). In the event that a civilian employee is not satisfied with the response from the DASD(E), he/she may contact, in writing, the Office of Federal Agency Safety Programs, U.S. Department of Labor, Washington DC 20210. This final appeal must describe in detail the entire previous processing of the appeal, and set forth objections thereto.

10005. Responsibilities. The reporting of hazards is the responsibility of any Navy personnel who observes a hazard. Specific responsibilities are:

a. Department Head/Staff Assistant. Corrective action on reported deficiencies normally requires approval of a Department Head/Staff Assistant. A report of an unsafe or unhealthy condition shall be reviewed by the Department Head/Staff Assistant and appropriate comments noted on attached correspondence prior to forwarding to the Safety Office.

b. Personnel will verbally report the hazard to their immediate supervisor or submit a Hazard Report form following the guidance printed on the reverse side of the form. The form can be submitted to the immediate supervisor, or sent to the Safety Office if anonymity is desired.

c. Supervisors. To minimize the necessity for personnel to submit the written reports or appeals all supervisory personnel shall:

(1) Initiate prompt corrective action for unsafe and unhealthy conditions existing within their areas of authority and for initiation of work stoppage where imminent danger situations are observed or determined to exist.

(2) Apprise immediate supervisors of serious or imminently dangerous situations which are outside the command's capability to correct immediately and take appropriate interim abatement action.

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(3) Promptly convey to the appropriate supervisor any report of a hazardous condition pertaining to an area or operation that is the responsibility of another supervisor.

(4) Personally inspect the locations where hazardous conditions are alleged to be, and under the circumstances the conditions are alleged to exist, to receive first hand knowledge. For example, after dark, when surfaces are wet, when weather is hot and humid, etc.

(5) Initiate action to correct safety and occupational health deficiencies found in their operations, using interim measures to reduce the potential for injury or illness pending correction of the hazard.

(6) Contact the Safety Office and report action taken or planned, to correct reported deficiencies.

(7) Keep personnel advised of the action taken and monitor the status of actions until the hazard has been abated.

d. The OSH-Manager will:

(1) Upon receipt of hazard report, the OSH Office will contact the originator by telephone to acknowledge receipt and discuss the seriousness of the reported hazard. The OSH office shall advise the cognizant supervisor that a hazard has been reported.

(2) Investigate hazard reports within 24 hours of notification and advise the responsible supervisor of the severity of the reported hazard. Potentially serious situations shall be investigated within three days. Health hazards will be referred to the Industrial Hygienist for investigation.

(3) Follow up on action taken to abate the hazard reported.

(4) Upon receiving a Hazard Report from someone who desires anonymity, complete a new report leaving the reporting individuals name off.

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(5) Provide an interim or complete response in writing to the originator of the report within 10 working days of receipt. Interim responses will include the expected date for the complete response. If the investigator validates the reported hazard, the complete response will include a summary of the action taken for abatement. If no significant hazard is found to exist, the reply will include the basis for that determination.

(6) Fully discuss any report that does not meet with the originator's satisfaction and assist the originator in the appeal process.

7) Assist the originator of report with all appeals desired.

(8) Maintain a record of all hazard reports

e. The Staff Civil Engineer will:

(1) Take action on all safety related work orders placing higher priority on those confirmed by the OSH Manager as more serious.

(2) Monitor action on all safety work orders until abatement is completed.

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DEFICIENCY (HAZARD) ABATEMENT PROGRAM11001. Background

a. The objective of FASO Safety is to identify and eliminate all workplace hazards and provide a safe working environment. Our employees deserve a safe place to work. It is essential that a program be developed to eliminate or control all identified hazards in a systematic manner.

b. Reference (a), Chapter 12, establishes guidance to be followed in developing hazard abatement programs.

11002. Purpose

a. Identification of deficiencies serves little purpose unless positive action is taken by responsible people to correct them.

b. The purpose of this program is to provide procedures to follow in abatement of safety related deficiencies reported during OSH inspections and other serious health or safety matters.

11003. Deficiency Processing and Trackinga. Hazard Identification Methods

- (1) Annual NAVOSH Inspections
- (2) Special Inspections, e.g. zone inspections
- (3) Employee Reporting System (OPNAV 5100/11)
- 4) Workplace Monitoring Program

b. Risk Assessment. Each identified/validated hazard shall be assigned a Risk Assessment Code (RAC) by the OSH Manager. The RAC represents the degree of severity and mishap probability. The RAC is, described in paragraph 1202 of reference (a).

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c. NAVOSH Deficiency Notice (NDN). The NAVOSH Deficiency Notice (OPNAV 5100/12) is used to provide the first arm of the NAVOSH Deficiency Abatement Program. Use of the NDN requires the following action:

(1) Deficiencies, reported by appropriate safety authorities with RAC 1, 2 and 3 shall be initiated by the OSH Manager by completing Section A of the NDN.

(2) The completion of the remainder of the NDN is the responsibility of the supervisor of the workplace concerned.

d. Abatement Plans

(1) Deficiencies assigned RAC 1, 2 and 3 that require more than 30 days to correct, shall be recorded in a formal installation hazard abatement plan.

(2) All FASO NAVOSH deficiencies will be processed using the NDN.

(3) In order to ensure compliance with NAVOSH guidance concerning the abatement plan, the following information shall be contained on the NAVOSH Deficiency Notice:

Dates of hazard identification;

Location of the hazard(s);

(c) Description of the hazard(s), including reference to applicable standards;

(d) Estimated RAC (with hazard severity, probability of single occurrence and annual personnel exposure cited separately) or calculated RAC;

Interim control measures in effect;

(f) Description of the abatement action, including estimated cost and completion date;

Abatement priority; and

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(h) Close out statement, indicating completed abatement action, actual cost, and date of completed action; or process discontinues or worksite vacated.

11004. Interim Controls. It is recognized that immediate abatement of deficiencies in working conditions may not always be possible and that some temporary deviation from NAVOSH standards may be required. Interim controls:

- a. Shall be established as soon as the deficiency is noted.
- b. Shall be documented on the NAVOSH Deficiency Notice 5100/12).
- c. The OSH Office shall conduct a follow-up inspection in 30 days.
- d. In effect for more than 60 days shall be approved by the OSH Manager.

11005. Hazard Abatement Project Development. Reference (a) paragraph 1204 provides complete guidance in development of deficiency abatement projects.

11006. Prioritization of Deficiency Abatement Projects

a. Local Funded Projects. Projects which are below the funding thresholds of the OSH Deficiency Abatement Program shall be prioritized based on RAC assigned to each identified hazard. If there are several projects for correction of hazards with identical RACs, then:

(1 The OSH Manager shall assign priorities based upon:

(a) The number of persons potentially exposed to the hazard, and/or

(b) The total cost required to abate the hazard.

(2) The Commanding Officer will review the complete listing of unabated deficiencies at least semi-annually and assign a command priority consistent with funding and workforce available.

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b. Centrally Funded Projects. NAVOSH Program Manual paragraphs 1204 and 1205 provides detailed guidance concerning these projects.

11007. Responsibilities

a. When Department Heads/Staff Assistants receive inspection results, following action shall be taken:

(1) Attempt to resolve the deficiencies identified in the inspection report by the most expeditious means possible.

(2) Abatement days designated on the inspection report are calendar workdays. Corrective actions are to be sent to the OSH Office within 30 days. Departments/Staff Assistants who do not meet this time frame shall be notified by the OSH Manager. Upon request, time frames may be extended if approved by the OSH Manager.

(3) For hazards that cannot be abated within 30 work days, the supervisor of the workplace concerned must complete Section B of NAVOSH Deficiency Notice (OPNAV 5100/12) and forward to the OSH Manager within this 30 day period.

(4) To abate deficiencies, use work request (NAVFAC 9-11014/20), trouble call and/or other administrative actions

(5) In cases where a deficiency has been identified during an inspection and found to present a serious or imminent danger, a notice, signed by the workplace supervisor, shall be posted in the immediate vicinity of the hazardous situation. Where posting at or near immediate vicinity of the hazard is not practical, the notice may be posted at an appropriate location in the work area readily visible to employees. Those deficiencies assigned a RAC 1, 2 or 3 shall be posted in the area until abated.

(6) Ensure that all original work requests concerning inspection deficiencies are routed via Resource Management Department (N4) prior to submission to Staff Civil Engineering

(7) Supervisors may consider the action proper provided every available step has been taken to provide an interim measure to safeguard structures, procedures and operations from

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exposing personnel to any hazards. Submission of a trouble call or a work request does NOT relieve the Department Head/Staff Assistant of the responsibility for correction of the deficiency.

Requesters are to maintain an active interest in accomplishment of the corrective action.

b. Resource Management Department is responsible for the following action concerning safety and occupational health deficiencies:

(1) When requested, assist the Department Heads in abating all deficiencies.

(2) Process all Work Requests within 15 days of receipt.

(3) Receive, coordinate and act promptly upon all safety related trouble calls.

(4) When abatement is beyond local funding, coordinate with the OSH Office in preparing the Deficiency Abatement Program/Management Information System (DAP/MIS) NAVOSH Project report.

(5) Maintain the correspondence file concerning all DAP/MIS NAVOSH Projects and semi-annually review the file with the Commanding Officer and OSH Manager.

(6) Ensure that reports of unsafe or unhealthy working conditions receive appropriate attention in abating the problem reported.

c. OSH Manager is responsible for following abatement planning:

(1) Provide Department Heads/Staff Assistants with a completed inspection report within 15 working days of the inspection.

(2) Assist the department concerned in determining acceptable solutions to correcting the reported deficiencies or developing interim controls until abated.

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(3) Monitor inspection reports to ensure deficiencies identified are abated within the time frame designated on the report. Contact the department/staff office concerned when the deficiency has not been abated or the time period extended.

(4) Assist in providing training necessary to abate deficiencies in the workplace.

(5) Review all safety related work requests to ensure that the requested action is proper and discuss all questionable action with the department concerned.

(6) Maintain a record of the action taken or requested to resolve the deficiencies. For those items requiring more than 30 days to abate, place the deficiency in the Abatement Log.

(7) Review the Abatement Log periodically and update to reflect new findings and to show current status of actions taken to correct listed deficiencies.

(8) Submit Abatement Log to the Commanding Officer for the purpose of prioritizing outstanding deficiencies. This submission and prioritizing procedures is to be accomplished semi-annually with a revised list resulting. Provide list to the department/staff office concerned.

(9) If an inspection is conducted in response to a written or verbal employee report of an unsafe or unhealthy working condition, the OSH Manager shall complete it.

(10) In the case of serious or imminent danger, ensure that the supervisor of the workplace concerned posts the appropriate notice.

(11) In cases where the project to abate safety and/or health deficiencies is beyond the funding capability of the Command, assist in the preparation of the DAP/MIS NAVOSH Project report.

(12) Maintain updated status of all safety and health deficiencies reported to the Safety Office.

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MISHAP INVESTIGATION, REPORTING AND RECORDKEEPING

12001. Background. Mishaps seriously degrade operational readiness and wastefully expend tax dollars. Hazard awareness and accident prevention are largely dependent on mishap investigations and on reports aimed at how and why the mishaps occurred. This chapter contains guidance for conducting mishap investigations, reporting, recordkeeping and action to prevent recurrence of mishaps. Chapter 14 of reference (a) contains specific guidance for use in investigating, reporting and recordkeeping of mishaps.

12002. Definitions

a. Class A Mishap. The resulting total cost of reportable material property damage is \$1,000,000 or more; or an injury or occupational illness resulting in a fatality, or permanent total disability.

b. Class B Mishap. The resulting total cost of reportable material (property) damage is \$200,000 or more, but less than \$1,000,000; or an injury or occupational illness resulting in permanent partial disability; or three or more personnel are inpatient hospitalized.

c. Class C Mishap. The resulting total cost of reportable material (property) damage is \$10,000 or more, but less than \$200,000; non-fatal injury that causes any loss of-time from work beyond the day or shift on which it occurred; or a non-fatal illness or disease that causes loss of time from work or disability any time (lost time case).

d. Class D Mishap. The resulting total cost of reportable material (property) damage is \$10,000; or a nonfatal injury (no lost time or first aid case) that does not meet the criteria of a Class C mishap.

12003. Policy. It is the policy of this Command to ensure all mishaps are timely and properly investigated following guidance in reference (a) Section 1404. Mishaps shall be reported immediately to the Command Duty officer, and to the

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OSH Office as soon as practicable. A written mishap report shall be forwarded to the OSH Office within three working days. Per reference (a), Section 1407, investigations and their results shall be used only for safety purposes, and shall be separate from other investigations. Investigative reports and related information shall only be released to those who have a "need to know" and all documentation shall be kept confidential. All lost time mishaps involving five (5) or more days away from work shall be reviewed with the employee's supervisor and Department Head/Staff Assistant by the Commanding Officer, and appropriate action taken to prevent recurrence.

12004. Objective. To provide guidance for supervisors in mishap reporting. Reference (a) contains all the necessary documentation for investigating and reporting mishaps, therefore only a local reporting system, a supervisor's report (NSSD Form 5100/14) and mishap review procedures will be discussed in this chapter.

12005. Supervisor Report of Mishap/Occupational Illnesses. In order to simplify the mishap reporting system, a single page supervisor report has been devised and provided as Appendix 12-A. The purpose of this report is to provide the initial information to the OSH Office so investigation and reporting can be accomplished more rapidly. Any additional information necessary to complete an investigation or mishap report can be gained through personal contact with the supervisor involved and the OSH Office. Motor vehicle and property damage mishaps shall be investigated by the pertinent supervisor using OSH staff assistance under the guidance of reference (e). Information needed on the supervisor Form requires short simple responses. If the supervisor contacts the OSH Office, a Safety Specialist will guide the caller through the Form. A copy of the completed Form may be reviewed by the Department Head/Staff Assistant, but this action shall not prevent the report from reaching the OSH Office within the three (3) day deadline.

12006. Responsibilities

- a. Department Heads/Staff Assistants shall be responsible for.

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(1) Ensuring supervisors are fully aware of their responsibilities relating to mishap processing procedures.

b. Officer of the Day (OOD) shall be responsible for contacting the following when a mishap report is received:

(1) The Executive Officer and the Department Head/Staff Assistant concerned following established contact criteria.

(2) The OSH Manager.

c. Officer of the Day (OOD) shall be responsible for the following when a mishap report is received after normal working hours:

(1) Contacting the Executive Officer and the Department Head/Staff Assistant concerned OSH Manager, following established Watch contact criteria.

(2) Making priority mishap reports on Class A and B mishaps, per procedures contained in the OOD log.

d. OSH Manager shall be responsible for:

(1) Investigating and reporting Class A, B and C mishaps, per reference (a).

(2) Training all supervisors in class D mishap investigation and documenting procedures.

(3) Assisting departments/staff offices in investigation and reporting procedures when requested.

(4) Reviewing all investigations and ensuring adequate documentation has been recorded.

(5) Maintaining a log of Navy Inquiries and Occupational Illness (civilian and military).

(6) Preparing reports (listed below) required by reference (a), and other applicable instructions.

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(a) Personnel Injury/Death/Occupational Illness Report.

(b) Annual Summary of Navy Civilian Injuries and Occupational Illnesses.

(c) Material (Property) Damage Mishap Report

(d) Motor vehicle and explosive mishaps may, under certain circumstances, also overlap NAVOSH reporting requirements.

(7) Maintaining liaison with Medical and Security Departments for mishap reporting purposes.

e. Supervisors shall be responsible for the following:

(1) Immediately report all mishaps to the OSH Office. A telephone call will meet this requirement if the written report is not completed.

(2) Immediately report all mishaps that occur after normal working hours to the OOD.

(3) Completing a report of all mishaps and forwarding the report to the OSH Office as soon as possible following the Incident. The required form for this report is Appendix 12-A.

(4) Preparing the necessary documentation to explain how the mishap occurred, actions taken to prevent recurrence and how the mishap could have been prevented. Documentation shall be reviewed with the Department Head/Staff Assistant prior to appearing at any command mishap review boards. All lost time mishaps involving five (5) or more days away from work shall be reviewed by the Commanding Officer, at a time arranged by the OSH Manager.

(5) Taking action necessary to prevent future recurrence of such mishaps.

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FASOTRAGRUPAC SUPERVISOR MISHAP REPORT

From:	To: SAFETY N7	Via: N__ DEPT.HEAD
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Name of Injured/Ill:	Sex:	Age:	Date:	Time:
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Injured/Ill Status:
 Military on duty (Civilian on job
 Military off duty (Civilian not on job Other

Type of Mishap:
 Injury on duty Illness Chemical exposure)
 Home injury (Sport injury Motor vehicle)
 Property damage Other _____

Mishap Data:
 Occupation _____ location of mishap _____
 Rate/Rank/Grade _____ Date stopped work _____
 SSN _____ Date returned to work _____
 Nature of injury/illness _____

Months job experience _____ # Days missed _____
 Medical attention yes () no () # Days hospitalized _____

Description of Mishap/Illness:

Corrective Action Taken:

Motor Vehicle Data (If involved): GMV PMV ()
 Plate # _____ Year _____ Make _____ Model _____
 Vehicle/property damage (Estimate dollars) _____

Typed Name and Signature of Supervisor: Date:

Typed Name and Signature of Dept. Head: Date:

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OCCUPATIONAL SAFETY AND HEALTH STANDARDS

13001. Background. The Department of Defense (DOD) and Navy have adopted the OSHA standards for use throughout the agency. Provisions for alternates to the OSHA standards, supplemental standards, other special standards and exceptions for military unique equipment, systems and operations are contained in the DOD Occupational Safety and Health Program (DOD INST 6055.1 of 30 Sep 1981).

13002. NAVOSH Standards. NAVOSH standards shall consist of the following:

a. OPNAV instructions (a). These instructions are based on the following:

(1) OSHA standards, including emergency temporary standards issued under the provisions of the OSHAct.

(2) Alternate OSHA standards as authorized by Deputy Assistant Secretary of Defense (Environment) (DASD(E)) and subject to Department of Labor (DOL) standards exist.

(3) Supplementary OSH standards, covering conditions in nonmilitary unique workplaces for which no OSHA standard exist.

(4) other regulatory OSH standards, issued under statutory authority by Federal agencies such as the Department of Transportation, Energy, the Environmental Protection Agency and the Food and Drug Administration.

(5) Special DOD or Navy developed standards, rules and regulations that govern on-the-job safety and health applicable to military unique equipment, systems and operations

b. Published OSHA Standards. If there is no applicable OPNAV instruction or chapter in reference (a), then published OSHA standards apply.

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c. Nationally Recognized Source Standards. If neither OPNAV or OSHA standards are applicable, then any nationally recognized source of OSH guidance apply, such as:

- (1) Governmental Industrial Hygienists (GIH)
- (2) American Conference of Governmental Industrial Hygienists (ACGIH)
- 3) American National Standards Institute (ANSI)
- 4) National Fire Protection Association (NFPA)

13003. Alternate Standard Approval. Paragraph 1603 of reference (a) fully discusses NAVOSH standard modification and the process necessary to use such changes.

13004. Application. NAVOSH standards shall be applied in Navy workplaces with the following qualifications:

a. In the case of uniquely military equipment, systems and operations Navy developed rules and regulations consisting of specialized standards, specifications and procedures to minimize hazards and prevent mishaps will apply.

b. Certain operations are subject to mandatory safety standards or rules which are derived from separate or specific statutory authority. Provided there is no substantive conflict, the application of these special functional standards does not exempt any workplace from other NAVOSH standards which address conditions not specifically covered by the special rules. For example, a weapons handling operation is subject to special explosive safety standards and is also subject to NAVOSH for machine guarding, eye protection, etc.

13005. Responsibilities

a. Department Heads shall ensure that criteria contained in NAVOSH standards are:

(1) Understood and complied with by all affected personnel and enforced by supervisors. In cases of

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noncompliance, appropriate disciplinary action shall be taken as a corrective measure against the offender and the supervisor.

(2) Applied to all command publications, instructions, manuals, specifications, technical orders, etc. and that existing documents are reviewed and updated to conform to NAVOSH standards as expeditiously as practicable.

b. The OSH Manager shall:

(1) Provide assistance to Department Heads in arriving at appropriate decisions regarding application of NAVOSH standards to proposed work practices.

(2) Cite NAVOSH standards for violations during inspections.

c. The Resource Management Department (N4) is responsible for ensuring NAVOSH standards are applied to:

(1) All materials ordered and received

(2) Materials handled/stored by all personnel.

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ASBESTOS14001. Background

a. Asbestos is recognized as a major health hazard. Inhalation of asbestos fibers has been demonstrated to cause at least two distinct disease states: Asbestosis and Mesothelioma. Asbestosis is a progressively restrictive fibrosis of the lung and is recognized as a classic disabling or even fatal occupational disease. Mesothelioma, a rare malignant tumor of the lung membrane which lines the chest and abdominal cavity, is occurring with increasing frequency in workers with exposure to asbestos. When coupled with cigarette smoking, the risk of contracting mesothelioma is increased dramatically: up to seventy times more than non smokers with similar exposure history.

b. The extended latency period of asbestos related disease, lack of adequate past exposure data, effect of other carcinogens and the variability of human responses make absolute safe level determinations difficult. Latency periods of 20-40 years between the first asbestos exposure and the appearance of a malignancy have been observed.

c. In recognizing the serious health hazards posed by asbestos exposure, the Navy has adopted stringent occupational health and environmental protection standards for the control of asbestos.

14002. Permissible Exposure Limit and Action Level

a. Permissible Exposure Limit (PEL). The PEL for asbestos is 0.2 fibers per cubic centimeter (f/cc) of air, calculated as an eight hour time-weighted average (TWA) exposure.

b. Action Level (AL). The AL is 0.1 f/cc, calculated as an eight hour TWA, which if exceeded requires the initiation of air-monitoring, employee training and medical surveillance.

c. Personnel Notification. Individuals exposed to asbestos in excess of the PEL shall be notified in writing not

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later than five days after the finding. Notification must be made to individuals who are exposed at the AL within 15 days of findings.

14003. Control of Asbestos in the Workplace. The basic principles for controlling hazards in the occupational environment include substitution with less hazardous materials, engineering controls (such as ventilation), administrative controls and the use of personal protective equipment. All areas found to contain asbestos will be reported to NAVOSH for appropriate action. Under no circumstances will FASO personnel attempt asbestos removal or repair work. Public Works Center will be contacted for disposition.

14004. Asbestos Management Program Ashore. The program objective (over a ten year period) is to provide a long term solution that will eliminate personnel exposure to airborne asbestos fibers in occupied Navy buildings and workspaces. The program contains five key elements:

- a. Inventory
- b. Assessment
- c. Abatement
- d. Operation and maintenance (O&M) plans
- e. Training

14005. Removal and Disposal Procedures. Only properly trained and designated personnel are permitted to conduct any operation involving asbestos. Under no circumstances shall FASO personnel undertake removal operations of confirmed or suspected asbestos containing material. Asbestos removal operations at FASO are performed by either Public Works or a Navy contractor. The cognizant industrial hygienist shall be informed immediately if suspected asbestos material is located in buildings. The industrial hygienist will perform an evaluation and determine control measures. If found to contain asbestos, the Staff Civil Engineer shall be informed for further action including possible removal operations. No known or suspected asbestos containing material shall be placed in regular dumpsters.

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14006. Training. Training requirements include:

- a. The health effects/hazards of asbestos
- b. Association between the use of smoking tobacco products and asbestos exposure in producing lung cancer
- c. Uses of asbestos which could result in an exposure
- d. Engineering controls and work practices associated with an employees' work assignment
- e. Purpose, proper use and limitations of protective equipment
- f. Purpose and description of medical surveillance program
- g. Description of emergency and clean-up procedures
- h. Overall review of the command's program

14007. Industrial Hygiene Surveillance. The Industrial Hygienist is responsible for developing workplace monitoring plans for any employee occupationally exposed to asbestos. Guidance for conducting this surveillance is contained in paragraph 1708 of reference (a).

14008. Responsibilities

- a. Department Heads/Staff Assistants are responsible for notifying personnel exposed to asbestos as soon as the findings are known to them.
- b. The Hazardous Waste Coordinator shall ensure Asbestos disposal assistance is provided to all departments requesting it.
- c. The Industrial Hygienist is responsible for making determination of suspect asbestos materials and monitoring of spaces which contain asbestos material.

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d. The OSH Manager shall ensure:

(1) All suspect asbestos containing materials (ACM) reported or discovered during inspections are processed for identification.

(2) Self-help projects are reviewed for potential asbestos hazards and handling procedures.

(3) Exposed employees receive appropriate training concerning asbestos hazards.

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CHAPTER 15

HEARING CONSERVATION AND NOISE ABATEMENT

15001. Background. Hearing loss has been, and continues to be a source of concern within the Navy. Hearing loss attributed to occupational exposure to hazardous noise, the high cost of related compensation claims, and the resulting drop in productivity and efficiency have highlighted a significant problem, which requires considerable attention. Hearing conservation is protecting your hearing from a potentially damaging level of noise.

15002. Hearing Conservation Program. The goal of the Navy Hearing Conservation Program is to prevent occupational noise-related hearing loss among Navy personnel. Elements of the program require that:

a. Work environments be surveyed to identify potentially hazardous noise levels and personnel at risk.

b. Noise levels of potentially hazardous locations be reduced to acceptable levels.

c. Periodic hearing testing be conducted to monitor the effectiveness of the program.

d. Training be provided to ensure individuals understand their responsibilities under the program.

e. Noise hazardous equipment and areas are properly labeled, and/or placarded to inform individuals of hazardous noise generation.

15003. Permissible Exposure Limit (PEL). The PEL for occupational exposure to noise is listed below:

a. For 8 hours in any 24 hour period - 84 dB(A).

b. For periods of less than 16 hours, in any 24 period, use the formula in paragraph 1802.2b in reference (a).

c. For impact or impulse noise - 140 dB(A) peak sound pressure level.

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15004. Noise Measurements and Exposure Assessments

a. Noise Measurements. Noise measurements shall be taken as part of the Industrial Hygiene Surveillance Program, which is outlined in Chapter 8 of reference (a).

b. Exposure Assessment

(1) The analysis of noise measurements in order to assess the hazard potential is a complex task that shall be performed by an Industrial Hygienist or other competent person under the direction of an Industrial Hygienist.

(2) A complete analysis may require the use of octave band analyzers, recorders and other specialized acoustical instrumentation such as personal noise dosimeters.

15005. Labeling of Hazardous Noise Areas and Equipment

a. Designated hazardous noise areas and equipment which produce sound levels greater than 84 dB(A) peak sound pressure level shall be appropriately labeled. NAVMED 6260/2, Hazardous Noise Warning Decal, 8"x10.5" and the NAVMED 6260/2A, Hazardous Noise Label (displayed on hand tools), 2" x 2" are the approved decals and labels for marking hazardous noise areas or equipment.

b. Military combatant equipment are excluded from this labeling requirement.

15006. Hearing Testing Program

a. All Navy employees who are required to work in designated noise hazard areas or with equipment which produces sound levels greater than 84 dB(A) or 140 dB(A) peak sound pressure levels, shall be entered in the Hearing Testing Program.

b. Paragraph 18015 in reference (a) contains all the details concerning the Hearing Testing Program.

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15007. Personal Hearing Protection Devices

a. Hearing protective devices shall be worn by all personnel when they must enter or work in an area where the operations generate noise levels of:

(1) Greater than 84 dB(A) sound level; or

(2) 140 dB(A) peak sound pressure level or greater; or

(3) Unpredictable level. An Industrial Hygienist will determine the required use of hearing protection.

b. A combination of ear insert type and circumoral type, hearing protective devices (double protection) shall be worn in all areas where noise levels exceed 104 dB(A) sound level.

c. All personnel exposed to gun fire in a small arms training situation, or to artillery or missile firing, under any circumstances, shall wear hearing protective devices.

d. See paragraph 1802.6 of reference (a) for other guidance related to hearing protective devices.

15008. Education

a. All Navy personnel included in the Hearing Conservation Program shall be informed accordingly, and receive instruction in:

(1) The elements of and rationale for a Hearing Conservation Program;

(2) Proper wearing and maintenance of hearing protection devices;

(3) The command program and their individual responsibilities; and

(4) Any off duty practices which may aid in protecting their hearing.

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b. Such instruction will also be provided to all personnel upon reassignment to a new job which is noise hazardous.

c. All personnel identified for inclusion in the Hearing Conservation Program shall receive initial instruction in the requirements of the program and appropriate refresher training annually thereafter.

d. Policy Regarding Use of Portable Personal Entertainment Devices

(1) Portable personal entertainment devices shall not be worn while:

- (a) In the vicinity of flight operations
- (b) Operating rotating machinery
- (c) Operating any vehicle or motorized equipment
- (d) Engaged in any industrial operation
- (e) Walking, jogging, or bicycling on any street or roadway

(2) Supervisors are responsible for ensuring that entertainment devices do not present a potential hazard to the person wearing the device or to the operation of equipment assigned.

(3) Personnel are advised that entertainment devices:

- (a) Have the potential for contributing to hearing loss if they are played too loudly.
- (b) May cause hearing loss due to the interaction with their occupational exposure to noise.

15009. Record Keeping

a. All personnel who routinely work in designated hazardous noise areas shall be identified and a current roster of such personnel shall be maintained, and updated periodically.

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b. Paragraph 1802.8 of reference (a) contains details relating to the record keeping requirements concerning audiogram testing.

15010. Noise Abatement Program. The primary means of protecting Navy personnel from hazardous noise shall be through the application of engineering controls. Administrative controls, such as the adjustment of work schedules to limit exposure are also effective but often result in some loss in productivity. Personal protective equipment (ear plugs, muffs, etc.) shall be the permanent solution only when engineering or administrative controls are considered to be unfeasible or cost prohibitive.

15011. Preventive Measures. It is much less costly to eliminate potential noise problems in the design or procurement stage for new processes, equipment and facilities than it is to make retrofits or modification after the fact.

a. Procurement. Specifications for all new machinery and equipment to be located in spaces where personnel are required to perform work, shall prescribe the lowest noise emission level that is technologically and economically feasible

15012. Abatement of Existing Noise Hazards. One or more of the following methods shall be taken to correct existing noise hazards:

a. Engineering design to eliminate or reduce the noise levels of machinery, equipment and other operating devices/facilities to acceptable levels;

b. Damping the noise by means of lamination, mufflers, mountings, couplings, supports, insulation or application of acoustic materials;

c. Acoustical enclosure of the noise producer;

d. Isolation of the noise producer to a point where the noise will affect fewer personnel;

e. Substitution of less noisy operation (i.e. welding in lieu of riveting); and

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f. By administrative controls which limit exposure.

15013. High Noise Level Abatement

a. Engineering control feasibility studies shall be initiated for those areas where continuous noise levels:

- (1) Exceed 100 dB(A), and/or
- (2) Personnel are exposed for four (4) hours or more.

b. Personal hearing protective devices can only be considered a permanent means of control when it has been determined that the methods outlined in paragraph 18012 are feasible or cost prohibitive.

c. Determinations shall be supported with appropriate documentation signed by an Industrial Hygienist and the cognizant engineer.

d. Records of above determinations shall be maintained by the Safety Office.

e. This requirement does not apply to military workplaces or operations.

15014. Responsibilities

a. Personnel are responsible for:

(1) Wearing proper hearing protection when exposed to noise levels in excess of the PEL working in hazardous noise areas or with machinery/tools and equipment, which produce hazardous noise.

(2) Completing an initial audiogram exam and hearing conservation training, prior to assignment in a hazardous noise area, or operating hazardous noise producing equipment.

(3) Completing annual audiogram examinations and hearing conservation training, including a terminal audiogram upon reassignment from a hazardous noise area or operation.

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b. The Industrial Hygienist is responsible for conducting periodic and annual noise surveys to determine noise hazardous areas.

c. The OSH Manager is responsible for:

(1) Informing, via the chain of command, all workcenters identified as hazardous noise areas, of their training responsibilities.

(2) Maintaining a current roster of personnel included in the Conservation Program, updated annually.

(3) Providing copies of the roster to the:

(a) Department Head concerned

(b) Medical Clinic

(c) Industrial Hygienist

(4) Investigation of reports, concerning noise complaints and resolving the problem through consultation with the Industrial Hygienist and supervisor, of the area/operation in question.

d. Supervisors are responsible for:

(1) Posting hazardous noise warning signs in all potential hazardous noise areas exceeding the PEL identified by the annual industrial hygiene survey.

(2) Labeling all pieces of machinery, tools and equipment which produce noise levels in excess of the PEL with noise hazard labels.

(3) Ensuring workers exposed to hazardous noise receive an initial audiogram exam and hearing conservation training prior to assignment to a hazardous noise area or operation.

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(4) Ensuring exposed workers receive an annual audiogram examination and hearing conservation training, to include a terminal audiogram exam upon reassignment from a hazardous noise area or operation.

(5) Maintaining a current record of all exposed workers including audiogram examination and training dates to be submitted to the OSH Manager and Medical Officer once a quarter.

(6) Receiving annual hearing conservation training if supervising personnel enrolled in the Hearing Conservation Program.

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CHAPTER 16

SIGHT CONSERVATION

16001. Background. Navy policy requires personnel working in eye hazardous areas or operations be provided adequate eye protection at government expense. Eye hazardous areas are defined as:

- a. Pouring or handling of solvents or corrosive liquids solids.
- b. Certain portions of the SERE curriculum/training.
- c. Drilling, grinding, and chipping where dust producing operations occur.

16002. Program Requirementsa. Survey

(1) Safety and health personnel will conduct an inspection of all the work places to determine areas that are eye hazardous.

(2) Supervisors shall post appropriate warning signs for designated eye hazardous areas within their workcenter. Some of the work operations in which eye hazards occur are:

- (a) Banding/unbanding operations
- (b) Chemical processes using acids or caustics
- (c) Grinding operations
- (d) Use of drill presses, power saws, sanders and buffers

(3) A list of all surveyed areas, processes and occupations that require eye protection will be maintained by OSH Manager.

(4) The following eye hazardous areas have been identified during inspections and surveys:

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<u>WK CENTER</u>	<u>BUILDING</u>	<u>PROCESS</u>	<u>PROTECTION EQUIPMENT</u>
SERE WS	Firing Range	Firearm discharge	Safety goggles
SERE WS	Firing Range	Weapons Cleaning	Safety goggles

b. Posting. All areas designated as eye hazardous shall be posted with appropriate warning signs.

c. Emergency Eye Wash Facilities. All areas where personnel may be exposed to corrosive materials shall be equipped with easily accessible emergency eye wash stations. During building compliance inspections, OSH office personnel will verify the proper and adequate installation of eye wash stations and the applicable PMS. Training on eye wash station use shall be accomplished in conjunction with the training schedule in paragraph 6004 of this instruction.

d. Special Precautions for Visually Impaired Employees

(1) Any person who is found to have vision in one eye which is 20/200 (corrected) or worse shall be considered visually impaired.

(2) Impaired personnel shall not be assigned duties which would present a hazard to his/her remaining eye.

e. Eye Screening Examination. Paragraph 1903 of reference (a) fully discusses screening procedures for personnel exposed to eye hazardous operations.

16003. Disposal of Eyewear

a. Termination of Employment

(1) PLANO safety glasses, goggles or other reusable eyewear shall be turned into the supervisor.

(2) Prescription eyewear do not require turn in.

b. Willful damage, alteration or loss. Disciplinary action may be taken against personnel who abuse protective eyewear.

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16004. Education. Safety Office provides training on the need for, and use of, protective eyewear. This training is included as part of the annual training program for supervisory personnel outlined in Chapter 6. Topics covered in this training include:

- (1) Eye protection against impact, splashes, sparks, or glare;
- (2) Command's responsibility to provide eye protection equipment;
- (3) Individual's responsibility to use eye protection when required, and
- (4) Eyewash use, and importance of getting injured personnel medical help.

16005. Eye Protection Equipment. Wearing the right type of eye protection equipment is the key to preventing most on-the job eye injuries. Regular glasses do not give adequate protection. If prescription eyeglasses do not have industrial lenses and frames, protective equipment must be worn over them. Contact lenses are never a substitute for safety gear.

16006. Responsibilities

a. Department Heads/Staff Assistants will:

- (1) Ensure identified eye hazardous areas and operations are posted.
- (2) Ensure personnel in the Sight Conservation Program and especially impaired personnel are properly protected at all times.
- (3) Provide training for personnel in the Sight Conservation Program.
- (4) Obtain eyewear protection for personnel who work in eye hazardous areas or operations. Funding of safety eyewear

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will be absorbed within local operating funds. Non-Appropriated Fund civilian employee safety eyewear procurement will be provided through Non-Appropriated Funds.

(5) Notify the OSH Manager when new processes or operations change that could result in additional eye hazardous areas.

6) Provide required eyewash station.

(7) Take appropriate action following injuries.

(8) Initiate disciplinary action against personnel who willfully neglect to comply with the requirements of the sight conservation program or who willfully damage or misuse provided sight protection devices.

b. Personnel will:

(1) Wear eye protection in eye hazardous areas or operations and request evaluation of areas where concern exists.

(2) Follow established procurement procedures.

(3) Maintain issued eyewear in satisfactory condition and contact their supervisor when eyewear is damaged or replacement is necessary.

(4) Not wear tinted safety glasses inside buildings, unless engaged in a welding or soldering process or similar operation.

(5) Report all injuries to their supervisor

c. OSH Manager will:

(1) Identify eye hazardous areas/operations and maintaining a record of these locations and operations.

(2) Evaluate new facilities or operations and re-evaluate areas being modified to ensure adequacy of established sight protection safeguards.

(3) Provide sight conservation training for supervisors and non supervisory personnel as needed.

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SAFETY AWARDS PROGRAM

17001. Background. Awards provide recognition to individuals and groups for attaining excellent records in safety. Awards also recognize safety consciousness and are not to be confused with recognition for safety improvements which are covered in the incentive awards programs.

17002. Policy. It is the policy of this command to actively support the Department of the Navy (DON) Awards Program and to encourage military and civilian personnel to apply safe working practices in all their daily operations. Per reference (c) and to stimulate and support increased interest in mishap prevention, a number of safety awards are presented as official recognition of commendable safety records attained by individuals and groups.

17003. Types of Awards

a. DON Accident Prevention Award - Supervisors, Award For:

(1) Each calendar year completed without any lost time (days away from work exceeding 24 hours) for work or duty related injuries as defined in reference (a) incurred by supervisors or by any personnel under their supervision.

(2) Total outstanding safety performance by a supervisor. Only those supervisors who have demonstrated a strong and positive attitude towards promoting increased safety awareness will be recommended.

(3) Supervisors who are in charge of, and responsible for, at least seven persons engaged in production or construction. Administrative and staff positions, such as office administrators and safety and health personnel, are not eligible for this award.

(4) Awards are granted only to those supervisors who have served during the entire calendar year. When a supervisor fails to qualify for an award during the calendar year, all higher echelons in the line of supervision for this position, will be disqualified for the same period.

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b. DON Accident Prevention Award- Group

(1) Awarded to any group who has excelled in its performance regarding safety by demonstrating a high safety awareness and has completed the calendar year without any lost time for work or duty related injuries.

(2) The occurrence of any lost time (days away from work exceeding 24 hours) injury as defined in reference (a), to any member of the division, will remove eligibility for the entire group for consideration during that calendar year.

(3) A group, as used for purposes of this award, is as autonomous unit having an average of seven or more military and civilian personnel or both assigned during the period under consideration. Group awards may also be issued to entire shops or departments which perform hazardous operations. Examples are crash crews, damage control crews, maintenance crews, entire departments, police security forces, etc.

17004. Responsibilities

a. The commanding officer will make formal presentations to supervisors, groups and departments selected.

b. Department Heads will make:

(1) Nominations for awards to the OSH office, at the beginning of each calendar year (CY) for the CY preceding; and

Individual driving award presentations.

c. The OSH Manager will:

Review safety records to determine eligibility for awards;

(2) Selected groups, department supervisors and individuals to receive awards;

Prepare awards for the commanding officer's signature;

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(4) Procure awards certificates; and

(5) Forward information concerning the award and commendation to the Public Affairs Officer for news release.

d. The Public Affairs Officer shall appropriately publicize winners of the award.

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TRAFFIC SAFETY

18001. Background

a. Motor vehicle mishaps kill and injure more NAVY personnel than any other type of mishaps. Research has proven that persons who operate motor vehicles while intoxicated are responsible for more than 50% of traffic injuries and fatalities.

FASOTRAGRUPAC has zero tolerance for operation of motor vehicles while intoxicated.

b. Traffic safety regulations can be found in references (a) and (b).

18002. Responsibilities. The Safety Manager or Safety Assistant will be assigned as Traffic Safety Representative for the command.

a. He/she will attend the NASNI Quarterly Traffic Safety Committee Meeting.

b. Make recommendations to the commanding officer for identified deficiencies in risk ascending order, taking into account severity of hazard and probability of a mishap occurrence.

c. Provide Traffic Safety Training when required.

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RECREATION, ATHLETICS, AND HOME SAFETY PROGRAM

19001. Background. DOD has directed that safety programs be established to protect personnel from accidental death or injury, including mishaps which occur during recreational activities. This program is established to provide special emphasis and initiate procedures for inspections, use of personal protective equipment, education, record keeping and reporting. The Recreation Safety Officer, located in the OSH Office (Building 646, ext. 5-6286) is always available to provide assistance to Department Heads/Staff Assistants or individuals. Further information and responsibilities can be found in reference (c).

19002. Scope. Applicable to:

- a. Military personnel, at all times while on, or off base
- b. Military dependents while on government property and while off base, if participating in command sponsored events.
- c. On duty civilians participating in recreational or athletic activities during command sponsored events, on or off base, or while on Temporary Additional Duty Orders.

19003. Responsibilities

a. The OSH Program Manager will administer the program in support of DOD policy as follows:

(1) Provide technical assistance to Departments/Staff Assistants, and especially the Morale, Welfare and Recreation (MWR) Committee and supervisors. Active participation will be solicited from individuals.

(2) Review all mishap investigations to determine compliance with and adequacy of procedures, and to identify the underlying cause(s) of any mishap, and take corrective action(s) to prevent recurrence.

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(3) Record and report mishaps as per chapter 12 of this instruction and analyze data at least annually to determine if more frequent inspections are warranted.

(4) Attend Safety Policy Committee meetings to identify, assess and recommend improvements for specific recreation, athletics and home problems areas.

c. Department Heads/Staff Assistants will:

(1) Ensure seasonally appropriate hazard awareness and safety training is conducted to ensure personnel are aware of specific hazards, personnel protection requirements and procedures for protecting themselves in recreational, athletic and home environment. Training will be done annually at a minimum and training records maintained for two years.

(2) Ensure that supervisors are fully aware of their responsibilities in the program.

d. Supervisors will:

(1) Conduct training in recreation, athletics and home safety.

(2) Ensure personnel follow the applicable provisions of this program.

(3) Ensure all mishaps are investigated and reported as per Chapter 12.

(4) Ensure facilities and equipment used by personnel are safe

(5) Ensure reporting and abatement of hazards.

e. FASOTRAGRUPAC personnel will:

Comply with all applicable provisions of this program.

Report observed hazards.

(3) Immediately report personal injuries, illnesses or property damage to their supervisor.

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REQUIREMENTS FOR OPERATORS OF GOVERNMENT OWNED VEHICLES

20001. Purpose. To promulgate procedures for authorizing operation of Government Owned Vehicles (GOVs).

20002. Scope. This requirement applies to all FASOTRAGRUPAC Personnel who operate government owned vehicles.

20003. Policy. There is no operation or administration of greater importance than mishap prevention. It is, therefore, policy that no GOV provided by FASOTRAGRUPAC be operated until operator meets the following applicable requirements:

a. Per reference (b), all employees must possess a valid State Driver's License for the class of vehicle to be operated. Operators of GOVs at, or in excess of 10,000 pounds gross vehicle weight (GVW) shall possess, in addition to a state license, a current, authenticated, U.S. Government Motor Vehicles Operator's Identification Card (OF-346) issued by PWC Transportation.

b. Per reference (b), all military personnel under 26 years of age who possess a driver's license must receive eight hours of driver improvement instruction from an approved American Automobile Association (AAA) instructor. All military personnel under 26 years of age who are assigned to operate a GOV shall receive a minimum of two hours of practical driving instruction in the type of GOV they are to operate.

20004. Responsibility. The following tasks are assigned:

a. Department Heads/Staff Assistants

(1) Develop a training program for the department/staff personnel which addresses all operating features of vehicles under your control. Assign qualified individuals to ensure training is performed-consistent with this policy. Record training in training jacket.

(2) Develop and implement a quality control and certification process for your department/staff office.

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b. Supervisors. Perform quality training on all and any GOVs which military drivers under 26 years of age will be assigned to operate. Training will include A review of all vehicle features, controls, concerns and special features.

c. GOV Operator Candidates. Military candidates under 26 years of age must complete the following requirements before operating a GOV (operation of GOV during supervised training is permitted). Provide proof of AAA Driver Improvement Course completion to the Naval Station Traffic Safety Manager. AAA Driver Improvement Program (DIP) courses are conducted monthly by Naval Station OSH specialists. Graduates are issued a certificate of completion. service records should contain proof of AAA DIP course completion at other activities.

d. Traffic Safety Manager

(1) Maintain a data base on all military GOV operators under 26 years of age. This data base is to include the following:

- (a) Name and rank/grade;
- (b) Date enclosure (1 was received;
- c) Date and location AAA DIP obtained;
- (d) Activity, department, workcenter and phone number;
- (e) Name and rank/grade of individuals certifying training;
- (f) Type(s) of GOV(S) employee is qualified to operate; and
- (g) Employee's state Driver's License number, state of origin and any special ratings or restrictions.

(2) Arrange quotas to the American Automobile Association's Driver Improvement Program (AAA DIP).

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NAVAL STATION SAN DIEGO
GOVERNMENT VEHICLE OPERATOR
AUTHORIZATION AND TRAINING REQUIREMENTS SHEET

(PRINT the following clearly)

NAME _____
(last) (first) (MI) (rank/grade)

DATE _____
(today's date)

AAA Drivers Improvement Course completion date
(must provide proof of training)

Drivers License Information _____
(state) (license #) (expires)

Glasses required? Y/N; Special endorsements _____
GOV(S) OPERATOR HAS BEEN TRAINED ON, AND IS AUTHORIZED TO OPERATE

1. Government pick-up truck
2. Government work van
3. Government passenger van
4. Utility vehicle smaller than a pick-up truck
5. Stake truck
6. Special work vehicles used by your activity list):

 (Activity)

(Department/Staff Assistant)

(Workcenter)

(Supervisor & Phone #)

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TRAINING REQUIREMENTS

DATE INITIALS

_____-Become familiar with all operating controls of the vehicle and demonstrate that you are able to operate all operating controls without taking your eyes from the road.

_____-Under controlled circumstances, successfully back, turn, park and otherwise operate the vehicle for which you are being licensed until you and the person who is observing your performance are confident that you can do so safely without assistance.

_____-Complete a ride around the base as a passenger, learning your normal traffic routes, traffic patterns, pedestrian choke points, and other features which may cause you concern when driving.

_____-Complete a supervised drive around the base as the driver, exhibiting knowledge of traffic patterns, stop signs, turn lanes, and crosswalks. Your familiarity with these features is imperative for you to safely operate any vehicle on the base.

_____-Practice and exhibit all skills required by your Department Head/Staff Assistant on vehicles which he/she will require you to operate.

_____-Know and use any Standard Operating Procedures require by your department/staff office in the performance of your duty. (i.e., boom truck operation, etc.)

(ATTACH DEPARTMENT/STAFF OFFICE OPERATING REQUIREMENTS TO THIS SHEET)

I RECOMMEND THIS INDIVIDUAL BE AUTHORIZED TO OPERATE GOVERNMENT VEHICLE(S) NOTED ON PAGE 1 OF THIS FORM. COMPLETE AND SUCCESSFUL TRAINING HAS BEEN HELD IAW THIS POLICY NOTICE.

(supervisor's signature)

(date)

I CERTIFY THAT ALL REQUIRED AND NECESSARY TRAINING HAS BEEN COMPLETED FOR THE INDIVIDUAL NAMED HEREIN TO SAFELY OPERATE GOVERNMENT VEHICLES UNDER MY COGNIZANCE.

(Department Head/staff Assistant or designated representative's signature) (date)

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ERGONOMICS

21001. Background. The U.S. Navy has identified Cumulative Trauma Disorder (CTD) type injuries as a significant source of workplace injury cases. CTDs arise from repeated biomechanical stresses, brought about by ergonomically hazardous conditions. Ergonomics is the study of the design of work in relation to the physiological and psychological capabilities of people. This program seeks to prevent injuries and illnesses by applying ergonomic principles to identify, evaluate and control ergonomic hazards.

21002. Implementation. Chapter 23 of reference (a) is the primary guide for the FASOTRAGRUPAC Ergonomics program. This chapter summarizes the responsibilities of FASOTRAGRUPAC and support personnel towards establishment of an effective ergonomics program.

21003. Responsibility. The following tasks are assigned:

a. OSH Manager

(1) Establish and publish appropriate goals for the reduction of CTD cases;

(2) Coordinate the medical aspects of the ergonomics program with the Director, Branch Medical Clinic; and

(3) Establish training programs as described in Section 21004 on ergonomics and back injury prevention.

b. Ergonomics Program Manager

(1) Conduct an annual analysis of FASOTRAGRUPAC injury and illness experience, including both injury/illness log records (OPNAV 5102/7) and medical injury compensation records. The analysis shall identify the departments and operations experiencing Cumulative Trauma Disorder (CTD) cases, part involved, nature of injury/illness, time of day, frequency, severity, physical location, job description, and cost of CTD cases that have occurred during the past 5 years.

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(2) Conduct a screening survey of at least 20% of the workplaces (or 20% of the job categories) in the 3 departments or codes that the injury/illness data indicated were at higher risk of CTD than other departments.

(3) Provide training in ergonomics and back injury prevention as directed by the Commanding Officer.

c. Department Heads/Staff Assistants

(1) Provide assistance to Ergonomics Program Manager as necessary to conduct baseline and annual ergonomic assessment of their work areas.

(2) Ensure that supervisors and managers under their cognizance have training and guidance in ergonomics sufficient for them to effectively carry out their responsibilities for the safety and health of employees.

e. Supervisors and Managers. Enforce the rules for safe work practices established at their activity, and ensure that employees reporting to them receive appropriate training and medical surveillance.

21004. Training. An essential part of the FASOTRAGRUPAC Ergonomics program shall be the proper training of managers, supervisors, professional staff, and employees as is appropriate. This training shall be oriented towards initiating positive behavioral changes in all personnel, thus reducing the risks associated with CTDS.

a. Back injury Prevention. Training in back injury prevention and care shall be given to personnel as part of new employee orientation training. Back injury prevention training shall include:

- (1) Anatomy and physiology to explain how the back works;
- (2) Biomechanics of lifting and lifting techniques;
- (3) How to avoid back injuries on and off the job;
- (4) Weight control; and

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5) Physical fitness.

b. Ergonomics. Training requirements for managers, supervisors, and affected employees shall be determined based on the results of a work site analysis conducted per Section 2303 of reference a.

(1) Managers shall receive training on ergonomic issues in order to effectively carry out their responsibilities for health and safety of employees.

(2) Supervisors (who supervise employees that are potentially exposed to ergonomic hazards) shall receive training which includes:

(a) recognizing hazardous work conditions/practices and symptoms of CTD;

(b) steps needed to remove ergonomic hazards, to reinforce the ergonomic program; and

(c) understanding job hazard analysis and its use as a formal instruction tool.

(3) Employees who are potentially exposed to ergonomic hazards shall receive formal training in;

hazards associated with their jobs and equipment;

varieties of CTD, and

(c) the means of prevention, causes, early symptoms, and treatment of CTDS.

(4) Safety and industrial hygiene personnel responsible for conducting ergonomics programs of screening surveys shall receive formal training on the recognition of ergonomic hazards.

(5) Engineering staff responsible for planning, designing, or writing specifications for equipment and processes shall receive instruction in methods for eliminating or reducing ergonomic hazards in the workplace.

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WRITTEN HAZARD COMMUNICATION PLAN

22001. Purpose. To establish a formal Hazard Communication (HAZCOM) Program Plan for FASOTRAGRUPAC in accordance with 29 CFR 1910.1200 and applicable DOD and Navy guidance. This chapter supplements reference (d) to ensure that the hazards of all chemicals used by FASOTRAGRUPAC employees are evaluated, and that the information concerning these hazards is transmitted to employees.

22002. Scope. This plan, unless otherwise specified, applies to all FASOTRAGRUPAC employees that routinely work with or are exposed to hazardous chemicals in their workplace, and to employees who may be exposed in a foreseeable emergency.

22003. Definitions

a. Chemical Manufacturer. An employer with a workplace where chemicals are produced for use or distribution.

b. Container. Means any bag, barrel, bottle, box, can, cylinder, drum, reaction vessel, storage tank, or the like that contains a hazardous chemical.

c. Distributor. Means a business, other chemical manufacturer or importer, which supplies hazardous chemicals to other distributors or employers.

d. Employee. Means a worker (military or civilian) who may be exposed to hazardous chemicals under normal operating conditions or in foreseeable emergencies. Workers such as office workers or instructors who encounter hazardous chemicals only in non-routine, isolated instances, are not covered.

e. Employer. Means a person engaged in a business where chemicals are either used, distributed, or are produced for use or distribution; isolated instances are not covered.

f. Hazardous Chemicals. Any chemical that is physical hazard or a health hazard per 29 CFR Section 1910.1200 (c), and

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with some exceptions as specified in the Community Right to Know Law of 1986 (Superfund Amendments and Reauthorization Act (SARA), Title III).

g. Hazardous Material (HM). Any material, as defined in 29 CFR 1910.1200, that is a hazardous material.

h. Hazardous Waste (HW). Any discarded substance as defined in 40 CFR 261 or applicable state regulations where the state has been granted enforcement authority by the Environmental Protection Agency.

22004. Policy. This HAZCOM program plan shall be made available, upon request, to employees, their designated representative, or other government officials upon request.

a. Each employee or contractor working at FASOTRAGRUPAC San Diego shall be appraised of the HAZCOM program and all persons working with or routinely coming in contact with hazardous chemicals shall receive training on the hazardous properties of HM and hazardous chemicals they work with and the precautionary measures needed for protection from these hazard(s).

b. All work location managers and workcenter supervisors shall ensure that each work area or shop maintains an Authorized Use List (AUL) and MSDSs for each HM used in that area, and that they are readily available to workers.

c. Only HM on the AUL shall be used by FASOTRAGRUPAC personnel. All HM received shall be properly labeled with, as a minimum, the chemical identity, trade name, appropriate hazard warnings, and the address of the manufacturer, importer or other responsible party.

d. A Hazardous Material Control and Management (HMC&M) Coordinator has been designated to advise the Commanding Officer on HM authorized for local use, procedures to control and manage HM and hazardous chemicals and implementation of HAZCOM.

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22005. Discussion

a. 29 CFR 1910.1200 established requirements for training and informing all employees of manufacturing and non-manufacturing sectors of the hazards associated with the chemicals with which they work or are exposed. To ensure worker safety, this instruction implements those requirements.

b. Paragraph (b)(4) of 29 CFR 1910.1200 recognizes that there are a number of work situations where employees handle only sealed containers of chemicals and under normal conditions of use, would not open the containers and would not expect to experience any measurable exposure to the chemicals. Such work operations include, for example, Resource Management Department (N4) procurement of supply chemicals.

22006. Program Operations and Responsibilities

a. List of Hazardous Chemicals. The Safety Manager, who is designated the HMC&M Program Manager, is to maintain a list of all hazardous chemicals used in the facility by work location and a unique Material Safety Data Sheet (MSDS) identifier, and will update the list on at least an annual basis in cooperation with all command organization elements. This list is referred to as the Authorized Use List (AUL).

(1) The master AUL and the locations where HM is used is located in Building 646 Safety Office. Each workcenter shall maintain a copy of their portion of the AUL.

(2) These lists are verified in cooperation with independent local audits and third party surveys.

(3) Additionally, the HMC&M Coordinator will distribute the AUL among key code offices, department heads with workcenters listed on the AUL, and other offices deemed necessary by the HMC&M Coordinator.

b. MSDSs. The HMC&M Coordinator is responsible for obtaining MSDSs for all hazardous chemicals utilized in the command, and will maintain a reference library of MSDSs for each of the chemicals or materials contained on the AUL. In addition, he or she will distribute MSDSs to various organization elements as needed for local requirements.

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(1) A complete set of all MSDSs is maintained in Building 646 (FASOTRAGRUPAC Headquarters) and is in the custody of the Safety Manager.

(2) MSDSs for individual workcenters are available in the workcenter spaces and supervisors are to instruct employees on access and use.

(3) Individual MSDSs are reviewed on acceptance and periodically for completeness and accuracy and assigned a unique identifier to aid in retrieval and use by non-technical personnel and to relate the MSDS to a specific product. Technical guidance maybe sought from the local NAVMEDCOM Industrial Hygienist.

(4) Identifying local requirements for MSDSs is accomplished by reviewing requisitions for HM in the approval process as a prerequisite for approval and use. At that time the HMC&M Coordinator verifies that the hazardous chemical and/or HM on the AUL. In event the hazardous chemical or HM is not on the list, an MSDS is requested from the vendor or is obtained from HMIS. Manufacturer information on the physical, chemical, toxic and other hazardous properties of the material plus the professional judgment by safety/environmental and industrial hygiene personnel, determine, in part, whether the material is or is not hazardous in its planned use.

(5) Corrective action is initiated, via procurement, in the event vendor(s) consistently provide incomplete or inaccurate MSDSs, e.g., inform the NAVSAFECEN of the deficiency so that a safety advisory may be sent to appropriate addresses, or inform the nearest Federal and state Right-to-Know contact of a violation of 29 CFR 1910.1200 (g) (5).

(6) All supervisory personnel are responsible for ensuring that all locally manufactured and distributed chemical products have an MSDS written consistent with Federal Standard 313, and that the material or product is on the AUL. In all cases the cooperation and assistance of the Occupational Safety and Health Office and the command's designated industrial hygienist will be requested and documented as appropriate.

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c. Labels and Other Forms of Warning

(1) All supervisors will ensure that all HM received by Resource Management Department (N4) is properly labeled.

(2) The manufacturers' MSDSs and HMIS are sources of information on hazard and storage compatibility for the DOD HAZCOM-compliant label.

(3) Portable containers into which HM is transferred from labeled containers, which are intended only for the immediate use of the employee who performs the transfer are not required to be labeled.

(4) The Occupational Safety and Health Office is responsible for performing routine periodic inspections to ensure that all hazardous chemical materials are properly labeled, in proper use, and hazard warning are properly heeded.

d. Training

(1) The employee's supervisor shall inform all new employees of the command HAZCOM program and shall schedule and provide job-specific (site-specific) training with the employee. The job-specific training shall be accomplished within the first month of employment.

(2) The employee's supervisor shall perform the job-specific HAZCOM training.

(3) All supervisors shall perform job-specific training in the event of process changes.

(4) HAZCOM training will emphasize the elements listed below:

(a) A summary of the OSHA HAZCOM Standard and this written plan;

(b) Job-specific HM and hazardous chemicals to which personnel have contact; the chemical properties of the HM, including visual appearance and odor; and methods that can be used to detect the presence or release of hazardous chemicals;

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(c) Physical and health standards associated with the potential exposure to workplace chemicals;

(d) Procedures to protect against hazards; e.g. personal protective equipment, work practices, and emergency procedures;

(e) Hazardous chemical spill, leak, and disposal procedures;

(f) MSDS locations, how to understand their content, and how employees may obtain and use appropriate hazard information.

(5) Training priorities are provided in OASD Defense Safety and Occupational Health Policy Program Policy Memorandum (SOHPPM 88-1), Subject: Hazard Communication, 09 FEB 1988 (NOTAL) for HAZCOM training of persons exposed to hazardous chemicals:

PRIORITY

GROUP

A

Workers in occupational health medical surveillance programs due to workplace chemical exposures per reference (g) and DOD 6055.5-M (Occupational Health Medical Surveillance Manual).

B

Those personnel who work in jobs or areas where there is significant risk for accidental exposure to chemicals and the consequences of exposure would be severe. For example, flushing pipes with a solvent aboard a ship.

C

Those personnel who work in jobs or areas where there is a low potential for accidental exposure to chemicals, but the health

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consequences of exposure would be severe; for example sealed containers in a confined space.

D All other personnel incidentally or occasionally exposed to workplace chemicals.

(6) HAZCOM-related training shall be documented. The minimum required recordkeeping data for individuals shall include: name; code/department; signature; and GS/GM/GW grade, series, rate/rank. For each training session or course an individual completes, the following minimum data must be maintained: date; instructor's name; description and/or reference to lesson plan; title of training; and length of training. HAZCOM training records related to job-specific in applications and related controls will be retained for 40 years. In the case of HW personnel, training records must be retained for the life of the facility. Records on former employees must be kept for at least 3 years from the date the employee last worked at the be sent to the OSH Office. Training shall also be recorded in employee personnel records. Military personnel training shall be recorded in the General Military Training Record following applicable regulations.

e. Non-routine Tasks

(1) All supervisors planning non-routine tasks involving HM shall ensure that the employees involved are trained and equipped to the same extent as required for routine tasks.

(2) Training to ensure that all employees are informed of non-routine chemical work hazards will be accomplished at a meeting attended by the supervisors, affected employees, and the Occupational Safety and Health Office prior to initiation of the scheduled work.

(3) Non-routine tasks training will be documented by the Occupational Safety and Health Office and coordinated by the Department Head for inclusion in appropriate personnel training records.

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f. Other Relationships

(1) The HMC&M Program Manager is responsible for distributing the list of chemicals used, produced or stored at various workplaces.

(2) The emergency availability of information from the AUL and MSDSs can be arranged or obtained from the OSH Office during normal working hours and the Command Duty Officer after normal working hours.

(3) Routine access to information on the AUL and MSDSs is available at the Safety Office. That office is located in Building 646 and may be contacted by calling 545-6286.

h. Program Information. Further information on this program can be obtained from the Occupational Safety and Health Programs Manager, at 545-6286.

22007. Action. Assigned individuals shall execute their specific responsibilities as stated.

a. All supervisors and employees are responsible for ensuring that only authorized and officially acquired materials are used in work operations.

b. Organization components and supervisors shall execute their assigned responsibilities as stated in this instruction and assist staff members named herein in the conduct of their responsibilities.

c. Annual performance ratings will reflect performance with the policies and requirements contained herein.

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CHAPTER 23

SEMI-ANNUAL SAFETY STAND DOWN

23001. Background. A Safety Stand Down is designed to improve FASOTRAGRUPAC safety posture and mishap prevention through a one day period of special activities twice per year. The objective is to involve everyone aboard in intensive safety awareness. Planning, preparation and participation are necessary for the success of the evolution.

23002. Action. Department Heads/Staff Assistants will accomplish advance planning and ensure a one day Safety Standdown is conducted twice per year. Departments/Staff Officers are to schedule pertinent mission specific safety topics/events. Formal lesson plans (helpful) are not required. The senior person in charge of each module will provide a critique of the training conducted and the names of attendees to their Department Head/Staff Assistant.

23003. Responsibility. The following management tasks are assigned:

a. Department Heads/Staff Assistants

(1) Monitor progress of Stand Downs within respective departments/staff offices;

(2) Evaluate the effectiveness of Stand Downs within respective departments/staff offices; and

(3) Provide attendance rosters with topics, date and instructor's name to the OSH Manager.

b. OSH Manager

(1) Assist Department Heads/Staff Assistants with advance planning;

(2) Provide OSH instructors and training aids;

3) Monitor progress of Stand Downs; and

(4) Provide a written report to the commanding officer if significant lessons learned are uncovered.

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CHAPTER 24

BLOODBORN PATHOGEN EXPOSURE PROGRAM

24001. Purpose. This Exposure Control Plan (ECP) is implemented to meet the letter and intent of the Occupational Safety and Health Administration's (OSHA) Bloodborne Pathogens Standard. This ECP is FASOTRAGRUPAC's written policy to prevent or reduce the risk of personnel occupationally contracting Hepatitis B Virus (HBV), Human Immunodeficiency Virus (HIV), and other bloodborne diseases. The ECP sets forth procedures, engineering controls, personal protective equipment, work practices and other methods designed to protect employees, and meets requirements stipulated in the OSHA Bloodborne Pathogens Standard. Consult reference (a) for additional information.

24002. Applicability. Affected personnel are encouraged to study all provisions of the ECP. Any questions or comments should be directed to FASOTRAGRUPAC Medical Officer and Occupational Safety and Health (OSH) Manager. The input and involvement of all affected personnel are needed to ensure this ECP continues to provide adequate workplace safety. The standard stresses hand washing and requires employers to provide facilities and ensure that employers use them following exposure to blood. It sets forth procedures to minimize needlesticks, minimize splashing and spraying of blood, ensure appropriate packaging of specimens and regulated wastes and decontaminate equipment or label it as contaminated before shipping to servicing facilities. This ECP will be subject to at least annual review and revision, as needed.

24003. Definitions

a. Biohazard Label. A label affixed to containers of regulated waste, refrigerator/freezers and other containers used to store, transport or ship blood and other potentially infectious materials. The label must be fluorescent orange-red in color with the biohazard symbol and the biohazard on the lower part of the label. See Appendix 28-B of reference (a)

b. Blood. Human blood, human blood components, and products made from human blood.

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- c. Bloodborne Pathogens. Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV).
- d. Contaminated. The presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.
- e. Contaminated laundry. Laundry which has been soiled with blood or other potentially infectious materials or may contain sharps.
- f. Contaminated Sharps. Contaminated objects that can penetrate the skin including, but not limited to needles, scalpels, broken glass, broken capillary tubes, and exposed ends or dental wires.
- g. Decontamination. The use of physical or chemical means to remove inactivate, or destroy bloodborne pathogens on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use or disposal.
- h. Employee. An individual employed in a health care, industrial or other facility or operation who may be exposed to bloodborne pathogens in the course of their assignments.
- i. Engineering Controls. Controls (e.g., sharps disposal containers, self sheathing needles) that isolate or remove the bloodborne pathogens hazard from the workplace.
- j. Exposure Incident. A specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.
- k. Handwashing Facilities. A facility providing an adequate supply of running potable water, soap and single use towels or hot air drying machines.
- l. HBV. Hepatitis B virus, the disease can produce a mild to chronic infection, liver damage such as cirrhosis, liver cancer or death due to liver failure.

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m. HIV. Human Immunodeficiency Virus, the precursor to the Acquired Immunodeficiency Syndrome (AIDS). AIDS results in the breakdown of the immune system, so the body does not have the ability to fight off other diseases. Currently no vaccination exists to prevent infection of HIV, and there is no known cure.

n. Licensed Health Care Professional. A person whose legally permitted scope of practice allows him or her to independently perform the activities required by paragraph (f) "Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up" of OSHA's Bloodborne Pathogens Standard.

o. Medical Consultation. A consultation which takes place between an employee and a licensed medical professional for the purpose of determining the employee's medical condition resulting from exposure to blood or other potentially infectious materials, as well as any further evaluation or treatment that is required.

p. NIOSH. National Institute for Occupational Safety and Health of the Public Health Service, of the U.S. Department of Health and Human Services; the Federal agency which assists OSHA in occupational safety and health investigations and research.

q. Occupational Exposure. Reasonably anticipated skin, eye, mucous membrane or parenteral contact with blood or other potentially-infectious materials that may result from the performance of an employee's duties.

r. OSHA. Occupational Safety and Health Administration of the U.S. Department of Labor; the Federal agency with safety and health regulatory and enforcement authorities for most U.S. industry and business.

s. Other Potentially-Infectious Materials (OPIM)

(1) The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;

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(2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and

(3) HIV containing cell or tissue cultures, organ cultures and HIV or HBV containing culture medium or other solutions; and blood, organs or other tissues from experimental animals infected with HIV or HBV.

t. Percutaneous. Piercing mucous membrane or the skin barrier through such events as needle sticks, human bites, cuts and abrasions.

u. Personal Protective Equipment. Specialized clothing or equipment worn by an employee for protection against a hazard. General work clothes (e.g. uniforms, scrub suits, pants, shirts or blouses) not intended to function as protection against a hazard are not considered to be personal protective equipment.

v. Regulated Waste. Liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; ant pathological and microbiological wastes containing blood or other potentially infectious materials.

w. Source Individual. Any individual, living or dead whose blood or other potentially infectious materials may be a source of occupational exposure to the employee. Examples include, but are not limited to, hospitals and clinic patients; clients in institutions for developmentally disable; trauma victims; clients of drug and alcohol treatment facilities; residents of hospices and nursing homes; human remains; and individuals who donate or sell blood or blood components.

x. Sterilize. The use of a physical or chemical procedure to destroy all microbial life including highly resistant bacterial endospores.

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y. Universal Precautions. An approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other bloodborne pathogens.

z. Work Practice Controls. Controls that reduce the likelihood of exposure by altering the manner in which a task is performed (e.g., prohibiting recapping of needles by a two-handed technique).

aa. 'Good Samaritan'. Good Samaritan acts such as assisting a co-worker with a nosebleed would not be considered occupational exposure.

24004. Exposure Determination. For the following job classifications it is reasonable to anticipate occupational exposure to bloodborne pathogens while performing certain jobs or tasks in this facility.

<u>JOB TITLE</u>	<u>PROCEDURE</u>	<u>LOCATION</u>
Health Care Providers	Provide medical care to personnel, including inoculating, specimen collecting and handling.	Bldg. 618 & Warner Springs
		EMT
	Provide medical care to personnel	Bldg. 618 & Warner Springs
Safety Observers	Provide CPR	Bldg. 618 & Warner Springs
SERE Instructors	Provide CPR	Bldg. 618 & Warner Springs

24005. Required Work Practices

a. Affected personnel shall wash their hands immediately or as soon as possible after removal of gloves or other personal protective equipment and after hand contact with blood or OPIM.

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b. All personal protective equipment shall be removed immediately upon leaving the work area (or as soon as possible) if overtly contaminated, and placed in an appropriately designated area or container for storage, washing, decontamination or disposal.

c. Used needles and other sharps shall not be sheared, bent, broken, recapped, or resheathed by hand. Used needles shall not be removed from disposable syringes. Recapping is permitted only if no other alternative is feasible and shall be done using an approved mechanical device or one-handed technique.

d. Eating, drinking, smoking, applying cosmetics or lip balm and handling contact lenses is prohibited in work areas where there is a potential for occupational exposure.

e. If conditions are such that handwashing facilities are not available, antiseptic hand cleaners are to be used. Because this is an interim measure, employees are to wash hands at the first available opportunity.

24006. Personal Protective Equipment

a. Where there is potential for occupational exposure, affected personnel will be provided and required to use personal protective equipment including gloves, one way breathing valves and overalls. This equipment shall be provided at no cost to personnel. When necessary, hypoallergenic, powder less or other alternative gloving shall be provided to those personnel who are allergic to types normally provided.

b. Single use (disposable) gloves may not be decontaminated or washed for re-use.

c. Contaminated Personal protective equipment shall be removed and placed into designated storage containers for proper disposal.

d. Personal protective equipment shall be considered "appropriate" only if it does not permit blood or OPIM to pass through or contact the clothing, skin, mouth or mucous membranes

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e. Listed below are types personal protective equipment available for use and circumstances under which it shall be used:

<u>ITEM</u>	<u>PROCEDURE</u>
Latex Gloves	Attending to victim(s) where blood or OPIM is present.
One Way Breathing Valves	Administering CPR to victim whether blood or OPIM is present or not.

24007. Decontamination

a. Decontamination of personal protective equipment shall be performed in the following manner:

<u>EQUIPMENT</u>	<u>CLEANER/DISINFECTANT</u>	<u>FREQUENCY</u>
One Way Breathing Valves	Dispose of valve assembly. Disinfect facepiece.	After each use.
All other PPE	Dispose of as infectious waste.	After each use.

b. Work surfaces shall be decontaminated with an appropriate disinfectant after completion of a procedure; when surfaces are overtly contaminated; immediately after any spill of blood or OPIM; and at the end of the work shift if it can be reasonably determined that there was contamination.

c. Equipment which may become contaminated with blood or OPIM will be checked routinely and prior to servicing or shipping and shall be decontaminated as necessary.

d. All bins, pails, cans and similar receptacles intended for reuse which have a potential for becoming contaminated with blood or OPIM shall be inspected, cleaned and disinfected immediately or as soon as possible upon visible contamination.

e. Broken glassware which may be contaminated shall not be picked up directly with the hands. It shall be cleaned up using mechanical means such as a brush and dust pan, tongs or forceps.

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f. Specimens of blood or OPIM shall be placed in a closable, leakproof container labeled or color-coded according to OSHA requirements prior to being stored or transported. If outside contamination of the primary container is likely, then a second leakproof container that is labeled or color-coded (again, per OSHA specifications) shall be placed over the first and closed to prevent leakage during handling, storage or transport. If puncture of the primary container is likely, it shall be placed within a leakproof, puncture-resistant secondary container.

g. Reusable items contaminated with blood or OPIM shall be documented prior to washing and/or reprocessing.

h. It is the responsibility of the work site supervisor to assure that the work site is maintained in a clean and sanitary condition. Facilities shall be cleaned and disinfected with an appropriate agent immediately following procedures involving bloodborne pathogens or OPIM.

24008. Waste Disposal. All infectious waste destined for disposal shall be placed in closable, leakproof containers or bags that are color-coded or labeled as herein described. It shall be the responsibility of the work site supervisor to assure that waste is properly eliminated and the following rules are observed:

a. If outside contamination of the container or bag is likely to occur, then a second leakproof container or bag which is closable and labeled or color-coded (as per OSHA specifications) will be placed over the outside of the first and closed to prevent leakage during handling, storage and transport.

b. Disposal of contaminated personal protective equipment will be provided at no cost to personnel.

c. Disposal shall be in accordance with applicable Federal, state and local regulations concerning medical waste.

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24009. Laundry

- a. Laundry which has been contaminated with blood or OPIM or may contain contaminated sharps shall be handled as little as possible and with a minimum of agitation.
- b. Contaminated laundry shall be placed and transported in bags that are labeled or color-coded as herein described. Whenever this laundry is wet and presents the potential or soaking or leaking through the bag, it shall be placed and transported in leakproof bags.
- c. Personnel responsible for handling potentially contaminated laundry are required to wear protective gloves and other appropriate personal protective equipment to prevent occupationally exposure during handling or sorting.
- d. Laundering of personal protective equipment is to be provided at no cost personnel.
- e. If laundry is shipped offsite to a second facility which does not utilize Universal Precautions in its handling of all laundry, bags or containers with appropriate labeling and/or color-coding shall be used to communicated the hazards associated with this material.
- f. Workplace supervisors are responsible for ensuring the proper handling, storage shipping or cleaning of contaminated laundry.

24010. Communication of Hazards to Personnel

- a. Warning labels shall be affixed to containers of infectious waste; refrigerators and freezers containing blood and OPIM; and other containers used to store or transport blood or OPIM except as provided below.
- b. Labels shall bear the legend described in the OSHA standard for bloodborne pathogens. They shall be fluorescent orange or orange-red or predominately so, with lettering or symbols in a contrasting color.

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c. All labels shall be an integral part of the container or will be affixed as close as safety possible to the container by string, wire, adhesive or any other method that prevents their loss or unintentional removal.

d. Red bags or red containers may be substituted for labels on containers of infectious waste.

e. The work site supervisor is responsible for ensuring that containers of biohazardous waste are properly labeled.

24011. Information and Training

a. All personnel with occupational exposure shall participate in Exposure Control training within 90 days of their initial assignment and at least annually thereafter. This training shall be free of charge and scheduled during working hours.

b. The person responsible for providing this training and coordinating the program is the Bloodborne Pathogen Program Manager.

c. At the end of each training session, personnel will acknowledge their participation in the program by signing a training form. See Appendix 24-A at the end of this chapter.

d. Personnel shall receive training and information in the following areas:

(1) A copy of this standard and an explanation of its content;

(2) A general explanation of the epidemiology and symptoms of bloodborne diseases;

(3) An explanation of modes of transmission of bloodborne pathogens;

(4) An explanation of the Exposure Control Plan and where you may obtain a copy;

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(5) An explanation of the appropriate methods for recognizing tasks and procedures that may involve exposure to blood or OPIM;

(6) An explanation of the use and limitations of practice that will prevent or reduce exposure, including appropriate engineering controls, work practices, and personal protective equipment;

(7) Information on personal protective equipment which shall address types available, proper use, location, removal, handling decontamination and/or disposal;

(8) An explanation of the basis for selection of personal protective equipment;

(9) Information on the hepatitis B vaccine, including information on its efficacy, safety and the benefits of being vaccinated;

(10) Information on the appropriate actions to take and persons to contact in the event of an emergency;

(11) Procedures to follow if an exposure incident occurs, including method of reporting the incident;

(12) Information on the medical follow-up that will be made available and on medical counseling provided to exposed personnel;

(13) An explanation of signs, labels, and/or color-coding; and

(14) A question and answer session with the trainer.

24012. Medical Surveillance

a. General Information

(1) Any individual who may be exposed to potentially infectious materials shall be offered at no cost, a vaccination for hepatitis B, unless a previous vaccination or antibody testing reveals immunity.

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(2) If the vaccination is declined, a waiver form shall be signed.

b. Post-Exposure Procedures. Should an exposure occur to a potentially infectious material (via needle stick, splash, etc.), a post-exposure confidential medical evaluation and follow-up shall be conducted, including:

(1) Documentation of the route(s) of exposure, HBV and HIV antibody status of the source individuals blood (if known), and the circumstances under which the exposure occurred.

(2) If the source individual can be determined and permission obtained, collection and testing of the source individuals blood to determine the presence of HIV or HBV infection.

(3) Collection of blood from the exposed employee as soon as possible after the exposure incident for determination of HIV/HBV status. Actual antibody or antigen testing of the blood or serum sample may be done at that time or at a later date, if requested by the exposed individual. Samples shall be preserved for at least 90 days.

(4) Follow-up of the exposed individual including antibody or antigen testing, counseling, illness reporting, and safe and effective post-exposure prophylaxis, according to standard recommendations for medical practices.

c. Information Supplied to Medical. The attending health care professional shall be provided the following information:

A copy of 29 CFR 1910.1030 and its appendices;

(2) A description of the affected individuals duties as they relate to occupational exposure;

(3) Results of the source individuals blood testing, if available; and

(4) All pertinent medical records, including vaccination records, relevant to the exposed individual.

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d. Health Care Professionals Report. The attending health care professional shall provide a written opinion to the individuals command concerning the following:

(1) The health care professionals recommended limitations upon the exposed individuals ability to receive the hepatitis B vaccination.

(2) A statement that personnel have been informed of the results of the medical evaluation and have been told about any medical conditions resulting from exposure to blood or OPIM which require further evaluation or treatment.

(3) Specific findings or diagnoses which are related to the individuals ability to receive the HBV vaccination. Any other findings and diagnoses shall remain confidential.

(4) Report to Exposed Individual. For each evaluation under this section, the exposed individual shall be provided a copy of the attending health care professionals written opinion within 15 days of the completion of the evaluation.

24013. Record Keeping

a. Medical Records. Medical records shall be kept for the length of the worker's employment plus 30 years in accordance with 29 CFR 1910.1030. Records shall be maintained at the designated medical treatment facility supporting the command or activity or transferred to the archives according to current regulations.

b. Training Records. Training records shall be kept for 5 years. A copy of these records shall be forwarded to the Occupational Safety and Health Office for compliance monitoring of the program.

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Bloodborne Pathogens Training

On _____, I attended training on Bloodborne Pathogens. topics covered in this training included:

- a. A copy of this standard and an explanation of its content;
- b. A general explanation of the epidemiology and symptoms of bloodborne diseases;
- c. An explanation of modes of transmission of bloodborne pathogens;
- d. An explanation of the Exposure control Plan and where you may obtain a copy;
- e. An explanation of the appropriate methods for recognizing tasks and procedures that may involve exposure to blood or OPIM;
- f. An explanation of the use and limitations of practice ghat will prevent or reduce exposure, including appropriate engineering controls, work practices, and personal protective equipment;
- g. Information on personal protective equipment which shall address types available proper use, location, removal, handling, decontamination and/or disposal;
- h. An explanation of the basis for selection of personal protective equipment;
- i. Information on the hepatitis B vaccine, including information on its efficacy, safety, and the benefits of being vaccinated;
- j. Information on the appropriate actions to take and persons to contact in the event of an emergency;
- k. Procedures to follow if an exposure incident occurs, including method of reporting the incident;
- l. Information on the medical follow-up that will be made available and on medical counseling provided to exposed personnel;
- m. An explanation of signs, labels, and/or color-coding;
- n. A question and answer session with the trainer

Supervisor or Trainer Signature

Trainee Signature