

5.14 INTRODUCTION TO ENVIRONMENTAL SAFETY AND OCCUPATIONAL HEALTH FOR JOB CORPS CENTERS

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. Governing Regulations and Policy

Centers must comply with federal, state, and local regulations and Job Corps policy regarding environmental safety and occupational health.

R2. Occupational Safety and Health Plan

- a. Center operators must develop and submit a center occupational safety and health plan, approved and signed by the center director and forwarded to the Regional Office. The National Office will review plans submitted by the Regional Office on a case by case basis. Note: Corporate plans or templates will not be accepted. Plans must be tailored to each center.
- b. Plans must be submitted electronically in Microsoft Word format only (no pdf files will be accepted).
 - 1. Only newly created center plans, or plans that have never been approved by the Regional Office must be submitted by February 15.
 - 2. Once the plan has been approved by the Regional Office, the plan should not be submitted to the Regional Office again until at least one of the following occurs:
 - (a) a new or revised PRH or regulatory standard necessitates revision of specific plan;
 - (b) the center introduces a new trade resulting in new potential hazards; or
 - (c) new hazards exist due to changes in equipment or materials.
 - 3. Approved plans must contain a revision tracking sheet that lists each component of the plan and documents changes made to the plan (i.e., specific change and date of revision).
 - 4. A copy of the approved plans must be maintained at the Regional Office and on center indefinitely and made available upon request.
 - 5. Approved plans must remain on center when there is a change in center operator.
- c. Each occupational safety and health plan must consist of the following components at a minimum (where applicable):
 - 1. Center Safety Orientation

2. Staff Training
 3. Basic Equipment for Safety Officers
- d. All center safety officers must possess the following equipment items, at a minimum, to effectively perform their responsibilities. Additional equipment may be required depending on the center's hazard analysis.
1. A quality camera
 2. Safety shoes
 3. Safety helmet/hardhat
 4. Safety goggles/glasses
 5. Gloves
 6. Use of computer with word processing, e-mail, Internet capability, and CD-ROM
 7. Flashlight
 8. Electrical circuit tester and ground fault circuit interrupter tester (GFCI)
- e. The following items should be available when appropriate and necessary to identify and control hazards:
1. Lockout/tagout kits
 2. Air flow meter (Alnor Velometer[®] Jr.)
 3. Hearing protection
 4. Swimming pool test kits
 5. Low-volume air sampling pumps
 6. High-volume air sampling pumps
 7. Sound level meter with octave band analyzer
 8. Noise Dosimeters
- f. Regulations and Policies
- All center operators, center directors, and safety officers must follow and refer to the following policy and regulatory information in performing their safety and health program review activities:
1. National Fire Protection Association (NFPA) 101, Life Safety Code[®] and Handbook
 2. Current OSHA Standards (29 CFR 1904, 1910, 1926, and 1960)
 3. Department of Labor Manual, Series (DLMS) 4, Chapter 800, DOL Safety and Health Program
 4. Job Corps Policy and Requirements Handbook (PRH)
 5. NFPA 70, National Electrical Code[®] (NEC)

g. Occupational Safety and Health Committee

1. Overview

Each center must establish an occupational safety and health committee in accordance with 29 CFR 1960.58 to:

- (a) Review reported accidents, injuries, and illnesses.
- (b) Consider the adequacy of action taken to prevent recurrence of such accidents, injuries, or illnesses.
- (c) Plan, promote, and implement DOL and Job Corps occupational safety and health programs.

2. Committee Membership

The center director must actively participate on the occupational safety and health committee. In addition to the center director, committee membership must include:

- (a) The center safety officer (facilitator)
- (b) Manager of residential living
- (c) A maintenance unit supervisor
- (d) A health services supervisor
- (e) A CTT supervisor
- (f) A recreation supervisor
- (g) A food service supervisor
- (h) A minimum of two students, selected by their peers
- (i) Representatives from other organizational units, as appropriate

3. Duties of Committee Members

Committee member duties must include, but not be limited to, the following:

- (a) Assist in safety inspections when requested by the safety officer.
- (b) Observe and report infractions of safety rules and regulations.
- (c) Review accident reports to determine if corrective action is necessary or if harmful trends exist.
- (d) Review inspection reports prepared by the center safety officer identifying unsafe/unhealthful conditions, and suggest techniques/strategies for correction/abatement.
- (e) Review all suggestions and concerns submitted by students and staff, and make recommendations for implementation to the center director.
- (f) Develop and implement a safety awards and recognition program.

4. Training for Committee Members

In accordance with 29 CFR 1960.58, safety committee members must complete training commensurate with the scope of their assigned responsibilities within 6 months of appointment. Such training must include:

- (a) The center's occupational safety and health program
- (b) Section 19 of the OSH Act of 1970
- (c) Executive Order 12196
- (d) 29 CFR 1910, 1926, and 1960
- (e) Center procedures for the reporting, evaluation, and abatement of hazards
- (f) Center procedures for reporting and investigating allegations of reprisal, and the recognition of hazardous conditions and environments
- (g) Identification and use of occupational safety and health standards, and other appropriate rules and regulations

5. Occupational Safety and Health Committee Meetings

Meetings must be held monthly and/or when called by the center director or safety officer. Copies of minutes must be maintained at the center for 3 years and made available upon request.

R3. Occupational Safety and Health Program

Center operators must establish and operate an occupational safety and health program in accordance with the requirements established in this section. The center's program must fully comply with current Occupational Safety and Health Administration (OSHA) standards at 29 CFR 1904, 1910, 1926, and 1960, and with U.S. Department of Labor (DOL) regulations, policies, and procedures. It must include, but not be limited by the following features:

- a. Appointment of a center safety officer who is properly trained in OSHA courses listed in Exhibit 5-4 (Required Staff Training)
- b. Development of an occupational safety and health plan, which is updated as needed or as directed by OSHA or the National Office (see R2 above). Center plans must include the following if applicable. See referenced section below for plan details:
 1. Personal Protective Equipment (PPE) Plan (*See Section 5.20, R1*)
 2. Fire Safety and Prevention Plan (*See Section 5.20, R2*)
 3. Emergency Action Plan (*See Section 5.20, R3*)
 4. Hazard Communication Plan (*See Section 5.16, R6*)
 5. Recreational Safety Plan (*See Section 5.20, R5*)

6. Asbestos Operations and Maintenance Plan (*See Section 5.16, R5*)
7. Confined Space Entry Plan (*See Section 5.20, R7*)
8. Bloodborne Pathogens Plan (*See Section 5.20, R8*)
9. Respiratory Protection Plan (*See Section 5.20, R9*)
10. Hearing Conservation Plan (*See Section 5.20, R10*)
11. Lead Exposure Plan (*See Section 5.20, R11*)
12. Hexavalent Chromium Exposure Plan (*See Section 5.20, R12*)
13. Lockout/Tagout Plan (*See Section 5.20, R13*)
14. Powered Industrial Vehicle Plan (*See Section 5.20, R14*)
- c. Investigation and reporting of accidents and injuries
- d. Enforcement of safety and health rules and regulations
- e. Conduct of safety inspections and initiation of corrective actions
- f. Development of a safety recognition program
- g. Establishment of occupational safety and health committees

R4. Center Occupational Safety and Health Responsibilities and Duties

a. General Responsibilities

The center operator must be responsible for safeguarding the occupational safety and health of all students and staff and ensuring a safe and healthful environment in which to live, work, and train. This responsibility will be inherent in all aspects of the program, whether stated explicitly or implied.

b. Center Operating Contractors and Federal Agencies

Center operating contractors and agencies will:

1. Ensure a training, living, and working environment that is free from recognized hazards.
2. Ensure that the center director is an active participant on the occupational safety and health committee.
3. Appoint a center safety officer and provide necessary training and equipment for the performance of those duties. The center safety officer will report directly to the center director on matters of safety.
4. Ensure that the center director or designee (e.g., safety officer) has the authority to terminate any activity where a hazard exists.
5. Enforce occupational health and safety rules, regulations, and standards.
6. Ensure that personal protective equipment (PPE) is worn in the trade programs to comply with OSHA standards.
7. Report fatalities, injuries, and occupational illnesses to DOL in a timely manner.

8. Instruct students and staff in safe practices and methods of operation.
 9. Conduct required occupational health and safety inspections and surveys and take prompt corrective action to deal with hazards identified.
 10. Provide medical and dental services and supplies for injured and occupationally ill students.
 11. Investigate accidents and complete and submit appropriate reports.
 12. Encourage and evaluate student suggestions on safety and health improvements.
 13. Develop and implement a safety awards and recognition program.
 14. Ensure that safety and health evaluation reports provided by the National Office of Job Corps are responded to within 30 days of receipt and that corrective action is taken to abate hazards noted.
- c. Job Corps Regional Offices
- Job Corps Regional Offices (ROs) will:
1. Ensure that centers have adequate occupational safety and health programs.
 2. Approve abatement plans for occupational safety and health violations.
 3. Approve center occupational safety and health plans, in addition to various environmental health plans.
- d. National Office of Job Corps
- The National Office of Job Corps (OJC) will:
1. Implement DOL occupational safety and health standards, policies, procedures, and programs.
 2. Develop and disseminate programs to promote occupational safety and health in Job Corps.
 3. Ensure the accurate and timely reporting of accidents, occupational illnesses, injuries, and environmental hazards.
 4. Monitor the current status of injury and occupational illness claims by students.
 5. Provide occupational safety and health literature to Job Corps centers and related training and technical assistance, as needed.
 6. Develop an annual occupational safety and health work plan in cooperation with OSHA.
 7. Provide technical guidance to Job Corps Regional Offices in reviewing center occupational safety and health plans.
 8. Conduct annual safety and health reviews of centers in accordance with 29 CFR 1960.25, 1960.78, 1960.79, and 1960.80.

9. Provide a written report to the Job Corps Regional Director and center director within 30 days after annual occupational safety and health (OSH) program review.
 10. Conduct center evaluations, announced or unannounced, as a result of a complaint from a student or staff member, or if there is reason to believe that there are serious safety and health hazards. These evaluations shall be accompanied by a written report to the Job Corps Regional Director and center director.
 11. Provide regions and centers with up-to-date information and regulations concerning occupational safety and environmental health issues such as polychlorinated biphenyls (PCBs), underground tanks, asbestos, and small-quantity hazardous waste.
- e. Center Director
- The center director will:
1. Ensure that all occupational safety and health requirements are implemented.
 2. Provide leadership, direction, enforcement, and accountability for the center safety program.
 3. Develop a center occupational safety and health program and plan.
 4. Ensure that personal protective equipment (PPE) is worn in the trade programs to comply with OSHA standards.
 5. Ensure a training, living, and working environment that is free from recognized hazards. Maintain facilities and grounds in a sanitary and healthful manner.
 6. Participate in all occupational safety and health committee meetings.
 7. Appoint a center safety officer and provide necessary training and equipment for the performance of those duties. The center safety officer will report directly to the center director on matters of safety.
 8. Terminate any activity where a hazard exists; additionally, the authority to terminate any such hazardous activity may be given to a designee (e.g., safety officer).
 9. Enforce occupational health and safety rules, regulations, and standards.
 10. Report fatalities, injuries, and occupational illnesses to DOL in a timely manner.
 11. Instruct students and staff in safe practices and methods of operation.
 12. Conduct required occupational health and safety inspections and surveys and take prompt corrective action to deal with hazards identified.
 13. Provide medical and dental services and supplies for injured and occupationally ill students.

14. Investigate accidents and complete and submit appropriate reports.
 15. Encourage and evaluate student suggestions on safety and health improvements.
 16. Establish a formal written safety awards and recognition program, and use it to recognize students and staff who make significant contributions toward the prevention of injury or illness.
 17. Review safety awards and recognition programs annually.
 18. Ensure that safety and health evaluation reports provided by the National Office of Job Corps are responded to within 30 days of receipt and that corrective action is taken to abate hazards noted.
- f. Center Safety Officer
- The center safety officer will:
1. Assist the center director in preparing the center occupational safety and health plan and implement the plan.
 2. Provide orientation and training to students and staff on the center safety and health plan.
 3. Promote safety campaigns on center to reduce accidents and injuries.
 4. Inspect all center areas for safety and health violations.
 5. Ensure that personal protective equipment (PPE) is worn in the trade programs to comply with OSHA standards.
 6. Complete all required accident and injury reports in full compliance with the PRH and OSHA regulations.
 7. Advise the center director of safety and health concerns.
 8. Facilitate required occupational safety and health committee meetings; retain meeting minutes for 3 years and make them available upon request.
 9. Coordinate with other safety and health staff (e.g., nurse, maintenance supervisor, CTT/education instructors, and others) to ensure a safe and healthful environment in which to live, work, and train.
 10. Retain exposure monitoring results on center for 30 years in accordance with 29 CFR 1910.1020, *Access to Employee Exposure and Medical Records*.

R5. Center Occupational Safety and Health Orientation and Training

In accordance with 29 CFR 1960.58, centers shall provide the appropriate safety and occupational health training to students and staff including specialized training appropriate to the training or work tasks performed. Center safety and health orientation and training shall include the following:

- a. Introduction to Center Life (New Students) - CPP
(See Chapter 2, Section 2.2.)

- b. **New Staff Training**
(See Exhibit 5-4.)
- c. **Ongoing Staff Training**
The center must provide required occupational safety and health training included as part of the center's annual training plan. Each plan must include anticipated occupational safety and health training needs, such as the anticipated number of staff members to be trained, where and when the training is to be performed, and the estimated cost (see Exhibit 5-4).
- d. **Training Standards and Documentation**
Safety training must be conducted in accordance with current OSHA standards 29 CFR 1904, 1910, 1926, and 1960 and DOL guidance provided by OJC. Center safety officers must have and maintain these references and regulations on hand at all times. Further, all completed training must be properly documented and maintained on center in the individual's personnel or continuing education file for up to 3 years, and 1 year beyond employment. Training records must be available upon request.
- e. **Minimum Training Requirements for Center Safety Officers**
The center operator and center director must ensure that center safety officers receive training in the courses referenced in Exhibit 5-4 within 180 days of appointment. In accordance with PRH Chapter 5, Section 5.3, annual advanced or refresher training must be provided to the safety officer after basic required courses are completed. The center director must ensure that a written continuing education plan is developed and implemented for the safety officer. Further, all completed files must be properly documented and maintained on center in the individual's personnel or continuing education file for up to 3 years, and 1 year beyond employment. Training records must be available upon request.

QUALITY INDICATORS

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding environmental safety and occupational health.
- Q2. Center operators establish and operate an occupational safety and health program.

5.15 SAFETY INSPECTIONS, OBSERVATIONS, AND OSH PROGRAM REVIEW

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. Imminent Danger

Imminent danger exists when a condition or practice presents a danger that could reasonably be expected to cause death or serious physical harm. If such a situation exists and is observed, the student(s) and staff in danger must be immediately removed from the area and not permitted to return until the problem is corrected. The safety officer must immediately notify the center director of the hazard and recommend corrective action. The center director must take appropriate action(s) to correct the hazard. If the hazard cannot be corrected promptly by the center, the center director must consult the appropriate Regional Office and/or the National Office of Job Corps for advice and assistance in correcting the hazard.

R2. Required Inspections and Observations

- a. All occupational safety and health inspections and observations must be:
 1. Conducted by appropriate center staff in accordance with 29 CFR 1960.25 and DLMS 4 Chapter 800, paragraph 825.
 2. Submitted according to Exhibit 5-2, Plan and Report Submission Requirements.
 3. The responsibility of the center safety officer, managers, supervisors, and instructors.
 4. Documented and maintained on center for a period of 5 years, then destroyed.
- b. Observations on a daily basis, and weekly or monthly inspections are required for all center:
 1. Buildings
 2. Facilities
 3. CTT facilities
 4. CTST projects
 5. Academic classrooms
 6. Cafeterias
 7. Dormitories
 8. Health services

9. Administrative offices
10. Recreation areas
11. Gymnasiums
12. Swimming pools
13. Child development center facilities, including playgrounds
14. Equipment
15. Vehicles used to transport students

Identified deficiencies must be corrected promptly. Weekly and monthly inspections must be documented; records of inspections and actions taken to correct deficiencies must be maintained by the center safety officer for 3 years, and made available upon request.

c. Daily Observations

1. Food service supervisors must check food preparation and food serving areas of cafeterias.
2. Residential advisors must check dormitories, snack bars, and canteens and document their findings in a log book.
3. CTT and academic managers/instructors must check classrooms/shops (including CTST projects), motor vehicles, and all equipment to be used by students and staff.
4. Child development supervisors must check the child development center, equipment and toys, and the playground.
5. Recreation supervisors/staff must check the gymnasium, exercise equipment, and other frequently used recreation areas.

d. Weekly Inspections

The center safety officer must inspect:

1. All food service facilities, including cafeterias, culinary arts facilities, snack bars, and canteens.
2. Gymnasiums, exercise equipment, and swimming pools during times of operation.
3. CTT facilities and CTST projects.

e. Monthly Inspections

The center safety officer must inspect:

1. Dormitories
2. Child development center
3. CTT facilities and CTST projects (see Chapter 3, Section 3.2)
4. Academic classrooms

5. Health services
 6. Administrative offices, warehouses, and other buildings occupied by students and staff
- f. Quarterly Inspections
- Centers must arrange for quarterly environmental health inspections by qualified non-center personnel in the following areas:
1. Food service facilities
 2. Residential facilities
 3. Training facilities
 4. Water supply and distribution facilities, when not a part of municipal systems
 5. Wastewater treatment facilities, except for septic systems, which must be inspected annually, and municipal sewer systems, which are exempt from this requirement
 6. Child development center, where appropriate
- Centers must submit quarterly environmental health reports and necessary corrective action, simultaneously, to the Regional Office and the National Office of Job Corps within 7 days of receipt. (See Exhibit 5-2, Plan and Report Submission Requirements.)
- g. CTST and Other Projects
- The center safety officer and/or appropriate instructor must inspect all CTST projects daily. The center safety officer must inspect and approve all final CTST projects, on and off center, before site occupancy and project completion. Inspection checklists, photographs, and associated corrective actions must be maintained on center indefinitely and made available upon request.

R3. Annual Occupational Safety and Health (OSH) Program Reviews

- a. The annual occupational safety and health (OSH) program review is conducted in accordance with Executive Order 12196, Title 29 Code of Federal Regulations (CFR) part 1960, Department of Labor Manual Series (DLMS) 4, Chapter 800, and the Job Corps Policy and Requirements Handbook (PRH). The review verifies that each center has implemented the safety and health program outlined in the PRH and identifies any outstanding occupational health and safety issues. The review consists of an on-site visit including opening and closing conferences, walk-through of facilities, document verification, and student/staff interviews.
- b. **OVERVIEW OF THE CENTER OSH PROGRAM REVIEW**
 1. The review is conducted using the Job Corps OSH Program Review Guide, which is composed of seven elements that address the specific requirements of a center's safety program, and by conducting a walk-through inspection of the center.

2. The OSH Program Review Guide enables safety program reviewers to determine a reasonably objective numerical rating of a Job Corps center's OSH program, using a rating system like the Program Assessment Guide (PAG) nine-point scale (also referred to as nine "levels" of achievement):

1	2	3	4	5	6	7	8	9
Not Acceptable (1.0 - 4.9)				Acceptable (5.0 - 9.0)				

While all centers are expected to achieve an overall rating of at least a 5.0, indicating that all safety laws, regulations, and requirements are being met, achieving a rating above a 5.0 is a goal to be strived for. Importantly, because the OSH Program Review Guide outlines the elements of a safety program, it serves as a guide to assist centers in developing and implementing strong OSH programs.

Several reference sources are incorporated into the guide, including but not limited to: OSHA standards and directives; the Department of Labor Manual Series (DLMS); and the Job Corps PRH.

3. The OSH Program Review Guide is comprised of seven elements that address the specific requirements of a comprehensive model OSH program. These seven elements are:
- (a) Management Leadership and Student Participation – Measures visible management interaction and student participation that is necessary for a successful program.
 - (b) Workplace Analysis – Measures actions taken to identify and analyze hazards on center to aid in the prevention of injuries and illnesses.
 - (c) Accident and Record Analysis – Measures the effectiveness of accident investigation and follow-up, and the use of data to prevent recurrent accidents and injuries.
 - (d) Hazard Prevention and Control – Measures the use of engineering and administrative controls and personal protective equipment to minimize exposure to current or potential hazards.
 - (e) Emergency Response – Measures implementation of appropriate planning, training, drills, and equipment for response to emergency situations.
 - (f) Safety and Health Training – Measures whether appropriate training has been completed and documented.

- (g) Written OSHA Programs – Evaluates the existence, quality, and implementation of required written safety and health programs.
 - (1) Levels 1 – 5 represent the minimum requirements of an OSH program.
 - (2) Levels 6 - 9 exceed the minimum OSHA requirements and are indicative of a more advanced, pro-active OSH program.
 - (3) Each level builds on the lower; i.e., the center must complete all of Level 1 to get credit for any item in Level 2.
 - (4) To achieve a level, all criteria and measures in the level must be complete.

4. Review Guide Form

- (a) The review guide form is divided into the seven elements and sub-elements. Each element has three parts:
 - (1) Standard – Statement of the policy, regulation, standard, or law that is required in Levels 1 - 5.
 - (2) Criteria – Items needed to achieve the standard.
 - (3) Measure – Items required to achieve the criteria.
- (b) If a measure is met, the line on the guide is annotated as “Go” and the reviewer continues to the next level.
- (c) If a measure is not met, the line is annotated as “Stop” and the element or sub-element is scored not higher than the lowest level filled.

Note: In order to ensure that all fundamental safety and health areas are reviewed regardless of whether the center met all measures and to accurately assess the entire program, the reviewer will evaluate all elements and sub-elements up to and including Level 9, whether or not a “Stop” is noted.

- (d) If an item is not applicable to a center, that item is not considered a “Stop” and will not penalize or assist the center in any way. That item is considered “Not Applicable” and will not be averaged into any score. However, the rationale for the determination of non-applicability is required (e.g., “Certification from a qualified asbestos inspector shows that the center is asbestos-free; therefore, an asbestos O&M is not required.”).

5. Rating System

- (a) Each sub-element receives a score equivalent to the highest level filled.

- (b) Each element score is equal to the average of the sub-element scores, rounded to the nearest decimal place. If the element has no sub-elements, the highest level filled is the score for the element.
- (c) The seven element scores are then averaged to produce a final score.
- (d) Final score:
 - (1) Since Levels 1 through and including 5 are based upon federal and DOL standards and regulations, scores of below 5.0 in any element or sub-element are not acceptable. Therefore, if any sub-element or element score is lower than a 5.0, the final evaluation score will be marked “with serious concerns.”
 - (2) If all element and sub-element scores are 5.0 or higher, the final score will require no notation.
 - (3) The score awarded by the reviewer is final.

6. Documentation Examined During Review

Documentation is critical. Reviewers will assess only the documentation provided to them while they are on center. Should the required documentation not be presented, the center will not be credited with the associated item. The reviewer will give the center safety officer (or designee) an opportunity to present any omitted documentation. Documentation that is created during or after the opening day of the review, however, will not be considered. OSH Program Review rebuttals based upon missing or unaccepted documentation at the time of the review will be rejected and the final score will not be changed.

7. Interviews During the Review

The OSH Program Review Guide includes interviews with the center director, staff members, and students to determine knowledge and involvement. In cases where verbal statements and documentation conflict, reviewers will use their professional judgment in deciding whether to award credit. Rebuttals or scoring changes based upon discussions with the reviewer that are not substantiated by OSH program review guide notes or references or other documentation will be rejected and the final score will not be changed.

8. Limitation of the OSH Program Review Guide

The guide is designed to facilitate the evaluation of OSH programs. Use of the guide does not constitute a facility inspection. The guide does, however, evaluate whether proper inspections have been conducted by center staff and outside entities, and whether proper abatement action has been taken.

9. Documentation of Deficiencies and Abatement Activities

OJC safety reviewers are required to document deficiencies in the Abatement Tracking System (ATS) Web site. Job Corps centers are required to document and post deficiencies manually on the DOL form DL1-2029. Blank forms can be obtained from the Job Corps Community Web site. Center abatement activities must be documented in ATS. The ATS Web site can be accessed at: <http://ats.dol.gov/>.

R4. *Occupational Safety and Health Facility Survey (Pre-Occupancy)*

- a. An occupational safety and health environmental facility survey (pre-occupancy) must be conducted before moving students into:
 1. a new center, dormitory, or classroom; or
 2. a facility that has been renovated so as to change any building structural system or major mechanical, electrical, plumbing, egress, or fire and safety system.
- b. Centers must contact the Regional Office (RO) project manager to schedule a pre-occupancy survey 30 days prior to project completion.
- c. The pre-occupancy survey must be coordinated through the RO and conducted by the center safety officer and/ or the National Office of Job Corps (OJC).
- d. Major deficiencies must be corrected before occupancy.
- e. The survey report will be distributed prior to occupancy, and it will be maintained by the OJC, RO, and the center.

R5. *Monitoring of Work-Based Learning Sites*

Centers are responsible for ensuring that students are placed in safe and healthful working conditions at work-based learning locations. However, Job Corps' responsibility will not extend to reviewing or inspecting private employer businesses for compliance with OSHA standards because this authority rests only with OSHA.

To ensure the occupational safety and health of students at private employer work sites, appropriate career development staff and/or the center safety officer must:

- a. Visually survey the work site for potential hazards and discuss safety and health requirements with the employer.
- b. Ensure that the employer signs a written agreement that specifically states that the employer will provide students with safety and health protection which shall be at least as effective as that which is required under the Occupational Safety and Health Act of 1970 (29 U.S.C.) and 29 CFR parts 1910, 1926, and 1960.
- c. Monitor active work sites on a regular basis. If hazards are noted, the employer shall be requested to take corrective action. Students should be removed from work sites where hazards exist that could cause personal injury or impairment of the health of students.
- d. Document the injuries of students who are injured on work-based learning sites in the Safety and Health Information Management System (SHIMS), as they are covered by the Federal Employees' Compensation Act (FECA).

R6. Abatement Plans for Violations Identified in Annual Occupational Safety and Health (OSH) Program Review

a. Abatement Procedures and Time Frames

The following procedures shall be followed by centers and Regional Offices (ROs) in responding to safety and health violations cited during annual safety and health reviews:

1. As part of the safety and health review, the center will receive a detailed verbal briefing regarding all hazards identified. The center must immediately begin to address those concerns. A log of the corrected item(s) must be maintained, indicating what action was taken, by whom, and the date of action.
2. The center and the RO will receive a formal OSH program review report from the National Office of Job Corps (OJC) within 60 days of a review. Violations must be documented manually on Form DL1-2029, Notice of Unsafe or Unhealthful Condition, which is to be created by the center. The violations documented on the DL1-2029 are the same as those documented in the Abatement Tracking System (ATS), which is the Web-based system designed to facilitate an information exchange between the reviewer, the RO, and the center, and to allow the OJC to monitor case status to ensure prompt and timely hazard abatement.
3. The roles of each ATS user are as follows:
 - (a) At the national level, OJC inputs DL1-2029 center violation data into ATS and transmits the data to the RO to initiate tracking.
 - (b) At the regional level, both the Job Corps Regional Director and the center's project manager are authorized to access ATS to view new cases transmitted from OJC and centers' abatement responses. Either individual in the RO can transmit the DL1-2029 in ATS to the Job Corps center. The RO can edit the center response and can close out the case only after all violations have been abated.
 - (c) At the center level, the center director and the safety officer are authorized to access ATS to view new cases transmitted from the RO and can respond to violations. Most violations should be abated within 30 days. If abatement is not completed, an abatement plan is required. Centers can indicate in ATS whether the response is a corrective action or an abatement plan. Funding requests can also be indicated. After the center transmits the response electronically to the RO, the RO will determine whether to accept the abatement response in part or in whole.

Note: ATS is not capable of providing users e-mail notification, so the system should be checked frequently.

b. Posting Requirements

Official response to violations noted during the occupational safety and health review occurs via ATS. A copy of the paper DL1-2029, which must be created by the center, is to be posted by the center at or near each place where an unsafe or unhealthful condition is referred to in the notice. It must remain posted until all violations cited are abated, or for 3 training days, whichever is longer.

QUALITY INDICATORS

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding environmental safety and occupational health.
- Q2. Residential and dining facilities are clean and neat in appearance.
- Q3. Few safety and health hazards are cited during inspections by the safety officer, during annual occupational safety and health (OSH) program reviews, and during environmental inspections.

5.16 ENVIRONMENTAL HAZARDS

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. *Hazardous Materials Management*

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding hazardous waste generation, storage, and disposal.
 - 1. Centers that ship hazardous materials off center must comply with pre-transportation regulations per 49 CFR 262 Subpart C.
 - 2. Centers that store or handle hazardous materials, such as flammable/combustible materials, acids, caustics, compressed gases, oxidizers, etc., must comply with facility storage requirements and operational procedures as stipulated in DOD 4145e19-R-1, 1910 Subpart Z and all applicable substance-specific standards.
 - 3. Centers that use hazardous or toxic chemicals must comply with the regulations of the Emergency Planning and Community Right-to-Know Act (EPCRTKA) of 1986.
 - 4. Centers must notify the Environmental Protection Agency (EPA), the Job Corps Regional Director, and the National Office of Job Corps safety team leader when a release of hazardous substance occurs. A release includes any discharge, spill, or leak into the air, water, or land, as stipulated in 40 CFR 302.
 - 5. Emergency response to a spill or leak of hazardous materials must be performed by the local hazardous materials response team or licensed contractor.
 - 6. Chemical-specific information such as material safety data sheets (MSDSs) must be readily accessible to emergency response personnel.

R2. *Polychlorinated Biphenyls (PCBs)*

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding polychlorinated biphenyls (PCBs) in electrical transformers.
 - 1. Centers that are using electrical equipment known to contain PCBs must register with the EPA's Transformer Registration and PCB Activity Database. A copy of the registration certificate can be obtained from EPA and must be maintained on center indefinitely, and must be available for review upon request.

2. Centers must prepare an inventory of all center equipment, including transformers, capacitors, fluorescent lights and ballasts, and hydraulic oils that may contain PCBs. The inventory shall include the following:
 - (a) Type of equipment, installation date, and manufacturer
 - (b) Overall condition
 - (c) Contact information for nearest PCB waste hauler

R3. *Underground Storage Tanks(USTs)/ Aboveground Storage Tanks (ASTs)*

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding underground storage tanks (USTs) and aboveground storage tanks (ASTs). Each center operator, center director, and safety officer must coordinate to ensure that all ASTs and USTs comply with 40 CFR Parts 112 and 280, and all applicable state requirements.

R4. *Lead*

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding lead-containing building materials.

Lead was a common paint additive used until 1978. Due to the age of many Job Corps center facilities, it is assumed that lead-based paint is present in buildings constructed prior to 1978 unless testing has proven otherwise. Centers that plan to disturb a surface that may contain lead must perform dust, air, and/or water sampling to determine the potential for exposure to lead. Centers in which there is a potential exposure to lead by students, staff, or young children (in child development or residential facilities) must develop a written lead-based paint compliance program in conformance with 29 CFR 1926.62 that includes the following:

1. Designation and training of a competent person, capable of identifying existing and predictable lead hazards in the surroundings or working areas and having the authority to take prompt corrective action.
2. Procedures to ensure that all CTST projects involving construction work will be tested for lead prior to initiation. No student or staff may be exposed to lead at concentrations greater than fifty micrograms per cubic meter of air (50 ug/m³) averaged over an 8-hour period.
3. Procedures for notifying staff and students of the health hazards of lead-based paint. Inventory documentation must be maintained on center and with the National Office of Job Corps and Regional Office project manager.
4. Appropriate hazard warning will be posted in all regulated areas.
5. Annual student and staff awareness training will be provided in accordance with the minimum requirements of 29 CFR 1926.62.

R5. Asbestos Operations and Maintenance

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding asbestos-containing building materials (ACBM).
- b. ACBM not immediately removed must be managed as part of an Asbestos Operations and Maintenance (O&M) Program, in conformance with 29 CFR 1910.1001 and 40 CFR Part 763. Centers in which there are buildings containing ACBM must have an O&M program that includes the following:
 1. Documentation, including copies of the initial asbestos survey report, subsequent ACBM surveys or inspection reports, and all asbestos abatement records, and laboratory analysis and exposure monitoring results must be maintained on center in a centralized asbestos record depository indefinitely, and made available upon request.
 2. Designation of an Asbestos Coordinator who must be responsible for ensuring compliance with all asbestos regulations and policies. The designated Asbestos Coordinator must receive initial training in asbestos O&M within 1 month of appointment. Training must consist of a minimum of 16 hours of both classroom and practical asbestos O&M training provided by an EPA-accredited training provider.
 3. Provide annual asbestos awareness training for all employees (including custodial and maintenance employees) and contract employees. Initial training must consist of a minimum of 2 hours of training in accordance with 29 CFR 1910.1001(j) within 1 week of hire.
 4. Annual refresher training for the Asbestos Coordinator and all custodial/maintenance employees. Documentation of training must be maintained in the central asbestos record depository as well as the individual's personnel file.
 5. Notification of the presence of asbestos within center buildings to all students and employees at least annually through a written notice or posting of a statement in the common areas of all buildings containing asbestos. The notice must contain a brief description of the location and type of ACBM, and the name and contact information for the designated Asbestos Coordinator.
 6. Posting of asbestos warning signs in all mechanical rooms, crawlspaces, custodial closets, or other work areas where maintenance or custodial employees may come into contact with ACBM. Warning signs must meet the requirements specified in 29 CFR 1910.1001, and must be posted so as to be visible immediately upon entering the room or workspace.
 7. Include employees and contract employees working in areas where ACBM is present in the center's respiratory protection program and medical surveillance program.

8. Inspection of all ACBM in center buildings at least twice each year to verify the physical condition and identify any significant damage. Evidence of significant damage and/or other deterioration in physical condition that presents a potential health hazard must be reported to the National Office of Job Corps and Regional Office via the Significant Incident Reporting (SIR) system.
9. Repair or abatement of ACBM must be performed by licensed asbestos abatement contractors. Clean-up of damaged ACBM by Job Corps personnel is strictly prohibited.
10. Review and documentation of all CTST or center-managed renovation projects by the Asbestos Coordinator to ensure that no ACBM will be affected by the proposed project. The center's Asbestos Coordinator will ensure that the proper warning signs are posted in the work area per 29 CFR 1910.1001.

R6. Hazard Communication

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding chemical hazard communication. Each center operator, center director, and center safety officer must coordinate and ensure that hazards associated with the use of all chemicals produced or imported by chemical manufacturers or importers, and used by Job Corps students/staff, are evaluated. Such information concerning chemical hazards must be communicated to affected students and staff via a comprehensive written hazard communication program in accordance with 29 CFR 1910.1200. The center director must ensure that the safety officer or other designee structures the hazard communication program to include:
 1. A complete chemical inventory or master list of chemical products used on center and a process to keep the inventory current. The inventory must include the name of the product and the location(s) where it is used. Ensure that students and staff know the location of the chemical inventory.
 2. Organization and ongoing maintenance of Material Safety Data Sheets (MSDSs) for all chemical products purchased by or used at the center. MSDSs for chemical products used in a given area must be available to and easily accessible by all staff and students. MSDSs can be stored in a three- ring binder or be accessible via computer.
 3. Clearly readable identifying labels securely placed on all incoming containers of hazardous chemical products, and such labels are not removed or defaced. Chemicals transferred to other approved containers must be labeled accordingly as well. Labels must contain at least:
 - (a) Product identification
 - (b) Hazard warning showing what parts of the body could be affected (HMIS or NFPA system)
 - (c) Name and address of the manufacturer or supplier

4. Supervisor/instructor maintenance of up-to-date MSDS file for each hazardous chemical product used within their respective areas.
5. Proper training and instruction delivered to all users of hazardous chemical products, including:
 - (a) Identification of such products
 - (b) The specific hazards associated with such products
 - (c) Measures that users can take to protect themselves (including PPE requirements)
 - (d) Methods and observations that may be used to detect the presence or release of hazardous chemicals
 - (e) Potential physical health effects of chemicals used in the workplace
6. Proper communication of chemical hazards associated with non-routine tasks.
7. An established and approved chemical products purchase list. MSDSs must be reviewed by the safety officer before the products are used in the workplace.

R7. Mercury

- a. Centers must comply with EPA standards, 40 CFR Part 261, Hazardous Waste Identification Regulations, 40 CFR Part 273, Universal Waste Regulations, as well as state and local regulations and Job Corps policy regarding mercury in fluorescent lamps and thermometers.
 1. Each center operator, center director, and safety officer must coordinate to ensure that all sources of mercury have been identified and are properly disposed of in accordance with the local/state health department or department of the environment regulations.
 2. All mercury-containing paints, batteries, thermometers, thermostats, light ballasts, etc., currently in use should be replaced when it is fiscally possible. Center students/staff are strictly prohibited from attempting to clean up spills or releases. Clean-up must be performed by the local fire department, hazmat team, or a licensed contractor.

R8. Freon 113

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding Freon 113 in the replacement and disposal of air conditioning and refrigerator units.
- b. Air conditioning and refrigeration units installed before 1995 that may contain ozone-depleting chemicals must be disposed of in accordance with federal and state hazardous materials regulations.

R9. Hexavalent Chromium

- a. Centers must comply with OSHA standard 29 CFR 1910.1026 and Job Corps policy regarding hexavalent chromium (Cr(VI)).
 1. Centers that offer trades that may potentially expose students/staff to hexavalent chromium (Cr(VI)) must develop, implement, and maintain an exposure control plan that contains the following minimum requirements:
 - (a) Trade(s) or center functions that may result in exposure
 - (b) Exposure-monitoring results for the affected trade(s) or center functions
 - (c) Engineering controls used to maintain Cr(VI) concentrations below the permissible exposure limit (PEL) and action level
 - (d) Personal protective equipment (PPE) required during performance of training or center function
 - (e) Method(s) of communicating hazards associated with Cr(VI) (See hazard communication training, Section 5.16, R6.)
 2. Centers offering the welding trade must perform one round of initial and confirmation exposure monitoring no matter how often welding of stainless steel occurs. No additional monitoring is necessary if both the initial and confirmation sample results are below the PEL of $5.0 \mu\text{g}/\text{m}^3$ and the action level of $2.5 \mu\text{g}/\text{m}^3$ calculated as 8-hour time-weighted averages (TWAs).
 3. Centers must maintain exposure monitoring results, and product MSDS on center for 30 years in accordance with 29 CFR 1910.1200 and 29 CFR 1910.1020.

QUALITY INDICATOR

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding environmental hazards.

5.17 FOOD HANDLING AND STORAGE, PEST CONTROL, UNSANITARY CONDITIONS, AND WATER TREATMENT

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. Food Handling

Centers must ensure that food handling practices comply with the state, local, or U.S. Public Health Service Food Code, whichever is more stringent. Centers must develop and implement a Hazard Analysis and Critical Control Point (HACCP) program as outlined in Annex 4 of the U.S. Public Health Service Food Code. All meat products must meet U.S. Department of Agriculture standards.

R2. Food Storage

Centers must ensure that storage of food complies with the state, local, or U.S. Public Health Service Food Code, whichever is more stringent, and does the following:

- a. Storage areas protect food from the elements, fire, rodents, insects, organisms, and other causes of spoilage.
- b. Chemicals, soaps, and poisons are properly labeled in accordance with Hazard Communication Standard (29 CFR Part 1910.1200) and stored separately from food.
- c. Storerooms are well ventilated and food items are stored a minimum of 6 inches above the floor in a manner that protects the food from splash, dust, and other contamination and permits easy cleaning of the area. Exceptions are:
 1. Metal pressurized beverage containers and cased food packaged in cans, glass, or other waterproof containers, and milk containers in plastic crates.
 2. Containers stored on dollies, racks, or pallets, provided such equipment is easily moveable.
- d. Storerooms are free of exposed or unprotected sewer lines, water lines (except automatic fire protection sprinkler heads), uninsulated steam lines, water heaters, refrigeration condensing units, or other heat-producing devices.

R3. Pest Control

Centers must:

- a. Take adequate measures to control insects and rodents in all areas. Only pesticides that are safe for use in food service areas shall be used in food service facilities.

- b. Ensure that pesticides are applied only by a licensed professional pest control contractor in food service, residential, and education facilities. The following information must be obtained from the contractor and kept on file for at least 3 years:
 1. Name/type of chemicals used
 2. Amount of chemical applied
 3. Areas where applied and amount specific to location
 4. Date when applied
 5. MSDSs for the chemicals used
- c. Ensure that pesticides are not stored for usage on centers except those that are approved by EPA for use in landscaping and gardening projects. Proper training on storage, use, and application of these chemicals must be provided to staff and students.

R4. *Unsanitary Conditions*

In accordance with Section 5(a) of the Occupational Safety and Health Act of 1970, centers must ensure that staff and students are not required or permitted to reside, work, be trained, or receive services in buildings or surroundings that are unsanitary, hazardous, or lack proper ventilation.

R5. *Water Treatment*

Centers must ensure that when non-municipal water and waste treatment facilities are used, the following requirements are met:

- a. Water supplies meet center needs and satisfy National Primary Drinking Water Regulations (40 CFR 142).
- b. Prior to construction or renovation, the standards or regulations of federal, state, and local health authorities are consulted. Renovation/building plans and specifications are sent to the National Office of Job Corps, with a copy to the Regional Office, for review.
- c. Records are maintained showing the amount of water treated, amount of chlorine used, daily free chlorine residual, and other data pertaining to water treatment.
- d. All required bacterial and chemical tests are performed by state or local health authorities, with the exception of the daily routine residual chlorine test that is to be conducted by center staff.
- e. The center complies with the water quality and related standards of the state and with the standards established by the Federal Water Pollution Control Act 33 U.S.C. 1251 et seq.
- f. Records are maintained documenting the water/waste water treatment pursuant to standards set by the EPA and local authorities and should be maintained on center indefinitely. Waste treatment problems are brought to the attention of the appropriate EPA coordinator and the Regional Office.

- g. Records of influent and effluent monitoring data are maintained as required by the plant's effluent discharge permit and other data pertaining to waste water treatment.
- h. The analysis of all influent and effluent, as required by the discharge permit, is performed by a certified laboratory.

QUALITY INDICATORS

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding food sanitation and water treatment standards.
- Q2. Residential and dining facilities are clean and neat in appearance.

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5.18 STUDENT AND STAFF INJURY REPORTS AND RECORD KEEPING

PURPOSE

- P1. To ensure documentation of compliance with required elements of the center's occupational safety and health program and ensure compliance with OSHA and all other applicable statutes.
- P2. To notify appropriate officials that an injury, illness, or death has occurred.
- P3. To record hazards identified and corrective actions taken, indicate trends, and provide a basis for formulating future plans.
- P4. To permit an evaluation of progress being made in preventing accidents.
- P5. To document incidents for assurance of proper medical treatment and potential processing of claims.

REQUIREMENTS

R1. Student Injury, Illness, and Death Record Keeping

Student injuries must be documented in the Department of Labor's Safety and Health Information Management System (SHIMS); OSHA and OWCP record keeping is required for students. Student deaths are documented on the CA-6 manual form; SHIMS record keeping is not completed for student deaths.

All occupational safety and health records must be maintained for a 5-year period, unless otherwise indicated by a specific OSHA standard, the DLMS, or the PRH.

Electronic Forms

- a. **OSHA 301, Injury and Illness Incident Report**, is completed in SHIMS for each student injury or occupational illness in accordance with 29 CFR 1904. The OSHA form is required to be retained for 5 years.
- b. **OSHA 300, Log of Work-Related Injuries and Illnesses**: All centers must maintain a single current log in SHIMS of all **work-related** accidents, injuries, and occupational illnesses incurred by students and staff in accordance with 29 CFR 1904. Student work-related injuries are those injuries that occur while the student is involved in training or educational activities.

Student injuries resulting from horseplay while engaged in training or educational activities must be recorded as well. For example: Two students, while participating in welding instruction, engage in playful teasing and pushing. One student becomes angry and the teasing escalates to a fight. One student is injured resulting in medical treatment beyond first aid. The student injury must be recorded in SHIMS.

The OSHA 300 Log is required to be retained for 5 years. The OSHA 300 replaced the OSHA 2014 Log beginning January 1, 2005. Centers are required to maintain copies of old OSHA 2014s so long as the form falls within the required 5-year period of retention.

- c. **CA-1, Notice of Traumatic Injury and Claim for Compensation**, is completed in SHIMS and forwarded to OWCP within 7 calendar days of supervisor notification when there is an injury that requires separation from Job Corps. When the CA-1 is filed with OWCP at separation, a CA-16 manual form, Authorization for Examination and/or Medical Treatment, and an OWCP-1500 manual form, the Health Insurance Claim Form, are sent to the provider. If the injury is not severe enough to cause separation, the CA-1 should be completed, electronically filed in SHIMS within 7 calendar days of supervisor notification, printed, signed by the student, and filed in the student's health folder.
- d. **CA-2, Notice of Occupational Disease and Claim for Compensation**, is rarely used in Job Corps because there are very few cases of occupational disease or illness related to enrollment in Job Corps. If such a situation does occur, contact the National Office of Job Corps before filing a CA-2. The CA-2 is completed in SHIMS and forwarded to OWCP within 7 calendar days of supervisor notification, and the Job Corps supervisor must contact OWCP before issuing a CA-16.

Manual Forms

- e. **CA-6, Official Supervisor's Report of Employee's Death**, is filed with the OWCP district office if a student dies as a result of an illness/injury incurred while in performance of duty. In the event of a student death, the center director should notify OWCP immediately by telephone or fax and mail the CA-6 to the OWCP district office. Do not document student death in SHIMS.
- f. **CA-7, Claim for Compensation Due to Traumatic Injury or Occupational Disease:** Unlike other federal employees, Job Corps students are not eligible for continuation of pay for 45 days. However, they may submit a CA-7 after medical separation to receive compensation for injury or illness. The center should provide the CA-7 to the injured student and offer assistance to the student in completing the form. The student is responsible for submitting the CA-7 to OWCP.

The center director must report student deaths to the National and Regional Offices within 6 hours of the event via Significant Incident Report (SIR).

- g. **CA-16, Authorization for Examination and/or Treatment:** Whenever a student separates from Job Corps and needs examination and/or treatment as a result of traumatic injury, the center director should issue a CA-16 to the physician or medical facility. This form authorizes the injured student's examination and/or treatment from a physician or medical facility. When a CA-2 is electronically submitted to OWCP in cases of separation because of work-related illness or disease, a CA-16 is issued only if prior approval is obtained from OWCP. If a CA-16 is submitted, do not submit a CA-20.

This form provides OWCP with an initial medical report and the physician or medical facility with a billing form for emergency treatment. Issuance of the CA-16 authorizes OWCP to pay medical expenses incurred.

Part A is completed by the student's supervisor and submitted to the physician or medical facility within 48 hours of examination and/or treatment. Part B is completed by the attending physician as promptly as possible after initial examination and sent to the appropriate OWCP district office.

When there is a need for medical follow-up for the work-related injury by a second health care provider, the center should mail the name and address of that provider to OWCP or instruct the student (in writing) to do so.

- h. **OWCP-1500 (also known as HCFA-1500)—Health Insurance Claim Form:** This form accompanies the CA-16 to all medical care providers, except hospitals. It is issued by health care providers to bill the OWCP district office for services rendered.
- i. **CA-20, Attending Physician's Report:** This report provides medical support of claims for compensation. It is submitted to OWCP upon completion of the medical examination and treatment. It is also used to provide additional medical information regarding the claim. If a CA-20 is submitted, do not submit a CA-16.

R2. Definitions and Procedures for Handling Job Corps Student Injuries

- a. Job Corps Injuries Designated "First Aid"
 - 1. First aid will be defined as any one-time treatment, and any follow-up visit for the purpose of observation, of minor scratches, cuts, burns, or splinters, which does not ordinarily require medical care. Such one-time treatment and follow-up visits are considered first aid even if they are provided by a physician or other registered professional personnel.
 - 2. First aid injuries must be documented in SHIMS.
 - 3. The following procedures are generally considered first aid treatment (e.g., one-time treatment and subsequent observation of minor injuries):
 - (a) Application of antiseptics during initial visit to medical personnel
 - (b) Treatment of first degree burn(s)
 - (c) Application of bandage(s) during any visit to medical personnel
 - (d) Use of elastic bandage(s) during initial visit to medical personnel
 - (e) Removal of foreign bodies from wound if procedure is uncomplicated (e.g., by tweezers or other simple technique)
 - (f) Use of nonprescription medications and administration of single dose of prescription medication on initial visit for minor injury or discomfort
 - (g) Soaking therapy on initial visit to medical personnel or removal of bandages by soaking
 - (h) Application of hot or cold compress(es) during first visit to medical personnel
 - (i) Application of ointments to abrasions to prevent drying or cracking

- (j) Application of heat therapy during first visit to medical personnel
 - (k) Negative x-ray diagnosis
 - (l) Observation of injury during visit to medical personnel
4. The administration of a tetanus shot or booster by itself is not considered medical treatment. However, these shots are often given in conjunction with more serious injuries; consequently, injuries requiring these shots may be filed in SHIMS for other reasons.
- b. More Serious Injuries Not Resulting in Student's Separation
- 1. This category includes injuries that result in medical treatment beyond first aid, but do not require a medical separation but are serious enough to need a specialized referral.
 - 2. An example of this type of injury would be a student sustained a strain or sprain, but is able to continue training with restrictions.
 - 3. These injuries must be documented in SHIMS.
Some examples of this category of injury are:
 - (a) Fractures
 - (b) Head injuries with loss of consciousness
 - (c) Positive x-ray diagnosis
 - (d) Lacerations with nerve or tendon damage
 - (e) Injuries needing sutures/SteriStrips/adhesive butterfly
 - (f) Foreign body embedded in the eye
 - (g) Jaw fractures/dental damage
 - (h) Treatment of infection
 - (i) Treatment of 2nd or 3rd degree burns
 - (j) Food poisoning
 - (k) Dislocated shoulder
- c. Injuries Resulting in Separation From Job Corps
- 1. This category includes injuries resulting in the student's death or serious injuries that result in the student's separation from Job Corps.
 - 2. An example of this type of injury would be a student sustained a traumatic injury in the performance of duty that requires surgery, additional medical treatment that can not be provided on center, or the student can no longer perform in the program.
 - 3. These injuries must be documented in SHIMS.
 - 4. Section 8143 of the Federal Employees' Compensation Act (FECA) states that while students are enrolled in Job Corps, students are considered

employees of the federal government for purposes of medical coverage under FECA. The “performance of duty” does not include an act of an enrollee while absent from his or her assigned post of duty, except while participating in an activity (including an activity while on pass or during travel to or from the post of duty) authorized or by under the direction and supervision of Job Corps.

R3. Staff Injury, Illness, and Death Record Keeping

All work-related staff injuries and occupational illnesses must be documented in the Department of Labor’s Safety and Health Information Management System (SHIMS) in accordance with 29 CFR 1904. Centers are only required to report the death of a staff member if the death occurs while in duty status on or off center. The center director must report staff deaths to the National and Regional Offices within 6 hours of the event via Significant Incident Report (SIR).

Job Corps center staff members do not qualify for FECA benefits; therefore, a CA-1 or CA-2 is never completed for staff in the Department of Labor’s SHIMS.

- a. **OSHA 301, Injury and Illness Incident Report**, is completed in SHIMS for each staff injury or occupational illness in accordance with 29 CFR 1904. The OSHA form is required to be retained for 5 years.
- b. **OSHA 300, Log of Work-Related Injuries and Illnesses**: All centers must maintain a single current log in SHIMS of all **work-related** accidents, injuries, and occupational illnesses incurred by students and staff in accordance with 29 CFR 1904. The OSHA 300 Log is required to be retained for 5 years. The OSHA 300 replaced the OSHA 2014 Log beginning January 1, 2005. Centers are required to maintain copies of old OSHA 2014s so long as the form falls within the required 5-year period of retention.

Staff injuries resulting from horseplay while engaged in work-related tasks or activities must be recorded as well. For example: Two staff members engage in playful teasing and pushing while repairing a piece of equipment. One staff member becomes angry and the teasing escalates to a fight. One staff member is injured resulting in medical treatment beyond first aid. The staff injury must be recorded in SHIMS.

R4. OSHA Form 300A, Summary of Work-Related Injuries and Illnesses

Each year, Job Corps centers are required to post OSHA Form 300A, also called the OSHA 300A Summary, from February 1 through April 30 in accordance with 29 CFR 1904.32. OSHA Form 300A summarizes data contained in the OSHA 300 Log, which is maintained electronically in SHIMS, for the calendar year just prior to posting for the purpose of notifying students and staff of the injuries that have occurred on center. This report may be generated through SHIMS reports.

Following the required 3-month posting period, the OSHA 300A must be retained for 5 years. OSHA 300A replaced the OSHA 2014 (Annual) Summary Report of Federal Occupational Illnesses beginning January 1, 2005. Centers are required to maintain

copies of old OSHA 2014 Summary Reports so long as the form falls within the required 5-year period of retention.

QUALITY INDICATORS

- Q1. Centers document student and staff injuries and occupational illnesses in accordance with federal, state, and local regulations and Job Corps policy.
- Q2. Centers report all staff and student injuries and deaths within the time frames required by federal standards and Job Corps policy.

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5.19 VEHICLE SAFETY AND ACCIDENT RECORD KEEPING

PURPOSE

- P1. To ensure student and staff safety while traveling in government vehicles on and off center.
- P2. To ensure documentation of accidents involving government vehicles.

REQUIREMENTS

R1. Overview of Center Director Responsibilities

Each center director must be responsible for:

- a. Administration of the motor vehicle safety program.
- b. A program for training, testing, and licensing students.
- c. A comprehensive vehicle maintenance and inspection program.
- d. Promotion and incentive awards programs to encourage traffic safety.
- e. Compliance with state and local motor vehicle laws.
- f. An effective accident investigation and analysis system.
- g. An on-center system of traffic control to include appropriate signs and lines.

R2. Overview of Requirements

- a. Government-owned or leased vehicles shall be operated by individuals meeting the following qualifications:
 - 1. Drivers must possess a valid state driver's license.
 - 2. Drivers must possess a valid federal employee identification or Job Corps identification.
- b. Student operation of government-owned or leased vehicles must be authorized by the center director and limited to driver's training only.
- c. All over-the-road vehicles must be equipped with fire extinguishers, emergency warning lights, and well-maintained first aid kits.
- d. In government-owned or leased vehicles, all drivers and passengers must wear seat belts in all over-the-road vehicles (except buses). When infants and/or children are being transported, restraints must meet applicable state requirements.
- e. No vehicle will be loaded (with personnel or materials) beyond the vehicle's rated capacity.
- f. Students will not be transported in the back bed of a pickup truck or other open-bed vehicle unless such vehicle has been equipped with appropriately designed and constructed seating and safety restraints.
- g. If a bus has an auxiliary gas tank that powers the air conditioner, the vehicle must have that tank properly guarded.

- h. Aisles in buses and vans must be kept free of luggage, tools, and equipment.
- i. No bus transporting students or staff shall have the emergency door locked or constricted.
- j. All vehicles that are driven by staff and students on center must meet appropriate federal and state safety requirements.
- k. All 15-passenger vans currently leased or owned by Job Corps contractors and agencies are modified and operated in a manner that decreases known risks associated with operating the vehicles. Job Corps contractors and agencies are permitted to retain 15-passenger vans that are currently in their GSA fleet inventory in accordance with the guidelines and restrictions detailed below; however, additional 15-passenger vans may not be purchased, leased, or rented.
 - 1. All 15-passenger vans will carry a maximum of 10 passengers, including the driver. If there is need to transport more than 10 passengers, it must be done using a higher capacity vehicle, or by using multiple smaller vehicles.
 - 2. Center directors will implement a program for drivers of 15-passenger vans that will provide training, an operational test, and a written test that will target the safety, operational, and maintenance requirements of these vans. This program is required in addition to the driver's license.
 - 3. Roof racks must be removed, except those that carry only light loads (e.g., ladder rack, rowing oars, etc.). No loads over 60 pounds should be placed on the roof.
 - 4. Rear seats must be removed.

R3. *Vehicle Accident Record Keeping*

- a. SF-91, Operator's Report of Motor Vehicle Accident

The operator of any government vehicle involved in an accident will complete an SF-91 form at the scene of the accident, if possible. The center will develop procedures to ensure that copies of the SF-91, and other applicable forms, are available in each vehicle, including privately owned vehicles, rentals, and GSA vehicles used for official business.
- b. SF-91A, Investigation Report of Motor Vehicle Accident

This report is used for motor vehicle accidents resulting in vehicle and/or property damage over \$500, or disabling work injuries including fatalities caused by a motor vehicle accident.

QUALITY INDICATOR

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding vehicle safety and record keeping.

5.20 OCCUPATIONAL SAFETY AND HEALTH (OSH) PROGRAM AND WRITTEN PLANS

PURPOSE

- P1. To develop, implement, and evaluate a safety and occupational health program that includes written plans in accordance with 29 CFR 1960, the OSHA Act of 1970, Executive Order 12196, and Job Corps policy.
- P2. To develop and document all of the plans described in the following requirements, if applicable.

REQUIREMENTS

R1. Personal Protective Equipment (PPE) Plan

In accordance with 29 CFR 1910.132, centers are required to develop, implement, and maintain a written PPE plan and program that includes at least the following:

- a. Perform hazard assessments for all trades and/or work areas to assess the need for personal protective equipment (PPE). Maintain hazard assessment records that identify hazards and risks, and document the type of PPE required. Develop procedures to notify the safety officer when new processes are introduced or when existing processes change.

Note: If a new trade is introduced, a hazard assessment must be performed to determine PPE needs according to training activities. Hazard assessment based upon other trades and activities cannot be the bases of the PPE requirements for a new trade.

- b. Select PPE based on hazard assessments by the trade supervisor in conjunction with the safety officer. Methods for selecting PPE are well-documented, appropriate, and properly implemented.
- c. Develop a PPE training program that will address student and staff needs. The written training program includes:
 - 1. When PPE use is necessary
 - 2. What PPE is necessary
 - 3. How to properly don (put on), doff (remove), adjust, and wear PPE
 - 4. The proper care, maintenance, useful life, and disposal of PPE
- d. Maintain PPE training records for students and staff for 3 years. Additional retention requirements are as follows:
 - 1. Retain student training records for 1 year following completion of training or termination of enrollment.
 - 2. Retain staff training records for 1 year following resignation or termination of employment.

- e. Establish procedures to inspect, clean, and maintain PPE. Ensure that supervisors, staff, and students are trained in these procedures and follow the established criteria.
- f. Establish procedures to remove damaged equipment from service.

R2. Fire Safety and Prevention Plan

All centers must develop and implement a fire safety and prevention plan that addresses the National Fire Protection Association (NFPA) Life Safety Code 101 requirements as referenced in 29 CFR 1910.39 and 1910.157.

Centers will establish a policy, based upon the proximity to emergency response personnel (i.e., fire and/or hazardous materials response teams) that specifies full evacuation or incipient stage fire suppression by staff in response to a fire alarm.

a. Fire Prevention Plan

The center safety office will perform the following activities to ensure that students and staff are familiar with all center fire alarms and evacuation procedures:

1. Center safety officers will perform and log monthly inspections of:
 - (a) Fire alarm systems
 - (b) Sprinkler systems
 - (c) Illuminated exit signs
 - (d) Emergency lighting
2. Centers will conduct monthly fire drills during high student/staff activity levels and when students are in the dormitories. Center safety officers will document the accountability and timeliness of fire drills.
3. Centers will establish and implement a fire watch plan, included as part of the fire prevention plan, to be implemented when there is a nonfunctional alarm system. The fire watch plan will include the following:
 - (a) Establish fire warden and security staff duties and responsibilities
 - (b) Establish minimum required equipment for security staff
 - (c) Establish process for reporting fires and notifying building occupants

b. Fire Safety Plan Elements

The safety officer must ensure that at least the following elements are included in the fire safety plan:

1. List of major fire hazards and proper handling and storage procedures for hazardous materials
2. List of all potential ignition sources, control procedures, and the type of fire protection equipment or suppression system used to control a fire

3. List of staff responsible for maintaining fire protection equipment or systems to prevent or control ignition fires
 4. List of staff responsible for control of fuel source hazards
 5. List of staff responsible for sounding alarms and contacting local fire department or other appropriate officials
 6. Evacuation and accountability procedures, including the posting of evacuation maps, assembly areas, and maintaining safe distance from affected buildings until areas are cleared for occupancy
 7. Emergency notification telephone numbers
 8. List of temporary shelters and contacts
 9. List of staff responsible for assessing damage to center and coordinating re-entry to center or affected buildings
 10. List of staff responsible for communications with local media, Regional Office, and National Office of Job Corps
- c. Training
- All centers must provide ongoing fire prevention and fire extinguisher training for staff and students according to their roles and responsibilities within the fire prevention plan. Training resources include state or local fire marshals, insurance companies, universities, or the Occupational Safety and Health Administration (OSHA). Training programs must be tailored to center location, offerings, and programs, and must include the following elements, as appropriate:
1. Fire wardens and security staff
 - (a) Fire classes and the appropriate extinguishing agent
 - (b) Proper maintenance and use of fire extinguishers
 - (c) Evacuation and accountability procedures, as defined by NFPA Life Safety Code
 - (d) Proper use of warning equipment/alarm systems
 - (e) Fire watch system and alternative warning systems
 - (f) Fire warden responsibilities
 - (g) Fire safety inspections, including housekeeping practices, flammable and combustible waste materials accumulation, and inspection and maintenance of fire equipment or systems
 2. Students
 - (a) Assigned evacuation routes and assembly areas
 - (b) Procedures for reporting a fire or potential for fire
 - (c) Procedures for disposal of combustible and flammable materials
 - (d) Location of smoking areas and receptacles

3. Staff
 - (a) Proper use of fire extinguishers
 - (b) Assigned evacuation routes and assembly areas
 - (c) Procedures for reporting a fire or potential for fire
 - (d) Procedures for disposal of combustible and flammable materials
 - (e) Location of smoking areas and receptacles
- d. Documentation

Documentation of fire safety training, drills, and inspections must be maintained on center for 3 years and made available for review upon request.
- e. Incipient Fire Suppression and Portable Fire Extinguishers
 1. OSHA defines “incipient fire” as a fire in the initial or beginning stage that can be controlled or extinguished using a portable fire extinguisher, Class II standpipe, or small hose system without the need for protective clothing or equipment (e.g., breathing apparatus). OSHA requires centers to provide fire extinguishing equipment for incipient fire. However, OSHA allows centers to address incipient fires and building evacuation in two ways:
 - (a) evacuation of all or most of the building’s occupants to a safe area without attempting to fight the fire; or
 - (b) evacuation of all building occupants except those who are properly trained and designated to use portable fire extinguishers.
 2. Fire prevention plans must comply with 1910.157 according to the center’s established policy concerning incipient fires.
 3. Incipient fire fighting should be based upon a thorough hazard assessment, and proximity and response time of local fire department or emergency response team.

R3. *Emergency Action Plan*

Centers are required to develop an emergency action plan (EAP) in accordance with 29 CFR 1910.38 if fire extinguishers are located in each building and students and staff are required to evacuate the building in the event of fire or other emergency.

- a. Emergency Action Plan (EAP) Elements
 1. The EAP must include procedures to handle hazards and threats including:
 - (a) Natural disasters typical for the geographic area in which the center is located; e.g., earthquakes, hurricanes, tornadoes, severe/extreme weather, blackouts, utility failures, and weather-related conditions.
 - (b) Criminal activity including arson/fire, bomb threats, suspicious packages, vandalism, civil disturbance, and weapons on center.

- (c) Terrorist threats including radioactive, biological, or cyber attacks.
 - (d) Medical emergencies, such as pandemic influenza or food poisoning (*E. coli* or *Salmonella*) outbreaks.
 - (e) Other hazards specific to the surrounding area, such as hazardous materials spills or explosion.
2. The EAP must contain a list of emergency personnel and contact information. The center director or his or her designee shall act as the responsible official during the emergency.
3. The center director or his or her designee must ensure that an emergency coordinator and area/floor monitors are identified, and ensure that assistance is available for the physically challenged.
4. The EAP must include procedures for emergency situations that require centers to shelter-in-place, evacuate, and provide for mass care for students and staff.
5. The EAP must identify assembly areas on and off center for students and staff to relocate depending upon the nature of the emergency.
6. Evacuation route maps indicating emergency exits, primary and secondary evacuation routes, location of fire extinguishers and fire alarm pull stations, and assembly points must be posted in all center buildings, including but not limited to:
 - (a) Residential facilities
 - (b) Child development centers, if applicable
 - (c) Academic facilities
 - (d) Food service facilities
 - (e) CTT facilities and classrooms
 - (f) Recreation areas
 - (g) Warehouse(s)
 - (h) Center maintenance
 - (i) Administration facilities
7. The EAP must include procedures for staff required to remain on center after an evacuation to perform critical activities (e.g., shut down utilities) and secure the center.
8. The EAP must contain procedures to account for students and staff after evacuation to assembly areas on and off center, including students training or working off center at the time of the emergency.

9. The EAP must contain procedures for transporting students and staff to off-center assembly areas, including students training or working off center.
 10. The EAP must include responsibilities and procedures for staff and students responsible for providing medical assistance. The plan should also provide for instances when individuals responsible for providing medical assistance are not available.
 11. An alarm system must be implemented that provides a distinctive sound or tone for each purpose (type of emergency and procedure) in accordance with 29 CFR 1910.165.
 12. The EAP must include procedures for returning the center to normal operations following an emergency. Procedures should be emergency-specific.
- b. Emergency Response Drills
1. Centers must perform fire drills on a monthly basis. The drills should be performed during normal business hours and after hours.
 2. Centers shall participate in federal, state, and local emergency preparedness drills, including terrorist attack and pandemic outbreak response, when possible.
 3. Centers shall establish and maintain contact with federal, state, and local emergency response coordinators to ensure that current information regarding emergency response procedures is maintained.
 4. All drill and post-drill activities designed to improve student and staff performance during drills must be documented and kept on file in the safety officer's office and made available upon request.
 5. Copies of drill performance and improvement reports must be maintained on the center for 3 years and made available for review upon request.
 6. Centers shall coordinate with the local emergency management authority, local health department, and local fire department to participate in federal, state, or local emergency response drills.

R4. Hazard Communication Plan

(See Section 5.16, R6.)

R5. Recreational Safety Plan

- a. Water Safety (See Chapter 3, Section 3.18, R5.)
 1. Job Corps centers operating swimming pools shall incorporate the Centers for Disease Control and Prevention (CDC) chlorine disinfection timetable for killing common germs.
 2. Cleaning and disinfecting procedures shall also include the area surrounding the pool, including chairs, towels, floors, etc., to prevent the onset of recreational water-related illnesses.

3. Provide staff and students with awareness training on the prevention of recreational water-related illnesses.
 4. Ensure that swimming pool areas are secured after hours to prohibit unauthorized access.
 5. Post proper warning signs, safety rules, and emergency response procedures.
 6. Ensure that necessary rescue equipment is maintained in good working order and easily accessible.
- b. General Recreational Safety
- The center director must:
1. Ensure that students receive adequate training prior to engaging in recreational activities such as weight lifting, basketball, arts and crafts, etc.
 2. Provide supervision during recreational activities to ensure that students follow proper techniques and are fit for the activity, thereby not placing the participant's safety at above-normal risk and reducing the risk of injury.
 3. Advise students that "horseplay" is not tolerated during recreational activities.
 4. Ensure that all recreational facilities and equipment are of safe design and free of known hazards.
 5. Ensure that recreational and athletic equipment purchases meet safety guidelines established by agencies nationally recognized by the Consumer Product Safety Commission (CPSC).
- c. Gymnasium and Recreational Equipment
1. Gym equipment must be positioned to allow for an unrestricted route of egress from the area during an emergency.
 2. Personal protective equipment such as helmets, padding, wrap-around eye protection, and gloves must be provided for students involved in recreational activities such as:
 - (a) Bicycling
 - (b) Skate boarding
 - (c) Rollerblading
 - (d) Racquet ball
 3. Recreational facilities and equipment must be inspected daily. Damaged equipment must be immediately removed from use and repaired or replaced as soon as fiscally possible.
- d. Competitive Sports

To ensure student and staff safety and security during on- and off-center events, centers are encouraged to prepare plans that contain the following elements, at minimum:

1. Consider limiting participants and spectators to current Job Corps students and staff.
2. Ensure that there is sufficient supervision for off-center games and events. The recommended ratio is one staff member for every five students.
3. Coordinate security arrangements between visiting and host centers in advance of each activity. Visiting centers shall provide a list of team members, Job Corps spectators, and player family members at least 1 week prior to the event. Limit entry into events to pre-approved spectators with proper identification.
4. Host centers are encouraged to arrange for additional security through local law enforcement when there is a history of past serious incidents.
5. Communicate safety and security procedures to athletes, staff, and spectators prior to the event.

R6. *Asbestos Operations and Maintenance Plan*

(See Section 5.16, R5.)

R7. *Confined Space Entry Plan*

a. Overview

A confined space is one that is large enough and configured in a manner that would allow a person to enter the space to perform work. The space has limited or restricted means of entry or exit and is not designed for continuous human occupancy. Hazards may also exist in the space, such as combustible gases, toxic materials, or mechanical or electrical hazards, or the space may be oxygen deficient.

A confined space entry plan is not necessary if:

1. there are no confined spaces on center; or
2. students and staff are prohibited from entering or performing work in any confined space.

b. Confined Space Inventory

1. Centers must conduct a survey to identify and label all confined spaces located on center. Each space must be identified as “non-permit required” or “permit required.”

(a) A permit-required confined space is one that contains one or more of the following characteristics:

- (1) Contains or has the potential to contain a hazardous atmosphere

- (2) Contains a material that has the potential for engulfment or entrapment
 - (3) Has an internal configuration such that an entrant could be trapped or asphyxiated
 - (4) Contains any other serious safety hazard
 - (b) Non-permit required confined space does not contain or have the potential to contain a hazardous atmosphere or any other hazard capable of causing death or serious physical harm.
 - (c) Re-evaluate all confined spaces annually and maintain documentation.
 - (d) Permit-required confined spaces are marked as such with appropriate signage.
 - (e) Ensure that permit-required confined spaces are locked or blocked to deter access.
2. Centers that require students, staff, or contractors to perform work in confined spaces are required to develop, implement, and maintain a confined space entry program in accordance with 29 CFR 1910.146. The plan must consist of the following elements:
- (a) Designated confined space entry coordinator
 - (b) Entrant and supervisor responsibilities
 - (c) Non-permit required confined space entry procedures
 - (d) Location-specific, permit-required confined space entry procedures
 - (e) List of center departments and/or career technical training trades that require confined space entry
 - (f) Emergency procedures
 - (g) Training and documentation of training
3. Maintain confined-space-entry training records for students and staff for 3 years. Additional retention requirements are as follows:
- (a) Retain student training records for 1 year following completion of training or termination of enrollment.
 - (b) Retain staff training records for 1 year following resignation or termination of employment.
4. Maintain cancelled entry permits for 1 year.

R8. Bloodborne Pathogens Plan

- a. Centers must develop, implement, and maintain a Bloodborne Pathogens Control Plan that is in compliance with the OSHA Occupational Exposure to Bloodborne Pathogens; Needlestick and Other Sharp Injuries; Final Rule (29 CFR Part 1910.1030). The plan, which is submitted to the Regional Office, must be

reviewed and approved by the regional health consultant. Once the plan has been approved, the plan should not be submitted again until at least one of the following occurs:

1. new or revised PRH or regulatory standards necessitate revision of the plan;
 2. center introduces a new trade resulting in new potential exposure to bloodborne pathogens; or
 3. new engineering controls, including safer equipment or procedures, are introduced.
- b. The plan must contain the following minimum requirements:
1. Identification of job classifications where there is no, low, or high risk of exposure to blood or other potentially infectious materials.
 2. Explanation of the protective measures in effect to prevent occupational exposure to blood or other potentially infectious materials and a schedule and methods of compliance to be implemented.
 3. Schedule and method of implementation for administering Hepatitis B vaccination and conducting post-exposure evaluation and follow-up.
 4. Schedule and method of implementation for communicating hazards to employees.
 5. Schedule and method of implementation for record keeping.
 6. Procedures for evaluating the circumstances of an exposure incident.

R9. *Respiratory Protection Plan*

- a. Centers must develop and implement a respiratory protection program, including a written plan in accordance with 29 CFR 1910.134, if any of the following conditions exist:
1. center offers trades that could potentially expose students or staff to airborne contaminants that meet or exceed the OSHA 8-hour permissible exposure limits (PELs) or action levels for known respiratory hazards;
 2. asbestos-containing building materials (ACBMs) are present and may be disturbed during routine maintenance, housekeeping, renovation, or demolition activities;
 3. lead-based paint or other materials are present and may be disturbed during renovation and demolition activities; or
 4. students and staff are exposed or may be potentially exposed to airborne contaminants and disease through contact with individual(s) engaged in providing student and staff health services or engaged in allied health training.
- b. Centers are not required to implement a written respiratory protection program if filtering face piece respirators (i.e., dust masks) are used on a voluntary basis and

there is no potential for airborne particulate levels to meet or exceed the OSHA 8-hour PEL or action levels.

Note: Voluntary use of tight-fitting, negative pressure air-purifying or powered air-purifying respirators requires a written plan, in accordance with 29 CFR 1910.134, Appendix D.

- c. Centers must identify and evaluate respiratory hazards in the workplace through:
 1. air sampling and exposure monitoring;
 2. NIOSH trade-specific data regarding airborne contaminants; or
 3. general or construction industry accepted best practices.
- d. The respiratory protection program must contain worksite-specific procedures and elements for required respirator use.
- e. Center director or his or her designee must select a respiratory protection program coordinator to manage the center's respiratory protection program.
- f. The written respiratory protection plan must contain the following elements:
 1. Respirator selection procedures and criteria that ensure that exposure to hazardous substances occurs at or below maximum use concentrations
 2. Medical surveillance for staff and students required to wear respirators
 3. Fit-testing procedures for tight-fitting respirators
 4. Procedures for the proper use of respirators in routine and emergency situations
 5. Procedures and timelines for cleaning, disinfecting, storing, inspecting, repairing, discarding, and general maintenance of respirators
 6. Procedures for ensuring air quality, quantity, and flow of breathing air for atmosphere-supplying respirators if applicable
 7. Student and staff initial and annual refresher training that includes:
 - (a) Potential respiratory hazards during routine or emergency situations
 - (b) Proper use, donning, removal of respirators
 - (c) Limitations of respirator use
 - (d) Regular maintenance of respirators
 8. Procedures for evaluating the effectiveness of the program
 9. Medical evaluations conducted by a licensed health care professional in accordance with 29 CFR 1910.134(e)(1) through (e)(7)(iv)
 10. Maintenance of respiratory protection training records for students and staff for 3 years. Additional retention requirements are as follows:

- (a) Retain student training records for 1 year following completion of training or termination of enrollment.
 - (b) Retain staff training records for 1 year following resignation or termination of employment.
- g. Centers must establish a cartridge change-out schedule in accordance with OSHA and manufacturers' recommendations to ensure cartridge effectiveness.
- h. Qualitative and quantitative fit-testing of tight-fitting respirators shall be done in accordance with 29 CFR 1910.134 Appendix A, Fit Testing Procedures (Mandatory). Fit-testing of respirators used to protect against asbestos or lead exposure shall be done in accordance with the appropriate OSHA standards.

R10. *Hearing Conservation Plan*

- a. Centers must conduct noise monitoring at least biannually to identify potential sources of hazardous noise or whenever new noise sources are introduced into the working or training environment.
- b. Centers must identify hazardous noise areas with warning signs or markings to ensure that hearing protection is used in those areas.
- c. Centers must develop and implement a hearing conservation program in accordance with 29 CFR 1910.95 if the following conditions exist:
 - 1. Results of noise measurements have identified hazardous noise sources that may result in staff or student exposures that exceed 85dB (decibels).
 - 2. Exposure monitoring indicates that student and staff noise exposures equal or exceed an 8-hour time weighted average (TWA) of 85dB measured on the A-scale (slow response) or fifty percent (50%) dose.
- d. The hearing conservation program (HCP) must consist of the following elements:
 - 1. Monitoring program that identifies students and/or staff for inclusion in the HCP and to facilitate selection of appropriate hearing protectors.
 - 2. Audiometric testing to monitor staff and students whose exposures equal or exceed an 8-hour TWA of 85dB, including:
 - (a) Baseline audiogram to be administered within 6 months of the initial exposure equal to or in excess of 85dB to be compared against subsequent audiograms.
 - (b) Audiograms administered at least annually following the baseline audiogram.
 - (c) Audiogram evaluation.
 - (d) Purchase of audiometric testing equipment is not required. However, if the center conducts audiometric testing, equipment and the testing environment must meet the requirements set forth in 29 CFR 1910.95, Appendices C and D.

If the center does not conduct audiometric testing, the center must ensure that individuals included in the hearing conservation program are administered audiograms in accordance with the OSHA standard.

- (e) Audiometric testing must be performed by a licensed or certified audiologist, otolaryngologist, or other physician, or by a technician certified by the Council of Accreditation in Occupational Hearing Conservation, or who has demonstrated competence in administering audiometric examinations, obtaining valid audiograms, and properly using, maintaining, and checking calibration and proper function of the audiometers being used.

A technician who performs audiometric tests using a microprocessor audiometer does not need to be certified but must be responsible to an audiologist, otolaryngologist, or physician.

- (f) Centers located in rural areas that are not equipped to conduct audiometric testing on center or find it difficult to locate audiometric testing centers must contact the Job Corps Regional Office project manager who will contact the National Office of Job Corps safety representative.

3. Hearing protector evaluation for specific hazardous noise environments to ensure attenuation to below 85dB. Evaluation methods should be done in accordance with 29 CFR 1910.95 Appendix B, "Methods for Estimating the Adequacy of Hearing Protection Attenuation."
4. Selection and distribution of hearing protectors.
 - (a) Hearing protectors must be provided at no cost to staff or students.
 - (b) The hearing protectors selected should be appropriate for the task and provide the required noise attenuation.
 - (c) Students and staff who have not yet had a baseline audiogram should be issued hearing protection.
 - (d) Students or staff who have experienced a standard threshold shift must be issued hearing protectors.
5. Training that will be administered annually that includes but is not limited to the following:
 - (a) Effects of noise on hearing
 - (b) Purpose of hearing protectors
 - (c) Disadvantages, attenuation of various types of hearing protectors
 - (d) Instructions on selection, fitting, use, and care of hearing protectors
 - (e) Purpose of audiometric testing and an explanation of the test procedures

6. Staff and students, or their representatives, must have access to monitoring results, audiometric test results, and training materials in accordance with 29 CFR 1910.95.
7. Centers must maintain records as follows:
 - (a) Exposure monitoring results are maintained for 2 years.
 - (b) Audiometric testing results are maintained for the duration of the student's enrollment and the duration of staff employment.
 - (c) Student and staff hearing protection attenuation and selection, and training records are maintained for 2 years.
8. Centers must retain all records associated with the hearing conservation program, upon transfer of center operations to another operator.

R11. Lead Exposure Plan

(See Section 5.16, R4.)

R12. Hexavalent Chromium Exposure Plan

(See Section 5.16, R9.)

R13. Lockout/Tagout Plan

- a. Centers must develop written procedures for the control of hazardous energy in accordance with 29 CFR 1910.147 if students and staff are responsible for servicing or performing maintenance of machines or equipment.
- b. A lockout/tagout plan is not required when:
 1. servicing equipment that is powered by plugging into an electrical outlet and is under complete control of the individual performing the work; or
 2. making normal adjustments, including minor tool changes and other minor servicing activities that take place during normal production operations which are routine, repetitive, and integral to the use of that production equipment, as long as workers are effectively protected by alternative measures that provide effective machine safeguarding protection.
- c. When a written lockout/tagout plan is required, the program must include the following minimum elements:
 1. Name of the machines or equipment and purpose of the procedure
 2. Compliance requirements (policy)
 3. Type of compliance enforcement for violation of policy
 4. Name of students or staff affected and method of communication
 5. Name of students or staff authorized to perform lockout/tagout
 6. Type and magnitude of energy, its hazards, and the methods to control the energy
 7. Type and location of machine or equipment operating controls

8. Type and location of energy isolating devices; lockout/tagout devices are sufficient in number, uniform, legible, understandable, and durable
9. Types of stored energy—methods to dissipate or restrain
10. Methods of verifying the isolation of the equipment
11. Training for affected and authorized students and staff
12. Method for evaluating lockout/tagout procedures at least annually and documenting results
13. Procedures for removing locks/tags when the owner of the lock or tag is not available
14. Plan is updated when changes in process, equipment, procedures, or audit warrants revision

R14. Powered Industrial Vehicle Plan

- a. Centers that own or provide access to gas-powered or electric-powered fork trucks, tractors, platform lift trucks, motorized hand trucks (pallet jacks) or other specialized vehicles must develop a written powered industrial vehicle plan.
- b. The plan must address the requirements outlined in 29 CFR 1910.178.
- c. The plan must also include:
 1. Complete list of covered vehicles
 2. Fuel handling and storage procedures (if applicable)
 3. Battery charging, changing, and storage procedures (if applicable)
 4. Spill response procedures and fire prevention
 5. Areas where trucks are used
 6. Operator training
 7. Daily inspection process
 8. Process for removing vehicles from service
- d. Powered industrial truck operators must be at least 18 years of age in accordance with the Fair Labor Standards Act.
- e. Operator training must be conducted by a certified trainer and the training must be in accordance with 29 CFR 1910.178(l).

QUALITY INDICATOR

- Q1. Center management fully implements all required occupational safety and health plans and actively promotes and maintains a safe and healthy living and working environment on center for students and staff.