



National Archives and Records Administration

SAFETY AND OCCUPATIONAL HEALTH PROGRAM HANDBOOK

Supplement to NARA 235

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CHAPTER 1

Overview

1.1 Introduction

This handbook provides detailed procedures for managing a safety and health program within the National Archives and Records Administration (NARA). It supplements NARA 235, Safety and Occupational Health (SOH) Program, and applies to all NARA facilities, employees, contractors, volunteers, and interns.

The intent of this handbook is to serve as a “how to” guide that all Office Heads/Staff Directors in the Washington, DC, area, and NARA Facility Directors outside of the Washington, DC, area (or their delegated authorities) use to promote an effective SOH Program at all locations within NARA. It further serves as a resource for every NARA employee to help create and work within a safe and healthful work environment.

All general references to NARA 235 in this handbook signify both the directive and the handbook.

1.2 Policy

The NARA SOH Program:

- a. Provides safe and healthful working conditions to protect personnel and the visiting public from injuries and illnesses and property from accidental damage.
- b. Includes safety and occupational health as an integral part of every operation.
- c. Holds managers and supervisors accountable and provides them recognition for implementation and management of the program within their scope of authority and responsibility.
- d. Establishes and maintains a staff of safety and occupational health professionals, safety and health committees (see 29 CFR 1960.37 and NARA 235, Safety and Occupational Health Program), and a Safety and Occupational Health Program Coordinator (SOHPC) at appropriate levels within the organization to advise management in the development and implementation of an effective safety and occupational health program.
- e. Requires that no personnel be subjected to restraint, interference, coercion, discrimination, or reprisal for filing a report of an alleged unsafe or unhealthful working condition or otherwise participating in the program.
- f. Provides personnel the supervision, knowledge, and skills necessary to safely perform their assigned tasks.

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- g. Requires personnel and supervisors to identify and correct unsafe and unhealthful conditions and to know and follow safe and healthful work rules and practices.
- h. Complies with applicable Program requirements of Executive Order 12196, 29 CFR 1960, Occupational Safety and Health Administration (OSHA), and adopted national consensus standards.
- i. Promotes off-the-job safety and health of personnel through on-the-job safety and health activities.
- j. Incorporates and enforces appropriate safety and health performance clause(s) in contracts with concessionaires and contractors.

1.3 Other Guidance References and Electronic Links

This handbook contains references and, where possible, direct links to other relative policy issuances. If readers find a reference that they believe is not valid or current, or a non-working link, please contact NASS for correction.

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CHAPTER 2

Safety and Health Standards, Procedures, and Guidelines

2.1 Purpose

To specify the minimum SOH Program requirements for the development and adoption of alternate safety and health standards, guidelines, and procedures if Occupational Safety and Health Administration (OSHA) or other Federal or adopted national consensus standards do not meet NARA needs.

2.2 References

- a. 29 CFR 1960.17, Subpart C, Alternate Standards;
- b. Section 6 of the Occupational Safety and Health Act (OSHAct);
- c. Public Buildings Act of 1959, Section 21, Compliance with Nationally Recognized Codes; and
- d. Executive Order 12196, Occupational Safety and Health Programs for Federal Employees.

2.3 Safety and Health Standards Requirements

a. NARA complies with applicable OSHA standards, other Federal agency standards, Executive Order 12196, and adopted national consensus standards. Where conflicts exist among these standards, NARA uses the most protective of the safety standards. NARA may establish more stringent safety and health standards.

b. If applicable safety and health standards do not exist or existing standards are not adequate, the NARA National Safety and Health Committee (NSHC) develops them using the following process:

(1) The NARA Safety and Occupational Health Program Manager (SOHPM) in the Security Management Branch (NASS), in coordination with the American Federation of Government Employees, prepares a statement for the Archivist to use in notifying the Secretary of Labor of NARA's intent to develop an alternate standard. The statement is routed through the Policy and Planning Staff (NPOL) and the Designated Agency Safety and Health Official (DASHO).

(2) The proposed standard is provided for comment to affected employees or their representatives.

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(3) The final draft of the standard is sent to the Secretary of Labor before final adoption and includes any written comments on the standard from employees or their representatives.

(4) Upon the Secretary of Labor's approval, NARA adopts the standard.

c. When NARA personnel work jointly with employees of other Federal agencies and conflicts exist between the agencies' standards, the more stringent of the standards applies unless agreements are reached between the agencies.

d. NARA personnel must comply with adopted standards consistent with laws and regulations of Federal, state, and local governments when they do not conflict with more stringent NARA standards.

e. Special requirements applicable to and adopted by the Department of Labor and NARA include:

- (1) Highway Safety Act of 1973, as amended;
- (2) Motor Vehicle Safety Act of 1986, as amended;
- (3) Construction Safety Act of 1969, as amended;
- (4) 29 CFR Parts 1910, 1915, 1918, 1925, 1926 1928 and 1960, as amended;
- (5) Service Contract Act of 1965, as amended;
- (6) Radiation Control for Health and Safety Act of 1968, as amended;
- (7) National Fire Codes (latest edition);
- (8) American National Standards (ANS) (latest edition);
- (9) Uniform Building Code (latest edition);
- (10) 40 CFR Parts 152-180, (Pesticides), as applicable and amended;
- (11) 49 CFR Parts 171-179 and 397 (Hazardous Material Transport), as amended;
- (12) 24 CFR Applicable parts, Housing and Urban Development regulations lead-based paints, as amended;
- (13) National Consensus Standards, as applicable;

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- (14) E.O. 12196, “Occupational Safety and Health Programs for Federal Employees,” dated Feb. 26, 1980;
- (15) National Fire Protection Life Safety Codes (NFPA 101, latest edition);
- (16) National Electrical Codes (NEC);
- (17) “National Agreement: National Archives and Records Administration and American Federation of Governmental Employees,” dated April 2002; and
- (18) 36 CFR 1200.230, as amended.

CHAPTER 3

Inspections and Abatement

3.1 Purpose

To specify the minimum SOH Program requirements for conducting formal inspections of establishments and timely abatement of identified hazards at NARA headquarters and facilities.

3.2 Reference

29 CFR 1960, Subpart D, Inspection and Abatement.

3.3 Requirements

a. The NARA Space and Security Management Division (NAS) formally inspects all establishments under its control at least every three years. More frequent inspections are conducted in high hazard areas as defined by the Occupational Safety and Health Administration (OSHA).

b. Persons who are trained in hazard recognition and safety and health inspection procedures conduct formal inspections. The inspector will give a representative of the workplace (e.g., facility manager or designee) and an employee representative the opportunity to participate in the inspection. However, the inspector may deny the right of accompaniment to any person whose participation interferes with the inspection.

c. Safety and health professionals, General Services Administration (GSA) personnel, or other qualified person(s), as determined by NAS, conduct pre-occupancy and re-occupancy inspections for safety and health considerations in accordance with 29 CFR 1960.25(a). Based on the inspection findings, the responsible safety and health professional recommends occupancy of the space or identifies corrective actions needed to bring the space into a safe and healthful condition (see 29 CFR 1960.34). Where problems regarding pre-occupancy and re-occupancy cannot be resolved locally, safety and health issues may be directed to the next higher level of safety management until the issue is resolved. This safety management chain includes respective library directors, regional administrators, or facility managers or designees (if the facility is in the Washington, DC, area), the National Safety and Health Committee (NSHC), the Safety and Occupational Health Program Manager (SOHPM), Senior Safety and Health Official (Director, NAS) [hereafter, SSHO], or the Designated Agency Safety and Health Official (DASHO), as appropriate.

d. OSHA and NARA safety and health personnel have right of entry without delay, at reasonable times, to any facility, construction site, or other workplace to perform an inspection. They also have the right to inspect any item or place within the establishment and to privately question any employee, supervisor, visitor, or manager associated with the establishment (see 29 CFR 1960.31).

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e. If an imminent danger condition is found, the management official in charge initiates corrective or protective action immediately and, if necessary, stops the operation or evacuates the area, except for those needed to abate the condition.

3.4 Inspection Procedures

a. NAS requires safety and health inspectors to:

- (1) Have the necessary equipment to conduct the inspection;
- (2) Examine appropriate accident records and previous inspection reports;
- (3) Hold an opening conference with the facility manager or designee;
- (4) Consult with employees on matters of safety and health;
- (5) Inform management and employees of imminent danger conditions;
- (6) Take or arrange for environmental samples, where appropriate;
- (7) Comply with safety rules and practices;
- (8) Take or obtain photographs where appropriate for inspection documentation;
- (9) Avoid unreasonable disruption of the operation; and
- (10) Hold a closing conference with the appropriate level(s) of management and the employee representative(s) to disclose findings of the inspection and discuss potential solutions for hazardous conditions. The management and employee representative(s) are afforded an opportunity to bring other information to the attention of the inspector regarding conditions in the workplace.

b. Within 15 calendar days of completing a formal inspection (30 calendar days for items dealing with health), a written “Notice of Unsafe or Unhealthful Working Conditions” (Notice) will be conspicuously posted at or near each place a hazardous working condition exists, if practical, until the condition is abated or for 3 working days, whichever is longer. If not practical, post the Notice where it is readily observable by all affected personnel.

c. The facility manager or designee prepares the notice and provides it to the appropriate levels of management and employee representative(s) participating in the inspection. The Notice includes the following:

- (1) Identification of the location of the hazard;

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- (2) Description of the nature and extent of the hazard;
- (3) Reference to applicable safety or health standards; and
- (4) Establishment of a reasonable time for abatement of the hazard.

d. The Safety and Health inspector conducts unannounced and follow-up inspections to determine that hazardous conditions are appropriately corrected.

e. If an OSHA representative arrives to conduct an inspection of a NARA establishment:

- (1) NARA personnel must immediately notify the
 - (a) SOHPM who notifies the SSHO and the DASHO; or
 - (b) Office head/staff director (in the Washington, DC, area), library director, or regional administrator (outside the Washington, DC, area) who notifies the SOHPM and assigns a safety and health representative to accompany the OSHA inspector.
- (2) The facility manager or designee must send copies of the inspection findings, recommendations, and abatement schedules to the SOHPM within 10 working days of their receipt of the OSHA report.

3.5 Abatement Procedures

a. For deficiencies that cannot be abated within 30 calendar days, a management action plan must be prepared. The local Safety and Occupational Health Program Coordinator (SOHPC) or designee coordinates with managers and supervisors to obtain proposed corrective actions and follows up abatement status every 90 calendar days until all inspection findings are abated. The local facility manager or designee monitors the quality control of hazard abatements and reviews the management action plan annually. The management action plan must include:

- (1) Proposed abatement action and timetable for correction;
- (2) Explanation for the delay in abatement;
- (3) Summary of the steps being taken in the interim to protect personnel; and
- (4) Person(s) responsible for abatement.

NOTE: If the management action plan changes, prepare a new plan.

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b. If abatement of a hazardous condition is not within the authority and resources of the local facility manager or designee then that person:

(1) Informs and requests assistance from the next higher management level in the organization within 10 working days;

(2) Informs and requests assistance from the next higher level of safety management until the issue is resolved. This safety management chain includes respective library directors, regional administrators, or facility managers or designees (if the facility is in the Washington, DC, area), National Safety and Health Committee (NSHC), the SOHPM, SSHO, or the DASHO, as appropriate, while informing and protecting the potentially affected personnel;

(3) Coordinates, when necessary, with the Federal lessor agency if applicable (e.g., General Services Administration [GSA]) to secure abatement as specified in 29 CFR Part 1960, Subpart E and 41 CFR Parts 101-21; and

(4) Places subject hazardous conditions on the facility's deferred maintenance listing, prioritizing appropriately.

3.6 Inspection and Abatement Responsibilities

a. SOHPM (in NASS)

(1) Conducts facility inspections of NARA facilities as feasible, in conjunction with security program assessments every three years;

(2) Develops and maintains a program to meet inspection, program, and hazard deficiency tracking and abatement requirements;

(3) Develops and incorporates standardized inspection checklists for field use in meeting inspection requirements;

(4) Generates a NARA-wide management action plan report detailing unabated inspection deficiencies and review for appropriateness and timeliness of corrective actions;

(5) Coordinates with the NSHC, SSHO, and the DASHO annually to review and compare NARA-wide safety related abatement projects with deferred maintenance projects;

(6) Conducts a trend analysis of NARA-wide inspection findings and deficiencies and incorporates the results with appropriate recommendations in the annual safety and health report; and

(7) Consults with NARA managers as needed.

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- b. Library Directors, Regional Administrators, and Facility Managers or designees
- (1) Document local safety self inspections;
 - (2) Assign Risk Assessment Codes (RACs) to facility findings and deficiencies for management use in prioritizing corrective actions as follows:
 - (a) Deriving Risk Assessment Codes (RACs). Use the matrix and descriptive definitions below to determine RACs for safety hazards.

Table 1 - Risk Assessment Codes

Hazard Severity	Accident Probability			
	A likely	B probably	C possibly	D unlikely
I (most severe)	1	1	2	4
II	1	2	3	4
III	2	3	4	5
IV (least severe)	4	4	5	5

- (b) Accident Probability Code Description. Accident probability is classified by an uppercase letter. (A) - Likely to occur immediately; (B) - Probably will occur in time; (C) - Possibly to occur in time; (D) - Unlikely to occur.
 - (c) Hazard Severity Code Description. Hazard severity is classified by an uppercase Roman numeral. (I) – Death, permanent total disability or loss of facility or asset; (II) – Permanent partial disability, temporary total disability in excess of three months, or major property damage; (III) – Lost-workday injury or compensable injury or minor property damage; (IV) Minimal threat to personnel or property, first-aid, minor supportive medical treatment, but still a violation of a standard.
 - (d) RAC Descriptor. Abatement priority ranking based on the merger of the accident probability and hazard severity, i.e., a probability of B and severity of III would equate to a RAC of 3 and be annotated as 3(B) (III). (1) - Critical; (2) - Serious; (3) - Moderate; (4) - Minor; (5) – Negligible.
- (3) Maintain all program assessments and facility inspection reports for a period of five years;

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(4) Support NARA local safety and health staff (e.g., Local Safety and Health Committee [LSHC] members, supervisors, assistant library directors, deputy directors, assistant regional administrators, supervisory archivists, and supervisory facility managers or designees) through training that incorporates the inspection process, provide subject personnel with the ability to recognize safety and health hazards, and conduct inspections within the workplace; and

(5) Take corrective action to abate any safety or health findings documented on inspections or take appropriate measures to mitigate the unsafe condition(s).

c. Facility managers or designees

(1) Provide safety inspection program oversight of NARA facilities within their area of responsibility to assure an effective program is in place for the identification, evaluation, and control of SOH hazards;

(2) Monitor and document local self-conducted inspections to assure their locations are informally inspected annually and follow up as appropriate for timely closure of deficiencies or updated status reports;

(3) Generate a local inspection report and forward with corrective action recommendations to the LSHC and the office head/staff director (for the Washington, DC, area), or library director or regional administrator (outside the Washington, DC, area) in a timely manner;

(4) Follow up on local safety inspection management action plans to assure corrective actions are abated and/or status reports are updated every 90 calendar days; and

(5) Support NARA local safety staff (e.g., LSHCs, managers, supervisors, CORs/COTRs) through training that incorporates the inspection process, provide subject personnel with the ability to recognize safety and health hazards and conduct inspections within the workplace.

d. NSHC monitors and reviews

(1) Reports of inspections;

(2) External and internal safety program evaluations; and

(3) Agency hazard abatement plans.

e. LSHCs

(1) Coordinate the establishment of a workplace inspection program to effectively identify, document, and track safety, health, and environmental deficiencies until

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corrective action is taken either to eliminate or reduce the hazard to an acceptable level. High hazard workplaces or locations where there is an increased risk of accident or injury due to the nature of the operations should be surveyed more frequently;

- (2) Provide guidance and assistance to local facility managers or designees and supervisors to comply with safety program evaluation and inspection requirements; and
- (3) Coordinate and/or conduct local facility self-inspections annually.

3.7 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 4

Notifying, Investigating, and Reporting Serious Accidents, Accidents, and Incidents

4.1 Purpose

To specify the minimum SOH Program requirements for notification, investigation, and reporting NARA-related serious accidents, accidents, and incidents.

4.2 References

- a. 29 CFR 1960, Subpart I, Recordkeeping and Reporting Requirements;
- b. 29 CFR Part 1904 regarding new recordkeeping rules on work-related fatalities, injuries, and illnesses; and
- c. The “National Agreement” Between the National Archives and Records Administration and American Federation of Government Employees, April 2002.

4.3 Notifying the Appropriate Officials of Serious Accidents, Accidents, and Incidents

See the Glossary for definitions of serious accidents, accidents, and incidents.

- a. Serious accidents - Report immediately to the SOPHM by phone as follows:
 - (1) Any NARA employee, contractor, or their designee who is made aware of a serious accident must immediately report it to the facility manager or designee; then
 - (2) Facility managers or their designees must immediately report serious accidents to the SOHPM. The SOHPM immediately notifies the DASHO.
- b. Accidents and incidents - Any NARA employee who is made aware of an accident or incident must report it to the facility manager or designee immediately so that appropriate action can be taken to assess and abate the hazard.

4.4 Investigating Serious Accidents, Accidents, and Incidents

On request, the SOHPM provides technical advice to all NARA personnel to support serious accident, accident, and incident investigations. The facility manager or designee investigates and documents all work-related serious accidents, accidents, and incidents and provides a copy of the investigation results to the SOHPM within 30 calendar days of completion.

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4.5 Reporting Serious Accidents, Accidents, and Incidents

a. Serious Accidents - The highest ranking authority onsite at the NARA facility where the serious accident took place reports serious accidents to OSHA immediately. The ranking authority ensures that within eight hours after the death of any employee from a work-related incident or the inpatient hospitalization of three or more employees as a result of a work-related incident. The fatality or multiple hospitalizations is orally reported by telephone or in person to the Area Office of the Occupational Safety and Health Administration (OSHA), U.S. Department of Labor that is nearest to the site of the incident. Alternately, use the National OSHA toll-free central telephone number, 1-800-321-OSHA (1-800-321-6742). In addition, the forms in pars (1) thru (4) below are completed.

(1) Complete the Serious Accident Questionnaire (NA Form 6054)

(a) The facility manager or designee completes the serious accident questionnaire and submits it to SOHPM within seven business days.

(b) The SOHPM

(aa) reviews the serious accident questionnaire (NA Form 6054) within three business days of receiving it.

(bb) prepares and submits to the DASHO, within seven business days, a serious accident report that presents the findings and recommendations to prevent recurrence.

(cc) maintains a file of all serious accident reports and other official documents related to serious accidents for a period of five years.

(c) The DASHO reviews the serious accident report submitted by the SOHPM and ensures that recommendations for hazard mitigation are implemented to prevent recurrence.

(2) Complete the OSHA Form 301, Injury and Illness Incident Report

(a) The supervisor, COR/COTR, or the injured employee

(aa) Provides the respective administrative officer/contact with the information required to document the accident on OSHA 301 form "Injury and Illness Incident Report," within five business days of the occurrence. This form and instructions can be found at <http://www.OSHA.gov> web site (click on the recordkeeping link on the right).

(bb) Documents on the Job Hazard Analysis (JHA) actions taken to mitigate the hazard and prevent accident reoccurrence.

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(b) The administrative officer/contact submits the OSHA 301 form to the SOHPM within 30 calendar days of the injury.

(3) Contact NAHR for instructions for completing required Office of Workers' Compensation Programs (OWCP) forms.

(4) Update the OSHA 300, Log of Work-Related Injuries and Illnesses. The administrative officer/contact updates the OSHA 300 form to reflect new injuries and illnesses. Send a copy of the completed OSHA 300 form and a certified copy of the OSHA 300A form, Summary of Work-Related Injuries and Illnesses, to the SOHPM by January 15 of every year. The completed OSHA 300A is certified by the regional administrator (NARA records centers and regional archives) or Presidential library director (at Presidential libraries) or the DASHO. This data will be included in the Annual Occupational Safety and Health Report which will be submitted to the Secretary of Labor.

b. **Accidents and Incidents** - Facility managers or designees follow the reporting procedures referenced in par. (2) - (4) above (i.e. Serious Accident Questionnaire (NA Form 6054) is not completed for accidents and incidents).

c. **Suspected Misconduct** - If an employee suspects any incident involves intentional acts or gross mismanagement he or she should also report the incident to the NARA Office of the Inspector General (OIG) as soon as possible.

4.6 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 5

Employee Reports of Unsafe Conditions and Allegations of Reprisal

5.1 Purpose

To specify the minimum SOH Program requirements for handling, investigating, and resolving employee reports of unsafe or unhealthful conditions and allegations of reprisal for NARA. Reports of unsafe or unhealthful conditions by employees are an important means of identifying potential hazards before accidents or injuries occur. These reports are encouraged at all organizational levels.

5.2 References

- a. Executive Order 12196, Section 1-2-1 (f) and (h);
- b. 29 CFR 1960.28, Employee Reports of Unsafe or Unhealthful Working Conditions;
- c. 29 CFR 1960, Subpart G, Allegations or Reprisal;
- d. NARA Admin.201 Chapter 10 part 51; and
- e. National Agreement Between NARA and American Federation of Government Employees, dated April 2002.

5.3 Handling Employee Reports of Unsafe or Unhealthful Conditions

- a. NARA establishes and maintains formal and informal processes for employees or their representatives to report unsafe and unhealthful conditions in the workplace and to request an inspection of the condition(s).
- b. Through its formal and informal processes, NARA ensures free and unfettered access to the Safety and Occupational Health Program Manager (SOHPM).
- c. The informal process encourages personnel to verbally report unsafe and unhealthful conditions to their supervisors. Once notified, supervisors are expected to act promptly and appropriately on employees' reports so that the more time-consuming formal process is unnecessary.
- d. The formal process is in writing and provides employees or employee representatives the opportunity to remain anonymous and still be informed of the resolution of their concerns. Employees initiate this process by sending a letter describing the unsafe or unhealthful conditions to the SOHPM, NSHC members, or their labor representatives. Anonymous reports must be investigated in the same manner as signed reports. Identities of

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employees requesting anonymity are kept confidential to anyone other than those authorized by the OSHA Act.

e. The formal process includes provisions on how employees or employee representatives may appeal to higher authorities.

f. In the case of imminent danger situations employees or their representatives submit verbal reports by the most expeditious means available and follow up with written reports.

g. The facility manager or designee

(1) Maintains a log of reports of unsafe or unhealthful conditions and tracks the conditions until they are resolved. (See 29 CFR 1960.28(d)(1).)

(2) Investigates imminent danger conditions within 24 hours, potentially serious conditions within 3 working days, and other hazardous conditions within 20 working days in accordance with 29 CFR 1960.28 (d)(3).

(3) Notifies employees or representatives submitting a report, in writing, within 15 calendar days if an inspection is deemed unnecessary. The notification must include the reasons why an inspection will not be conducted.

(4) Provides a copy of the NARA report of an inspection, made as a result of an employee's formal report of an unsafe or unhealthful condition, to the employee or their representative within 15 calendar days after an investigation of a safety concern is completed, or within 30 calendar days after an investigation of a health concern is completed. If additional time to prepare the report is required, the facility manager or designee notifies the employee or representative of the expected due date.

h. If OSHA directly receives a report of an unsafe or unhealthful condition, it has the option of allowing NARA to conduct its own investigation. If NARA conducts its own investigation, the following procedures apply:

(1) The SOHPM notifies the facility manager or designee immediately upon receiving a request from OSHA;

(2) The facility manager or designee conducts the investigation and provides a written report to the SOHPM within five business days; and

(3) The SOHPM reviews the findings and prepares recommendations to abate the hazard or refute the validity of the complaint. The SOHPM submits the report to the DASHO who responds to OSHA.

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5.4 Handling Employee Allegations of Reprisal Reports

- a. Employee allegations of reprisal related to participation in the SOH Program are handled through NARA administrative grievance procedures or appropriate collective bargaining agreements.
- b. Report any allegations or suspicions of reprisal actions to the OIG immediately.

5.5 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

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CHAPTER 6

Safety and Health Training

6.1 Purpose

To specify the minimum SOH Program requirements for safety and health training for NARA managers, supervisors, safety and health committee members, safety and occupational health personnel, employees, and employee representatives.

6.2 References

- a. 29 CFR 1960.54, Training of Top Management Officials;
- b. 29 CFR 1960.55, Training of Supervisors;
- c. 29 CFR 1960.56, Training of Safety and Health Specialist;
- d. 29 CFR 1960.57, Training of Safety and Health Inspector;
- e. 29 CFR 1960.58, Training of Collateral Duty Safety and Health Personnel;
- f. 29 CFR 1960.59, Training of Employees and Employee Representatives; and
- g. OSHA Pub.2254, Training Requirements in OSHA Standards and Training Guidelines.

6.3 Requirements

NARA develops and implements an annual safety and health training plan that encompasses the following:

- a. All personnel receive orientation training on the NARA SOH Program, including their rights and responsibilities under the program, and applicable information on the Occupational Safety and Health Act of 1970, Executive Order 12196, 29 CFR 1960, this handbook, and other applicable regulations.
- b. Personnel are given specialized on-the-job or classroom training to equip them with the knowledge and skills to safely perform assigned tasks for each hazardous work activity and to respond effectively to recognized emergencies, such as fires, injuries, or other types of accidents. Certification procedures for high-hazard tasks, such as fork lift operation are documented and carried out by certified examiners in accordance with 29 CFR 1910 and 1926. (See also OSHA Publication 2254 “Training Requirements in OSHA Standards Guidelines” <http://www.osha.gov/publications/osh2254.pdf> .)

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c. Safety and Occupational Health Program Coordinators (SOHPC), Safety Specialists, Safety Inspectors, Safety and Health Committees, and supervisors must complete appropriate hazard recognition training within six months of being selected for the task.

6.4 NARA Senior Staff

The safety training requirements of the Senior Staff also apply to the Director, Space and Security Management Division (NAS), and the Chief, Security Management Branch (NASS). In accordance with 29 CFR 1960.54, Senior Staff receive safety orientation training to enable them to manage the NARA SOH program. This safety orientation training is provided internally and includes coverage of Section 19 of the Occupational Safety and Health Act of 1970, Executive Order 12196, 29 CFR 1960, 29 CFR 1910, 29 CFR 1926, and a review of NARA's SOH program.

6.5 Safety and Occupational Health Program Manager (SOHPM)

a. In accordance with 29 CFR 1960.56 (a) and (b), receives safety and health training through course work, laboratory experience, field study and other formal training necessary to perform tasks related to safety program development and implementation and tasks related to safety consulting. This safety and health training includes the OSHA Course #6010 - Occupational Safety and Health Course for Other Federal Agencies.

b. Assists facility SOHPCs in identifying, developing, and coordinating safety training programs.

c. Documents and tracks safety and health training for OSHA reporting requirements.

6.6 National Safety and Health Committee (NSHC) and Local Safety and Health Committee (LSHC)

a. In accordance with 29 CFR 1960.58, within six months of appointment, NSHC and LSHC members receive and document training from OSHA Course #6000 "Collateral Duty Course for Other Federal Agencies" or equivalent, which addresses Section 19 of the Occupational Safety and Health Act of 1970, Executive Order 12196, 29 CFR 1960, 29 CFR 1910, and 29 CFR 1926. Note: OSHA Course #6000 can be taken at any OSHA Training Institute Education Center. (See the OSHA.gov web site and click on the training link for a list of locations.)

b. The NSHC monitors and reviews the NARA safety and health training program in accordance with the NSHC committee charter.

c. The LSHC monitors and reviews the NARA local facility safety and health training programs in accordance with the LSHC committee charter.

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6.7 Safety and Health Inspectors

a. In accordance with 29 CFR 1960.57 (a) and (b), agency safety and health inspectors (including NAS security inspectors, Real Property Management Branch [NASR] engineers, and Facilities and Personal Property Management Division [NAF] facilities quality control inspectors and engineers) complete OSHA course #6000 or its equivalent.

b. During the performance of their duties, inspectors must make every effort to recognize, evaluate, and make recommendations for the control of safety and health hazards associated with equipment and facility design, standards, analysis of accidents, injury and illness data, and other related tasks.

6.8 SOHPCs

a. Within 45 days of appointment, receive an orientation to the NARA safety program, reviewing basic duties and responsibilities, organization, available resources, and NARA safety policies.

b. Within six months of appointment, must receive and document training from OSHA Course #6000 or equivalent, which addresses Section 19 of the Occupational Safety and Health Act of 1970, Executive Order 12196, 29 CFR 1960, 29 CFR 1910, and 29 CFR 1926.
NOTE: OSHA Course #6000 can be taken at any OSHA Training Institute Education Center. (See the OSHA.gov web site and click on the training link for a list of locations.)

c. Conduct or coordinate safety and health training within the facility, such as Collateral Duty Safety Training, Defensive Driving, CPR/First Aid, back safety, and ladder safety.

d. Assist the SOHPM in establishing a system to document and track safety, health, and environmental training at all organizational levels.

e. Maintain a resource library of local safety and environmental training sources and assist local supervisors in identifying, coordinating, scheduling, conducting, and documenting personnel training.

f. Assist management to identify previous fiscal year training accomplished and forecast upcoming fiscal year training needs and requirements as part of the NARA Annual Action Plan and Accomplishment Program Planning process, as described in Chapter 25 of this Handbook.

6.9 Supervisors

a. In accordance with 29 CFR 1960.55 (a), supervisory employees receive safety and health training, which includes supervisory responsibility for providing and maintaining safe and healthful working conditions for employees, coverage of Section 19 of the Occupational

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Safety and Health Act of 1970, Executive Order 12196, 29 CFR 1960, 29 CFR 1910, 29 CFR 1926 and a review of NARA's safety and occupational health program. NOTE: Completing OSHA Course #6000 or its equivalent, and reviewing NARA 235 and this Handbook will comply with this standard.

b. In accordance with 29 CFR 1960.55(b), supervisors receive introductory and specialized training which enables them to recognize and eliminate safety and health hazards in the workplace and manage the SOH program within the work unit. Examples of supervisors' training for the work unit include: forklift (Powered Industrial Truck) training for supervisors of loading docks and warehouses; introductory asbestos training for maintenance supervisors; back safety, ladder safety, material handling safety, and mobile shelving safety training for supervisors of records storage areas. Maintenance supervisors at non-asbestos facilities must complete introductory asbestos training for maintenance supervisors.

c. Provide the resources to accomplish personnel training required in this Handbook for all applicable personnel under their control.

d. Report documented training and forecasted training needs annually to the SOHPM.

e. Assist in identification of additional personnel safety training requirements through job hazard analysis (see Chapter 7) or by researching mandatory requirements personnel must receive before carrying out unique job activities.

f. Certify that personnel are experienced, knowledgeable, and technically qualified before assignment in potentially hazardous occupations (e.g., electrician, machinist) or operations (e.g., use of power tools, complex operations with high hazard materials) where personnel safety may depend on skill.

g. Explain the policies, rules, and regulations, emergency procedures, and any special conditions peculiar to personnel working environment during each new employee's first week on the job. This information will include the following:

(1) Presentation and discussion of the NARA SOH Program and local organizational safety and health policies.

(2) Identification and demonstration of safe working procedures related to personnel responsibilities, carefully pointing out inherent hazards.

(3) Discussion of any physical limitations to be considered before assignment of duties.

h. Issue of hard hats, gloves, or other personnel protective equipment needed for work. Explanation of the proper use and where to get other personnel protective equipment.

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- i. Arrange for required and specialized training, including hazard communications, for the employee before assigning the employee to a task involving hazardous materials and potential exposures.
- j. Obtain medical approval, fit testing, and training for personnel required to wear respirators.
- k. Provide the following information to personnel involved in motor vehicle or special purpose vehicle operations:
 - (1) Authorized vehicle uses and limitations.
 - (2) Vehicle accident reporting procedures and responsibilities.
 - (3) Emergency equipment requirements.
 - (4) Vehicle inspection procedures.
- l. Provide the following information to all personnel:
 - (1) Accident and injury reporting responsibility and reporting procedures.
 - (2) Hazardous condition reporting procedures.
 - (3) Fire hazards and fire plan.
 - (4) Protective equipment policy.
 - (5) Local safety plan.
- m. Include safety and environmental program elements, employee rights and responsibilities under the Program, applicable information on the Occupational Safety and Health Act of 1970, Executive Order 12196, 29 CFR 1960, the NARA Safety manuals, and other applicable regulations as part of new personnel orientation.

6.10 Employees

- a. Attend safety training programs, providing feedback to supervisors on quality and content of the program.
- b. Assist supervisors in the determination of safety training requirements.

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6.11 Personnel Training Requirements (Note: Training will be linked to NARA@work web site.)

- a. Bloodborne pathogens - In accordance with 29 CFR 1910.151 and 29 CFR 1910.1030, personnel who are designated first aid providers receive training upon initial assignment and annually thereafter in the hazards of and prevention of exposure to bloodborne pathogens. Subject training may be in conjunction with organizational first aid and CPR training. All designated first aid responders must also be trained in the hazards of bloodborne pathogens and must be provided with appropriate personal protective equipment. If they render assistance in a first aid accident, they must be offered the hepatitis B vaccine within 24 hours of the time they rendered assistance. If they experience exposure to a bloodborne pathogen (e.g., a splash to the eyes or exposure of mucous membrane), they must be provided with a follow-up medical evaluation (see Chapter 13).
- b. Chemical hygiene - In accordance with 29 CFR 1910.1450, personnel using hazardous materials in a laboratory environment receive chemical hygiene training as described in Chapter 12 of this Handbook with refresher training every 3 years.
- c. Confined space entry - In accordance with 29 CFR 1910.146, personnel entering a confined space or serving as attendants receive training before performance of confined space entry duties as required described in Chapter 19 of this Handbook.
- d. Electrical work - In accordance with 29 CFR 1910.332, through education, certification, or training, personnel must have knowledge of the hazards of electrical energy. Personnel who repair, modify, or work on any energized electrical system, instrument, or machinery must be aware of the training requirements of lockout/tag out procedures as described in Chapter 18 of this Handbook.
- e. Emergency Response Hazardous Material Spill Containment and Cleanup - In accordance with 29 CFR 1910.120, personnel or contractors designated to take defensive measures or contain hazardous material spills receive first responder operational level certification as defined by OSHA (see 29 CFR 1910.120). A minimum of eight hours of training is required. Personnel who are members of organized NARA spill teams receive training appropriate for the tasks to be completed as part of the emergency response. Personnel must see the facility manager or designee who maintains the Occupant Emergency Plan (OEP). Personnel assigned to entry team or decontamination duties must be certified to the hazardous materials technician level as specified by OSHA (see 29 CFR 1910.120). A minimum of 24 hours of training is required. Personnel who fill support roles receive certification to at least the first responder operational level as defined by OSHA. A minimum of eight hours of refresher training is provided to personnel of organized NARA spill teams every year. Personnel must not attempt to clean up any hazardous material spill without appropriate training, personal protective and cleanup equipment, and knowledge of the material's hazards. The amount spilled, degree of toxicity, and resources available to clean up the spill must be properly evaluated.

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f. Hazard Communication (HAZCOM) - In accordance with 29 CFR 1910.1200, personnel with the potential for being exposed to and handling or using hazardous materials receive initial Hazard Communication Training with refresher training every three years. See Chapter 8 of this Handbook.

g. Materials handling - In accordance with 29 CFR 1910.176-184, personnel who use manual or motorized forklift trucks have supervisory authorization and receive initial and refresher training in their operation every three years. Personnel required to routinely lift objects greater than 35 pounds as part of their job assignment, are instructed in proper lifting techniques, proper back care, and exercises upon initial assignment and every three years thereafter. See Chapter 19 of this Handbook.

h. Machine shop, woodworking and portable power tools - In accordance with 29 CFR 1910.211-217, supervisors certify that personnel are experienced and knowledgeable in the safe operation of machine shop tools, portable power tools, and other equipment before operating such equipment. Refresher certification or formal training is required every three years. See Chapter 6 of this Handbook.

i. Motor vehicle operation - Personnel operating any type of motor vehicle receive defensive driving training. See specific requirements in Chapter 9 of this Handbook.

j. Radiation - In accordance with 29 CFR 1910.1096, personnel using Nuclear Regulatory Commission (NRC) licensable ionizing radiation material receive appropriate training to maintain compliance with the NRC license authorizing the material and as described in Chapter 14 of this Handbook.

k. Respiratory protection program - In accordance with 29 CFR 1910.152, personnel who have the need to use respirators receive appropriate training and fit testing before use as described in Chapter 10 of this Handbook.

l. Fire extinguisher training - See Chapter 17, Fire Safety, for fire extinguisher training.

6.12 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 7
Job Hazard Analysis**

7.1 Purpose

To specify the minimum SOH Program requirements for structuring and using job hazard analysis (JHA) within NARA and all remote facilities. The JHA is a safety tool that focuses on job tasks to identify potential hazards in the workplace in order to control or eliminate them.

7.2 References

- a. OSHA 29 CFR 1960.9, “Basic Program Elements for Federal Employees: Supervisory Responsibilities”;
- b. OSHA 29 CFR 1960.55, “Basic Program Elements for Federal Employees: Training of Supervisors”;
- c. OSHA 29 CFR 1910.132(d), “Hazard assessment and equipment selection.”; and
- d. OSHA PUBLICATION #3071 (2002), “Job Hazard Analysis Guide.”

7.3 Requirements

- a. NARA develops and manages a system by which major activities and individual jobs are analyzed by:
 - (1) The sequence of step or job task to perform work or major activity;
 - (2) The hazards associated with the sequence (actions); and
 - (3) The methods or safeguards to prevent, reduce, or control the identified hazard(s).
- b. JHAs are required to prevent unnecessary exposure to job-related hazards. Supervisors or CORs/COTRs conduct JHAs before performing any potentially hazardous operations.
- c. When NARA staff perform work at other non-NARA facilities for which there is a work agreement or contract, the regional administrator or library director with oversight directs the person in charge of the work to develop appropriate JHAs for the work to be performed if none currently exist. The regional administrator or library director must approve JHAs before staff proceed with the work.

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d. When work is performed by others for which there is a work agreement or contract, the contracting officer (CO) directs the person in charge of the work to develop appropriate JHAs for the work to be performed. This information will be provided to the CO or contracting officer representative/contracting officer technical representative (COR/COTR) for approval. The CO or COR/COTR must approve the JHA before permitting the contractor to proceed with the work. (See Chapters 7 and 15.)

e. The following activities or circumstances are examples of things that need JHAs:

- (1) Catwalk including trap doors;
- (2) Conveyors (for moving records up to upper levels of catwalks),
- (3) Dock levelers,
- (4) Egress;
- (5) Fork lift/pallet jack operations;
- (6) Internal electrical service;
- (7) Lockout/tagout;
- (8) Ladders and stairs;
- (9) Lifting;
- (10) Manlifts;
- (11) Medical units located within a NARA facility;
- (12) Mold remediation;
- (13) Motor vehicles operated by staff; and
- (14) Streamliners.

f. If a serious accident occurs during a task for which a JHA has already been prepared, note the step in section 9 of the NA Form 3062, Job Hazard Analysis, including where the accident occurred and details about what changes will be made to prevent the recurrence of a similar accident. If a serious accident occurs during a task for which a JHA had not been prepared, the investigating facility manager or designee determines the need for completing a JHA for the operation. After reporting the accident (See Chapter 4 for serious accident reporting requirements), the facility manager or designee ensures that all employees that are involved in

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the operation are trained on the new or modified JHA. If the facility manager or designee determines that a new JHA or modification of an existing JHA is not needed, the facility manager or designee documents the reasons for determination and forwards a copy to the SOHPM.

7.4 Responsibilities for Conducting Job Hazard Analysis

a. Safety and Occupational Health Program Manager (SOHPM)

(1) Maintains and publishes electronically a master file of JHAs within all NARA facilities.

(2) Reviews JHAs during Safety and Health Program assessments to assess program effectiveness and compliance.

b. Facility Managers or Designees

(1) Provide technical assistance to SOHPCs, supervisors, and CORs/COTRs in reviewing, conducting, and evaluating concurrence with locally developed JHAs, as appropriate.

(2) Forward a copy of JHAs for high hazard activities to the SOHPM.

(3) Review JHAs during field-level safety and health assessments to assess program effectiveness and compliance.

c. **Regional Administrators and Library Directors** - Provide technical assistance to SOHPC, supervisors and CORs/COTRs in reviewing, conducting, and evaluating concurrence with locally developed JHAs.

d. Safety and Occupational Health Program Coordinators (SOHPCs)

(1) Assist supervisors and CORs/COTRs in the implementation of the JHA program.

(2) Provide technical assistance to line supervisors and CORs/COTRs in the conduct and development of JHAs.

(3) Maintain a local file of JHAs for all activities.

e. Supervisors and CORs/COTRs

(1) Identify all hazardous operations or activities under their control and develop or approve corresponding written JHAs.

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- (2) Coordinate review of all developed JHAs.
- (3) Discuss the results of each JHA with affected personnel focusing on identified hazards and steps to be taken to reduce them before beginning the hazardous job activity.
- (4) Provide or make accessible to all personnel engaged in high hazard activities written JHAs applicable to their occupation or activities they will be involved in or will be performing.
- (5) Maintain a file for all JHAs and provide a copy to the SOHPC.
- (6) Review JHAs annually and update whenever significant changes occur to the job.

f. **Employees**

- (1) Review JHAs as needed to conduct job task safely.
- (2) Notify the supervisor whenever significant changes occur to the job that must be included in the JHA.

7.5 Conducting a JHA

To conduct a JHA, carefully study and record each step of a job and identify any existing or potential job hazards (safety, health, or environmental) on NA Form 3062. For each identified hazard, determine what controls will be used to eliminate the hazard, or reduce the hazard to an acceptable level. Each JHA must address the following elements:

- a. A breakdown of the job activity into steps, including a description of how the job activity should and should not be accomplished (Use Box 6 a-f of NA Form 3062);
- b. Examine each job step to determine the hazards present (Use Box 7a-f of NA Form 3062.);
- c. Evaluate each hazard to determine the cause of any factor that may contribute to creation of a hazard (Use Box 7a-f of NA Form 3062);
- d. For each hazard identify corrective or preventive measures. Eliminate the source or cause of the hazard if possible. If the hazard cannot be eliminated, identify engineering controls, improved procedures, personal protective equipment, or training requirements that will help to control the hazard. Identified hazard controls must be in place before work proceeds (Use Box 8a-f of the JHA form); and

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e. Each JHA must also contain the following (Use Box 9 of NA Form 3062 or separate sheet of paper attached to the JHA):

- (1) A section describing unsafe conditions under which operations will not be conducted;
- (2) Conditions, if any, for which the wearing of Personal Protective Equipment (PPE) is required;
- (3) Conditions, if any, when more than one employee is required to perform the operation;
- (4) Emergency and rescue procedures, as applicable; and
- (5) The location and telephone number of emergency medical and rescue facilities.

7.6 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 8
HAZARD COMMUNICATION PROGRAM
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8.1 Purpose

To specify the minimum Occupational Safety and Health Program (Program) requirements for providing personnel adequate protection from chemical, physical and biological stressors, such as noise, chemical exposures, excessive temperatures, dusts, mists, and vapors within the NARA.

8.2 References

- a. 29 CFR 1910.1200, Hazard Communication; and
- b. 29 CFR 1910.1450, Occupational Exposure to Hazardous Chemicals Laboratories. in

8.3 Scope

The Hazard Communication (HAZCOM) Program applies to all NARA government and contract personnel who work with hazardous materials as a part of their assigned job duties or who may otherwise have the potential for exposure to hazardous chemicals or materials that pose either a physical or health hazard. This chapter supplements OSHA requirements in 29 CFR 1910.1200.

8.4 HAZCOM Program Requirements

NARA implements a HAZCOM Program that includes the following requirements:

- a. Consumer products used in the workplace in the same manner, frequency, and duration of use as would be expected in normal use, are exempt from HAZCOM requirements (i.e., inventory, MSDS, user training). Although most NARA personnel do not handle hazardous materials as part of their job duties, they may occasionally use consumer products (office supplies, glue, oil, paint, batteries, etc.) that if used improperly could become hazardous. All personnel must read and follow warning labels and manufacturers' precautions for the safe use of these products.
- b. Contract personnel and visitors to sites of hazardous operations or environments comply with any required special precautions for that site.
- c. Maintain inventories of hazardous materials for all areas where such materials are used or stored.
- d. Material Safety Data Sheets (MSDSs) and other hazardous chemical references, as appropriate, must be readily available for all hazardous chemicals on the work site inventory.

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e. Appropriately label all chemical containers.

(1) Supervisors ensure that employees label all secondary containers (i.e., beakers, flasks, bottles, safety cans, etc.) if the substance is to be kept in the container past the immediate work shift or if the container will leave the immediate work area.

(2) Labels must include complete hazard warnings as listed on the manufacturers' labels, if taken out of the immediate work area.

(3) Chemical formulas or nonspecific names, such as "Mixture A" are not acceptable identifiers. Label all innocuous substances to avoid confusion.

f. All personnel working with hazardous chemicals receive hazard training.

(1) Hazard training is as chemically specific as possible.

(2) If work procedures involve various chemicals of similar hazard (i.e. flammable solvents), then general safety training applicable to these chemicals may be given.

(3) The training addresses chemicals with unique hazards.

8.5 Responsibilities

a. **Safety and Occupational Health Program Manager (SOHPM)**

(1) Develop NARA-wide HAZCOM Program policy and guidance.

(2) Provide technical advice and guidance to NARA facility managers in development of a facility-specific HAZCOM Program.

(3) Maintain a master inventory of all hazardous materials and chemicals contained in NARA facilities. The facility manager submits the facility inventory annually to the SOHPM.

(4) Evaluate NARA facility HAZCOM Program effectiveness and make recommendations for improvements during security and safety evaluations.

(5) Assist facility managers in the development of tools to facilitate organizational completion and updating of chemical and hazardous material inventories.

b. **Facility Managers or Designees**

(1) Review facility chemical inventories during facility inspections and evaluations.

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- (2) Assist management, Environmental Program Coordinators (EPC), and Chemical Hygiene Officers (CHO) in the development of HAZCOM Programs, and tools to simplify organizational completion and updating of chemical and hazardous inventories during safety evaluations and inspections.
- (3) Annually provide the SOHPM with a copy of the facility's master copy of the HAZCOM Program, including an up-to-date list of hazardous chemicals and material safety data sheets (MSDSs).
- (4) Maintain a master copy of the facility's HAZCOM program including hazardous material inventory, MSDSs and other hazardous material references.
- (5) Coordinate, conduct, and document employee training.
- (6) Maintain a list of restricted chemicals (e.g. Chemicals not allowed in the facility). The chemical restriction may be waived by the facility manager on a case by case basis.
- (7) Evaluate the effectiveness and regulatory compliance of all HAZCOM programs in the facility.
- (8) Establish procedures for controlling the procurement of chemicals to prevent excess stockpiles, and to identify and dispose of expired materials.

c. Supervisors

- (1) Establish and implement a written HAZCOM Program at all work areas within their jurisdiction in accordance with applicable OSHA and NARA requirements. A template may be found with OSHA Publication 3186 "Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards" located at this link: <http://www.osha.gov/Publications/osh3186.html>.
- (2) Maintain an accurate and current hazardous materials inventory, for areas under their jurisdiction, by identifying and monitoring expiration dates of chemicals. At a minimum, the inventory must include the chemical name, chemical quantity/unit of measurement, location (building and room), chemical hazard classification, and the custodian name/telephone number. Notate discontinued chemicals "Discontinued" on the list. Maintain the list of discontinued items. (See para. 8.7.)
- (3) Ensure that MSDSs are readily available (accessible during all shifts without having to ask a supervisor) to employees and establish a central hazardous chemical reference library containing MSDSs and other hazardous chemical reference materials to allow employees timely emergency and non-emergency access.

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- (4) Monitor procurement to ensure excess or duplicate chemical orders are prevented.
- (5) Request an MSDS whenever a new hazardous material is ordered.
- (6) Maintain a list of restricted chemicals (e.g., Chemicals not allowed in the facility) to be purchased only with the approval of facility management.
- (7) Review a list of any chemicals restricted from use in the NARA facility, prior to procurement, by the facility manager.
- (8) Periodically monitor employee compliance with HAZCOM Program requirements.
- (9) Provide employees initial HAZCOM program training and additional training when new physical or health hazards are introduced into their work area.
- (10) Provide HAZCOM Program refresher training every three years, to employees who handle or come in contact with hazardous chemicals in the workplace. Information and training may be designed to cover categories of hazards (e.g., flammability, toxicity) or specific chemicals. Chemical-specific information must always be available through labels and MSDSs.

d. Employees or Contractors

- (1) Participate in all training and follow all safety and health instructions, standard operating procedures, and personal protective equipment requirements.
- (2) Immediately report any hazardous conditions, exposures, or unusual circumstances to supervisor(s).
- (3) Forward a copy of MSDSs for each hazardous material received into the workplace to the facility manager and maintain on file.
- (4) Plan and conduct all operations involving hazardous material in accordance with established policies or procedures (e.g., Job Hazard Analysis [JHA] guidance).
- (5) Review MSDSs or other hazard information sources as needed to maintain knowledge of hazards and precautions.

e. Contracting Officer's Representatives (CORs)/Contracting Officer's Technical Representatives (COTRs)

- (1) Inform contractor personnel of known work site hazards (chemicals, asbestos, etc.).

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(2) Monitor contractor enforcement and maintenance of the HAZCOM Program for compliance with OSHA standards.

(3) Establish provisions within the contract requiring the contractor to provide MSDSs to the facility manager for hazardous materials brought on to NARA property by the contractor. Ensure that MSDSs are provided before work commencement.

8.6 Additional Resources

- a. OSHA Publication # 3111 (2000) “Hazard Communication Guidelines for Compliance” (<http://www.osha.gov/Publications/osh3111.pdf>);
- b. OSHA Publication # 3186 (2003) “Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards” (<http://www.osha.gov/Publications/osh3186.pdf>);
- c. Chemical Hazard Communication (OSHA), (<http://www.osha.gov/Publications/osh3186.pdf>);
- d. Exposure Limits for Air Contaminants, (http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9991); and
- e. Select Carcinogen List, (<http://www.cdc.gov/niosh/npotocca.html>).

8.7 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 9
MOTOR VEHICLE SAFETY**

9.1 Purpose

To specify the minimum NARA SOH Program requirements for the safe operation of government owned, leased, and operated motor vehicles. Only qualified and authorized persons are authorized to operate motor vehicles.

9.2 References

- a. Section 211(j) of the Federal Property and Administrative Services Act of 1949 as amended [68 Stat. 1128];
- b. 40 U.S.C. “Public Buildings, Property, and Works” Subtitle I “Federal Property and Administrative Services, Chapter 5, Subchapter VI, “Motor Vehicle Pools and Transportation System, Section 606 “Regulation Related to Operations”;
- c. Executive Order 13043 of the April 16, 1997, “Increase Seat Belt Use in the United States”;
- d. 49 CFR Part 383, Commercial Driver’s License Standards; Requirements and Penalties;
- e. NARA 703, Transportation and Messenger Services in the Washington, DC, Area
- f. NARA Directive 201 General Administration, Chapter 10 Facility Management, Part 8, Parking and Motor Pool Operations.
- g. Executive Order 13513 of October 1, 2009 “Federal Leadership On Reducing Text Messaging While Driving”

9.3 Scope

This chapter applies to any NARA employee or contractor who operates a motor vehicle in the performance of official duties. Motor vehicles include all vehicles owned or leased by NARA, rental and privately owned vehicles, and other vehicles, such as trucks, forklifts, and special purpose vehicles.

9.4 Motor Vehicle Safety Requirements

a. **Operating a Government, rental, or privately owned motor vehicle for NARA** - NARA personnel and contractors must:

(1) Possess valid state/international licenses for the class of vehicle being operated. NARA requires drivers who transport school-age children be licensed in accordance with regulations administered by the Federal Highway Administration and the States wherein the children are transported.

(2) Be at least 18 years old.

(3) Have their driving records validated by the state (international-licensed drivers exempted) and/or National Driver Register upon employment and whenever management deems it advisable to review. Employees may contact their State Motor Vehicles department or register online to obtain a copy of their driving record. Validation is delegated to local organizational managers and supervisors and may be re-delegated as deemed appropriate.

(4) Meet requirements stated in pars. (a) and (b) of this section if they infrequently operate sedans and other light motor vehicles. The requirement in par (c) of this section is also recommended, but at the Office Head's option.

(5) Notify their supervisor if their drivers' licenses are suspended, revoked, canceled, or they have been otherwise disqualified from holding licenses.

b. **NARA employees operating commercial vehicles**

(1) A commercial vehicle is any vehicle having a gross vehicle weight (GVW) rated greater than 26,000 pounds or towing a vehicle with a GVW rating of 10,000 pounds, or hauling hazardous material requiring a vehicle to display a Department of Transportation Hazardous Material placard, or a vehicle designed to transport 16 or more persons.

(2) NARA employees must:

(a) Possess an appropriate state commercial driver's license;

(b) Be at least 21 years of age; and

(c) Possess a valid medical examiners' certificate if required by the state where employed.

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c. Use of Seatbelts and Wireless Communication Devices

(1) All vehicle occupants of general and commercial vehicles must wear seatbelts while the vehicle is in motion for general and commercial vehicles.

(2) Use of wireless communication devices (e.g. Cell phones, Hands-free devices, GPS, and texting devices, etc.) in NARA vehicles (owned, leased or rented) is restricted as follows:

(a) The driver of a NARA vehicle must not use a wireless communication device while the vehicle is in motion. The driver must comply with all state and local laws governing the use of wireless communication devices. A passenger in a NARA vehicle may use wireless communication devices while the vehicle is in motion; but never allow them to distract the driver.

(b) When driving alone, pull to the side of the road to a safe location before using any wireless communication device.

(c) The NARA Inspector General may waive this specific requirement to support active criminal investigative efforts.

d. NARA employees operating vehicles that require specialized skills or knowledge (i.e. forklifts, 4x4 vehicles, or vehicles with greater than 1-ton capacity, or vehicles towing large equipment) must obtain their supervisor's approval before operating a vehicle and must possess the appropriate certification or license.

e. Equip all field vehicles used to transport cargo with a properly designed safety screen, installed between the passenger compartment and cargo area, and a securely mounted fire extinguisher easily accessible from inside the vehicle.

9.5 Responsibilities

a. SOHPM - Evaluates facility safety programs as part of NAS periodic security and safety inspections to assess the effectiveness of the facility motor vehicle safety program administration and implementation.

b. Facility Managers or Designees

(1) Develop the written facility Motor Vehicle Safety Program.

(2) Coordinate the scheduling and conduct of periodic evaluations of the facility to determine the effectiveness and degree of motor vehicle safety program administration and implementation. Evaluations will consider the overall program (i.e., employee training, vehicle maintenance, inspections, and licensing requirements).

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(3) Provide assistance to Assistant Regional Administrators, Assistant Library Directors, and others to determine training needs and implement motor vehicle safety program requirements.

(4) Report a summary of vehicle accidents to the SOHPM annually (January 1). To be included in the Annual Occupational Safety and Health Report, this will be submitted to the Secretary of Labor.

(5) Ensure that the responsible supervisor investigates each NARA vehicle accident and then take appropriate action to minimize the occurrence of future accidents.

(6) Ensure motor vehicles safety inspections are conducted by with the “Motor Vehicle Safety Inspection Checklist” NA Form 6056 and deficiencies are corrected before returning the vehicle to an operational status.

(7) Inspect motor vehicles in order to maintain in a safe, operable condition.

(8) Ensure that appropriate safety features (e.g.s, seat belts, spare tire, jack etc.) are included in purchase orders and lease agreements for non-General Services Administration vehicles.

c. Supervisors and CORs/COTRs

(1) Assure that personnel have valid State drivers’ licenses for the class vehicle to be operated and have completed NA Form 7004 (Vehicle Requisition).

(2) Use the NA Form 6056 to inspect and maintain all vehicles. Vehicles with defects or deficiencies affecting occupant safety must be taken out of service until repaired.

(3) Investigate the motor vehicle accident.

(4) For General Services Administration (GSA) leased vehicles: Report the accident to the NARA National Fleet Manager (NAFM) and library director or regional administrator immediately, and then to the local facility manager or designee, and GSA Accident Management Center within five business days. Report accidents involving fatalities within 24 hours following the procedures in Chapter 4 of this Handbook.

(5) For Commercially leased vehicles:

(a) Notify the lessee, following any accident reporting instructions provided.

(b) Report the accident to the local facility manager or designee within five business days. Report accidents involving fatalities within 24 hours following the

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procedures in Chapter 4 of this Handbook.

(6) For privately owned vehicles, ensure that the accident is reported to the library director or regional administrator immediately, and to the local facility manager or designee, within five business days. Report accidents involving fatalities within 24 hours following the procedures in Chapter 4 of this Handbook.

d. Employees or Contractors

(1) Follow the driving laws and rules of the road for the state in which they are driving.

(2) Notify their supervisors if their drivers' licenses have been suspended, revoked, canceled, or if they have been convicted of any moving traffic violation that affects their driving status.

(3) Must wear seatbelts when operating government-owned, leased or privately owned vehicles when on government business.

(4) Walk around the vehicle to identify obstacles that may be hidden from view when seated behind the steering wheel when backing maneuvers are necessary.

(5) Use windshield wipers and headlights when weather conditions warrant.

(6) Perform and document routine checks of vehicle safety components (i.e., tires, windshield wipers, headlights, taillights, turn signals, mirrors, etc.).

(7) Secure all weights, compressed gas cylinders, and other heavy or large items in the vehicle. Transport gasoline and other hazardous materials in approved containers and secure to prevent movement.

(8) Immediately report all vehicle defects to the responsible supervisor.

(9) Complete applicable initial and defensive driving training as appropriate for the vehicle type to be operated.

(10) Immediately report to their supervisor all accidents involving NARA, GSA, privately owned, commercially leased vehicles, or motorized equipment (i.e. fork lifts) used for official business.

(11) Complete and submit all required accident documentation including police reports, witness statements, form SF 91 "Motor Vehicle Accident Report" (for GSA-leased vehicles) to your supervisor within five business days, and include any documentation required by the vehicle lessee (for commercially leased vehicles).

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e. **CORs/COTRs** - Ensure contractor compliance with requirements of this chapter when NARA arranges to have a contractor perform work that involves motor vehicle operation.

9.6 Additional Resources

- a. National Highway Traffic Safety Administration (NHTSA), (www.nhtsa.dot.gov/);
- b. Motor Vehicle Safety (OSHA) (<http://www.osha.gov/SLTC/motorvehiclesafety/standards.html>);
- c. Traffic Safety Digest (<http://www.nhtsa.dot.gov/PEOPLE/outreach/safedige/>);
- d. NHTSA Regional Offices (<http://www.nhtsa.gov/nhtsa/whatis/regions/>);
- e. GSA Accident Management Center (www.GSA.gov/accident); and
- f. Reasonable Accommodation (http://www.nara-at-work.gov/nara_policies_and_guidance/directives/0300_series/nara303.html).
- g. Executive Order 13513 of October 1, 2009 “[Federal Leadership On Reducing Text Messaging While Driving](#)”
- h. ["GSA Defensive Driver Training online course"](#)

9.7 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 10

RESPIRATORY PROTECTION PROGRAM

10.1 Purpose

To specify the minimum SOH Program requirements for providing personnel adequate protection from chemical, physical and biological stressors, such as chemical exposures, dusts, mists, and vapors within NARA.

10.2 References

- a. 29 CFR 1910.134, Respiratory Protection;
- b. 42 CFR, Part 84, Respiratory Protection Devices;
- c. 29 CFR 1926, subpart D, Occupational health and environmental controls;
- d. 29 CR 1926, subpart Z, Toxic and hazardous substances; and
- e. 29 CFR 1910, subpart Z, Toxic and hazardous substances.

10.3 Scope

This program outlines minimum requirements for acceptable Respiratory Protection Programs (RPPs) within NARA. These requirements apply to all NARA personnel whose job duties involve the use of respiratory protection devices and who work in an environment with potential exposure to respiratory hazards.

10.4 Respiratory Protection Program Requirements

- a. Use OSHA Permissible Exposure Limits (PELs) found in 29 CFR 1910.1000 (www.OSHA.gov) or American Conference of Governmental Industrial Hygienists (ACGIH) Threshold Limit Values (TLV's) (www.ACGIH.org) as the primary baseline for determining hazardous airborne concentrations of toxic materials. Where conflict exists between OSHA PELs, and ACGIH TLV's, the more stringent requirement should apply.
- b. NARA uses the services of a Certified Industrial Hygienist (CIH) in complying with the OSHA standards referenced in this chapter.
- c. A CIH conducts all exposure evaluations, respirator selections, and fit testing at NARA.

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d. NARA policy mandates evaluating all potential health hazards in the workplace and controls them using appropriate means whenever a hazard is encountered. Use engineering controls as the primary means to prevent exposure to hazards. Administrative controls and personal protective equipment will supplement engineering controls as appropriate.

e. NARA provides a written respiratory protection program (RPP) for personnel who are exposed to potentially harmful gases, vapors, and particulates in accordance 29 CFR 1910.143(c).

f. Use engineering controls or changes in methods or process to the greatest extent possible to either eliminate or reduce respiratory hazards to acceptable levels. Respiratory protection is an alternative to engineering controls only in the following situations:

(1) When engineering controls are not possible or practical (i.e., short term, non-routine, or remote site operations).

(2) When development or installation of engineering controls is pending.

g. Implement RPPs in accordance with 29 CFR 1910.134(C)(1) to provide personnel with respiratory protection when the status of engineering controls to control respiratory hazards is unknown, while engineering controls are being instituted, or when engineering controls are not feasible. Unlike engineering controls, respirators do not eliminate a hazard. If the respiratory equipment is not used or is used improperly (equipment does not fit or is damaged), exposure to the hazard would likely occur.

(1) Written RPPs are not required for voluntary use of disposable type dust masks if a hazard assessment is performed to determine these type respirators are acceptable for the task and do not create a hazard in themselves.

(2) Only allow approved respiratory protection devices and components. Permitted respiratory devices and components are only those certified as NIOSH approved.

(3) Never use single use, disposable, or maintenance-free respirators in place of elastomeric face piece type respirators designed to accept replaceable cartridges.

(4) Respirator selection and use in atmospheres that are of either unknown hazard or known to be Immediately Dangerous to Life and Health (IDLH) must comply with 29 CFR 1910.134(d)(2) and (g)(3).

(5) All fit testing must be in accordance with the OSHA-approved protocols found in 29 CFR 1910.134, Appendix A. Respirators worn on a voluntary basis do not require fit testing. If the respirator will be worn with any additional equipment (e.g., corrective glasses, goggles, face shields, helmets, etc.) that could potentially compromise face piece seal, then perform respirator fit testing with this equipment in place to ensure that an adequate fit is obtained.

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(6) An employee must successfully pass fit testing before the appropriate official can issue the employee a respirator or assign the employee to a task requiring the use of respiratory protection. In order to ensure continued proper fit and face piece seal, successfully complete qualitative fit testing on an annual basis unless a specific OSHA standard requires more frequent fit-testing (e.g., the asbestos, lead, arsenic, and acrylonitrile, standards require testing every six months). Personnel performing fit-testing must receive appropriate training. Use only validated qualitative fit-test protocols. Several examples of acceptable protocols may be found in the current OSHA 29 CFR Subpart Z standards for toxic and hazardous substances (e.g., 1910.1001, Appendix C, and 1910.1025, Appendix D detail procedures for a variety of qualitative fit tests).

(7) Perform pre-use checks before each use of the respirator to ensure an adequate seal is achieved as described in 29 CFR 1910.134, Appendix B-1.

(8) Maintenance, care, and inspection of respirators must be in accordance with 29 CFR 1910.134(h) and Appendix B-2, or procedures recommended by the manufacturer provided they are of equal effectiveness. For hygiene purposes, assign respirators to individual approved employees for personal use only; do not share respirators. For disinfecting activities to eliminate the hantavirus or histoplasmosis fungus, **always move away from a potentially contaminated area and into a clean area before removing respirator.**

(9) Breathing air quality and use for supplied air respirators must be in accordance with 29 CFR 1910.134(i). In addition, compressor systems used for supplying breathing air must be of a type specifically designed for this purpose.

(10) The employee inspects the device to ensure that all National Institute of Occupational Safety and Health (NIOSH) approvals, color codes, and markings on respiratory protection devices are legible in accordance with 29 CFR 1910.134(j). If color coding or other labeling becomes illegible, the device must be destroyed and replaced with appropriate equipment.

(11) The facility manager conducts periodic RPP evaluations in accordance with 29 CFR 1910.134(l), as necessary to ensure effective implementation. In addition, operations in which respirators are being used voluntarily should receive periodic evaluation to ensure that these operations have not altered or increased in hazard to a level that would make respirator use mandatory.

10.5 Responsibilities

a. Safety and Occupational Health Program Manager (SOHPM)

(1) Provides technical assistance and guidance to facility managers on respiratory protection issues, air monitoring, exposure assessment, and program requirements.

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(2) Establishes and tracks NARA's industrial hygiene contracts for air monitoring, as needed.

(3) Assesses the effectiveness of NARA RPP policy annually and modifies procedures and requirements, as necessary.

(4) Evaluates NARA facility RPPs during security and safety inspections including the annual facility safety program self assessments produced by the facility manager.

(5) Keeps abreast of the current technology in respiratory protection and ensures that resources are available to assist facilities in RPP administration and implementation.

b. Facility Managers or designees

(1) Evaluate the effectiveness of the local program by conducting the annual facility safety program self assessment. The assessment should address the following topics and include information compiled during the course of the year to help determine if the program has been effective or if changes are needed:

(a) Numbers of individuals who used their respirators during the year, and their job classifications.

(b) Types of respirators and elements used during each incident, activity, and operation.

(c) Reviews and documentation of JHAs (See Chapter 7 of this Handbook for details on JHAs) to update them.

(d) Maintenance and care of respirators.

(e) Effectiveness of training. See paras. 10.5 c (4).

(f) Records and documentation (e.g., medical evaluations [dates and clearance statements] and qualitative fit tests).

(2) Assist supervisors and CORs/COTRs in arranging for or conducting appropriate respirator training.

(3) Assist local safety and health committees (LSHCs) in addressing respiratory protection safety concerns, upon request.

(4) Keep abreast of the latest technology of respiratory protection.

(5) Establish and monitor facility industrial hygiene contracts for air monitoring, as applicable, in coordination with the SOHPM.

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(6) Provide technical assistance and review JHAs, air monitoring results, and RPPs, for adequacy and compliance with OSHA Standard 29 CFR 1910.134 and this Handbook..

(7) Develop and update RPPs as necessary for all operations in which respiratory protection is used and communicate RPP to organizational employees.

(8) Prepare and update, as needed, standard operating procedures.

(9) Assist supervisors in implementing RPPs, respirator selection, coordinating fit testing, medical exams, and maintenance of associated RPP records.

(10) Assist supervisors in the coordination of information and annual training on the correct use and maintenance of respirators.

(11) Coordinate air monitoring, exposure assessments, and any technical issues with the SOHPM as applicable.

c. Supervisors and CORs/COTRs

(1) Identify and evaluate hazards under their control and bring them to the direct attention of the facility manager when assistance is needed for abatement.

(2) Consider engineering controls such as contaminant isolation or enclosure, substitution of less or nontoxic materials, or exhaust ventilation in place of respiratory protection where feasible.

(3) Implement RPPs as necessary for all operations in which respiratory protection is used.

(4) Provide personnel fit testing, training and awareness in use, maintenance, inspection, and limitations of the specific type(s) of respiratory protection assigned for use.

(5) Coordinate employee qualitative fit tests of half-face or full-face respirators annually or when changes in the users' physical conditions that could affect respirator fit are reported or observed.

(6) Provide information and annual training on the correct use and maintenance of respirators.

(7) Ensure personnel are not assigned tasks requiring respiratory protection until all requirements of this chapter are met with. If an employee refuses medical surveillance do not assign the employee to tasks requiring respiratory protection.

(8) Monitor personnel compliance with established RPPs and take corrective action where appropriate.

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(9) Identify and evaluate tasks that have potential to create a respiratory hazard using JHAs, as described in Chapter 7 of this Handbook. Use this evaluation to identify tasks that may potentially expose personnel to respiratory hazards and to recommend the appropriate types and quantities of respirators needed.

(10) Provide personnel with initial and any follow-up medical evaluation with a qualified physician or other licensed health care professional whenever respirators are in use.

(11) Report positive evidence of exposure to the facility manager, and follow up with appropriate work area surveillance.

(12) Provide personnel with proper training and protection with the appropriate respirator and cartridges. Make respirator selection in consultation with a CIH or the SOHPM.

(13) Coordinate to assure all NARA contractors establish a respiratory protection program in compliance with OSHA 29 CFR 1910.134.

d. **Certified Industrial Hygienist (CIH)**

(1) Conducts all exposure evaluations, respirator selections, and fit testing at NARA.

(2) Selects respirators based on their evaluation of the respiratory hazard(s) present and in accordance with 29 CFR 1910.134(d). Use the OSHA “Respiratory Protection E-tool” (<http://www.osha.gov/SLTC/etools/respiratory/index.html>) to meet this requirement.

(3) Provides air monitoring or quantitative exposure estimates to assess levels of airborne contaminants in accordance with OSHA PELs found in 29 CFR 1910.1000, National Institute of Occupational Safety and Health (NIOSH) Recommended Exposure Limits (RELs), or ACGIHs.

(4) Uses TLVs as the primary baseline to determine hazardous airborne concentrations of toxic materials. Where conflicts exist between the various exposure limits, the more stringent limit must apply. In addition, follow this policy if respirators are worn for protection from exposure to other respiratory hazards that are encountered occasionally but have not been determined to exceed established exposure limits. These occasionally encountered respiratory hazards may include exposure to organic vapors from paints and solvents, vapors from concentrated hydrochloric acid used to prepare dilute solutions for water-quality equipment rinses, metal oxide fumes from welding and metal cutting procedures, and chemical vapors from bleach solutions used for disinfection.

(5) Selects the air-purifying elements based on the nature of the respiratory hazard, in accordance with 29 CFR 1910.134(d). Air-purifying elements provide protection against specific substances or groups and classes of contaminants. It is imperative to identify the contaminant(s) in order to select the proper air-purifying element.

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(6) Performs fit testing of tight fitting face piece respirators as required by 29 CFR 1910.134(f). Before requiring an employee to use a tight fitting face piece respirator, successfully perform a fit test with the same make, model, and size respirator to be used.

(7) Performs a qualitative fit-test (does not apply to hooded respirators operated with adequate positive pressure).

(8) Provides initial training before any personnel are required to wear a respirator. Training must cover at minimum the topics listed in 29 CFR 1910.134(k)(1).

(9) Provides retraining at least annually or more often as described in 29 CFR 1910.134(k)(5). Provide personnel who wear respirators on a voluntary basis with the information contained in 29 CFR 1910.134, Appendix D, at a minimum.

e. All Personnel (Employees/Contractors) Exposed to Hazards

(1) Participate in all training and follow all safety and health instruction and SOPs and personal protective equipment requirements.

(2) Report any hazardous conditions, exposures, or unusual circumstances to supervisors.

(3) Participate in medical surveillance and meet all physical requirements before respirator use to include maintaining clean shaven skin to ensure the best fit and seal where the respirator face piece contacts the face. See chapter 13 par 13.6b (5) regarding the medical monitoring protection program.

(4) Properly maintain and care for individually issued respirators as outlined in the RPP and manufacturer instructions and document use and maintenance checks.

(5) Inspect individually issued respirators before each use; clean, disinfect, and inspect after each use for damage; and report any respirator damage immediately to immediate supervisor.

(6) Participate in formal qualitative or quantitative fit testing and perform a fit check of the respirator before each use, in accordance with established SOP's, manufacturer recommendations, and training instructions. Ensure that the respirator is equipped with the proper air-purifying elements.

(7) Participate in respiratory training and be knowledgeable in nature of the hazards present in the workplace and in the selection of the appropriate respiratory protection for the task. Users must ensure the ambient atmospheric oxygen content of the work environment is at least 19.5 percent by volume.

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(8) Wear and use respirator(s) as required by this program and only the model(s) for which they have been fit tested when conditions warrant and per manufacturer instructions for operation. Become familiar with the respirator in an uncontaminated atmosphere. Any employee who has reservations about wearing a respirator should discuss this with the supervisor or the program coordinator before work at a potentially contaminated site begins.

10.6 Additional Resources

- a. Respiratory Protection OSHA 3079 (2000),
<http://www.osha.gov/Publications/osh3079.pdf> ;
- b. DHHS (NIOSH) Pub. No. 96-101, Guide to the Selection and Use of Particulate Respirators Certified under 42 CFR 84 <http://www.cdc.gov/Niosh/userguid.html> ;
- c. DHHS (NIOSH) Pub. No. 87-116, NIOSH Guide to Industrial Respiratory Protection, <http://www.cdc.gov/niosh/87-116.html> ;
- d. OSHA Interpretations on Respiratory Protection,
http://www.osha.gov/pls/oshaweb/owasrch.search_form?p_doc_type=INTERPRETATIONS&p_toc_level=3&p_keyvalue=1910.134&p_status=CURRENT ;
- e. Respiratory Selection Guide NIOSH Pub No. 87-108, NIOSH Respirator Decision Logic, <http://www.cdc.gov/niosh/docs/87-108/> ;
- f. ANSI Z88.2-1992, Standard for Respiratory Protection, <http://webstore.ansi.org/> ;
and
- g. OSHA Respiratory Protection eTool,
<http://www.osha.gov/SLTC/etools/respiratory/index.html> .

10.7 Records Management

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**CHAPTER 11
HEARING CONSERVATION PROGRAM (HCP)**

11.1 Purpose

To specify the minimum SOH Program requirements for providing personnel adequate protection from noise hazards within NARA.

11.2 References

- a. 29 CFR 1910.95, Occupational Noise Exposure;
- b. 29 CFR 1910.95 Appendix A-I, Occupational noise exposure;
and
- c. OSHA Publication 3074, Hearing Conservation 2002.

11.3 Scope

This section covers all NARA employees who are exposed to hazardous noise levels. This chapter supplements those requirements established in 29 CFR 1910.95.

11.4 Requirements of the HCP

- a. Hazardous noise level threshold
 - (1) NARA provides all personnel who are intermittently exposed to hazardous noise (85dBA or greater) with hearing protection devices.
 - (2) ARA includes all employees whose 8-hour time weighted average (TWA) exposure exceeds 85 decibels weighted on an “A” scale (dBA) or impact noise exceeding 140 dBA in a written Hearing Conservation Program (HCP) in accordance 29 CFR 1910.95. Equipment and locations within NARA that typically exceed 85 dBA include: generators, most heavy equipment (tractors, backhoes/loaders), lawn and garden equipment (mowers, weed eaters, chainsaws, wood chippers, leaf blowers), cranes and drag lines, air compressors, mechanical rooms, heating, ventilation, and air conditioning (HVAC) systems, pneumatic tools, handheld power tools, and metal or wood working machinery.
- b. Engineering controls - NARA uses engineering controls as the primary means to prevent exposure to hazards. Administrative controls and personal protective equipment (i.e., ear plugs, ear muffs, etc.) will supplement engineering controls.
- c. Audiometric testing - NARA provides an audiometric testing program in accordance with 29 CFR 1910.95(g) for all employees who work in areas or conduct activities where noise exposure cannot be reduced below an 8-hour TWA of 85 dBA.

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d. Noise surveys and monitoring

(1) NARA performs surveys of suspected noise hazardous areas. Post signs at the entrance to any work area or on any piece of equipment that exposes personnel to 85 dBA. Make hearing protection devices available to all personnel who must enter areas or work with equipment where noise levels exceed 85 dBA steady state or 140 dBA impact.

(2) NARA conducts noise monitoring in accordance with 29 CFR 1910.95(d) for personnel whose job duties routinely expose them to noise hazardous equipment, or where a job hazard analysis (see Chapter 7 in this Handbook for JHA procedures) otherwise indicates employee exposure may equal or exceed an 8-hour TWA of 85 dBA.

(3) NARA conducts baseline medical evaluations for all employees assigned to work in noise hazard areas.

11.5 Responsibilities

a. SOHPM

(1) Provides guidance to facility managers on implementation of the HCP to ensure compliance with NARA standards.

(2) Evaluates the HCP at NARA facilities during periodic security and safety inspections.

b. Facility managers or designees

(1) Develop a written HCP consistent with 29 CFR 1910.95 and this chapter's requirements; and ensure it is implemented for personnel working in environments where noise levels exceed 85 dBA.

(2) Conducts periodic evaluations of NARA facilities to determine the effectiveness of the HCP administration and implementation.

(3) Coordinates with supervisors and a Certified Industrial Hygienist (CIH) to determine the HCP training needs of employees and ensure affected employees are provided training.

(4) Coordinate noise surveys and monitoring with the supervisor, and employees.

(5) Assist supervisors in evaluating hearing protection devices to ensure proper noise attenuation is achieved.

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(6) Coordinate with supervisor to identify all affected personnel for inclusion in an audiometric testing program in areas and occupations where noise exposure cannot be reduced below an 8-hour TWA of 85 dBA.

(7) Ensure employees who work in areas or operate equipment-producing noise in excess of 85 dBA are provided appropriate hearing protection devices.

c. Local Safety and Health Committees (LSHCs)

(1) Assist supervisors in providing employee awareness of hearing protection requirements as detailed within the scope of this chapter.

(2) Assist the facility manager in the development of a written facility HCP.

(3) Monitor the effectiveness and implementation of the facility HCP in conjunction with annual safety program self-evaluation/facility inspection.

d. Supervisors

(1) Ensure compliance with the facility HCP by employees working in environments where noise levels exceed 85 dBA.

(2) Perform a JHA (see chapter 7 of this handbook) to assess operations or equipment that may result in noise exposure in excess of 85 dBA.

(3) Arrange for noise exposure monitoring when a JHA has identified potential hazardous noise exposure in coordination with the facility manager.

(4) Make every effort to reduce noise levels via engineering control(s) when noise monitoring establishes noise levels exceeding 85 dBA for an 8-hour TWA or impact noise exceeds 140 dBA.

(5) In the area or on equipment producing the noise prominently post warning signs that indicate that there are excessive noise hazards and that hearing protection is required if noise levels cannot be reduced below 85 dBA.

(6) Coordinate with the facility manager to ensure all affected employees are included in an audiometric testing program in areas and occupations where noise exposure cannot be reduced below an 8-hour TWA of 85 dBA.

(7) Provide personnel who work in areas or operate equipment-producing noise in excess of 85 dBA appropriate hearing protection devices and ensure they are provided hearing protection training.

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e. **Employees or Contractors**

- (1) Wear hearing protection devices when using equipment or in areas determined to have noise in excess of 85 dBA.
- (2) Attend training on how to wear the device selected, including proper fitting, proper cleaning, and recognizing when the device is no longer effective.
- (3) Participate in medical surveillance to include audiometric testing if exposed to excessive levels of noise.
- (4) Participate in all training and follow all safety/health instruction and standard operating procedures and personal protective equipment requirements.
- (5) Report any hazardous conditions, exposures, or unusual circumstances to supervisor(s).

f. **Contracting Officer Representatives (CORs)/Contracting Officer's Technical Representatives (COTR's)** - When a contractor performs work involving the potential for noise exposure above 85 dBA, the COTR must monitor contractor compliance with OSHA hearing protection requirements.

11.6 Additional Resources

- a. OSHA's Noise and Hearing Conservation Information page (<http://www.osha.gov/SLTC/noisehearingconservation/index.html>) ;
- b. OSHA Publication 3074, (2002), (<http://www.osha.gov/Publications/osha3074.pdf>) ;
- c. NIOSH Hearing Conservation Information Page (<http://www.cdc.gov/niosh/topics/noise/>) ;
- d. NIOSH Hearing Conservation Program Evaluation Checklist (<http://www.cdc.gov/niosh/topics/noise/workplacesolutions/hearingchecklist.html>) ;
- e. OSHA Hearing Conservation Technical Manual Etool (<http://www.osha.gov/dts/osta/otm/noise/index.html>) ; and
- f. OSHA Training Institute (<https://learninglink.dol.gov/dol/user/portal.do?siteID=Private+Sector>). Enter the course name in the search field.

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11.7 Records Management

The records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 12 LABORATORY PROTECTION PROGRAM

12.1 Purpose

To specify the minimum SOH Program requirements for providing personnel who work in laboratory environments adequate protection from chemical, physical, and biological stressors, such as noise, chemical exposures, excessive temperatures, dusts, mists, and vapors within NARA.

12.2 References

- a. 29 CFR 1910.1450, Occupational Exposures to Hazardous Chemicals in Laboratories;
- b. 29 CFR 1910.1450, Appendix A, National Research Council Recommendations Concerning Chemical Hygiene in Laboratories;
- c. 29 CFR 1910.1200, Hazard Communication;
- d. ANSI/ASHRAE Standard 110 “Method of Testing the Performance of Laboratory Fume Hoods”; and
- e. ANSI/ASHRAE Z9.5-2003 “Laboratory Ventilation.”

12.3 Scope

- a. This chapter applies to all NARA personnel with potential for on-the-job exposure to chemical and biological hazards in laboratory environments, and defines organizational responsibilities for laboratory start-up, transfer, and closure.
- b. The goal is to provide NARA personnel with a safe laboratory working environment by ensuring that laboratories are operated from start-up to closure in compliance with Federal, State, and local safety, health, and environmental regulations. Careful planning is the key to minimizing the potential hazards associated with laboratory work activities.
- c. Laboratory work activities include sampling and collection of samples, storage of bottles in a vehicle, transportation to the project office, processing bottles for shipment, receiving, preparing, analyzing, storing, and disposing of samples.
- d. Shops and other locations where hazardous materials are used in other than laboratory situations must comply with Hazard Communication (HAZCOM) requirements (Chapter 8).

12.4 Requirements of the Laboratory Protection Program

a. To protect NARA laboratory personnel and property, a written Chemical Hygiene Plan (CHP) is required for activities where multiple chemical procedures or small quantities of hazardous materials are used on a laboratory scale.

b. Provide laboratory personnel with chemical information and training in accordance with 29 CFR 1910.1450(f).

c. Provide laboratory personnel medical surveillance as required by 29 CFR 1910.1450(g).

d. Laboratory employees must handle and dispose of liquid and solid hazardous materials and waste in accordance with the transportation and handling procedures in the Department of Transportation (DOT) regulations (DOT 49 CFR #171-173), and the disposal and containment of hazardous materials and waste, in U.S. Environmental Protection Agency (USEPA) regulations (USEPA 40 CFR #261 and #262).

12.5 Responsibilities

a. SOHPM

(1) Evaluates the effectiveness of the NARA laboratory protection program annually and modifies procedures and requirements on NARA, as necessary.

(2) Conducts on-site facility laboratory protection program evaluations.

(3) Keeps abreast of current laboratory technology, provide technical assistance, and assists organizations in administration and implementation of the laboratory protection program.

b. Facility managers or designees

(1) Provide facility laboratory protection program guidance and oversight.

(2) Evaluate the effectiveness of the facility laboratory protection program annually and take actions to assist in program improvement/enhancement, as necessary.

(3) Provide assistance to laboratory supervisor in development of a written CHP.

(4) Evaluate CHP plans to include procedures for laboratory startup, modification and closure during on-site inspections and assessments.

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(5) Provide assistance to the Chemical Hygiene Officers (CHO's) in assessing start-ups, modifications, and closures of laboratories located at regional science program field facilities.

c. Chemical Hygiene Officers (CHO's) (NARA employees designated by Lab supervisors)

(1) Assist supervisors in the development of CHP's, and review annually for completeness and accuracy in accordance with 29 CFR 1910.1450 and the requirements of this chapter.

(2) Coordinate with supervisors and employees to assure an inventory of hazardous materials is maintained for all assigned laboratories.

(3) Coordinate and/or assist in conducting CHP employee training.

(4) Assist supervisors and employees in obtaining MSDS's and other hazardous chemical safety information.

(5) Review all laboratory accidents involving hazardous chemicals and recommend steps to prevent recurrence of similar accidents.

(6) Review procedures for procurement of lab chemicals ensuring they include approval requirements for ordering highly toxic or hazardous substances.

(7) Ensure that the performance of each hood has been evaluated and complies with ANSI/ASHRAE Standard 110 "Method of Testing the Performance of Laboratory Fume Hoods" and ANSI/ASHRAE Z9.5-2003 "Laboratory Ventilation." If periodic face velocity checks fall below recommended levels the hood shall not be used for work with toxic chemicals until corrective action is taken.

(8) Provide assistance to laboratory supervisors, as necessary, to assure implementation of CHP requirements.

d. Laboratory Supervisors

(1) Informs female personnel of childbearing age of reproductive hazards in the laboratory and refers pregnant employees for medical consultation.

(2) Develops and implements a written laboratory-specific CHP for each laboratory using hazardous materials. (See section 12.6 (k) for links to several CHP templates, recommended by OSHA, that can be tailored to specific needs of each laboratory.)

(3) Designate a CHO and provide appropriate training.

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- (4) Implement a laboratory protection program in accordance with OSHA, NARA requirements, and applicable safety consensus standards such as ANSI standards for all laboratory facilities within their jurisdiction.
- (5) Coordinate laboratory start-up, closure, or modification with CHO and facility manager as soon as possible but no less than 90 days before proposed action.
- (6) Accompany facility manager and CHO on periodic inspections of subject laboratory and take corrective action as required to abate identified deficiencies.
- (7) Oversee the development and implementation of a written CHP and standard operating procedures (SOP's) for all hazardous lab activities and review for appropriateness and update whenever laboratory operations change or at least annually.
- (8) Provide appropriate personal protective equipment (PPE) and mandate use by all personnel.
- (9) Maintain good housekeeping practices and verify that equipment such as safety showers, eyewashes, and ventilation systems are in good working order.
- (10) Provide laboratory personnel CHP training in accordance with this chapter.
- (11) Oversee the conduct of laboratory inspections and abatement of identified deficiencies in a timely manner.
- (12) Maintain an accurate chemical inventory for all laboratories.
- (13) Establish procedures for monitoring and disposing of chemicals with expiration dates.
- (14) Establish procedures for supervisory approval before personnel are allowed to work with highly toxic or hazardous materials.
- (15) Provide personnel access to medical surveillance as required.
- (16) Provide personnel with information and training for hazards of chemicals present in their work area. Provide such information must be provided at the time of personnel initial assignment to a work area where hazardous chemicals are present and before assignments involving new exposure situations with refresher training provided every three years.

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(17) Personnel initial and refresher training must include:

(a) methods and observations that may be used to detect the presence or release of a hazardous chemical (such as exposure monitoring conducted by the employer, continuous monitoring devices, visual appearance or odor of hazardous chemicals when being released, etc.);

(b) the physical and health hazards of chemicals in the work area; and

(c) the measures personnel can take to protect themselves from these hazards, including specific procedures NARA has implemented to protect employees from exposure to hazardous chemicals, such as appropriate work practices, emergency procedures, and protective equipment to be used; and applicable CHP details.

g. **Employees and Contractors**

(1) Female personnel of child bearing age, who work with reproductive hazards in the laboratory, must notify their supervisors as soon as a pregnancy is known and request a medical consultation.

(2) Properly store and label all chemical containers within the workplace.

(3) Practice good personal hygiene around hazardous materials such as washing hands after handling chemicals, using and maintaining the clean condition of required PPE, not smoking, and not consuming or storing food/drink in areas where hazardous materials are used or stored.

(4) Report to the line supervisor any hazardous conditions, exposures, or unusual circumstances associated with assigned operations.

(5) Provide input in the development of CHP's and SOP's and plan and conduct all laboratory operations in accordance with established guidelines.

(6) Participate in maintaining chemical inventories for their areas.

(7) Participate in related safety, health, and environmental training programs.

12.6 **Additional Resources**

a. Exposure Limits for Air Contaminants, 29 CFR 1910 subpart z,
http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_art_number=1910 ;

b. Chemical Glove Resistance Guide,
<http://www.pp.okstate.edu/ehs/HAZMAT/Gloves.htm> ;

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- c. Glove Chemical Resistance Guide (Ansell)
http://www.ansellpro.com/download/Ansell_7thEditionChemicalResistanceGuide.pdf ;
- d. Glove Chemical Resistance Guide (Best Manufacturing)
<http://www.bestglove.com/site/chemrest/> ;
- e. Glove Chemical Resistance and Barrier Guide (Safeskin)
<http://www.pacifica.com/NitrileGlovesChemicalResistance-BarrierGuide.pdf> ;
- f. Chemical Compatibility Chart (Guide),
<http://www.pp.okstate.edu/ehs/hazmat/labman/doc-pdf/appendixb.pdf> ;
- g. Material Safety Data Sheet Search,
<http://www.pp.okstate.edu/ehs/links/msds.htm> ;
- h. Chemical Reactivity Worksheet (NOAA) Terminology,
<http://response.restoration.noaa.gov/chemaids/react.html> ;
- i. Chemical Emergency Response Guidebook,
<http://hazmat.dot.gov/pubs/erg/gydebook.htm> ; and
- j. NIOSH Pocket Guide To Hazardous Chemicals,
<http://www.cdc.gov/niosh/npg/pdfs/2005-149.pdf> .
- k. There are numerous chemical hygiene plans available on the Internet. Most of these are from colleges, universities, state and Federal facilities. Examples include:

- (1) University of Vermont, 2001 Chemical Hygiene Plan
<http://esf.uvm.edu/uvmchp/index.html> .
- (2) University of Illinois at Urbana-Champaign, Model Chemical Hygiene Plan.
<http://www.ehs.uiuc.edu/css/guidesplans/chyp/index.aspx?tbID=gp> .
- (3) Oklahoma State University, Laboratory Safety Manual.
<http://www.pp.okstate.edu/ehs/hazmat/Labman.htm> .

12.7 Records Management

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**CHAPTER 13
MEDICAL MONITORING PROGRAM**

13.1 Purpose

This policy specifies the minimum SOH Program requirements to monitor the effectiveness of control measures (e.g., personal protective equipment, engineering controls) that protect employees from chemical, physical and/or biological stressors, such as noise, chemical exposures, excessive temperatures, dusts, mists, and vapors. The purpose of this service is to medically monitor employees, who, as part of their normal work activities, are exposed to hazardous agents or conditions, or have physically demanding work (Physical Stressor). Pre-placement, periodic, and termination medical exams are provided at no charge to these employees.

13.2 References

- a. Executive Order 12196, Occupational Safety and Health Programs for Federal Employees, February 26, 1980;
- b. 29 CFR 1910, Subpart H “Hazardous Materials”;
- c. 29 CFR 1910, Subpart I “Personal Protective Equipment”;
- d. 29 CFR 1910, Subpart Z “Toxic and Hazardous Substances”;
- e. 29 CFR 1910.1020, “Access to employee exposure and medical records”;
- f. 29 CFR 1910.1450 “Occupational exposure to hazardous chemicals in laboratories”;
- g. OSHA Publication #3162 (2002) “Screening and Surveillance - A Guide to OSHA standards” (<http://www.osha.gov/Publications/osh3162.pdf>); and
- h. Privacy Act of 1974 5 U.S.C. § 552a as amended.

13.3 Scope

- a. This chapter applies to NARA personnel whose duties may require occupational exposure to toxic chemicals, physical agents, biological hazards, or physical stressors above OSHA's Permissible Exposure Limits (PEL), OSHA Action Levels or, when OSHA standards are absent or less stringent American Conference of Governmental Industrial Hygienist's (ACGIH) Threshold Limit Values (TLV).

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- b. Contractor employees and volunteers must participate in medical monitoring when required by OSHA regulation.
- c. Some examples of NARA activities that may require medical monitoring (i.e., measuring employee exposure to hazards for the purpose of reducing the exposure) and surveillance (i.e., medical exams used for the purpose of catching potential illnesses caused from exposure before they become illness) are handling pesticides, inspections, confined space entry work, working in high noise environments, conducting chemical spill clean-up, and staff working with hazardous waste site activities.
- d. Volunteers under the age of 18 are not permitted to perform activities that require medical surveillance.

13.4 Program Requirements

NARA is required to implement the following actions:

- a. Provide medical surveillance for personnel who are exposed to chemical, physical, or biological stressors at concentrations exceeding the applicable OSHA Action Level.
- b. When contractor personnel will be working in environments requiring medical surveillance and monitoring, the NARA COR or supervisor must ensure that this is adequately addressed in the language of the contract.
- c. When volunteers will be working in environments requiring medical surveillance and monitoring, the Volunteer Coordinator must ensure that this is adequately addressed in the language of an agreement.
- d. When evaluating the need to provide medical monitoring services or to perform exposure monitoring for contractors or volunteers in order to comply with OSHA standards, facility managers may seek guidance from the NARA General Counsel (NGC).
- e. The written medical monitoring program must comply with current OSHA regulations, as a minimum.
- f. Conduct medical exams of personnel before employee assignment to the hazard area and perform exams consistent with guidelines in the OSHA regulations. (See par 13.2g.)
- g. Medical monitoring is mandatory and a condition of employment for any employee with an occupational exposure that exceeds or could have the potential to exceed regulatory standards based on the professional judgment of the safety and health professional making the assessment. (See par 13.2g.)

h. Participation in pre-placement exams with periodic follow-up based on these standards is a condition of employment. (See par 13.2g.)

i. Ensure that affected personnel participate in an appropriate medical surveillance program. A licensed physician or registered nurse under the supervision of a licensed physician conducts the medical surveillance in accordance with any required OSHA and NARA policies as specified in this handbook and in par 13.2.

13.5 Medical Exams and Medical Monitoring

a. **Periodic exams and medical monitoring** - Ongoing, periodic exams, when required by regulation, are necessary to ensure that individuals working in potentially hazardous jobs are being adequately protected from the hazards.

(1) Periodic exams will detect abnormalities in workers exposed to work-related health hazards early enough to prevent or limit disease progression by exposure modification or medical intervention.

(2) Certain OSHA standards have specific tests and exams (including special exams) that must be performed at regular intervals to monitor occupational exposures to hazardous agents or conditions (e.g., chemicals, respirable dust, asbestos, lead, and noise). OSHA Publication # 3162 “[Screening and Surveillance: A Guide to OSHA Standards](http://www.osha.gov/SLTC/medicalsurance/screening.html)”, found at <http://www.osha.gov/SLTC/medicalsurance/screening.html> is a list of the OSHA required and recommended exams and laboratory tests based on exposure and target organ for chemical exposures.

b. **Special Exams**

(1) **Bloodborne Pathogens** - Offer the Hepatitis B Series exam to employees that are potentially exposed to Bloodborne Pathogens (e.g., accidental contact with bodily fluids). The Hepatitis A exam may also be offered for employees working in polluted waters (e.g., contaminated sewer waste in a flooded facility) that may have the potential for exposure to HEP-A. During the exam, employees must read a short fact sheet on the benefits and risks of immunization. Those wishing to be immunized must sign a consent form. Those not wishing to be immunized must sign a declination form. Maintain either form in the employee medical record. The following forms are found at NARA@work: NA Form 6059 - Hepatitis B Vaccination Information, Consent, and Declination. Employees that experience a bloodborne pathogen exposure incident complete NA form 6060 - Exposure Incident Record for Bloodborne Pathogen Exposure. Healthcare professionals will complete NA form 6061 - Health Care Provider Report of Postexposure Evaluation.

(2) **Routine Immunizations** - Provide routine immunizations to employees as part of the employee wellness program as required for fieldwork and international travel. See CDC Immunization recommendations at <http://www.cdc.gov/vaccines/>. Employees should consult with the host nation or State Department concerning current immunization requirements for the country when traveling.

c. Termination exams

(1) Termination of employment physical exams - Conduct this exam whenever an individual enrolled in medical surveillance is transferred to another agency, is terminated, or retires. The purpose of this exam is to identify medical conditions that are related to an occupational exposure that may require future medical treatment for which the government may be responsible.

(2) Termination of exposure exams - Conduct this exam when an employee is no longer exposed to a particular hazard in the workplace. Exposures to specific hazards may cease when a worker is reassigned or when a process is changed.

13.6 Responsibilities

a. SOHPM

(1) Oversees the NARA medical monitoring protection program.

(2) Evaluates each NARA facility medical monitoring protection program during on-site visits.

(3) Assists facility managers in establishing medical monitoring contracts with health providers.

b. Facility Managers or Designees

(1) Develop a medical monitoring protection program and establish contractual services with health providers.

(2) Provide oversight for the facility medical monitoring protection program.

(3) Ensure that chemical, physical, and biological workplace exposures to workers in the facility are identified and evaluated by a Certified Industrial Hygienist.

(4) Coordinate study results and air sampling data to ensure abatement, as appropriate.

(5) Provide supporting data and hazard abatement recommendations for consideration on how to eliminate or minimize worker occupational exposures to chemical, physical, and biological hazards.

(6) Provide up-to-date guidance to Human Resources (NAH) staff and supervisors on medical surveillance requirements based on OSHA requirements.

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(7) Using the JHA (see chapter 7), develop a list of job types that require pre-placement and periodic physicals and provide the list to NAH and supervisors.

(8) Ensure that a Certified Industrial Hygienist (CIH) conducts surveys and investigations (medical monitoring) when occupational health surveillance exams identify abnormal physical results (related to their occupational exposures).

(9) Provide technical assistance to supervisors in implementing this policy.

(10) Provide guidance to supervisors upon request, in finding an Occupational Health Physician (OHP).

(11) Work with supervisors:

(a) to ensure appropriate sampling data are included in the personnel medical folder (SF 66D). (NOTE: For the purposes of this chapter, appropriate sampling data are information collected for compliance with specific OSHA regulations [e.g., audiograms, asbestos sampling data, etc.]).

(b) in applying or implementing engineering or administrative controls when workers are or may be occupationally exposed to chemical, physical, or biological hazards above established PEL or TLV.

(c) in the acquisition and proper use of personal protective equipment (PPE) when engineering or administrative controls are in the process of being implemented, are not feasible, or are not effective in protecting workers from occupational exposures to chemical, physical, or biological hazards.

c. Supervisors and Laboratory Supervisors

(1) Oversee development of JHAs for operations where chemical, physical, or biological hazards may affect NARA personnel. See Chapter 7 of this Handbook for procedures on JHAs.

(2) Identify personnel who require medical surveillance and provide the facility manager with the requirements necessary to develop a medical surveillance contract with a health provider (e.g., U.S. Public Health Service [USPHS] or Federal Occupational Health [FOH]).

d. Employees

(1) Complete any required forms and provide appropriate medical history to medical personnel performing the exam.

(2) Participate in any required testing and exams necessary to comply with OSHA regulatory requirements for medical monitoring when exposed to hazardous materials.

e. Human Resources (NAH)

(1) Notifies facility managers of new hires, terminations, or job re-assignments related to the list of positions involving regulated hazardous material exposures, provided by the facility manager.

(2) Maintains employee exposure and medical records.

f. Medical Personnel Contracted by NARA

(1) Conduct physical exams to determine fitness for duty and to monitor occupational exposures.

(2) Use workplace sampling to determine the appropriate type and frequency of medical surveillance for workers.

(3) Inform workers receiving occupational medical exams of any specific health risks that can result from their particular occupational exposures. Provide informal counseling concerning the methods to protect against particular occupational exposures.

(4) Provide a copy of the physical exam results to the employee and explain the implications of any abnormal tests.

13.7 Records management

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CHAPTER 14 RADIATION SAFETY

14.1 Purpose

To specify the minimum SOH Program requirements for protecting NARA employees and the public from adverse exposure to ionizing and non-ionizing radioactive sources. This Chapter complies with all applicable requirements established by a license issued by the Nuclear Regulatory Commission (NRC) and 10 CFR 20.

14.2 References

- a. Radiation Control for Health and Safety Act of 1968, as amended;
- b. Occupational Safety and Health Act of 1970, as amended;
- c. 10 CFR Part 20, Standards for protection against radiation; and
- d. 10 CFR Parts 0 - 199, Nuclear Regulatory Commission.

14.3 Program Requirements

NARA implements a Radiation Safety Program that includes the following requirements:

- a. Identify, evaluate, and control potential radiation hazards to employees, contractors, and the visiting public.
 - (1) Limit radiation doses in accordance with the standards in 10 CFR 20.1201.
 - (2) Adopt the policy that all radiation doses should be “as low as reasonably achievable” (ALARA). Make reasonable efforts to keep doses low in accordance with 10 CFR 20.
- b. Train personnel who are occupationally exposed to radiation (e.g. laboratory personnel, security x-ray baggage inspection operators, etc) in radiation hazards and proper use of radiation producing equipment or sources.
- c. Use methods, such as warning signs and barriers to prevent accidental exposures to harmful quantities of radiation. Laboratories and other areas where radioactive materials are used must be posted and containers labeled per 10 CFR 20 Subpart J, “Precautionary Procedures.”
- d. Appoint and assign responsibilities to a qualified Radiation Safety Officer at each applicable facility in accordance with 10 CFR 20.

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e. Develop and implement procedures for the distribution, use, and maintenance of employee-monitoring devices, such as film badges, pocket dosimeters, and pocket chambers. Dosimeters (personal monitoring devices) are required as applicable:

(1) For workers who may receive a radiation dose of 10 percent of the NRC limit within a 12 month period, as permitted under NRC regulations (10 CFR 20.1502).

(2) For employees who work directly with radioisotopes, x-ray producing devices, or who work in radiation areas.

(3) By local radiation procedures.

f. Develop and implement procedures for the disposition of radiation waste properly.

g. Handle emergencies as follows:

(1) The Radiation Safety Officer must investigate any dose of 10 percent or greater of the NRC limit received within any three month period to determine how the exposure was obtained and how future exposures can be avoided. (See Chapter 4, "Notifying, Investigating, and Reporting Serious Accidents, Accidents, and Incidents" in this Handbook for investigation procedures.)

(2) If a dose of 25 percent or greater of the NRC limit is received within any three month period, remove the employee from radiation work until the cause of exposure is identified and eliminated.

(3) In addition to meeting the reporting requirements of chapter 4 of this handbook, report overexposures and incidents in accordance with 10 CFR 20 Subpart M, "Reports." Submit the report in accordance with 10 CFR 20.2203 (d) and in accordance with applicable state and local regulatory requirements. Submit a copy immediately to the SOHPM.

(4) For any employee receiving radiation dosage levels exceeding the annual NRC limit, a physician experienced in radiation exposure, must perform a complete physical examination as soon as possible.

(5) Report any exposure to radiation greater than 10 percent of the NRC limit within any three month period on OSHA form 301 "Injury and Illness Incident Report" and log it on OSHA form 300 "Log of Work-Related Injuries and Illnesses" as appropriate, following the reporting procedures in Chapter 4 of this Handbook.

h. Implement the security procedures for ionizing and non-ionizing radiation producing equipment and sources.

i. Implement procedures for the safe transportation of radioactive materials.

- j. Use lockouts and tag-outs procedures to prevent unauthorized access to radiation sources. (See chapter 18.)
- k. Maintain mandatory records. (See par. 14.6.)
- l. Implement procedures for the storage and leak testing of radiation producing equipment and sources.
- m. Direct questions and program support related to radiation issues to the SOHPM or an Industrial Hygienist, or the local Radiation Safety Officer (RSO).

14.4 Responsibilities

a. SOHPM

- (1) Provides oversight of the radiation safety program and ensures the conduct of periodic radiation safety program evaluations to determine overall effectiveness.
- (2) Serves as primary technical subject matter expert within NARA in the development of plans and advising the facility managers.
- (3) Assists the facility managers in the development of the facility radiation safety program, recommends policy, and provides guidance as needed.
- (4) Performs periodic facility Radiation Safety site-specific program evaluations.
- (5) Reports program information, such as safety findings, recommendations, and program status reports to the NSHC and DASHO.
- (6) Documents all facility ionizing radiation safety training courses involving NARA personnel.
- (7) Maintains a copy of the annual facility self-assessment of radiation program elements and advises the facility manager on the abatement of identified deficiencies.
- (8) Reviews and evaluates NRC, FDA, and OSHA regulations for impact on NARA radiological operations, developing recommendations, and proposing alternatives for implementing compliance programs.

b. Facility managers or Designees

- (1) Establish a facility radiation safety program in accordance with the requirements of this chapter for operations producing ionizing radiation under their control.

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(2) Review and evaluate NRC, FDA, OSHA, state, and local regulations, for impact on NARA facility radiological operations, and develop recommendations and propose alternatives for implementing compliance programs.

(3) Obtain applicable state and local government licenses to operate radiation producing equipment and sources in the facility.

(4) Conduct the annual facility self-assessment of radiation program elements and provides a copy to the SOHPM.

(5) Investigate ionizing radiation accidents and incidents and recommend corrective action.

(6) Appoint and assign responsibilities to a qualified Radiation Safety Officer (RSO) in the facility.

(7) Develop plans, policies, and guidance to maintain a facility Radiation Safety Program involving ionizing radiation (with assistance from the RSO).

(8) Ensure compliance with NRC requirements for training and specified qualifications (with assistance from the RSO).

(9) Select suitable instructors for training of radiation workers, as needed (with assistance from the RSO).

c. **Radiation Safety Officers** - A Radiation Safety Officer (RSO) is a NARA employee designated by the facility manager that must have both education and work experience in ionizing radiation. An RSO must be designated for each NRC license possessed; NRC must approve each RSO. RSOs:

(1) Coordinate with the NRC on licenses, respond to correspondence, and accompany inspectors. Ensure that all requirements of NRC licenses are met, maintain required records, inventories, wipe tests, and air flow measurements ionizing radiation laboratory hoods, etc.

(2) Arrange for proper disposal of radioactive waste materials.

(3) Develop an ionizing radiation safety manual for the licensed material under that specific license. Include a description of the intended use of the radiation material and/or the radiation-producing equipment.

(4) Coordinate and conduct the radiation safety training and personnel monitoring programs.

(5) Certify that a program is in place to limit personal exposure to as low as is reasonably achievable.

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- (6) Serve as the COR for contracts involving ionizing radiation services.
- (7) Assist the facility manager in conducting the self-assessment of facility radiation program elements.
- (8) Identify workers who may receive 10 percent of the radiation dose within any three month period permissible under NRC regulations (10 CFR 20.1.1501) and provide personal monitoring devices (dosimeters). The RSO conducts JHAs for this program only in lieu of supervisor. (See chapter 7 “JHA” of this handbook..)
- (9) Provide each employee with a dosimeter if the employee works directly with radioisotopes, x-ray producing devices, or works in radiation areas.
- (10) Maintain dosimetry records as part of the employee(s) permanent record.
- (11) Investigate radiation exposures to determine how the exposure was obtained and how future exposures can be avoided.
- (12) Remove the employee from radiation work until the cause of exposure is identified and eliminated if a dose of 25 percent or greater of the NRC limit is received in any one fiscal quarter.
- (13) In addition to meeting the reporting requirements of chapter 4 of this handbook, report overexposures and incidents in accordance with 10 CFR 20 Subpart M, “Reports.”
- (14) Schedule and obtain a complete medical examination performed by a physician experienced in radiation exposure for any employee receiving radiation dosage levels exceeding the allowable annual NRC limit.
- (15) Report any exposure to radiation greater than 10 percent of the NRC limit in any one calendar quarter on an OSHA form 301 “Injury and Illness Incident Report” and logged on the OSHA form 300 “Log of Work-Related Injuries and Illnesses.” (See Chapter 4 of this Handbook for details on reporting procedures.)
- (16) Assist facility manager or designee in:
 - (a) developing safety evaluations as required by NRC or state regulatory personnel.
 - (b) determining suitable disposal alternatives for radioactive wastes and surplus radioactive sources.
 - (c) the decommissioning of facilities and sites where licensed radioactive materials were used.

regulations. (d) maintaining or restoring compliance with NRC rules and

(e) addressing regulatory findings of noncompliance.

d. Radiation Safety Committees (RSCs)

(1) Must be established at each facility as required by the governing NRC license.

(2) Meet at least annually, or more often as required by the governing NRC license, and must perform the following:

(a) Establish local procedures for requiring and approving radioactive materials permits.

(b) Certify that all requirements of the NRC license are met.

(c) Assist the facility manager or RSO in obtaining personal monitoring devices.

(d) Assist the RSO in maintaining records required by the NRC license and interface with NRC officials.

(e) Investigate any incident where personnel receive radiation exposure greater than 10 percent of a NRC limit within any three month period.

e. Supervisors

(1) Ensure that employees participate in radiation safety training and follow all procedures established for the safe use of radiation producing materials and devices.

(2) Ensure that employees wear dosimetry, as required by local radiation procedures.

(3) Do not conduct JHAs for this program. RSO's conduct JHAs in lieu of supervisors following Chapter 7 of the Handbook.

f. Employees

(1) Participate in radiation safety training and follow all procedures established for the safe use of radiation producing materials and devices.

(2) Wear dosimetry, as required by local radiation procedures.

14.5 Additional Resources

- a. EPA Radiation Protection Home Page, (<http://www.epa.gov/radiation/>)
- b. Nuclear Regulatory Commission Home Page, (<http://www.nrc.gov>)
- c. EPA's Federal Guidance for Radiation Protection, (<http://www.epa.gov/radiation/federal/index.html>)

14.6 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 15
CONTRACTOR SAFETY AND HEALTH**

15.1 Purpose

To specify the minimum SOH requirements for contractors with regard to occupational safety and health when working at NARA.

15.2 References

- a. Service Contract Act of 1965, as amended;
- b. 29 CFR Part 1926, Occupational Safety and Health Standards for the Construction Industry;
- c. Federal Acquisition Regulations (FAR), 48 CFR, Parts 1-53;
- d. 41 CFR 101-20.002-1;
- e. The Contract Work Hours and Safety Standards Act (40 USC 333);
- f. 40 CFR Protection of Environment; and
- g. 29 CFR 1925 Safety and Health Standards for Federal Service.

15.3 Program Requirements

- a. All contractors and subcontractors must comply with all applicable safety and health provisions and requirements.
- b. The Contracting Officer appoints a Contracting Officer's Representative (COR) or Contracting Officer's Technical Representative (COTR) to administer the contract.
- c. All CORs/COTRs must have safety training appropriate to the contracts they administer.
- d. Any NARA organization developing a contract for services in excess of \$2,500 (except as provided in Paragraph (b) of the Services Contract Act), must include, as a minimum, those requirements in 48 CFR Part 52.222-41(h), Safety and Sanitary Working Conditions, of the Federal Acquisition Regulations.
- e. Any NARA organization engaged in construction contracts exceeding \$2,000 must include, as a minimum, a safety and health clause similar to that appearing in 48 CFR 52.236-13, Accident Prevention, of the Federal Acquisition Regulations.

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f. NARA requires contractors to have a substance abuse awareness program in place and promote a “drug free” work environment, similar to that appearing in 48 CFR 52.223-6.

g. NARA CORs/COTRs must enforce safety and health requirements in contracts in the same manner as other contract requirements.

h. Construction, renovation, repairs, or change of occupancy of NARA facilities must meet applicable codes before occupancy. Documentation certifying code compliance must be on file within each NARA-owned facility.

i. Any Interagency or Cooperative Agreement must include appropriate safety and health considerations. Where conflicts in safety and health standards exist, the more stringent applies.

15.4 Responsibilities

a. **SOHPM**

- (1) Serves as the principal technical expert on contracting safety issues.
- (2) Provides assistance to CORs/COTRs regarding contracting issues.
- (3) Reviews facility manager regulatory safety compliance during facility safety inspections.
- (4) Advises CORs/COTRs on safety regulatory requirements and standards for use by NARA in establishing contracts (e.g., contract clauses for services and construction contracts, etc.).

b. **Facility Managers or Designees**

- (1) Serve as technical experts providing oversight for facility contractor safety.
- (2) Assist in implementing the NARA facility contractor safety policies.
- (3) Recommend NARA facility contractor safety policies for review and implementation.

c. **CORs/COTRs**

- (1) Enforce safety standards in the same manner as other contract requirements.

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- (2) Advise contractors of potential unsafe or unhealthful working conditions that exist or may occur on the job site. Provide information regarding hazardous substances in writing, as required by OSHA, 29 CFR 1926.59, Hazard Communication.
- (3) Inspect (or ensures that a project inspector inspects) the worksite at reasonable intervals to ensure that the contractors and their personnel are complying with safety and health standards applicable to the work being performed.
- (4) Ensure corrective action is undertaken to rectify safety and health problems on the worksite within the time frame established.
- (5) Record all safety and health deficiencies noted during inspections and maintains them in the project contract files.
- (6) Ensure that Material Safety Data Sheets (MSDSs) are provided for all hazardous materials used on the worksite.
- (7) Report contractor accidents, as soon as possible, to the facility manager for investigating and reporting.
- (8) Review contractor safety training documentation before the contract implementation.

15.5 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 16
OFF-THE-JOB SAFETY AND HEALTH**

16.1 Purpose

To recommend SOH elements to minimize the occurrence of NARA personnel injuries and illnesses off the job.

16.2 References

None.

16.3 Requirements

NARA requires on-the-job safety and health activities to encourage personnel to be safe off-the-job. Examples of potential activities include the following:

- a. Educating personnel through items and activities, such as safety meetings, NARA publications, posters, and flyers.
- b. Conducting promotional campaigns, such as seat belt use, fire prevention for the home, and recreation safety.
- c. Providing and encouraging personnel to participate in health and fitness activities.
- d. Promoting off-the-job safety in annual NARA Safety Day activities.

16.4 Responsibilities

- a. NSHC and LSHC conduct activities promoting off-the-job safety.
- b. Employees are urged to learn how to avoid off-the-job accidents and injuries (e.g. wearing eye protection when mowing the lawn)

**CHAPTER 17
FIRE SAFETY**

17.1 Purpose

To specify the minimum SOH Program requirements for protecting NARA personnel and public property from the effects of fires.

17.2 References

- a. 29 CFR Part 1910, Occupational Safety and Health Standards for General Industry;
- b. 29 CFR Part 1926, Occupational Safety and Health Standards for the Construction Industry;
- c. National Fire Protection Association (NFPA) 101-2000, the Life Safety Code; and
- d. The International Building Code (IBC).

17.3 Program Requirements

- a. Establish written fire prevention and protection requirements that:
 - (1) Prevent or minimize accidental fires and related fire losses;
 - (2) Provide for the prompt detection, reporting, control, and investigation of fires;
 - (3) Establish abatement procedures; and
 - (4) Provide for the safe evacuation of building occupants through the establishment, maintenance, and implementation of Occupant Emergency Plans (OEPs).
- b. Require fire detection and suppression systems and equipment to be inspected at least annually by qualified persons and maintained in safe operating condition.
 - (1) In GSA-leased space, this requirement is part of the lease and is the responsibility of the building owner.
 - (2) In NARA facilities, this requirement is the responsibility of the facility manager.

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- c. Train personnel in the basics of fire prevention, fire extinguisher use, emergency response, and Occupant Emergency Plan procedures in accordance with 29 CFR 1910.38 and 157.
- d. When NARA facility managers elect to assign personnel to a fire brigade, they will comply with the requirements of 29 CFR 1910.156, Fire Brigades.
- e. Use the National Fire Protection Association (NFPA) Life Safety Code 101 (<http://www.nfpa.org/>) as the minimum criteria for life safety features, e.g. those construction, protection, and occupancy features necessary to minimize danger to life from fire, including smoke, fumes, or panic, in occupied NARA space, unless a more stringent code is applicable.
- f. Secure the services of a qualified fire protection specialist to evaluate NARA's fire prevention and protection program, as needed.

17.4 OEPs

NARA abides by the requirements contained in the current issuance of the General Services Administration (GSA) booklet, "Occupational Emergency Program Guide." In those GSA-leased buildings where:

- a. NARA is the major tenant, NARA must prepare the required Occupant Emergency Plans.
- b. NARA is not the major tenant or lead agency, NARA must assist the lead agency in completion of the required plan.

17.5 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 18 LOCKOUT/TAGOUT

18.1 Purpose

To specify the minimum SOH Program requirements for the NARA lockout/tagout (LOTO) program. (See the glossary for the definition of Lockout and Tagout.)

18.2 References

- a. 29 CFR 1910.147, The Control of Hazardous Energy (lockout/tagout).
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9804
- b. 29 CFR 1910.147, Appendix A, Typical Minimal Lockout Procedure.
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9805
- c. 29 CFR 1910.306, Specific purpose equipment and installations.
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9883
- d. 29 CFR 1910.333, Selection and use of work practices.
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9910
- e. 29 CFR 1926.417, Lockout and tagging of circuits.
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10718
- f. 29 CFR 1926.702, Requirements for equipment and tools.
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10779

18.3 Scope

The LOTO program applies to all NARA personnel and contractors servicing and maintaining machines and equipment in which unexpected energization or start up of machines or equipment, or release of stored energy could cause injury or damage. This Chapter supplements those requirements established by OSHA, 29 CFR 1910.147.

18.4 Requirements

- a. Establish LOTO procedures for any activity or operation where servicing and maintenance operations are performed on energized systems.

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b. Isolate machines, equipment, and instrumentation from all potential energy before individuals perform any servicing or maintenance activities where the energizing, start-up, or release of stored energy could cause harm to the individual working on the machine or equipment.

c. You may perform lockout and tagout procedures only if you are designated by your supervisor, and are trained to lockout and tagout machines or equipment in order to perform service or maintenance.

d. Use locking devices to control hazardous energy for systems capable of being locked out. You may use tagout devices without a lock out device only under the following conditions:

(1) The energy isolating device is not capable of being locked out in accordance with 29 CFR 1910.147(C)(2)(i).

(2) The use of tagout devices will provide full personnel protection equivalent to the level of protection provided by the lockout device in accordance with 29 CFR 1910.147(C)(3).

e. All authorized, affected, and incidental personnel receive training consistent with their level of LOTO program responsibility in accordance with 29 CFR 1910.147(C)(7).

f. Have individual or group lockout and tagout application procedures that comply with requirements of 29 CFR 1910.147(d).

g. Have individual or group lockout and tagout removal procedures that comply with the requirements of 29 CFR 1910.147(e).

h. Have clearly identifiable lockout and tagout devices that meet the construction specifications of 1910.147(C)(5).

18.5 Responsibilities

a. **SOHPM**

(1) Develops NARA program policy and guidance regarding LOTO program.

(2) Assists facility managers in coordinating employee training to meet the requirements of this Chapter.

(3) Conducts periodic evaluations of LOTO programs to determine the effectiveness of the program administration and implementation to satisfy all requirements of this chapter and 29 CFR 1910.147, making recommendations for improvements as appropriate.

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(4) Provides technical guidance to facility managers on the development and implementation of facility LOTO programs.

b. Facility Managers or Designees

(1) Develop the facility LOTO program.

(2) Provide technical guidance on LOTO procedures and policy to supervisors and employees.

(3) Assist supervisors and local safety committees in coordinating employee training requirements.

(4) Provide the LOTO program with oversight and conduct periodic evaluations of the facility lockout/tagout program to determine effectiveness and to provide supervisors with recommendations for program enhancement.

c. Supervisors

(1) Designate employees authorized to be in the LOTO program based on their job task.

(2) Ensure employees possess the skills required for the safe usage of energy control devices.

(3) Ensure employee information and training is consistent with this chapter and 29 CFR 1910.147(C)(7) and maintain records of all training.

(4) Ensure all energy control procedures are formally established by a job hazard analysis (JHA), standard operating procedure, or other documentation. (See Chapter 7 “Job Hazard Analysis.”)

(5) Provide all lockout and tagout devices at no cost to the employee in accordance with 29 CFR 1910.147(c)(5)(i).

d. Employees - Use safe and prudent work practices and comply with all program elements and training requirements outlined in this chapter.

e. CORs/COTRs

(1) Ensure that contractor personnel engaged in activities within the scope of this chapter employ LOTO procedures that meet or exceed those outlined in this chapter and that all work agreements and contracts reference OSHA 1910.147.

(2) Ensure that contractors engaged in activities covered by this chapter coordinate their lockout or tagout procedures with the facility manager.

18.6 Additional Resources

- a. OSHA Technical Link, Control of Hazardous Energy (Lockout/Tagout)
(<http://www.osha.gov/SLTC/controlhazardousenergy/index.html>)
- b. OSHA LOTO fact sheet
(http://www.osha.gov/OshDoc/data_General_Facts/factsheet-lockout-tagout.pdf)
- c. OSHA Publication #3120 “Lockout/Tagout”
(<http://www.osha.gov/Publications/osha3120.pdf>)

18.7 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 19 CONFINED SPACES ENTRY PROGRAM

19.1 Purpose

To specify the minimum SOH Program requirements for the National Archives and Records Administration (NARA) confined space entry program.

19.2 Scope

This chapter covers NARA personnel and contractors working in any area that is large enough and so configured that an employee can bodily enter and perform assigned work, but

- a. Has limited or restricted means for entry or exit;
- b. Is not designed for continuous employee occupancy;
- c. Has poor ventilation;
- d. Could contain or retain a hazardous atmosphere; or
- e. Could pose an engulfment or entrapment hazard.

19.3 Entry into a confined space is defined as placing any part of the face or body into the space. Common examples of potential confined spaces include stilling wells, sewers, sewer manholes, most sewer inlets and outfalls, some culverts, vaults, tanks, trenches, pits, pipe assemblies, ducts, silos, storage bins, and hoppers.

19.4 References

- a. 29 CFR 1910.146, Permit Required Confined Spaces,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9797
- b. 29 CFR 1910.146 Appendix A, Permit Required Confined Space Decision Flow Chart,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9798
- c. 29 CFR 1910.146 Appendix B, Procedures for Atmospheric Testing,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9799
- d. 29 CFR 1910.146 Appendix D, Confined Space Pre-Entry Check List,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9801

19.5 Requirements

- a. Perform Job Hazard Analyses (JHAs) (see Chapter 7 of this Handbook) to determine the potential presence of hazardous conditions for tasks requiring entry into a confined space.
- b. If the JHA and applicable air monitoring confirms that the confined space does not contain nor has the potential to contain any hazard capable of causing death or serious physical harm (i.e., no atmospheric hazard, physical stressor, and entrapment or engulfment hazard exists), then a permit is not required and the space may be classified as a “Non Permit” required confined space.
- c. If the JHA results and applicable air monitoring confirm the confined space contains atmospheric hazard or physical stressor, and/or entrapment or engulfment hazards exist, then classify the confined space as a “Permit Required” confined space.
- d. Establish a written Permit Required Confined Space (PRCS) Program for all NARA activities where employees are performing duties in areas designated as PRCS. The PRCS program must include all information and guidance necessary to protect personnel from applicable hazards in accordance with 1910.146(d). In addition to the program plan, each PRCS requires a written entry permit addressing space specific hazards, controls, personnel rosters, etc., in accordance with 29 CFR 1910.146(f).
- e. Assign specific PRCS entry or support positions to appropriately trained employees performing confined space entry work. Training must be documented in accordance with 29 CFR 1910.146(g). Assignments include authorized entrant 29 CFR 1910.146(h), attendant 29 CFR 1910.146(i), PRCS entry supervisor, 29 CFR 1910.146(j), or rescue service 29 CFR 1910.146(k).
- f. Routinely perform continuous forced air ventilation, where possible, and air monitoring to ensure a non-hazardous atmosphere is maintained. If a non-hazardous atmosphere condition is achieved and maintained, then the confined space would not require individual permitting subject to the conditions of 29 CFR 1910.146(C)(5). However, note that it is necessary to develop a confined space program plan and a standard operating procedure (SOP) covering the requirements of 29 CFR 1910.146(C)(5)(ii) for confined space entry event.
- g. Submit confined space program plans to the facility manager for review and approval by the PRCS entry supervisor. Upon acceptance of the program plan and completion of employee training, medical surveillance, and respiratory protection requirements, PRCS entry supervisors are authorized to approve space specific entry permits for their activities.
- h. Perform the appropriate medical surveillance examinations for employees performing permit required confined space work. Perform these exams prior to duty in a confined space and periodically thereafter as recommended by the consulting physician.

- i. Use Permit Required Confined Space Decision Flowchart, found in 29 CFR 1910.146 Appendix A, to determine if the space is permit required confined space. (See par 19.3b.)

19.6 Responsibilities

a. SOHPM

(1) Develops NARA program policy and guidance regarding the confined space entry program.

(2) Conducts periodic evaluations of facility confined space entry programs to determine the effectiveness of confined space entry program administration and implementation to satisfy all requirements of this chapter and 29 CFR 1910.146, making recommendations for improvements as appropriate.

(3) Provides technical guidance to facility managers on the development and implementation of facility confined space entry programs.

(4) Assists facility managers in coordinating employee training to meet the requirements of this Chapter.

b. Facility Manager

(1) Develops the facility confined space entry program.

(2) Promotes awareness of the facility confined space entry program.

(3) Provides technical guidance on confined space entry program to supervisors and employees.

(4) Obtains training appropriate to the scope of the confined space program for which they are responsible.

(5) Assists supervisors and local safety committees in coordinating employee training requirements.

(6) Provides confined space entry program oversight and conducts periodic evaluations of the facility PRCS program, to determine the effectiveness and provide supervisors with recommendations for PRCS program enhancements.

(7) Reviews all confined space program permits and plans for the facility, approving subject plans that comply with the requirements of this chapter and 29 CFR 1910.146.

c. Supervisors

(1) Coordinate the completion of JHAs to determine the presence of hazardous conditions within all confined spaces requiring personnel entry and to determine whether the space is Permit Required.

(2) Implement the confined space program appropriate to the level of identified hazards within the JHA. (See Chapter 7 “Job Hazard Analysis.”)

(3) Assign employees to specific permit required confined space entry or support positions and ensure that training is provided before they perform their assigned duties. This training must be specific to their assigned duties if the JHA indicates the space requires a permit.

(4) Provide employees performing permit required confined space work appropriate medical surveillance examinations prior to duty in a confined space and periodically thereafter as recommended by the consulting physician.

(5) Maintain records of medical examinations as required to document employee fitness for duty. (See Chapter 13, “Medical Surveillance and Monitoring.”)

d. Employees

(1) Comply with instructions and training received on the hazards associated with confined space entry.

(2) Maintain and properly use personal protective equipment.

(3) Participate in all medical surveillance required under this section or whenever a serious injury is sustained that could impact the individual’s ability to perform under the stresses of working in confined spaces or wearing respiratory protection. (See Chapter 10, “Respiratory Protection.”)

e. CORS/COTRs

(1) Inform the contractor of the permit required confined spaces and ensure that the contractor complies with the requirements of this chapter and 29 CFR 1910.146.

(2) Ensure coordination of entry operations when both contractor and NARA personnel are working in or around the same entry permit space.

(3) Ensure contractors provide a copy of their entry permit program to the facility manager for review.

(4) Ensure contractors do not start work until the facility manager approves the contractor's permit entry program.

19.7 Additional Resources

a. 29 CFR 1910.146 Appendix C, Examples of Permit-required Confined Space Programs,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9800

b. 29 CFR 1910.146 Appendix E, Sewer System Entry,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9802

c. DHHS (NIOSH) Pub. No. 87-113, A Guide to Safety in Confined Spaces,
<http://www.cdc.gov/niosh/pdfs/87-113.pdf>

d. Confined Spaces Technical Advisor,
(<http://www.dol.gov/elaws/confined.htm>)

e. American National Standards Institute (ANSI)/American Society of Safety Engineers (ASSE), Z117.1 - 2003, Safety Requirements for Confined Spaces,
(<http://webstore.ansi.org/FindStandards.aspx?SearchString=ANSI%2fASSE+Z117.1-2003&SearchOption=1&PageNum=0>)

f. OSHA Publication #3138, Permit Required Confined Spaces,
(<http://www.osha.gov/Publications/osh3138.pdf>)

19.8 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 20 ERGONOMICS AND BACK SAFETY

20.1 Purpose

To specify the minimum SOH Program requirements for NARA Ergonomics and Back Safety (a component of ergonomics).

20.2 Scope

This chapter applies to all NARA operations and activities. Ergonomics is the study of work, which attempts to design the work environment to fit the employee's physical capabilities and limitations. NARA is committed to preventing musculoskeletal injuries (including back injuries) associated with ergonomic hazards in the workplace, through training, workplace evaluation, and redesign.

20.3 References

Section 5(a)(1) of the OSH Act, The General Duty Clause,

http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=OSHACT&p_id=3359

20.4 Requirements

- a. Inform NARA personnel about the ergonomic risks associated with the jobs that they are expected to perform when they are initially assigned to the job, or when they are reassigned to another position.
- b. Train personnel about the most common Musculoskeletal Disorders (MSDs), including back injuries, especially identifying signs and symptoms, and the importance of early reporting.
- c. Early reporting is a key element since repeated trauma can eventually lead to permanent disability. Report all work-related MSDs as injuries in accordance with Chapter 4 of this handbook.
- d. NARA facilities must implement an ergonomic program that includes:
 - (1) A means for identifying ergonomic hazards (e.g., improper lift techniques, improper computer workstation set up, and improper use of hand tools) in the workplace through the completion of a job hazard analysis (JHA) (See Chapter 7 of this handbook); and
 - (2) A means for reporting ergonomic hazards (See Chapters 4 and 5 of this handbook), and requesting work area evaluations, and training of all staff.

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e. Provide training to employees in jobs that have been identified as having ergonomic hazards during formal audits, or during the supervisory JHA. Supervisors and any other employees involved in setting up or managing the ergonomics program must also receive an adequate level of ergonomics training.

f. Provide the facility manager or designee with a sufficient level of ergonomics training to be able to handle routine issues concerning ergonomics evaluations and work area design. More complicated issues that are beyond the ergonomic training of the facility manager will be handled via the Public Health Service (PHS) Memorandum of Agreement (MOA), or via contract with an Ergonomic Consultant.

g. Identifying ergonomic hazards is a joint responsibility shared by facility managers, supervisors, and employees.

(1) The formal means for identifying hazards is through the use of a JHA or through the use of appropriate checklists, which will consider the risk of musculoskeletal injuries as a part of the evaluation. (See par 20.6(g) for fact sheets with guidance and checklists for different types of jobs with ergonomic hazards).

(2) Preparing the JHA is a supervisory responsibility. JHAs are discussed in Chapter 7 in this Handbook.

h. If hazards are discovered, implement control measures to reduce the hazards. Control measures can be as simple as an adjustment to a workstation or chair. Control measures can also mean job rotation or more complex solutions such as an operation redesign.

i. If an employee reports a recordable MSD incident (e.g., back injury or carpal tunnel syndrome), provide the employee with prompt access to a health care professional (HCP) for evaluation and follow-up subsequent to their injury or illness.

(1) The HCP will determine if any modification of the regular duties are necessary.

(2) Once an employee reports an incident, supervisors will investigate and the reporting employee, along with management, will be involved in the process of suggesting solutions for completing the job efficiently and safely. (See par 20.6 for guides, fact sheets and posters that suggest solutions to common ergonomic problems.)

20.5 Responsibilities

a. SOHPM

(1) Provides guidance and assistance to the facility managers in setting up their programs.

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(2) Assists facility managers with designing and arranging for appropriate training in ergonomics for staff at all levels (this may include web-based training, training-the-trainer training via PHS contract or a professional ergonomics trainer).

b. Facility Managers or Designees

(1) Develops and implements a facility ergonomics program that includes:

(a) A training plan for supervisors and all employees working in jobs with ergonomic risks;

(b) Promotion of ergonomics and back safety through ergonomics posters and fact sheets,

(c) Investigation of work related musculoskeletal injuries;

(d) Ergonomic hazard abatement. (See par 20.6 for guidance on abating common ergonomic hazards.);

(e) A training plan for supervisors and all employees working in jobs with ergonomic risks; and

(f) Procedures for requesting an ergonomic evaluation and how the ergonomic evaluations will be accomplished.

(2) Participates in a sufficient level of ergonomics training to be able to provide guidance to supervisors on ergonomic issues and to conduct basic ergonomics evaluations.

(3) Coordinates with the PHS certified ergonomic consultants for advice and consultation for unique or complex ergonomic hazards that require the expertise of a professional ergonomist or human factors engineer.

(4) Performs workplace ergonomic assessments upon request for work areas where ergonomic hazards have been identified during a JHA or for which complaints have been received.

(5) Provides copies of ergonomic workplace assessment documentations to the SOHPM.

c. Supervisors

(1) Assist the facility manager in implementing the facility ergonomics program.

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- (2) Assist the facility manager in coordinating consultation on unique ergonomic issues and engineering or design requests.
- (3) Assist the facility manager with coordinating training for employees.
- (4) Conduct JHAs to determine which jobs contain ergonomic hazards or risk factors.
- (5) Ensure that employees participate in ergonomics training and can identify the signs and symptoms of MSDs.
- (6) Ensure that sound ergonomic principles (e.g., safe lifting techniques, appropriate workstation orientation) are integrated into all aspects of the work being performed.
- (7) Encourage early reporting of work-related MSDs.
- (8) Ensure that employees are referred for medical evaluation, if they sustain a work-related musculoskeletal injury.
- (9) Ensure that recommendations from ergonomics surveys, which may include purchase of new furniture or equipment, work rotation, or adjustment of existing furniture or equipment, are implemented.

20.6 Additional Resources

- a. OSHA Video: Ergonomic Programs That Work,
(<http://www.osha.gov/SLTC/video/ergoprogramsthatwork/video.html>)
- b. NIOSH Publication No. 97-117, Elements of an Ergonomics program.1997,
(<http://www.cdc.gov/niosh/docs/97-117/pdfs/97-117.pdf>)
- c. OSHA 30-92 Working Safely with VDTs,
(<http://www.osha.gov/Publications/osh3092.pdf>)
- d. NIOSH Publication No. 2007-131: Ergonomic Guidelines for Manual Material Handling,
(<http://www.cdc.gov/niosh/docs/2007-131/pdfs/2007-131.pdf>)
- e. OSHA Computer Workstation E-Tools,
(<http://www.osha.gov/SLTC/etools/computerworkstations/index.html>)
- f. OSHA Grocery Warehousing E-Tools (These are general warehousing ergonomic suggestions that apply to NARA's records handling mission),
(<http://www.osha.gov/SLTC/etools/grocerywarehousing/index.html>)

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g. Ergonomic Working Group Ergonomic Fact Sheets and training resources,
(<http://www.ergoworkinggroup.org/ewgweb/SubPages/ProgramTools/Publications/FactSheets.htm>)

h. Lift Safer Poster,
(http://www.dir.ca.gov/dosh/dosh_publications/liftingSafer.pdf)

20.7 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 21
Heat Stress and Cold Stress safety**

21.1 Purpose

To specify the minimum SOH Program requirements for protecting NARA employees from heat and cold stress hazards.

21.2 References

a. Section 5(a)(1) of the OSH Act 1970, The General Duty Clause,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=OSHACT&p_id=3359;
and

b. Labor-Management Agreement- National Archives and Records
Administration and American Federation of Government Employees, July 2008,
(http://www.nara-at-work.gov/staff_resources_and_services/employee_resources/afge_agreement.html).

21.3 Requirements

NARA implements a heat and cold stress hazard management program based on written procedures that:

a. Identify work locations or processes where employees may be exposed to excessive heat or cold.

b. Establish a training program to educate employees, contractors, and volunteers about:

(1) Factors leading to heat and cold stress;

(2) Symptoms of heat exhaustion, heat stroke, and hypothermia; and

(3) Operational procedures that decrease the incidence or severity of heat or cold related illnesses (see par 21.2(b) for procedures required by the NARA/AFGE Labor Management Agreement).

21.4 Responsibilities

a. **SOHPM**

(1) Oversees the NARA heat stress and cold stress safety program.

(2) Evaluates NARA facility heat stress and cold stress safety program during on-site inspections.

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(3) Assists facility managers in establishing a facility heat stress and cold stress safety program.

b. Facility Managers or Designees

(1) Develop and implement the facility heat and cold stress safety program.

(2) Ensure that adequate and appropriate resources (e.g., heat monitoring equipment, personal protective equipment, heaters, cooling equipment) are available to fully implement a heat and cold stress safety program.

(3) Ensure that all work activities and locations, where employees will be exposed to excessive heat or cold, are identified through JHAs (see chapter 7 of this handbook).

(4) Ensure that supervisors provides cool water to employees when they are exposed to excessive heat.

c. Supervisors

(1) Complete JHAs (see chapter 7 of this handbook) to identify all work activities and locations where employees will be exposed to excessive heat or cold.

(2) Assist the facility manager with establishing and implementing a heat and cold stress safety program.

(3) Provide input to the facility manager on the effectiveness of the facility heat and cold stress safety program.

(4) Provide cool water to employees to replace fluids when they are exposed to excessive heat.

(5) Monitor the local heat index or WBGT (Wet Bulb Globe Temperature) and moderate work, rest, and hydration based on the heat and humidity.

(6) Provide cool areas for rest and recovery.

(7) Arrange work schedules so that the most strenuous work is conducted during the coolest part of the day.

(8) Monitor all employees on the work crew to ensure they are drinking adequate quantities of fluids and are not suffering from heat stress.

(9) Be familiar with the signs of heat-related illnesses and take appropriate action when someone exhibits signs of heat stress. (See par 21.5(a)-(e) for list of heat and cold stress resources and information.)

(10) Ensure that employees are familiar with signs of heat and cold- related illness.

(11) Report any heat-related incidents to the facility manager.

d. Employees

(1) Follow the local facility heat and cold stress safety program procedures.

(2) Become familiar with the hazards associated with working in a hot environment, and the signs and symptoms of overexposure to heat. (See par 21.5(a)-(e) for list of heat and cold stress resources and information.)

(3) Report any heat or cold-related illnesses to the supervisor.

21.5 Additional Resources

a. NIOSH Publication No. 86-113: *Criteria for a Recommended Standard: Occupational Exposure to Hot Environments* (Revised Criteria 1986),
(<http://www.cdc.gov/niosh/86-113.html>)

b. 2008 TLVs ® and BEIs ® Based on the Documentation of the Threshold Limit Values for Chemicals Substances and Physical Agents and Biological Exposure Indices, American Conference of Governmental Industrial Hygienists, 2008 edition,
(<http://www.acgih.org/store/ProductDetail.cfm?id=1975>)

c. ANSI - Ergonomics of the Thermal Environment: Medical Supervision of Individuals Exposed to Extreme Hot or Cold Environments,
(<http://webstore.ansi.org/RecordDetail.aspx?sku=ISO+12894%3a2001>)

d. OSHA Publication # 3156 - OSHA Cold Stress Quick Card,
(<http://www.osha.gov/Publications/osh3156.pdf>)

e. OSHA Publication # 3154 - OSHA Heat Stress Quick Card,
(<http://www.osha.gov/Publications/osh3154.pdf>)

21.6 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 22 LADDER AND SHELVING SAFETY PROGRAM

22.1 Purpose

The purpose of this chapter is to specify minimum SOH Program requirements for the NARA Ladder and Shelving Safety Program.

22.2 References

- a. 29 CFR 1910.21-30 “Walking and Working Surfaces,”
(http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_part_number=1910)
- b. National Fire Protection Association (NFPA) 13 “[Standard for the Installation of Sprinkler Systems](http://www.nfpa.org/aboutthecodes/AboutTheCodes.asp?DocNum=13),”
(<http://www.nfpa.org/aboutthecodes/AboutTheCodes.asp?DocNum=13>)

22.3 Scope

This program applies to step ladders, extension ladders, fixed ladders, pulpit ladders (collectively “ladders”), movable and fixed shelves (collectively “shelving units”). (Pulpit ladders are also called Manually Propelled Mobile Ladder Stands or Platforms.)

22.4 Requirements for ladder and shelving units

- a. NARA implements a Ladder and Shelving Safety program that protects employees from potential hazards when using ladders and shelving units.
- b. NARA inspects and maintains ladders and shelving units in accordance with manufacturer’s recommendation.
- c. NARA establishes procedures for inspection, maintenance, and safe use of ladders and shelving units.
- d. NARA provides training to employees on the procedures for inspection, maintenance, and safe use of ladders, shelving units.

22.5 Responsibilities

- a. **SOHPM**
 - (1) Evaluates the effectiveness of the NARA-wide Ladder and Shelving Safety Program annually and modifies procedures and requirements as necessary and accordance with OSHA regulations.

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(2) Evaluates the NARA Ladder and Shelving Safety Program at local facilities during security and safety evaluations.

(3) Provides technical advice and guidance to NARA facility managers in development of facility Ladder and Shelving Safety Program.

b. Facility Managers or Designees

(1) Develop and implement the NARA facility Ladder and Shelving Safety Program including policy and procedures for the inspection, maintenance, and training on the safe use of ladders and shelving.

(2) Repair all ladders in accordance with manufacture's recommendations only.

(3) Make only manufacturer-approved modifications to ladders.

(4) Post and maintain legible manufacturers' warning labels (including maximum load ratings) on the ladders. (Contact the manufacturer for replacement warning labels.)

(5) Ensure that employees, including those who do not have access to computers, do have access to the manufacturer's instructions for ladders at all times. (See par 22.7(c) for instruction manual source.)

(6) Periodically inspect shelving units and repair any deficiencies. (e.g., bent or deformed shelves, loose or missing nuts, bolts, cross bracings, leaning shelving units or shelf-to-wall fasteners.)

(7) Prominently post and maintain shelf capacity signs on the shelving units.

(8) Maintain library of shelving designs, modifications, inspections documentation, and engineering specifications at the facility.

(9) Post and maintain signs prohibiting shelf climbing (i.e., climbing shelves as an alternative to using a pulpit ladder to retrieve or deposit materials).

(10) Prominently post and maintain catwalk floor load limits at all catwalk entrances.

(11) Prominently post and maintain sprinkler head clearance limits (18 inches) on the end of each shelving unit.

c. Supervisors

(1) Ensure employees have been trained in the safe use of and inspection methods (See par 22.5d) for ladder stands and shelving units in accordance with the manufacturer's guidelines, as well as the local facility NARA ladder and shelving safety program policy.

(2) Ensure employees are aware of the procedures for removing defective ladders from use immediately upon discovery of the defect and of the policy prohibiting use of defective ladders.

(3) Ensure employees maintain an 18 inch clearance of sprinkler heads in accordance with NFPA 13 par 8.6.5 and 29 CFR 1910.159(c)(10), when loading materials on shelving units.

(4) Ensure employees comply with the maximum load limits of shelving units, catwalks, and ladder stands.

d. Employees

(1) Inspection and Maintenance of ladders

(a) Inspect ladders for missing, damaged, loose or worn components, sharp edges and burrs prior to each use.

(b) Immediately remove ladders from service when defects are found and report damaged ladders to the supervisor.

(c) Tag Out ladders that have been removed from service so employees are alerted not to use them. (See chapter 18 for tag out procedures.)

(2) Safe Use of Ladders

(a) Lock casters on pulpit ladder when the ladder is being used.

(b) Do not use ladder for electrical work unless it is specifically designed for that use.

(c) Do not move ladder with an employee standing on it.

(d) Do not load a ladder beyond the manufacturer's load rating.

(e) Ensure that ladders are used by one employee at a time.

(f) Do not store materials or equipment on the steps or platform of a pulpit ladder.

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(g) Do not attempt to gain additional height by adding objects or extensions to the ladder unit.

(h) Use both hands on the handrails when ascending and descending a pulpit ladder. (Retrieved materials can be alternately placed on the steps as you ascend or descend the ladder steps.)

(i) Do not place occupied ladders in front of doors, unless the door is barricaded, locked or secured open and labeled as “Door out of service.”

(j) Do not overreach while using the ladder; move the ladder as close as possible to the work.

(k) Stand only on the steps or platform components of a pulpit ladder.

(3) Shelving unit requirements

(a) Do not climb shelves.

(b) Do not exceed posted load capacity when loading shelves.

(c) Do not make contact with overhead lighting when loading shelves.

(d) Maintain an 18 inch clearance of sprinkler heads when storing materials on shelves.

(e) Do not damage shelving components with material handling equipment such as forklifts, long Johns, pallet jacks, and streamliners. (See chapter 23, “Material Handling Safety.”)

(f) Uniformly distribute loads on shelves.

(g) Use shelving units in accordance with the manufacturer’s guidelines and the local NARA facility Ladder and Shelving Safety Program policy.

22.6 Additional Resources

a. Letter from the Department of Labor to Ray Kline, GSA Deputy Administrator, December 9, 1983. “Approval of Alternate Standard for Pulpit Ladder” (If needed, obtain from SOHPM.)

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- b. Letter from Ray Kline, GSA Deputy Administrator, to the Department of Labor May 23, 1983. “Requesting Approval of an Alternate Standard Under 29 CFR 1960.17” and attached Justification Statement and Purchase Description. (If needed, obtain from SOHPM.)
- c. Ballymore Assembly, Use, and Maintenance Instructions for Mobile Ladder Stands and Mobile Work Platforms. Document # B-0304/10M. (<http://hotkilns.net/ladder-instruct.pdf>)
- d. ANSI-ASC A14.7-2006, American National Standard for Mobile Ladder Stands and Mobile Ladder Stand Platforms. (<http://www.ansi.org/>)
- e. American Ladder Institute ladder safety resources: (<http://www.americanladderinstitute.org/ali/resources.asp>)
- f. OSHA Publication #3124 “Stairways and Ladders: A Guide to OSHA Rules” (<http://www.osha.gov/Publications/ladders/osha3124.html>)
- g. OSHA Publication #2236 “Material Handling and Storage” (<http://www.osha.gov/Publications/osha2236.pdf>)

22.7 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 23 MATERIAL HANDLING SAFETY PROGRAM

23.1 Purpose

The purpose of this chapter is to specify minimum SOH Program requirements for the NARA Material Handling Safety program.

23.2 References

- a. 29 CFR 1910.21-30 “Walking and Working Surfaces,”
(http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_part_number=1910)
- b. 29 CFR 1910.176 “Material Handling and Storage,”
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9824)
- c. 29 CFR 1910.178 “Powered Industrial Trucks,”
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9828)
- d. National Fire Protection Association (NFPA) 13 “[Standard for the Installation of Sprinkler Systems](http://www.nfpa.org/aboutthecodes/AboutTheCodes.asp?DocNum=13),”
(<http://www.nfpa.org/aboutthecodes/AboutTheCodes.asp?DocNum=13>)
- e. NFPA 101, Life Safety Code,
(<http://www.nfpa.org/aboutthecodes/AboutTheCodes.asp?DocNum=101>)
- f. 29 CFR 1910.30a “Dockboards,”
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9722m)
- g. 29 CFR 1910.132-138 “Personal Protective Equipment,”
(http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_part_number=1910)

23.3 Scope

This program applies to the use of material handling mechanical equipment used in NARA facilities, such as hand trucks, semi-live skids, jack lifts, dollies, forklifts, pallet-type hydraulic lifts, platform trucks, dock levelers, pallets, and loading docks. These items are required to be used in accordance with the manufacturers’ instructions.

23.4 Program Requirements for Material Handling Equipment

- a. NARA implements a Material Handling Safety program that protects employees from potential hazards caused from using material handling mechanical equipment.
- b. NARA inspects and maintains material handling mechanical equipment in accordance with manufacturer's recommendations.
- c. NARA establishes procedures for inspection, maintenance, and the safe use of material handling mechanical equipment.
- d. NARA provides training to employees on the procedures for inspection, maintenance, and the safe use of material handling mechanical equipment.

23.5 Responsibilities

a. SOHPM

- (1) Evaluates the effectiveness of the NARA-wide Material Handling Safety program annually and modifies procedures and requirements as necessary.
- (2) Evaluates NARA local facility Material Handling Safety program effectiveness and makes recommendations for improvements during security and safety evaluations.
- (3) Provides technical advice and guidance to NARA facility managers to develop the local facility Material Handling Safety program.

b. Facility Managers or Designees

- (1) Develop and implement the NARA local facility Material Handling Safety program that includes policy and procedures for the inspection, maintenance, and training on the safe use of material handling mechanical equipment.
- (2) Repair all material handling mechanical equipment in accordance with manufacturer's recommendations only.
- (3) Make only manufacturer approved modifications to material handling mechanical equipment.
- (4) Prominently post and maintain all manufacturer warning labels on the material handling equipment. (Contact manufacturer for replacement warning labels.)
- (5) Prominently post and maintain the manufacturer's instructions with material handling mechanical equipment.

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(6) Periodically inspect all material handling mechanical equipment and repair any deficiencies.

c. Supervisors

(1) Ensure that employees have been trained in the safe use and inspection methods of material handling mechanical equipment in accordance with the manufacturer's guidelines and NARA facility Material Handling Safety program policy.

(2) Ensure employees are aware of the procedures for removing defective equipment from use immediately upon discovery and of the policy prohibiting use of defective equipment.

d. Employees

(1) Inspection and maintenance of material handling mechanical equipment.

(a) Inspect mechanical equipment for missing, damaged, loose or worn components prior to each use.

(b) Immediately remove mechanical equipment from service when defects are found and report the damaged mechanical equipment to the supervisor.

(c) Lock-out or otherwise ensure defective material handling equipment is non-functional and has been removed from service so employees are unable to use the item. (See chapter 18 for lock-out procedures.)

(2) Safe use of material handling mechanical equipment.

(a) Use material handling mechanical equipment in accordance with the local facility Material Handling Safety Program, manufacturer instructions, and federal, state, and local regulatory requirements (if applicable).

(b) Participate in all required training and follow all safety and health instructions, standard operating procedures, and personal protective equipment requirements.

23.6 Additional Resources

a. OSHA's Forklift Safety Information Page,
(<http://www.osha.gov/SLTC/poweredinustrialtrucks/index.html>);

b. OSHA Publication #2236 "Material handling and Storage,"
(<http://www.osha.gov/Publications/osh2236.pdf>);

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- c. Material Handling and Storage Outreach,
(<http://www.osha.gov/doc/outreachtraining/htmlfiles/mathan.html>);
- d. Powered Industrial Trucks (OSHA Training & Reference Materials Library),
(<http://www.osha.gov/dcsp/ote/trng-materials/pit/pit.html>);
- e. Forklift Operation & Safety (free-training.com),
(<http://www.free-training.com/OSHA/forklift/forkmenu.htm>);
- f. OSHA Training Institute (OTI), Course #7005, Public Warehousing and Storage,
(<http://www.osha.gov/fso/ote/training/edcenters/index.html>); and
- g. OSHA Publication #3220 - Warehousing Pocket Guide,
(<https://safety.army.mil/LinkClick.aspx?fileticket=J2bmyFsfgJ0%3d&tabid=555>).

23.7 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 24
MOLD SAFETY PROGRAM**

24.1 Purpose

To specify the minimum SOH Program requirements for providing personnel adequate protection from mold, fungus, and mildew within NARA.

24.2 References

- a. Occupational Safety and Health Act of 1970: General Duty Clause, Section 5(a) 1: Duties,
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=OSHACT&p_id=3359)
- b. 29 CFR 1910.141- Sanitation,
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9790)
- c. OSHA Letter of Interpretation- 01/24/2003 - "Enforcement Policy for Respiratory Hazards Not Covered by OSHA Permissible Exposure Limits,"
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=INTERPRETATIONS&p_id=24749)
- d. 29 CFR 1910.132 – Personal Protective Equipment,
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9777)
- e. 29 CFR 1910.134 – Respiratory Protection,
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=12716)
- f. Justification for the use of respirators to prevent the inhalation of harmful airborne contaminants that are alive or were released from a living organism (e.g., mold spores),
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=FEDERAL_REGISTER&p_id=13749)
- g. NARA Directive 1571, Archival Storage Standards, Appendix A: Temperature and Relative Humidity Standards for Archival Records,
(http://www.nara-at-work.gov/nara_policies_and_guidance/directives/1500_series/word/1571_appa.doc)
- h. NARA Directive 1561, Records Emergency Preparedness and Recovery in NARA Facilities: Staff Responsibilities,
(http://www.nara-at-work.gov/nara_policies_and_guidance/directives/1500_series/nara1561.html)

24.3 Scope

- a. This chapter applies to all NARA personnel with potential for on-the-job exposure to mold, mildew, or fungi, and defines organizational responsibilities.
- b. Planning and implementing a good indoor air quality program is the key to minimizing the growth of biological contaminants, such as mold, that are dependent on environmental factors, including high relative humidity and temperature and inadequate air exchanges. Recommended levels to reduce the risk of mold growth are listed in NARA Directive 1571, Archival Storage Standards.
- c. Review each mold damage incident, devise an appropriate mold remediation action plan in consultation with the SOHPM, Records Emergency Management Team (REMT), Preservation Programs (NWT-L and NWT-R) and the onsite Supervisory Archivist.

24.4 Program Requirements

NARA implements a Mold Safety Program that includes the following requirements:

- a. The Use of Personal Protective Equipment (PPE) when implementing mold remediation procedures.
- b. Appropriate assessment of mold-contaminated records.
- c. Safe disposal of mold-damaged, non-record materials or other debris.
- d. Testing and analysis of mold damaged records as appropriate.
- e. Appropriate engineering controls when conducting mold remediation activities or procedures.

24.5 Responsibilities

- a. **SOHPM**
 - (1) Develops NARA-wide Mold Safety program policy and guidance.
 - (2) Evaluates the effectiveness of the NARA Mold Safety Program annually and modifies the procedures and requirements as necessary.
 - (3) Provides technical advice and guidance to NARA facility managers to develop a local facility Mold Safety Program.

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(4) Evaluates the effectiveness of the local facility Mold Safety Program as part of periodic security and safety inspections and makes recommendations for improvements.

(5) Assists Facility Managers or Designees to develop the local facility Mold Safety Program.

(6) Keeps abreast of the current technology for mold contamination assessment, exposure assessment, and remediation techniques, and ensures that resources are available to assist facilities in facility program administration and implementation.

b. Facility Managers or Designees

(1) Develop and implement a written facility Mold Safety Program that establishes mold mitigation procedures and complies with the requirements of: NARA Directive 1561, Records Emergency Preparedness and Recovery in NARA Facilities, 29 CFR 1910.132 (Personal Protective Equipment), and 29 CFR 1910.134 (Respiratory Protection) and Section 5(a)1 of the OSHA Act (General Duty Clause).

(2) Periodically evaluate the effectiveness of the facility Mold Safety Program and makes appropriate improvements.

(3) Review each mold damage incident, devise an appropriate mold remediation action plan in consultation with the SOHPM, REMT, Document Conservation, Preservation Programs (NWT-L and NWT-R) and the onsite Supervisory Archivist.

(4) Consult with a CIH:

(a) to determine the appropriate protocol regarding personal protection equipment which may include latex or nitrile gloves, an N-95 face mask, respirator, and/or lab coats or coveralls. (See Chapter 10, Respiratory Protection Program and Chapter 25, Personal Protective Equipment.)

(b) to determine the appropriate engineering controls (e.g., fume hood, etc.) for mold remediation activities and procedures.

c. Supervisory Archivists

(1) In a non-emergency situation, contact the facility manager when mold is found on, near, or around records (i.e., walls, furniture, shelves, air handlers, etc).

(2) Notify Preservation Programs (NWT-L and NWT-R) to discuss mold remediation treatment and records duplication.

d. Employees

(1) Notify supervisor of conditions that may lead to mold growth on building material or records (e.g., evidence of building water intrusion or leaky pipes).

(2) Notify supervisor of mold damaged records upon discovery, so appropriate action can be taken to mitigate damage.

(3) Avoid contact with mold unless using appropriate personal protective equipment as recommended by a CIH. (See par 24.5b (2), Chapter 10 and Chapter 25.)

e. Preservation Programs (NWT)

(1) Works with local facilities to assess records that are mold damaged and to develop preservation and conservation remedies. Solutions may include: treatment, creation of surrogate copies, or segregated storage.

(2) Provides a list of approved cleaners upon request. All “cleaners” need to be approved in advance of use; appropriate “cleaners” may be used on surfaces such as walls, shelving; never on records. Note: Do not use bleach because chlorine fumes are dangerous to humans and damage the records.

(3) Provides standard protocols for dealing with mold-damaged records. Positive mold identification is not required.

Note: For further clarification of responsibilities listed above, see NARA Directive 1561, Records Emergency Preparedness and Recovery in NARA Facilities, paragraph 1561.7, Staff Responsibilities.

24.6 Additional Resources

a. NIOSH Safety and Health Topic: Indoor Environmental Quality,
(www.cdc.gov/niosh/topics/indoorenv)

b. US EPA Indoor Air Quality – Mold Resources,
(www.epa.gov/iaq/molds/moldresources.html)

c. US EPA Building Air Quality: A guide for Building Owners and Facility Managers,
(http://www.epa.gov/iaq/largebldgs/pdf_files/iaq.pdf)

d. US EPA Building Air Quality Action Plan,
(http://www.epa.gov/iaq/largebldgs/pdf_files/baqactionplan.pdf)

e. Indoor Air Quality Building Education and Assessment Model (IBEAM),
(<http://www.epa.gov/iaq/largebldgs/i-beam/index.html>)

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- f. American Industrial Hygiene Association: Facts about Mold,
(<http://www.aiha.org/Content/AccessInfo/consumer/factsaboutmold.htm>)
- g. CDC Emergency Preparedness and Response: Protect Yourself from Mold,
(<http://www.bt.cdc.gov/disasters/mold/protect.asp>)
- h. Nilfisk Industrial HEPA Vacuum Cleaners,
(www.nilfiskefm.com)
- i. National Academies of Science, Press Release: Indoor Mold, Building Dampness Linked to Respiratory Problems and Require Better Prevention; Evidence Does Not Support Links to Wider Array of Illnesses,
(<http://www8.nationalacademies.org/onpinews/newsitem.aspx?RecordID=11011>)
- j. EPA Mold Remediation in Schools and Commercial Buildings,
(http://www.epa.gov/mold/mold_remediation.html)
- k. EPA - A Brief Guide to Mold Moisture and Your Home,
(<http://www.epa.gov/mold/moldguide.html>)
- l. New York City Department of Health & Mental Hygiene, Bureau of Environmental & Occupational Disease Epidemiology,
(<http://www.nyc.gov/html/doh/html/epi/moldrpt1.shtml>)
- m. The Indoor Air Quality Association (IAQA) Mold Resources Links page,
(http://www.iaqa.org/mold_resource_links.htm)
- n. A Brief Guide to Molds in the Workplace - Information Bulletin SHIB 03-10-10, (<http://www.osha.gov/dts/shib/shib101003.html>)
- o. Fact Sheet on Natural Disaster Recovery: Fungi,
(<http://www.osha.gov/OshDoc/fungi.html>)
- p. Fungi - OSHA Fact Sheet (2003),
(http://www.osha.gov/OshDoc/data_Hurricane_Facts/Bulletin3.pdf)
- q. Molds and Fungi - Safety and Health Topics,
(<http://www.osha.gov/SLTC/molds/>)
- r. ASHRAE Standard 62.1-2004 “Ventilation for Acceptable Indoor Air Quality”
- s. ASHRAE Standard 55-2004 “Thermal Environmental Conditions for Human Occupancy” will be added to par 24.6(r) and (s).

24.7 Preservation and Conservation Resources

a. Survey on Acquisition, Treatment, Access, and Storage of Moldy Materials by Olivia Primanis,
(http://palimpsest.stanford.edu/byauth/primanis/mold_survey_summary_2004-10.html)

b. National Park Service Conservation program #3/4, July 1993: Mold and Mildew Prevention of Microorganism Growth in Museum Collections,
(<http://www.cr.nps.gov/museum/publications/conserveogram/03-04.pdf>)

c. Additional sources of information on mold and remediation in collections:

(1) “Fungal Facts” by Mary Lou Florian (Archetype Books, 2003) ISBN: 1873132638,
(<http://www.amazon.com/exec/obidos/ASIN/1873132638/emarketplace-20>)

(2) “Mould Prevention and Collection Recovery: Guidelines for Heritage Collections” by Sherry Guild and Maureen MacDonald (CCI 2004) ISBN: 0-662-35932-1,
(<http://www.cci-icc.gc.ca/bookstore/viewCategory-e.cfm?id=18&thispubid=500>)

(3) “Art, Biology, And Conservation: Biodeterioration of Works of Art” by Robert J. Koestler, Victoria H. Koestler, A. Elena Charola, Fernando E. Nieto-Fernandez (Yale University Press 2004) ISBN-10: 0300104820,
(<http://www.amazon.com/Art-Biology-Conservation-Biodeterioration-Metropolitan/dp/0300104820>)

(4) “Invasion of the Giant Spore” by Sandra Nyberg November 1987, SOLINET July 2003 ([http://www.lyrasis.org/Preservation/Resources and Publications/Invasion of the Giant Mold Spore.aspx](http://www.lyrasis.org/Preservation/Resources_and_Publications/Invasion_of_the_Giant_Mold_Spore.aspx))

(5) The NARA@work preservation page (http://www.nara-at-work.gov/archives_and_records_mgmt/archives_and_activities/preservation/index.html)

24.8 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

CHAPTER 25

PERSONAL PROTECTIVE EQUIPMENT (PPE) PROGRAM

25.1 Purpose

To specify the minimum SOH Program requirements for the selection, issuance, use, maintenance, and storage of personal protective equipment (PPE).

25.2 References

- a. Section 5(a)1 of the OSHA Act,
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=OSHACT&p_id=3359
- b. 29 CFR 1910.132-138 (Subpart I), “Personal Protective Equipment,”
(http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_part_number=1910#1910_Subpart_I)
- c. 29 CFR 1910.95, “Occupational Noise Exposure,”
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9735)

25.3 Scope

This chapter applies to all NARA operations and activities. The purpose of this policy is to prescribe guidance concerning the selection, usage, and maintenance of PPE necessary to allow employees and volunteers to perform assigned tasks. PPE is provided at no cost to employees and volunteers. Contractors are responsible for procuring and providing PPE to contractor personnel.

25.4 Program Requirements

NARA implements a Personal Protective Equipment Program that includes the following requirements:

- a. **A written PPE Program that:**
 - (1) Provides PPE to protect employees from occupational hazards, at no cost to employees.
 - (2) Provides PPE to employees when the need is indicated by the JHA.
(See Chapter 7 – JHAs)
 - (3) Provides employee training on proper selection, inspection, use, maintenance, storage, and disposal of PPE.

(4) Provides proper fitting of the equipment (e.g., hearing protectors, respirators, footwear).

(5) Provides a list of appropriate responsibilities of facility manager, supervisors, and employees for the effective implementation of the program.

(6) Provides appropriate medical evaluation and monitoring for employees required to wear a respirator.

b. Eye Protection

(1) Provide eye protection devices (meeting the requirements of ANSI Standard Z87.1 1989) for all employees working in or visiting an eye hazard area. (See chapter 7 “JHAs” for guidance on hazard determination using JHAs.)

(2) Evaluate the work environment in eye hazard areas to determine the suitability of wearing contact lenses in addition to eye protection devices. Contact lenses are not considered a substitute for approved eye protection. In some instances, contact lenses may increase the hazard to the eyes.

(3) Provide eye protective devices designed to fit over standard eyeglasses (e.g., goggles, face shields) to be used by those employees who use standard eyeglasses.

c. Head Protection

(1) Provide safety helmets or “hard hats” (meeting the requirements of ANSI Z89.1- 1986 “American National Standard for Industrial Head Protection,” Class A (Type I or II)) to be used by employees where overhead hazards exist (e.g., danger of head injuries from falling objects or other hazards).

(2) Use safety helmets on jobs involving construction; confined space entry; the movement of earth, rock and gravel; crane operations.

d. Hand Protection - Provide protective gloves to be used by employees working with or handling materials likely to be hazardous to the hands. Gloves are rated for the type of materials being handled.

e. Foot Protection - Provide personal protective footwear (meeting the requirements of ANSI Z41-1991 "American National Standard for Personal Protection-Protective Footwear") to be worn in all areas where foot hazards exist (e.g., danger of foot injuries from falling or rolling objects, objects piercing the sole, electrical hazards).

f. Respiratory Protection Equipment - (See Chapter 10 of this Handbook.)

g. **Other Protective Equipment** - Furnish equipment to meet special conditions if such equipment would not ordinarily be purchased by the employee for personal use. For example, if mission requirements call for personnel to preserve records, which may have been contaminated by mold, disposable over-suits, shoe covers and appropriate PPE will be provided to the employee.

25.5 Responsibilities

a. SOHPM

- (1) Develops the NARA-wide PPE program.
- (2) Evaluates the effectiveness of the NARA-wide PPE program and modifies requirements as necessary.
- (3) Provides technical assistance and guidance to facility managers on PPE issues and program requirements to ensure compliance with NARA standards.
- (4) Keeps abreast of current PPE technology and regulatory requirements.
- (5) Evaluates the local facility PPE program effectiveness and makes recommendations for improvements during periodic security and safety inspections.

b. Facility Managers or Designees

- (1) Develop and implement the facility PPE program.
- (2) Periodically evaluate the effectiveness of the facility PPE program and make modifications and improvements as needed.
- (3) Consult with SOHPM as needed to ensure proper selection of PPE.
- (4) Provide employee awareness and training regarding the proper usage of PPE, to include proper fit, limitations, and maintenance of equipment.
- (5) Assist organizational managers and supervisors in the proper PPE procurement, selection, training, maintenance, and use.

c. Supervisors

- (1) Ensure that employees are trained in proper usage of PPE.
- (2) Ensure that employees wear or use PPE in accordance with facility PPE program requirements.

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(3) Ensure that employees maintain PPE in accordance with the manufacturer's recommendations and the facility PPE program requirements.

d. Employees

(1) Wear or use all necessary PPE that is required in the performance of duties in accordance with the facility PPE program requirements.

(2) Complete required PPE training and education programs applicable to the type of PPE provided.

(3) Maintain required PPE in accordance with the manufacturer's recommendations and the facility PPE program requirements.

25.6 Additional Resources

a. OSHA Publication 3151 Personal Protective Equipment,
(<http://www.osha.gov/Publications/osh3151.pdf>)

b. OSHA Publication (September 30, 1998), Small Entity Compliance Guide for the Revised Respiratory Protection Standard,
(<http://www.osha.gov/Publications/secgrev-current.pdf>)

c. Lab Safety Supply Fact Sheet: "Hard Hats,"
(<http://www.labsafety.com/refinfo/ezfacts/ezf241.htm>)

d. American National Standards Institute (ANSI) Standard Z87.1 2003 "Occupational and Educational Personal Eye and Face Protection Devices,"
(<http://webstore.ansi.org/RecordDetail.aspx?sku=ANSI%2fASSE+Z87.1-2003>)

e. ANSI Standard Z89.1, 1986,
(<http://global.ihs.com/ansiz89.1>)

25.7 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 26
BLOODBORNE PATHOGENS PROTECTION PROGRAM**

26.1 Purpose

To specify the minimum SOH Program requirements for Bloodborne Pathogen Protection (BBP) provided to NARA personnel engaged in activities that may affect their health.

26.2 References

- a. 29 CFR 1910.1020, Access to Employee Exposure and Medical Records, (http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10027);
- b. 29 CFR 1910.1030, Occupational Exposure to Bloodborne Pathogens, (http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10051); and
- c. 29 CFR 1910.151, “Medical Services and First Aid,” (http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9806).

26.3 Scope

This program applies to all NARA employees, contractors, or volunteers whose duties require them to come into contact with blood or other potentially infectious materials (OPIM).

26.4 Program Requirements

NARA implements a Bloodborne Pathogens Protection Program that includes the following requirements:

- a. A written BBP program
 - (1) Each facility that has personnel with potential occupational exposure to bloodborne pathogens (BBP) must have a written exposure control plan.
 - (2) A template exposure control plan may be found in OSHA Publication # 3186, “Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards,” (<http://www.osha.gov/Publications/osh3186.pdf>)
- b. Implement universal precautions and procedures as outlined in 29 CFR 1910.1030(d) to prevent contact with blood or OPIM.

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c. Place biohazard warning labels on containers of regulated waste, refrigerators and freezers containing blood, OPIM, and containers used for storage, transport, or shipment of blood or OPIM.

d. Provide employee training in accordance with 29 CFR 1910.1030(g)(2) and include site-specific information. See a list of qualified instructors at the American Red Cross.

e. Maintain training and medical records in accordance with 29 CFR 1910.1030(h).

f. Medical Program/Vaccination

(1) Provide the hepatitis B vaccination series at no cost to the employees determined to have occupation exposure in accordance with 29 CFR 1910.1030(f)(2).

(2) Provide post-exposure evaluation and follow-up in accordance with 29 CFR 1910.1030(f)(3). Document the exposure incident using NARA form 6060. Give healthcare providers evaluating the exposure incident NARA form 6061 to complete.

g. Special Issues - 29 CFR 1910.15 requires either emergency services (i.e., clinic, infirmary, hospital) in near proximity (within 15 minutes travel time), or the presence of an adequate first aid kit, as well as an appropriately trained and certified first aid provider on site.

h. Designated First Aid Providers

(1) Employees whose primary job is unrelated to rendering of first aid or medical assistance but who may perform these functions as a collateral duty in an emergency are considered to have occupational exposure and are covered by all provisions of the standard.

(2) A facility may choose to defer vaccinating designated first aid providers until after their involvement in a first aid incident. If this policy is chosen, the following conditions (i-iv) will be met:

(a) Institute reporting procedures to ensure that all first aid incidents involving the presence of blood or OPIM are reported before the end of the work shift during which the first aid incident occurred. This report (Use NARA form 6061) will include the names of all first aid providers who rendered assistance and the time and date of the incident.

(b) The training program will include the specifics of the reporting procedures referenced at par. 26.4f (2) for first aid providers.

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(c) The full hepatitis B vaccination series will be made available within 24 hours, at no cost, to all unvaccinated first aid providers who have rendered assistance in any situation involving the presence of blood or OPIM regardless of whether or not a specific exposure incident occurred.

(3) In addition to the requirements of 29 CFR 1910.1030(d)(3), personal protective equipment for first aid providers must include:

(a) disposable latex gloves in a variety of sizes.

(b) face shields or masks and eye protection, and gowns if there is the potential for splashes of body fluids.

(c) resuscitation equipment, such as pocket mouth-to-mouth resuscitation masks.

26.5 Responsibilities

a. SOHPM

(1) Develops the NARA-wide BBP program.

(2) Evaluates the effectiveness of the NARA-wide BBP program and modifies requirements as necessary.

(3) Keeps abreast of the current BBP technology and regulatory requirements.

(4) Evaluates the NARA facility BBP program effectiveness and makes recommendations for improvements during periodic security and safety inspections.

(5) Provides technical assistance and guidance to facility managers on BBP issues and program requirements to ensure compliance with NARA standards.

b. Facility Managers or Designees

(1) Develop and implement the facility BBP program.

(2) Periodically evaluate the effectiveness of the facility BBP program and make modifications and improvements as needed.

(3) Consult with the SOHPM as needed to insure proper selection of PPE and engineering controls for the BBP program.

(4) Assist supervisors in implementation of the BBP program and training and education component.

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(5) Assist supervisors in identifying personnel with potential for occupational exposure to BBP and help conduct or coordinate appropriate training programs.

(6) Assist in local development of standard operating procedures (SOPs) and in maintaining required BBP program documentation.

c. Supervisors

(1) Provide personnel training and education on the BBP program.

(2) Provide personnel medical records to employees and to others with written consent of the person upon request, in accordance with 29 CFR 1910.1020.

(3) Determine which personnel have occupational exposure to bloodborne pathogens (See chapter 7 – JHAs), ensure that these employees receive required training. NARA personnel who are designated as responsible for rendering first aid or medical assistance will be considered to have occupational exposure to bloodborne pathogens and will be covered under 29 CFR 1910.1030 and this chapter.

(4) Provide access for personnel to vaccination and medical evaluation as required and maintain records as part of the personnel permanent record.

(5) Develop SOPs for operations where potential BBP incidents could occur, these Standards must cover appropriate decontamination and disposal procedures, personal protective equipment, engineering controls, and appropriate work practices.

(6) Sign a consent or declination form for the hepatitis B vaccine (see NARA form 6059).

d. Employees

(1) Participate in all required training programs.

(2) Read and become familiar with the facility's BBP program and SOPs related to BBP.

(3) Wear appropriate personal protective equipment and observe appropriate work practice controls, including universal precautions.

(4) Sign a consent or declination form for the hepatitis B vaccine (see NARA form 6059).

26.6 Additional Resources

- a. OSHA Publication #3186, “Model Plans and Programs for the OSHA Bloodborne Pathogens and Hazard Communications Standards,”
(<http://www.osha.gov/Publications/osh3186.pdf>)
- b. OSHA BBP Technical Resources page,
(<http://www.osha.gov/SLTC/bloodbornepathogens/index.html>)
- c. Free OSHA Training Course #2340: “Biohazards,”
(http://oshaelearning.org/registration/show_classes?courseid=2340)
- d. OSHA Directorate of Training and Education Training Resources,
(<http://www.osha.gov/dcsp/ote/index.html>)
- e. HepNet - The Hepatitis Information Source,
(<http://www.hepnet.com/>)
- f. OSHA Publication #3110 “Access to Medical and Exposure Records”
(<http://www.osha.gov/Publications/osh3110.pdf>)

26.7 Records Management

The SOH program records created and/or maintained by the functions and activities described in this Handbook are currently unscheduled. They may not be destroyed until appropriate disposition instructions have been approved by the Archivist of the United States and published in the NARA Records Schedule. A request for disposition authority is in progress.

**CHAPTER 27
ANNUAL SAFETY AND OCCUPATIONAL HEALTH PROGRAM REPORTS**

27.1 Purpose

To specify the SOH Program reporting requirements for the development and submission of “The Comprehensive Report on the SOH Program to the Secretary of Labor.”

27.2 References

- a. Executive Order 12196, Section 1-201 (I),
(<http://www.archives.gov/federal-register/codification/executive-order/12196.html>)
- b. 29 CFR 1960.71, “Agency Annual Reports,”
“(a) (http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=11305)
- c. 29 CFR 1960.79, “Self-evaluations of occupational safety and health programs,”
(http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=11313)
- d. Section 19(a)5 of the Occupational Safety and Health Act (OSH Act)
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=OSHACT&p_id=3373

27.3 Program Requirements

a. NARA annually submits “The Comprehensive Report on the SOH Program to the Secretary of Labor.” This report describes NARA’s Program for the previous fiscal year and goals for the current year using the NARA injury and illness statistics, Safety and Health Program action plans, program goals and accomplishments.

(1) Additional required information will be included as specified in the “Annual Request for Fiscal Year Report on Occupational Safety and Health” from the Department of Labor.

(2) This report is submitted on a time schedule set by the OSHA’s Office of Federal Agency Programs.

b. The SOHPM develops the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” that incorporates NARA-wide and NARA facility SOH program annual action plans, accomplishments for the preceding fiscal year, and establishes goals and objectives for the enhancement of performance in the upcoming fiscal year.

(1) Goals are specific, programmatic, and measurable with responsibility for implementation clearly identified.

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(2) Upon approval of the plan by the NARA Senior Safety and Health Official, a copy is provided to the DASHO for review and approval by the December 1 of each calendar year.

c. NARA facilities submit to the SOHPM the “Facility SOH Program Report” that includes:

- (1) actions plans;
- (2) injury and illness statistics (See Chapter 4 of this handbook);
- (3) facility SOH program accomplishments; and

(4) goals and objectives for the enhancement of the facility SOH program. Goals should focus on accident prevention and improving any facility SOH program discrepancies identified during the periodic SOHPM and/or facility manager SOH program review.

27.4 Responsibilities

a. **DASHO** - Approves and submits the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor.”

b. **SOHPM**

(1) Develops the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” that incorporates NARA-wide and NARA “Facility SOH Program Report” by November 15th of each calendar year. The comprehensive report consists of a list of goals and objectives to enhance the NARA-wide SOH program, an action plan to achieve the goals and objectives, NARA’s injury and illness data from the Department of Labor, a discussion of the SOH program accomplishments. Additional required information will be included as specified in the “Annual Request for Fiscal Year Report on Occupational Safety and Health” from the Department of Labor.

(2) Submits the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” to the Senior Safety and Health Official for review and approval no later than November 15th of each calendar year.

(3) Submits the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” to the DASHO for review and approval no later than December 1st of each calendar year.

(4) Makes the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” available to all NARA employees by posting it on the Security and Safety page of the NARA@work web site.

c. Facility Manager

(1) Develops and submits to the SOHPM a “Facility SOH Program Report” consisting of:

- (a) a list of goals and objectives to enhance the facility SOH program;
- (b) an action plan to achieve the goals and objectives;
- (c) injury and illness data from the facility via OSHA form 300 “Log of Injury and Illness” (See Chapter 4 of this handbook for injury and illness reporting procedures); and
- (d) a discussion of the facility SOH program accomplishments.

(2) Goals (i.e., mentioned in (1) (a) above) should focus on accident prevention and improving any facility SOH program discrepancies identified during the periodic SOHPM and/or facility manager SOH program review.

(3) Submits the facility SOH Program Report to the SOHPM by October 31st of each calendar year.

(4) Makes the Facility SOH Program Report available at the facility to all employees.

Note: The Facility SOH Program Report is incorporated into the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” as an appendix. All Federal Agency Reports are consolidated into the “Annual President's Report on Safety and Health.”

d. **NSHC** - Consults with the SOHPM, in accordance with the committee charter, in establishing goals and objectives and an action plan to achieve the goals and objectives for the “NARA Comprehensive Report on the SOH Program to the Secretary of Labor.”

e. **LSHC** - Consults with the Facility Manager, in accordance with the committee charter, in establishing goals and objectives and an action plan to achieve the goals and objectives for the “Facility SOH Program Report.”

27.5 Additional Resources

a. OSHA Publication #3245 – 2005, “Recordkeeping Handbook,” (<http://www.osha.gov/recordkeeping/handbook/index.html>)

b. The FY 2007 Annual President's Report on Safety and Health, (http://www.osha.gov/dep/fap/annual_presidents_report_fy07.pdf)

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c. The FY 2008 “NARA Comprehensive Report on the SOH Program to the Secretary of Labor” (see NARA@work safety and security information page)

27.6 Records Management

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