



**Federal Employee Occupational Safety and Health
Program for
Office of Health, Safety and Security (HSS)
Federal Employees**

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**Federal Employee Occupational Safety and Health
Program Plan for
DOE HSS Federal Employees**

POLICY STATEMENT

I want to highly emphasize my support and the importance of your participation in our HSS Federal Employee Occupational Safety and Health (FEOSH) program. The Office of Health, Safety and Security (HSS) is committed to providing safe and healthful working conditions for our employees.

This commitment is implemented through an effective Federal Employee Occupational Safety and Health (FEOSH) Program for HSS employees, which builds upon the Department's integrated safety management (ISM) core functions and guiding principles.

The accomplishment of DOE's mission depends on the safety and health of its employees. As such, each HSS program element must implement practices contained in this document that afford optimal protection of its employees.

The FEOSH Program for HSS Federal employees is designed to be 'owned' and implemented by all HSS managers and employees. The program's success depends in great measure upon open and honest communication between employees and management.

This team approach facilitates the recognition of existing and emerging safety and health concerns and the timely application of appropriate hazard mitigation actions. It is critical that all HSS personnel become involved in seeking and suggesting ways to improve the effectiveness of the FEOSH Program for HSS employees.

I want each of you to take the time to become familiar with this document, and personally commit yourself to supporting the HSS FEOSH program with your participation, awareness, and actions to promote a safe and healthy work environment.

Our shared goal in this program is for all of us to return home to our families at the end of each workday with no work-related injury or illness.



Glenn S. Podonsky
Chief Health, Safety and Security Officer
Office of Health, Safety and Security

1.0 Purpose.

The purpose of this document is to describe the FEOSH Program for the Department of Energy (DOE) HSS Federal employees and covered contractors. This document provides all HSS personnel with the information, and references to additional information, needed to understand how to provide a safe and healthful work environment. This document describes the aspects of the FEOSH Program and provides guidance in its implementation for all HSS employees and work environments.

2.0 Background.

Successful implementation of a FEOSH Program for HSS requires participation by employees in their safety and health program, and integration of safety and health into all aspects of work. Implementation of the FEOSH Program for HSS and covered contractor employees is achieved by applying the ISM core functions and guiding principles as described in DOE Publication 450.4, *Safety Management System Policy*:

A. Core Functions:

- Define the Scope of Work
- Analyze the Hazards
- Develop and Implement Hazard Controls
- Perform Work within Controls
- Provide Feedback and Continuous Improvement

B. Guiding Principles:

- Line Management Responsibility for Safety
- Clear Roles and Responsibilities
- Competence Commensurate with Responsibilities
- Balanced Priorities
- Identification of Safety Standards and Requirements
- Hazard Controls Tailored to Work Being Performed
- Operations Authorization

FEOSH Program requirements are established by statutes, regulations, and orders. By law (Section 19(a) of the Occupational Safety and Health Act of 1970, as amended), each Federal agency is required to develop and implement a safety and health program that is designed to protect its Federal employees from workplace hazards, illnesses, and injuries. Furthermore, each agency must appoint a Designated Agency Safety and Health Official (DASHO) who is responsible for monitoring and reporting on the effective management and implementation of the agency's FEOSH Program(s). The Chief Health, Safety and Security Officer is the DASHO for DOE employees.

The workplace safety and health standards for the FEOSH Program are:

- Section 19 of the *Occupational Safety and Health Act of 1970*, Public Law 91-596, 91st Congress, S. 2193, December 29, 1970
- Executive Order 12196, *Occupational Safety and Health Programs for Federal Employees*
- Title 29 Code of Federal Regulations, Part 1960 (29 CFR 1960), *Elements for Federal Employee Occupational Safety and Health Programs*
- Title 10 CFR Part 835, *Occupational Radiation Protection*
- Title 10 CFR Part 850, *Chronic Beryllium Disease Prevention Program*
- DOE Order 440.1A, *Worker Protection Management for DOE Federal and Contractor Employees*
- DOE O 231.1A, *Environment, Safety, and Health Reporting*
- DOE Order 442.1, *Department of Energy Employee Concerns Program*
- DOE Order 341.1, *Federal Employee Health Services*
- DOE P 450.4, *Safety Management System Policy*
- Title 41 CFR Part 102-74.240 to .260, Federal Management Regulation, *Occupant Emergency Plans*.

Within DOE, line management is responsible and accountable for the safety and health of their employees. As such, each HSS departmental element is required to implement a FEOSH program for their employees that is graded to the hazards and activities of their work duties and environment. The Office of Corporate Safety Programs (HS-31) provides essential technical support and consultation to other HSS program elements to effect consistent and compatible FEOSH programs throughout HSS. Each HSS program element must designate a FEOSH safety and health coordinator for their respective organization to assist the HS-31, Safety and Health Manager in implementing the FEOSH program. For more information on the FEOSH program, links to the directives and requirements, visit the FEOSH web site at: <http://www.hss.energy.gov/CSA/CSP/feosh/index.html>

3.0 Applicability.

The policies and guidelines contained within this document apply to all HSS Federal personnel. The policies and guidelines contained within this document also apply to “HSS covered contractors” while working in or visiting Federal owned or leased facilities if the contractor has affirmed, in writing, that they will comply with the provisions of this document. This is intended to fulfill their requirements for a safety and health program in accordance with 10 CFR 851 “Worker Safety and Health Program”. This program supplements, but does not replace, the contractor’s corporate program to comply with OSHA and with state workers’ compensation requirements for their employees. HSS line managers and covered HSS contractors must ensure: 1) that their managers and employees become familiar with this document and abide by its policies; 2) that all aspects of the FEOSH program are fully implemented; and 3) that contractors located in their space and occasional visitors are afforded safe and healthful working conditions.

4.0 Program Structure.

Four key elements must exist to implement an effective FEOSH Program for HSS employees. These four program elements, described by the Department of Labor (DOL) in their *Safety and Health Program Management Guidelines*, January 26, 1989, are consistent with the Department's ISM policy which is the cornerstone of the DOE's safety and health program. The key elements are:

- Management commitment and employee involvement;
- Workplace hazard analysis;
- Hazard prevention and abatement; and
- Mandatory Safety and health training.

The following sections provide detailed discussions of these program elements.

4.1 Management Commitment and Employee Involvement.

Management responsibility is one of the ISM guiding principles. HSS management commitment is critical to the successful implementation of the FEOSH Program for HSS employees. In an effective program, management regards worker safety and health as a fundamental value to be pursued with as much vigor as other organizational goals.

HSS employee involvement also is critical to the successful implementation of the FEOSH Program for HSS employees. HSS employee involvement provides the means through which workers develop and/or express their commitment to safe and healthful practices for themselves and for their fellow workers.

4.1.1 HSS Line Management Responsibilities.

HSS line management is responsible for the overall integrity and implementation of the FEOSH Program for HSS employees. In order to implement an effective program, HSS line management and covered contractors' management must support awareness activities; workplace inspections; investigation of safety and health concerns; hazard communication, abatement, and control; employee training and, other safety and health related initiatives.

HSS line managers and supervisors are responsible for the safety and health practices of their employees in their respective work areas and in the pursuit of their work activities when away from their assigned office. Furthermore, supervisors have the authority to re-locate an employee from their work area or to implement a stop-work mandate if they perceive a real or potential, serious threat to the worker's health or safety, or that of others.

Additionally, HSS line managers must, under the provisions 29 CFR 1960, post the responsibilities of both its managers and employees, the rights of employees and their

representatives, the name of the Safety and Health Manager, the FEOSH safety and health coordinator, and the DASHO. This information is contained within the FEOSH Poster, available through HS-31, and must be displayed where HSS employees work and congregate.

HSS line managers and covered HSS contractors also have certain responsibilities related to recordkeeping practices. Line managers must: 1) ensure that recordkeeping procedures are implemented for their organizations; 2) designate a FEOSH safety and health coordinator to serve on the HSS FEOSH Committee, and coordinate with the HSS Safety and Health Manager in implementing the FEOSH program and, 3) ensure that records created from workplace inspections, hazard analyses and surveys, exposure monitoring, medical surveillance, work permits and procedures, employee safety and health concerns, or other FEOSH-related activities are created in accordance with DOE Order 440.1A and maintained in accordance with DOE Order 1324.5B, *Records Management Program*, including Federal confidentiality requirements.

Subject to confidentiality policies and procedures, records reflecting inspections, hazard analyses, employee concerns, and work practices must also be accessible to employees and their representatives upon request. HSS employees may access their personal health record by contacting the manager of the Germantown or Forrestal Federal Employee Health Units.

4.1.2 HSS Safety and Health Manager Responsibilities.

Each HSS Departmental element and covered contractor must designate a FEOSH safety and health coordinator for their respective organization. The HSS safety and health coordinators are expected to coordinate their offices FEOSH activities with the HSS Safety and Health Manager. The HSS Safety and Health Manager must perform his or her duties and responsibilities in accordance with the requirements in 29 CFR 1960. The HSS Safety and Health Manager is responsible for the following aspects of the program:

- Administer the FEOSH Program activity for HSS employees.
- Ensure that required FEOSH training and HSS workplace inspections are conducted.
- Target safety and health activities in high-risk or identified problem areas.
- Conduct or coordinate the investigation of employee concerns and reports of unsafe/unhealthful working conditions.
- Coordinate prompt abatement of occupational safety and health hazards, and monitor progress.
- Encourage employee participation and involvement.
- Provide regular feedback to management concerning occupational safety and health hazards.
- Identify trends in workplace hazards or injuries and initiate programs to address these trends.

- Ensure that the respective OSHA Log 300A is posted in each HSS workplace annually.
- Review and maintain Material Safety Data Sheets (MSDS) for hazardous materials received, stored, or used in HSS-occupied spaces.

4.1.3 Employee Rights and Responsibilities.

All HSS employees and covered contractors have rights as well as responsibilities in maintaining a safe and healthful workplace, including:

- Work in an environment that is safe and devoid of known occupational hazards and health risks.
- Know what identified occupational hazards exist, and the corrective actions taken to eliminate or reduce those risks.
- Stop work IMMEDIATELY without fear of reprisal, should a situation arise that puts them or a co-worker in immediate danger.
- Report unsafe work conditions or practices to their supervisor, HSS Safety and Health Manager, their Senior Manager, the Chief Safety, Health and Security Officer, (HS-1), the National Treasury Employees Union (NTEU), the Occupational Safety and Health Administration (OSHA), or any other appropriate authority, without fear of reprisal and receive timely notification when the issue is adequately resolved.
- Request inspections of unsafe or unhealthful working conditions.

HSS employee responsibilities go hand-in-hand with employee rights. Commensurate with the right to work in a safe and healthful environment is the responsibility to act in ways that promote safety. Specifically, employees must:

- Comply with applicable OSHA laws, and DOE safety and health implementing policies and directives.
- When at other DOE facilities on official government travel, follow all site-specific policies and procedures (e.g., training requirements, use of personnel protective equipment, wearing dosimeters, etc.) that have been established by the respective DOE field offices or their operating contractors.
- Know the location of, and the information contained on MSDS for the chemicals contained in their work area while in DOE owned or leased space, or on travel.
- Report recognized hazards to their immediate supervisor.
- Stop work immediately if they perceive a real or potential serious risk of injury to either themselves or a co-worker.
- Report work related injuries or illnesses first to their supervisor.
- Know and follow the emergency evacuation procedures for their work area.

- Participate in assigned safety training and comply with all applicable safety procedures while performing a work assignment or task.
- Wear a seat belt when operating or riding in a motor vehicle that is equipped with seat belts and obey applicable traffic rules when on DOE-owned or leased property, in a government-owned vehicle, or while on official travel.

4.1.4 Reporting Employee Concerns and Hazards.

Identification and reporting of potentially unsafe or unhealthful working conditions, accidents, injuries, and illness is the responsibility of all HSS employees and covered contractors, their supervisors, or their representatives. Employees should first report concerns, either verbally or in writing, to their supervisors or their FEOSH coordinator, and then follow up, if needed, with the HSS Safety and Health Manager.

Conditions reported may include environmental, occupational safety or health related hazards or concerns, and facility related issues. Since many conditions can be eliminated as soon as they are identified, an effective channel of oral then written communication is imperative in the development of a sound FEOSH Program for HSS employees.

Written Safety and Health concerns should be reported to the supervisor and FEOSH Manager/Coordinator on DOE HQ F 3790.7, Notice of Unsafe or Unhealthful Working Conditions, which may be found at: <http://www.directives.doe.gov/pdfs/forms/hq3790-7.pdf>.

Additionally, Appendix B provides details of the Employee Concerns Program, including responsibilities and procedures, should the employee believe that the initial actions taken to resolve an employee concern are inadequate.

HSS employee accidents, illness, and injuries on the job must be reported as soon as possible to their supervisor, the DOE health unit, or the HSS FEOSH program manager. Contractor employees shall report these events to their assigned DOE buyer's technical representative and to their own management.

DOE uses an electronic system to report job related illness and injuries. Reporting requirements for DOE Federal employees are the same as those for DOE contractor employees, but they are, for Federal employees, governed by 29 CFR Part 1960 Subpart I - Federal Agency Recordkeeping and Reporting Requirements.

DOE HSS program elements, under DOE Order 231.1, must record and report occupational injury, illness, and property data. This is done through the Computerized Accident Incident Reporting System (CAIRS), maintained by HS-30 at headquarters. See DOE Reporting Order 231.1; and Computerized Accident/Incident Reporting System (CAIRS).

HSS managers need to report job related illness and injuries for their employees, within 7 days of notification by the employee, to the HSS FEOSH Program Manager, HS-31, Dave Pegram at (301) 903-9840; or Dave.Pegram@hq.doe.gov.

The HSS FEOSH web site may provide additional information on reporting, located at: http://www.hss.energy.gov/csa/csp/feosh/feosh_records.html#recordsandreporting

4.2 Analysis of Hazards in the Workplace.

Analysis of hazards is an ISM core function. HSS and covered contractor managers and employees must identify and analyze the hazards to employees at their normal work station and while on official travel.

Hazard analysis is a comprehensive process for identifying existing and potential workplace conditions that have the capability of causing employee injury or illness. The process helps to foster continuous improvement in safety and health, to ensure compliance with DOE and other Federal safety and health requirements, and to establish a safe work environment.

The following methods can be used to identify work-related hazards faced by HSS employees and covered contractors in HSS occupied space or while on official travel:

- Hazard analysis (e.g., job safety analysis and comprehensive safety and health surveys)
- Accident/incident investigations
- Routine self-assessment
- Inspections

Hazard analysis

Hazard analysis of a work activity can be conducted either informally or formally, depending upon the potential severity and the level of familiarity with the work and location. Hazard identification can be effective when performed informally during the course of daily work activities by supervisory and non-supervisory employees and qualified safety and health professionals. New situations or changes in routine or environment can often be readily detected by affected employees and reported for further analysis, if warranted. Formal hazard analysis requires more planning and is accomplished by trained safety specialists experienced in recognizing hazards in specific work areas and activities. A formal hazard analysis usually includes job safety analysis, process hazard analysis, comprehensive safety and health surveys, and investigations arising from employee concerns. The primary goal for identifying hazards in the workplace or activity is to determine why they exist so effective abatement actions can be taken.

Where significant injury, or exposure above any Regulatory limit exists, a Job Safety Analysis (JSA) should be conducted, by the HSS line manager in coordination with the HSS Safety and Health Manager, and affected employee. More information on JSA may be found at: http://www.hss.energy.gov/CSA/CSP/feosh/feosh_inspections.html#hazards

Checklists may be helpful in aiding in identification of work place hazards. An example checklist for common office related hazards is provided in Appendix J.

The work-related hazards faced by the majority of HSS employees and covered contractors fall into two main categories. The first category is hazards most commonly associated with an office environment. These include, but are not limited to, design of computer workstations, uneven walking surfaces, use of electrical equipment, and office clutter.

The second category is hazards associated with performing higher hazard work activities including; security and protective force operations and those who travel to DOE sites, or traveling outside the United States. Hazards for HSS employees performing security and protective force operations include ergonomics, heat/cold stress, noise, lead, carbon monoxide, workplace violence, firearms and explosives, and blood borne pathogens. HSS employees traveling to DOE facilities have potential for exposure to: chemical; radioactive materials; radiation generating devices and, beryllium, as well as vehicular hazards. Employees whose job responsibilities fall under this category must participate in site specific training qualification programs and any exposure records must be documented and maintained by the employee and responsible manager. Travel outside the United States may present hazards of disease, civil unrest, motor vehicles, unfamiliar signs and labels, language misunderstandings, different standards of worker protection, different standards for medical care, and time change fatigue. HSS managers must implement procedures to identify and document these job related work activities and exposures. The HSS FEOSH program manager will work with HSS managers to establish these procedures.

Industrial Hygiene Program and Workplace Monitoring

When chemical, physical, and biological exposure hazards are identified, environmental or personal monitoring of the exposure to employee(s) may be necessary to be conducted by an industrial hygienist (IH). DOE Order 440.1A contains specific IH program requirements for maintaining exposures below mandatory Threshold Limit Values (TLVs), and OSHA Permissible Exposure Limits (PELs). The Office of Management and Administration (MA) maintains the industrial hygiene program for DOE HQ. If a significant exposure hazard is suspected in HSS workspaces, monitoring will be conducted by an IH provided by the MA, HQ Safety and Health Manager (MA-40). Results of the monitoring must be provided by MA-40 to the HSS Safety and Health Manager, the affected employee, or their representative. HSS line managers will review recommendations, made by the MA-40, HQ Safety and Health Manager, and the HSS Safety and Health Manager, and are responsible to take action to reduce any exposure found to be over a Regulatory exposure limit.

Hazard Communication

The OSHA Hazard Communication Standard, 29 CFR 1910.1200; requires employers to establish hazard communication programs to transmit information on the hazards of chemicals to their employees by means of labels on containers, material safety data sheets, and training programs. Implementation of these hazard communication programs will ensure all employees have the "right-to-know" the hazards and identities of the chemicals they work with, and will reduce the incidence of chemically related occupational illnesses and injuries. All HSS workplaces where employees are exposed to hazardous chemicals must have a written plan which describes how the OSHA standard will be implemented in that facility.

HSS shall maintain a written hazard communication program, a workplace hazardous chemical inventory list, and material safety data sheets for each hazardous chemical in the workplace. HSS managers shall ensure that the material safety data sheets are readily accessible to employees during each work shift and that employees are provided information and training on the hazardous materials in the work area. The MSDSs and the HSS written hazard communication program will be available to HSS employees electronically. Hard copies of each MSDS will be included within any hazardous work procedure and, maintained in the workplace. This includes to the extent necessary, information to protect HSS employees in the event of a spill or leak of a hazardous chemical from a container. Additionally, each HSS manager or employee who has or obtains hazardous materials on DOE-owned or leased property shall submit the MSDSs to the HSS Safety and Health Manager.

Accident investigation

Accident investigation is a systematic search to uncover facts and details of a loss-producing event and to determine what recommendations and corrective actions are needed in order to prevent a recurrence. There are specific criteria that must be followed in event of a serious accident or fatality. More information on accident investigation requirements may be found at: <http://www.hss.energy.gov/csa/aip/> and DOE Order 225.1A, Accident Investigations.

Self-assessment

Self-assessment is a systematic process of evaluating the effectiveness of safety and health policies and programs as well as the systems that support them. The most basic form of self-assessment is conducting daily walk-through of the work space and regular review of work activities. Workers and supervisors should evaluate their own work areas and activities by periodically conducting informal safety inspections and reviews with the intent of identifying hazardous working conditions or activities. The ability to identify and correct noted deficiencies greatly enhances the benefit of performing a self-assessment. Self assessment is a Core function of the DOE ISM program.

Inspections

Inspections of work areas help to improve employee safety and health. Types of inspections vary but usually fall into three main categories: periodic/annual, compliance-oriented, and employee concerns. In general, the objective of an inspection is to improve employee working conditions through systematic identification and subsequent abatement of hazards. Periodic inspections help to provide a continuous assessment of the work areas whereas compliance-based inspections usually target high-risk problem areas.

Inspections in response to reported employee concerns evaluate the alleged unsafe or unhealthful working conditions. Conditions prompting the employee concern must be inspected within 24 hours for imminent danger situations, within 3 days for potentially serious allegations, and within 20 days for all other conditions.

HSS program elements will notify MA who is responsible for building maintenance and correction of facility related hazards for the Forrestal and Germantown facilities. MA is the point of contact for the General Services Administration (GSA) leased space. The annual inspection of HSS work spaces, as required by 29 CFR 1960, will be jointly performed by MA-40 (Safety and Health Manager), HSS organizational element's FEOSH coordinator, the HSS Safety and Health Manager, and NTEU.

Notices of unsafe and unhealthful working conditions resulting from workplace inspections, affecting employees and/or their work areas, will be posted in accordance with requirements in 29 CFR 1960. HSS management will also be informed of unsafe and unhealthful conditions affecting their employees and/or their work areas identified through internal DOE inspection activity, e.g., annual FEOSH walk-through. NTEU representatives will be advised on inspection findings and abatement plans, also in accordance with 29 CFR 1960.

Radiation Protection

HSS managers and employees must comply with the requirements of 10 CFR 835, *Occupational Radiation Protection*. Specifically, HSS managers and employees should consult Appendix C of this document before traveling to a DOE facility for activities that include potential exposure to radioactive materials or radiation generating devices. HSS managers will assure that HSS employees document and comply with site specific training, and access requirements of the facility being visited.

Beryllium

HSS managers and employees must comply with the requirements of 10 CFR 850, *Chronic Beryllium Disease Prevention Program*, for those employees who travel to facilities that present the potential for exposure to airborne beryllium particles. Specifically, line managers and employees must comply with the Department's Chronic

Beryllium Disease Prevention Program (CBDPP) for HSS Federal Employees, which is contained in Appendix D of this document. Appendix E summarizes the procedures and responsibilities of the HSS CBDPP Medical Surveillance Program.

Foreign travel

Prior to departure, all HSS employees traveling outside the United States should consult with the medical personnel of the health unit regarding travel advisories, health precautions, and suggested immunizations to reduce the risk of travel-related illnesses or other health consequences of travel abroad.

Additional information

The HSS FEOSH web site may provide more detailed information on hazards inspections, analysis, and abatement located at:

http://www.hss.energy.gov/CSA/CSP/feosh/feosh_inspections.html#hazards

4.3 Hazard Prevention and Abatement

Developing and implementing hazard controls is an ISM core function. Line managers and employees must prevent or eliminate or control the real or potential hazards that are identified. Federal and DOE requirements for hazard abatement are found in 29 CFR 1960.30, 10 CFR 835, 10 CFR 850, and DOE Order 440.1A.

The safety and health of an employee should be considered during the earliest stages of facility design, work or activity planning, and travel. However, employees may face new and previously unpredicted hazards that must be corrected or abated as they arise. For hazards newly identified in the workplace or during a work activity, corrective actions must be prioritized according to worker risk. If a hazard cannot be corrected on the spot, then prompt interim protective measures must be taken prior to its final abatement.

An important element of a hazard prevention and control program is employee safety and health awareness. HSS employees can obtain basic safety and health information about their office environment by accessing information on the HSS FEOSH Web Site located at: <http://www.hss.energy.gov/csa/csp/feosh/>

The FEOSH web site provides employees and managers with information on their roles, responsibilities, directives, guidance, and technical assistance and tools to implement FEOSH. The HSS Safety and Health Manager can also answer questions and provide additional information, guidance on these and other safety and health-related topics.

Employees need to anticipate and prevent hazards by:

- Prior to travel, know the scope of work that is expected of you, and the need for training, monitoring, personal protective equipment, and medical clearance.

- If travel is outside the United States, contact the Physician at the health unit about specific health precautions, travel advisories, and need for immunizations, that are recommended by the World Health Organization and the Centers for Disease Control.
- During DOE related travel, if a HSS employee has a medical/health examination in order to obtain a “clearance” to perform his or her assigned duties (e.g., respirator clearance); a copy of the examination/clearance form should be provided to the employee by the Physician at the HSS health unit.
- If a HSS employee is the subject of exposure monitoring during DOE related travel, the exposure monitoring data should be forwarded to the HSS Safety and Health Manager and the appropriate HQ health unit, for inclusion in the employee’s medical record.
- If a work activity analysis of potential hazards indicates the potential for serious injury or illness may exist, then specific work permits and/or work procedures are required prior to performing the work. Under these circumstances contact the HSS Safety and Health Manager for advice.

At any time, if a HSS or covered contractor employee becomes aware of a previously unidentified hazard or perceives a risk of potential injury or exposure to chemical, ergonomic, or physical (including radiological) hazards, the employee should notify their supervisor immediately. If the risk of serious bodily harm is great, the employee should stop work until a safety or health specialist can evaluate the offending hazard. If the hazard is facility-related, whether the building is HSS or GSA leased, the procedures in Section 4.1.4, *Reporting Employee Concerns and Hazards*, should be followed.

The HSS FEOSH web site may provide more detailed information on hazards analysis and abatement, located at:

http://www.hss.energy.gov/CSA/CSP/feosh/feosh_inspections.html#hazards

HSS has written programs for hazard prevention for hazards encountered by HSS employees and covered contractors that include office environments, travel to field sites, and security activities:

- General office safety
- Emergency evacuation
- Ergonomics
- Fire prevention
- Noise exposure
- Nonionizing radiation
- Compressed gases
- Spill response
- Personal protective equipment
- Respiratory protection
- Sanitation

- First aid
- Occupational medicine
- Motor vehicles
- Hand and powered tools
- Fall protection
- Ladders and scaffolds
- Electrical hazards
- Confined spaces
- Chemical hazards
- Laboratory hazards
- Hazard communication
- Blood borne pathogens
- Respiratory pathogens
- Ionizing radiation hazards
- Laser hazards
- Temperature extremes
- Hot work
- Material handling
- Firearms
- Explosives
- High hazard training

The level of detail is related to the tasks performed by HSS personnel. For example, observing or inspecting a work operation is generally less hazardous than actually performing the task and the corresponding hazard prevention plan is less detailed, but is sufficient to protect the employee who may be unfamiliar with the hazards of a particular operation. In many cases the hazard prevention plan prohibits HSS personnel from performing a particular task, unless the employee is specifically authorized in writing by the employer to perform it. Such an authorization would be issued after a review of the individual's training, demonstrated knowledge and skill, and in some cases, after receipt of evidence of medical approval to perform the task.

Appendix A provides a listing of HSS subject matter experts that can be contacted to provide additional information on specific hazards.

4.4 Safety and Health Training and Information.

Competence commensurate with responsibilities is an ISM guiding principle. All HSS employees must have the needed skills to perform their tasks in a safe and healthful manner. Beyond a generalized safety and health orientation, all other training should focus on helping employees meet their environment, safety, and health performance requirements, satisfy DOE and other regulatory requirements, and allow for future professional growth. The hazard specific program plans specify the required training to be completed prior to start-up and periodically thereafter.

Safety and health training can be delivered through a variety of methods. Examples are:

- Orientation sessions that provide a general awareness of a specific topic;
- Formal classroom style including courses, seminars, conferences, and expositions devoted to a more in-depth training in a specific topic; and
- Approved on-the-job training for skill-related activities where hands-on operations are performed.
- “Tool box” meetings where topics specific to the job are reviewed and discussed.

If training has been successful, employees will display their acquired safety and health knowledge through:

- Exhibiting a thorough knowledge of their rights, roles, and responsibilities;
- Reporting worksite incidents and accidents;
- Identifying and reporting real or potential worksite and work activity hazards; and
- Using appropriate safeguards in the performance of their assigned duties.

Additional information about the FEOSH Program, as well as basic safety and health training, is available to all HSS and covered contractor employees on the FEOSH web site: <http://www.hss.energy.gov/csa/csp/feosh/>.

HSS employees should have an initial training session in the basic elements of 29 CFR 1960, including hazard recognition and awareness involving typical safety and health subjects encountered in their occupied work areas and DOE sites when visiting on official business. Refresher training should be conducted every 2 years. Also, training should be provided to newly hired employees, and to those employees that are reassigned to another position within HSS, if that position involves more hazardous working conditions. In 2007, HSS will deploy a mandatory web based FEOSH Orientation program. Records of safety training are maintained for at least five years.

HSS employees should also consult with their training coordinators on the availability of other in-house or contractor sponsored safety and health training. Also, DOE field safety and health managers should be contacted regarding training that is specific to hazards that may be encountered while visiting a DOE facility.

Finally, HSS and covered contractor employees should consult their immediate supervisor if at anytime they do not have the skills or knowledge to perform an assigned task in a safe or healthful manner.

4.5 Program Evaluation.

Title 29 CFR 1960.79 requires that FEOSH Program self evaluations be developed and implemented. The Safety and Health Manager must conduct an annual programmatic review. Results of the FEOSH Program review, as well as reviews from all other departmental FEOSH Programs, will be used to prepare the annual DOE report on occupational safety and health to the Secretary of Labor, as required by 29 CFR 1960. The Chief Health, Safety and Security Officer must prepare this report on behalf of the Secretary and may request, as appropriate, information from all Department organizations to complete the annual report.

HS-30 is the lead organization in the Department to track and report DOE's performance in achieving FEOSH accident, injury, and illness reduction goals and objectives. HSS program elements should periodically review the accident injury and illness data for their employees act to establish, programs, initiatives, and goals to reduce their causes.

Pursuant to Executive Order 12196, OSHA may conduct program evaluations or unannounced inspections of Federal workplaces. It is the HSS policy to cooperate with OSHA compliance personnel and seek their assistance in improving workplace safety and health.

APPENDIX A

Office of Health, Safety and Security (HSS) Subject Matter Experts

HSS is fortunate to have an abundance of highly trained and specialized safety and health professionals. Below is a listing of the HSS subject matter experts who can provide management, employees, and employee representatives with additional information on specific hazards.

HSS Safety and Health		
Program Manager	Dave Pegram	301-903-9840
Beryllium	Jacqueline Rogers	301-903-5684
	Paul Wambach	301-903-7373
	David Weitzman	301-903-5401
General and Chemical Safety	Dan Marsick	301-903-3954
Construction Safety	Pat Finn	301-903-9876
Electrical Safety	Pat Tran	301-903-5638
Ergonomics	Carlos Coffman	301-903-6493
Fire Protection	Jim Bisker	301-903-6542
Firearms Safety	Pat Tran	301-903-5638
Industrial Hygiene	Dave Pegram	301-903-9840
	David Weitzman	301-903-5401
	Dan Marsick	301-903-3954
Occupational Medicine/ Medical Surveillance	Bonnie Richter	301-903-4501
Radiation Protection	Peter O'Connell	301-903-5641
Respiratory Protection	Dan Marsick	301-903-3954
Violence in the Workplace & Employee Assistance	Ken Matthews	301-903-6398

The HSS FEOSH program web site is a valuable source for obtaining employee environment, safety and health information across the complex. Employees can access this web site at: <http://www.hss.energy.gov/csa/csp/feosh/>

APPENDIX B

Common Hazards That May be Found in Health, Safety and Security Workspaces

As the majority of HSS employees work in an office environment, the following is a listing of the most commonly occurring hazards found in this setting. The intent of listing the most common workplace hazards is to raise awareness and to ultimately provide employees protection against injury. This listing is not designed to be all inclusive.

When at a Department of Energy (DOE) or DOE contractor facility, HSS employees must abide by site specific safety and health programs. While on travel, if an employee has questions about worksite hazards, personal protective equipment, or safety and health protocols, contact the site safety and/or health personnel for guidance. HSS employees should contact their supervisor, the HSS subject matter experts listed in Appendix A of this document, or the HSS Safety and Health Manager, in sequential order, should they need further direction or consultation concerning these or other work-related hazards.

A. Electrical Hazards.

Most offices contain a considerable amount of electrical equipment such as computers and small appliances like coffee makers, toasters, heaters, and fans. Caution should be used in setting up electrical equipment so as to prevent circuit overload and tripping hazards. Never use daisy chained linked together, extension cords or surge suppressors. Organize the office space so that cords are not crossing aisles or walkways. Before setting up electrical equipment, always inspect the integrity of the cord and appliance itself. If an electrical appliance appears faulty, stop using it immediately, unplug it and remove it from service, tag it as "non-operational," and report it to your supervisor. Always use an electrical appliance for its intended purpose only. Additional information may be found in Appendix H.

B. Fire Safety- Occupant Emergency Plans.

Every employee is responsible for promoting fire safety and emergency preparedness. Reporting real or potential fire hazards and ensuring those hazards are corrected are necessary actions that help to eliminate the risk of a fire. If a perceived fire hazard cannot be corrected on-the-spot, report it to your supervisor and facility management immediately. Keep work areas, exits (internal and external), and hallways free of clutter. Know the correct evacuation route from your work area. In addition HSS manager must assure that occupant emergency plans (OEPs) have been developed, employees trained, and exercises conducted. Guidance from the Office of Personnel Management on OEPs may be found at: <http://www.opm.gov/emergency/>. Additional information may be found in Appendix H.

C. Ergonomics.

Computer workstation and other office equipment should be configured to the comfort of the user. Position computer monitors so the top of the screen is at or below eye level. Chairs should

be adjustable and provide support to the lower back and upper extremities. When seated, feet should either rest on the floor or on a footrest. If in doubt of the correctness of your computer workstation design or if you are experiencing ill health effects possibly because of it, report it to your supervisor and contact the HSS Safety and Health Manager to schedule an ergonomics evaluation. If health effects persist, consult the Federal Employee Health Unit. More detailed information on may be found at: <http://www.hss.energy.gov/csa/csp/feosh/reports.html>

D. Blood borne Pathogens.

In the event of an accident, authorized employees may need to administer first aid to a co-worker, and are potentially at risk of exposure to blood or other body fluids. If providing first aid where blood or body fluids are present, employees should wear gloves or use a barrier (absorbent cloths topped with a plastic liner) to help reduce their risk of exposure. Washing hands vigorously with soap and water immediately following an exposure will also help to eliminate possible health risks. Employees need to report any such exposure to their supervisor and consult with the Federal Employee Health Unit as soon as possible. Supervisors identify those employees at potential risk of exposure to blood borne pathogens and arrange initial and annual training, as well as hepatitis B vaccinations, if appropriate.

E. Violence in the Workplace/Employee Assistance Program

Workplace violence or other type of unprofessional physical or verbal conduct will not be tolerated within the Department. This type of behavior may result in disciplinary action, including termination of employment. As with any other type of workplace hazard, HSS employees are responsible for reporting incidents of this nature to their supervisor. Additionally, at any time, if the threat of bodily harm is apparent, HSS employees should immediately call building security at HQ "166" or if in leased spaces "9-911" to report the incident to local law enforcement authorities

Employees are also encouraged to utilize the Employee Assistance Program (EAP). The DOE HQ Work File Center, maintains the Employee Assistance Program (EAP). HSS employees who have a concern about workplace violence may seek confidential consultation with an EAP counselor. EAP also offers other services, confidentially these include: Stress Management; Anxiety; Family Concerns; Work Conflict; Depression; Relationship Concerns; Financial Concerns; Substance Abuse and, Coping with Change. To learn more about EAP services, contact: Forrestal EAP Office: Room GM-184; 202-586-4995, Germantown EAP Office: H-104; 301-903-4995. Or visit the EAP web site at: <http://worklifecenter.doe.gov/eap.htm>

F. Housekeeping.

Clean, uncluttered, and organized work areas help minimize office related accidents and employee injuries. Proper storage of paperwork, work materials, and equipment will also help the overall professional appearance of the work area. Discarding or archiving no longer needed documents or articles, regular cleaning and vacuuming, and avoiding fluid spills on carpeting and upholstered surfaces will support good indoor air quality and the overall safety and health of the work environment.

G. Heat Stress

HSS security protective force personnel who maintain posts out of doors may be subjected to seasonal heat stress. Specific heat and cold stress procedures need to be developed and workers trained against these procedures. Guidelines are available by contacting the HSS FEOSH program manager.

APPENDIX C

Radiation Protection for Health, Safety and Security Federal Employees

Because radioactive materials or radiation generating devices can be found at most Department of Energy (DOE) field sites, a Federal employee visiting a DOE site, in many cases, may have to prepare for possible exposure to radiation or radioactive material. Under the system of radiation protection established by Title 10 Code of Federal Regulation, Part 835 (10 CFR 835), a site performing an activity that could result in exposure of an individual or individuals to ionizing radiation is responsible for establishing a program to protect the individual from the effects of ionizing radiation. While the field site is responsible for protecting all visitors to the site, it is prudent for Federal employees visiting the field site to determine if there are any actions that should be taken in advance to meet site radiation protection requirements. In this way, time can be devoted most effectively to meeting the objectives of the visit. The following sections address aspects of radiation protection that should be considered before visiting a DOE field site.

A. Training.

Training is required for unescorted access in the Controlled and Radiological areas of DOE sites. A field site visitor needs to determine what areas of a site will be entered during the visit, and make arrangements for obtaining either training appropriate to the radiological hazard in those areas or a qualified escort. Training on core or generally applicable aspects of radiation protection is periodically available to Federal employees at DOE HSS. Training that is specific to a DOE site must be obtained at that DOE site.

B. Radiation Dose Monitoring.

Depending upon which area of a site is to be visited, personnel visiting a site may either be monitored for internal or external exposure to radiation. In most cases the visitor does not have to take any actions before the visit to be monitored for internal or external exposure to radiation. However, some sites may require a whole body count (a determination of internal radiation exposure by using detectors on the outside of the body) before permitting a person to enter an area where internal radiation exposure monitoring is required. The whole body count should be arranged before the visit. In addition, it is a good practice for site visitors to know their current radiation dose for the year, particularly if they have received more than 50 millirem (mrem) during the current year or if they are going to receive any significant amount of radiation dose as a result of the site visit. DOE HSS Federal employees are periodically provided records of their radiation dose from visits to DOE sites where they have been monitored.

C. Protective Equipment.

For entry into areas of the site controlled because of the presence of contamination and airborne radioactive material, personal protective equipment such as anti-contamination clothing (anti-Cs) is always required and respiratory protection may be required. Typically, no advance

preparations are needed for anti-Cs; however, it may be helpful to obtain training in putting on and taking off protective clothing if a full set of anti-Cs will be needed to visit a part of the site. This training is typically included in the training needed to gain access to areas that are controlled because of the presence of contamination or airborne radioactive material. If respiratory protection is needed as part of the site visit, the visitor must meet site requirements concerning respirator training, respiratory protection medical examination, and fit testing of the respirator. If the site agrees, the medical examination and training can be obtained at HQ before the visit. The fit test of the respirator must be performed on site and arrangements should be made before the visit to schedule a fit test upon arrival.

D. Records.

Current records must be maintained of radiation dose monitoring, medical exams related to respirator use, and radiological training if a Federal employee plans routinely to visit DOE sites where exposure to contamination and airborne radioactive material is possible. A records coordinator of the employee's organization needs to be assigned to maintain the records. Radiation dose monitoring results need to be sent to the Health Unit and become a part of the HSS employee's occupational medical file. If provisions do not exist to have these records automatically incorporated into the employee's medical file, the employee should personally forward copies of the monitoring records to their HSS health unit.

APPENDIX D

Chronic Beryllium Disease Prevention Program (CBDPP) for Health, Safety and Security Federal Employees

Title 10 Code of Federal Regulations, Part 850 (10 CFR 850), *Chronic Beryllium Disease Prevention Program*, published December 8, 1999, requires that responsible employers must implement a program to manage and control worker beryllium exposures in order to reduce the number of workers exposed and to ensure the early detection of chronic beryllium disease. HSS employees may conduct activities at the Department of Energy (DOE) facilities that present the potential for exposure to airborne beryllium particles. This appendix is the HSS CBDPP, as required by 10 CFR 850, for HSS Federal employees who conduct activities at DOE facilities that present the potential for exposure to airborne beryllium particles.

A. General Requirements.

HSS managers and employees must comply with the Federal Employee Occupational Safety and Health (FEOSH) Program for HSS Employees (this document) while visiting DOE facilities that may pose a risk of exposure to airborne beryllium particles.

Affected HSS Office Directors must designate a CBDPP point-of-contact to assist managers and employees, as well as the HSS Office Director, in implementing the CBDPP for HSS employees in their organization, and keeping track of CBDPP documentation and records.

HSS managers must, in giving assignments to HSS employees, assure that the employees' exposures will be at or below the action level; that the number of employees exposed and potentially exposed is minimized; that the opportunity for exposure to these employees is minimized; and that these employees' disability and lost work time due to beryllium disease, sensitization, and associated medical care is minimized.

HSS managers must set goals for, and keep track of, these employees' exposures and potential exposures, and beryllium-related medical status, to further reduce exposures below the action level established by 10 CFR 850. By January 7, of each year, beginning with the year 2001, the affected HSS Office Director must submit to HS-1 summary of their employees' exposures and potential exposures, and beryllium-related medical status, and a proposal for exposure reduction and minimization goals for the ensuing year.

B. Program at Facility to be visited.

HSS employees must comply with the CBDPP of the facility to be visited. HSS managers must obtain and review with the employee the facility's CBDPP to ensure that the employee is, or will be, in compliance when the activity involving beryllium begins.

C. Specific Program Requirements.

Many of the specific program requirements of 10 CFR 850 does not apply to the Department as the responsible employer due to the type of job activities performed by HSS employees, e.g., oversight activities. Specific detail on the Beryllium program Requirements may be found at: <http://www.hss.energy.gov/HealthSafety/WSHP/be/index.html>

For example, the requirements to conduct a baseline beryllium inventory (10 CFR 850.20) and to establish regulated areas (10 CFR 850.26) do not apply to HSS because beryllium is not used in HSS offices.

HSS managers and employees complying with the specific requirements of a DOE-approved CBDPP plan of a facility being visited will be in compliance with the specific requirements of 10 CFR 850, Subpart C. These requirements include, but are not limited to sections 850.22 (permissible exposure limit), 850.23 (action level), 850.24 (exposure monitoring), 850.25 (exposure reduction and minimization), 850.26 (regulated areas), 850.27 (hygiene facilities), 850.28 (respiratory protection), 850.29 (protective clothing and equipment), 850.37 (training and counseling), and 850.38 (warning signs and labels).

HSS managers and employees must comply with the requirements of sections 850.28 (respiratory protection), 850.34 (medical surveillance), 850.35 (medical removal), 850.36 (medical consent), 850.37 (training and counseling), and 850.30 (beryllium registry) by utilizing the services of the HQ health unit. The HQ health unit is prepared to support the Department in providing the services needed for managers to comply with the requirements of sections 850.34-36, 850.37, the respirator fit testing requirement of section 850.28, and the counseling requirement of section 850.37. When appropriate, HSS managers must arrange for reciprocity with the facility being visited by the employee, to accept the medical services (e.g., physical, respirator fit testing, etc.) provided by the Headquarters health unit.

All records generated as a result of the requirements of 10 CFR Part 850 must be maintained by the employee's Headquarters health unit for inclusion in the employee's medical surveillance program records. HSS managers must arrange for exposure results to be sent to the HQ health unit for inclusion in the employee's medical surveillance record.

HSS managers must comply with 850.39 (performance feedback) by conducting periodic analyses and assessments of the monitoring results, medical surveillance, and exposure reduction and minimization data obtained (without personal identifiers) from the HQ health unit.

APPENDIX E

Occupational Health Medical Surveillance Program For HSS Federal Employees

The Dependent and Health Care Services Program has established medical surveillance protocols for a HSS Occupational Health Program to ensure the early detection of disease for workers who are exposed or potentially exposed to toxic and hazardous substances in the workplace.

The requirements for DOE Federal employees, in DOE Order 341.1 Federal Employee Health Services, and may be found at:

<http://www.directives.doe.gov/pdfs/doe/doctext/neword/341/o3411.pdf>

Occupational Health Services/DOE Health Unit

The occupational health care professionals at the Headquarters Health Units in Forrestal and Germantown provide the following services: Walk-in care; health assessment, nursing care and follow-up for minor illnesses and injuries on a walk-in basis; First-response; emergency treatment to any employee, contractor or visitor needing immediate care; Treatment of non-life threatening injuries or illness and, Wellness seminars that educate participants on a wide range of health issues.

For additional information on the Department of Energy (DOE) Health Unit, Work-life Center, visit the web site at: <http://worklifecenter.doe.gov/index.htm>

Employee Assistance Program

HSS managers should periodically make positive affirming statements to employees in support of employees seeking assistance from the Employee Assistance Program (EAP), and in maintaining confidentiality. HSS managers should encourage employees to participate in EAP provided training activities and programs.

The DOE HQ, Work Life Center, maintains the Employee Assistance Program (EAP). EAP offers other services, confidentially these include: Stress Management; Anxiety; Family Concerns; Work place violence and conflict; Depression; Relationship Concerns; Financial Concerns; Substance Abuse and, Coping with Change.

To learn more about EAP services, contact: Forrestal EAP Office: Room GM-184; 202-586-4995, Germantown EAP Office: H-104; 301-903-4995. Or visit the EAP web site at:

<http://worklifecenter.doe.gov/eap.htm>

Chronic Beryllium Disease Prevention Program (CBDPP) for Headquarters Employees

The CBDPP will enhance, supplement and be integrated into the existing HSS Occupational Health Program for the Department of Energy (DOE) HSS employees. This program is being structured in this manner to: (1) take advantage of the existing comprehensive medical surveillance program already implemented at DOE HQ; and (2) Minimize the burden on DOE managers by clarifying that managers need not establish redundant medical surveillance programs to protect employees from occupational exposure to beryllium.

The CBDPP is designed to reduce the number of workers exposed to beryllium, minimize the levels of and the potential for exposure to beryllium, establish medical surveillance requirements to ensure early detection of the disease, and to improve the state of information regarding chronic beryllium disease and beryllium sensitization for HSS employees.

Specific CBDPP Requirements

Many of the specific program requirements of 10 CFR 850, CBDPP, will apply to a HSS manager and their employees, due to the type of job activities performed by HSS employees in the field (e.g., oversight or technical assistance activities).

The DOE Headquarters (HQ) health unit will provide services needed for HSS managers to comply with the program requirements of sections 850.34 (medical surveillance), 850.35 (medical removal), 850.36 (medical consent), 850.30 (beryllium registry), the fit testing requirement of section 850.28 (respiratory protection), and the counseling requirement of section 850.37 (training and counseling).

The DOE HQ health unit will assist HSS managers in arranging for reciprocity with the facility being visited by the employee, to accept the medical services (e.g., physical, respirator fit testing, etc.) provided by the Headquarter health unit.

The DOE HQ health unit will maintain all records generated as a result of 10 CFR 850, for inclusion in the employee's medical surveillance program records. HSS managers must arrange for exposure results to be sent to the HSS health unit for inclusion in the employee's medical surveillance program records.

For any reason, if employees are unable to perform their normally assigned duties for medical or health reasons, whether the cause is occupationally related or not, they should notify their supervisor immediately. It may also be advisable for the employee to contact the medical staff at The Federal Employee Health Unit located at either Germantown or Forrestal facilities.

APPENDIX F

Respirator Program

The requirements for the Respirator Program are outlined in the OSHA 29 CFR 1910 General Industry Standards, 29 CFR 1926 Construction Standards, and American National Standards Institute (ANSI) Standard Z88.2, American National Standard for Respiratory Protection (currently under revision). The following guidelines apply to all HSS employees.

A. Written Program.

This program shall be maintained by the designated Respiratory Protection Program Administrator in conjunction with the HSS Federal Employee Occupational Safety and Health (FEOSH) Program. It will be made readily available to all who wear respirators.

B. Hazard Assessment.

Before wearing a respirator, a hazard assessment at the proposed workplace should be performed by a competent industrial hygienist, safety professional, or health physicist. It is assumed that if a DOE field site requires a HSS employee to wear a respirator, such an assessment should have been done and documented, according to the OSHA Standard and ANSI Z88.2.

C. Medical Evaluation.

Where possible, medical evaluation for Federal employees will be done through the HSS Health Unit (following ANSI Z88.6, Respirator Protection - Respiratory Use - Physical Qualifications for Personnel (currently under revision) and 29 CFR 1910.134). A written certificate shall be issued and should be acceptable at most field sites. When necessary, field sites may administer medical evaluations (following ANSI Z88.6), in lieu of the HSS Health Unit. The medical certification is a pre-requisite for respirator wear, including training classes. The only exception is for single use dust masks worn voluntarily by an employee.

D. Training.

All those wearing respirators must receive proper training according to the OSHA Standard and ANSI Z88.2. These training elements presently include:

- Why the respirator is necessary and how improper fitting, usage, or maintenance can compromise the protective effect of the respirator;
- What are the limitations and capabilities of the respirator;
- How to use effectively the respirator in emergency situations, including situations in which the respirator malfunctions;
- How to inspect respirator seals;

- What are the procedures for maintenance and storage of the respirator;
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators;
- Proper donning and doffing; and
- When to change a cartridge.

E. Routine inspection, maintenance, storage, cleaning and disinfecting.

Routine inspection, maintenance, storage, cleaning and disinfecting of respiratory equipment is the responsibility of the issuer, usually the field Site. The wearer is responsible for inspecting his respiratory equipment prior to and after its use. Such inspection could include cleanliness of the respirator, torn or loose straps, and holes in the filter, broken or loose fittings, cracked or scratched facepieces, and missing parts.

F. Selection.

All respirators and air-supplied suits will be NIOSH approved or approved under the DOE Respirator Acceptance Program. In most cases, the site provides the needed respiratory equipment and the selection is made by a qualified industrial hygienist, safety professional or health physicist.

G. Fit Testing.

Fit testing should preferably be done at the DOE field site, using the OSHA Standard protocol and Site-preferred respirators. In exceptional circumstances, the HSS Respiratory Program Administrator will arrange fit testing using a common respirator brand. Beards, low hairlines, glasses or goggles, and stubble may prevent proper user seal on a respirator. Quantitative fit testing is preferred. Fit testing must be done annually or more often as required by facial changes. Respirator, self check, pressure tests should always be done by the worker before entering a hazardous atmosphere.

H. Program evaluation

Program evaluation of the HSS Respiratory Protection Program should be conducted once a year.

APPENDIX G

Motor Vehicle Safety

DOE Order 440.1A requires a motor vehicle safety program. HSS employees while on official government business, travel assignment, or on government property, shall obey all motor vehicle laws and ordinances. Seat belt use is mandatory. Accidents involving HSS employees must be reported to onsite security operations and the HSS Safety and Health Manager.

Motor vehicle accidents are also reported into CAIRS and/or the ORPS system maintained by HS-30. Specific accident reporting criteria are provided in: DOE O 231.1A, Environment, Safety and Health Reporting ; see also the Occurrence Reporting and Processing System (ORPS) <http://www.hss.energy.gov/CSA/orps.html> and, the Computerized Accident Incident Recordkeeping and Reporting System (CAIRS) <http://www.hss.energy.gov/CSA/CSP/CAIRS/cairs/facts.htm>

HSS Managers should promote motor vehicle safety by:

- Assign a key member of the management team responsibility and authority to set, monitor, and enforce comprehensive driver safety policy.
- Enforce mandatory seat belt use.
- Do not require workers to drive irregular hours or far beyond their normal working hours.
- Do not require workers to conduct business on a cell phone while driving. Prohibit cell phone use while operating a government-owned vehicle or while driving on DOE property, except for emergency calls.
- Develop work schedules that allow employees to obey speed limits and to follow applicable hours-of-service regulations.
- Adopt a structured vehicle maintenance program.
- Provide vehicles that offer the highest possible levels of occupant protection.
- Teach workers strategies for recognizing and managing driver fatigue and in-vehicle distractions.
- Provide training to workers operating specialized motor vehicles or equipment and implement an authorized operator program for these vehicles.
- Emphasize to workers the need to follow safe driving practices on and off the job.
- Ensure that workers assigned to drive on the job have a valid driver's license and one that is appropriate for the type of vehicle to be driven.

APPENDIX H

Electrical Safety and Fire Prevention Program

The overall fire protection program and written program plan for HSS workspaces is the responsibility of the DOE Office of Management and Administration (MA) and the General Services Administration (GSA). HSS managers and employees have a responsibility to abate fire hazards and implement the DOE HQ fire prevention program plan. HSS managers should conduct, in addition to the annual inspection, a periodic electrical and fire safety walk-around of their workspaces.

HSS managers and employees to prevent electrical accidents and fires should:

- Not use or store flammable chemicals in HSS areas without review of the HSS Safety and Health Manager.
- Reduce storage of combustible materials such as paper and boxes. Never store combustible materials in stair wells. Keep sources of ignition such as space heaters, hot plates, coffee pots away from combustible materials. Do not leave space heaters operating unattended.
- Assure that all employees have been trained in the occupant emergency plan (OEP) and participate in regular evacuation drills.
- Eliminate defective, frayed, damaged electrical equipment and cords.
- Assure that emergency exit doors are not damaged, locked, blocked, and are marked.
- Assure that fire alarm pull stations are not blocked or damaged.
- Assure that electrical circuit breaker boxes are not blocked.
- Assure that egress paths are not blocked, such as by storing unused office equipment in hallways.
- Assure that sprinkler heads are not damaged, or impeded by storing material underneath them.
- Not use multi-outlet adapters or extension cords to permanently connect appliances or equipment. Not use electronic power strips to connect appliances such as: photocopiers, microwaves, refrigerators, hot plates, space heaters, and coffee pots.
- Replace any missing electrical outlet or switch covers.
- Assure that HSS employees who may contact or service electrical systems follow Lock and Tag-out procedures.

APPENDIX I
Firearms Safety Program

Reserved.

APPENDIX J
Office Common Hazard Inspection Checklist

FEOSH OFFICE INSPECTION CHECKLIST

COMMON HAZARDS	YES	NO
<u>Indoor Air Quality</u>		
A-1 Are HVAC sensors free and clear of heat-producing devices?		
A-2 Are window convector/induction units free of furniture, paper or other obstruction?		
A-3 Are air diffusers clear and free of obstructions or employee modifications?		
A-4 Are walls, floors, and other surfaces free of water infiltration, or evidence of water damage?		
<u>Electrical Safety</u>		
E-1. Are all appliances and equipment plugged directly into receptacles? (e.g., refrigerators, microwave ovens, coffee pots, network printers, etc.)		
E-2. Are power strips or surge protectors used only to connect low amperage office appliances and equipment such as desktop printers, computers, fax machines, phones, desk lamps, radios, etc.?		
E-3. Are power strips or surge protectors plugged directly into wall outlets? (NOTE: <i>Power strips plugged in series or into one another is prohibited.</i>)		
E-4. Are flexible cords and cables free from frays, splices or taps, exposed wires, or deteriorated insulation?		
E-5. Are flexible cords properly installed such that they are not run across aisles or passageways, under floor mats, through walls, or subject to be pinched by doors or furniture?		
E-6. Is adequate number of outlets provided to avoid the use of multiple-plug adapters? (NOTE: <i>Multiple-plug adapters are prohibited.</i>)		
E-7. Are flexible cords and cables used appropriately and rated for the load? (NOTE: <i>Household zip cords should not be used. These are not appropriate for office loads.</i>)		
E-8. Are junction boxes, receptacles, and switches properly secured and provided with tight-fitting covers or plates; therefore, not exposing wires or conductors?		

E-9. Are plugs on equipment in good working condition with no bent or missing contacts or exposed wiring?		
<u>Fire Protection & Life Safety</u>		
F-1. Are all exit doors and passageways free of obstructions?		
F-2. Are exits marked with an exit sign and illuminated by a light source?		
F-3. Is the direction to exits, when not immediately apparent, marked with visible signs?		
F-4. Do exit doors open easily and immediately with one hand?		
F-5. Are doors, passageways or stairways, that are neither exits nor access to exits and which could be mistaken for exits, appropriately marked "NOT AN EXIT," "STOREROOM," etc?		
F-6. Are sprinkler heads kept clear of stored material? (NOTE: <i>18-inch minimum clearance required between sprinklers and the top of storage.</i>)		
F-7. Are fire extinguishers mounted in readily accessible locations?		
F-8. Do fire extinguishers have a current service tag that shows they are serviced and maintained annually and visually inspected monthly?		
F-9. Is emergency lighting in stairways, hallways and other work areas in operable condition?		
F-10. Are fire alarm pull boxes visible and unobstructed?		
F-11. Are office areas free of open flames and other sources of ignition, such as candles and incense burners?		
F-12. Have all employees been trained in the building Occupant Emergency Plan?		
F-13. Are Occupant Emergency Plan team members identified in your area?		
F-14. Has an area monitor been identified for you area?		
F-15. Are primary and secondary means of egress identified for your area? (NOTE: <i>These should be posted.</i>)		
F-16. Is your assembly area identified?		
F-17. Do you have a means to account for personnel?		
<u>Hazardous Substance Communication</u>		
H-1 Are offices free of chemicals other than general office supplies?		

<u>Medical Services and First Aid</u>		
M-1 Are first aid supplies easily accessible? Are the first aid supplies that are listed on the inventory present and in good condition?		
M-2 Are personnel aware of the procedures for obtaining medical services and first aid?		
M-3 Are emergency phone numbers posted where they can be readily found in case of emergency? (NOTE: <i>Emergency phone numbers should be on each phone.</i>)		
M-4 Are CPR and First Aid trained personnel identified? M-5 If AED's are provided, is there a record of their visual monthly inspections?		
<u>Ergonomics</u>		
R-1 Is office equipment /seating adjustable?		
R-2 Have employees been trained in office ergonomics?		
R-3 Have assessments been done on employee workstations?		
<u>Sanitation</u>		
S-1 Are restrooms clean and in sanitary condition?		
S-2 Is food waste properly bagged before being disposed?		
S-3 Are areas where food is consumed clean?		
S-4 Are food and drinks stored, prepared and consumed away from chemicals and cleaning products?		
S-5 Are water coolers clean and sanitized?		
<u>Working Surfaces</u>		
W-1. Are floors, aisles, and passageways clean and dry?		
W-2. Are carpets tight, so that there are no tripping or slipping hazards?		
W-3. Are office areas uncluttered, without excessive accumulation of paper or other combustible material?		
W-4. Is there at least 18 inches of open space (room) provided in office areas between desks and other furniture, and adjacent to doors to facilitate exit into hallways? (NOTE: <i>Where special needs personnel are located, American for Disabilities Act (ADA) requirements will apply.</i>)		
W-5. Are there holes in the floor or other walking surfaces?		
W-6. Are changes of direction or elevations readily identifiable?		
W-7. Are passageways and workspaces free from protruding objects?		

W-8. Are all work areas illuminated?		
W-9. Are all materials stored such that they are easily retrieved without climbing on equipment or surfaces?		
W-10. Are items such as bookcases, shelving units, pictures, and bulletin boards secured and stable?		