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Federal Bureau of Prisons

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National Occupational Safety and Health Policy

/s/
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1. PURPOSE AND SCOPE

This new policy replaces the safety and health requirements (Chapters 1 and 2) in the Program Statement **Occupational Safety, Environmental Compliance, and Fire Protection**. The need for a new policy was prompted by numerous changes to Occupational Safety and Health Administration (OSHA) regulations, American Correctional Association (ACA) standards, , and National Fire Codes (NFC) requirements relating to occupational safety and health since the policy was issued in 2007. The purpose of this policy is to:

- Provide a safe and healthy environment for facility occupants.
- Implement a facility safety program.
- Provide an environment free from recognized hazardous likely to cause death or serious physical harm.
- Provided safety and health training for personnel.
- Ensure prompt abatement of unsafe and unhealthy working conditions.
- Ensure all institutions comply with the most recent codes, standards, and regulations; the following are referenced in this policy:

  - OSHA.
  - National Fire Protection Association (NFPA).
  - ACA.

- Requirements for conditions or operations not adequately addressed by the codes and standards referenced above may use information published by:

  - American Society for Testing and Materials (ASTM).
  - American National Standards Institute (ANSI).
  - American Conference of Governmental Industrial Hygienists (ACGIH).

The scope of this policy is limited to occupational safety and health requirements dealing with:

- Institution Security.
- Occupational Safety.
- Occupational Health.

This policy applies to:

- BOP-owned or -operated detention and correctional facilities.
- UNICOR operations at BOP detention and correctional facilities.

a. **Summary of Changes**

Policy Rescinded

P1600.09 Occupational Safety, Environmental Compliance, and Fire Protection (10/31/07); Chapters 1 and 2 (Safety and Health) only.

Numerous changes to occupational safety/health codes, standards, and regulations have been incorporated into this policy.

b. **Program Objectives.** The objectives of this policy are:

- Evaluate unsafe or unhealthy conditions reported by facility occupants.
- Evaluate accidents and injuries that occur at the facility.
- Develop a plan of corrective action based on the evaluation of hazards and accidents.
- Ensure personal protective equipment is issued and used by all personnel when necessary.
- Conduct safety and health inspections/audits, as specified in this policy.
- Conduct hazard assessments and surveys, as specified in this policy.
- Minimize the possibility of accidents, deaths, and illnesses.
- Encourage facility occupants to report workplace hazards.
- Ensure that safety is a principal element in all BOP operations.

c. **Institution Supplement.** Each facility must develop an institution supplement on foot protection. Should local facilities make any changes outside the required changes in the national

policy or establish any additional local procedures to implement national policy, the local Union may invoke to negotiate procedures or appropriate arrangements.

d. Written Plans and Programs. Each institution must develop the following written plans/programs:

- Control of flammable, toxic, and caustic materials. See Chapter 3, Section 4.
- Confined space. See Chapter 2, Section 5.
- Control of Hazardous Energy (Lockout/Tagout). See Chapter 2, Section 6
- Fall protection. See Chapter 2, Section 3.
- Hazard communication. See Chapter 3, Section 3.
- Hearing conservation. See Chapter 3, Section 8.
- Hot work. See Chapter 2, Section 14.
- Pest control. See Chapter 3, Section 10.
- Respiratory protection. See Chapter 3, Section 2.

REFERENCES

Program Statements

P1600.12	National Environmental Protection Policy (6/1/2017)
P1600.13	National Fire Protection Policy (6/1/2017)
P1601.05	Workers' Compensation Programs (3/25/16)
P4200.11	Facilities Operations Manual (4/12/16)
P5500.14	Correctional Services Procedures Manual (8/1/16)

BOP Forms

BP-A0139	Notice of Right to File for Compensation for a Work-Related Injury
BP-A0140	Injury Report – Inmate
BP-A0169	Uniform Basic Safety Regulations
BP-A0506	Institution Fire/Safety and Sanitation Inspection
BP-A0658	Inmate Claim for Compensation Resulting from Work Injury

Other Forms

OSHA 300	Log of Work-Related Injuries and Illnesses
OSHA 300a	Summary of Work-Related Injuries and Illnesses
OSHA 301	Injury and Illness Incident Report
SF-91	Motor Vehicle Accident Report
SF-94	Statement of Witness
SF-95	Claim for Damage, Injury, or Death

ACA Standards

- American Correctional Association Standards for Adult Correctional Institutions, 4th Edition: 4-4082, 4-4145, 4-4146, 4-4211, 4-4212, 4-4215, 4-4329, 4-4332, 4-4333, 4-4358, and 4-4413
- American Correctional Association Performance Based Standards for Adult Local Detention Facilities, 4th Edition: 4-ALDF-1A-01M, 4-ALDF-1A-03M,4-ALDF-1A-04, 4-ALDF-1A-14,4-ALDF-1A-16, 4-ALDF-1C-08M,4-ALDF,1C-09M, 4-ALDF-1C-11M, 4-ALDF-4C-18M, and 4-ALDF-4D-26
- American Correctional Association Standards for Administration of Correctional Agencies, 2nd Edition: 2C0-2A-02, 2C0-1D-15, and 2C0-3B-01
- American Correctional Association Standards for Correctional Training Academies: 1CTA-2B-01, 1CTA-2B03, 1CTA-3B-06, 1CTA-3C-05 1CTA-3E-03, 1CTA-3E-04, and 1CTA-3E-05

Records Retention Requirements

For guidance on records and information that apply to this program, see the Records and Information Disposition Schedule (RIDS) on Sallyport.

CONTENTS

ACRONYMS AND ABBREVIATIONS

ACA	American Correctional Association
ACGIH	American Conference of Governmental Industrial Hygienists
AD	Assistant Director
ASTM	American Society for Testing Material
ANSI	American National Standard Institute
BOP	Federal Bureau of Prisons
CDL	Commercial Drivers License
CEO	Chief Executive Officer
CFR	Code of Federal Regulations
DOL	U.S. Department of Labor
DOJ	U.S. Department of Justice
DOT	U.S. Department of Transportation
ESCA	Environmental and Safety Compliance Administrator
FIFRA	Federal Insecticide, Fungicide, and Rodenticide Act
GFCI	Ground Fault Circuit Interrupter
HSD	Health Services Division
HVAC	Heating, Ventilation, and Air Conditioning
IAC	Inmate Accident Compensation
NESCA	National Environmental and Safety Compliance Administrator
NIOSH	National Institute for Occupational Safety and Health
NFPA	National Fire Protection Association
NFC	National Fire Codes
NOV	Notice of Violation
NRC	Nuclear Regulatory Commission
OSHA	Occupational Safety and Health Administration
OPM	Office Personnel Management
PEL	Permissible Exposure Limit
PPE	Personal Protective Equipment
RD	Regional Director
RESCA	Regional Environmental and Safety Compliance Administrator
SCBA	Self-Contained Breathing Apparatus
SHU	Special Housing Unit
SDS	Safety Data Sheet
T4T	Training-for-Trainers
TPQ	Threshold Planning Quantity
TSCA	Toxic Substance Control Act
UL	Underwriters' Laboratories
VT	Vocational Training

Chapter 1. Administration

1. OCCUPATIONAL SAFETY AND HEALTH DUTIES

a. **Assistant Director**. The Assistant Director (AD), Health Services Division (HSD), is designated as the Health and Safety Official for the Federal Bureau of Prisons (BOP).

b. **National Environmental and Safety Compliance Administrator.** The National Environmental and Safety Compliance Administrator (NESCA), reports to the AD, HSD, on issues relating to occupational safety. He/she:

- Oversees the management of the BOP's occupational safety and health program.
- Supervises the Chief, Occupational Safety Compliance.
- Provides technical direction to Regional Environmental and Safety Compliance Administrators (RESCA).
- Interprets the BOP Occupational Safety and Health Policy.
- Provides guidance and technical assistance to Central Office, Regional, and institution staff to resolve OSHA issues that cannot be resolved at the institution or regional levels.

c. **Chief, Occupational and Employee Health.** The Chief, Occupational and Employee Health, reports to the AD, HSD, on issues relating to occupational health. He/she:

- Oversees the management of the Bureau's occupational health program.
- Interprets the Bureau's Occupational Health requirements within this policy.
- Supervises the Occupational and Employee Health Branch.
- Provides technical direction to RESCAs on occupational health issues.
- Provides guidance and technical assistance to Central Office, Regional, and institution staff to resolve occupational health issues that cannot be resolved at the institution or regional levels.

d. **Chief, Occupational Safety Compliance.** The Chief, Occupational Safety Compliance, reports to the NESCA on issues relating to occupational safety. He/she:

- Oversees the daily operation of the Bureau's occupational safety program.
- Interprets the Bureau's Occupational Safety requirements within this policy.
- Serves as the BOP point of contact for OSHA visits to institutions.
- Notifies RESCAs of scheduled OSHA visits.
- Serves as a technical resource in the area of:

    - OSHA-related programs.
    - OSHA citations and complaints.
    - OSHA compliance audits.

- Provides guidance and technical assistance to Central Office, regional, and institution staff to resolve OSHA issues that cannot be resolved at the institution or regional levels.

e. **Regional Environmental and Safety Compliance Administrator.** The Regional Environmental and Safety Compliance Administrator (RESCA), reports to the Regional Director (RD) on issues relating to occupational safety and health. He/she, in conjunction with the National Environmental and Safety Compliance Branch and the Occupational and Employee Health Branch:

- Provides direction and technical assistance to help resolve occupational safety and health issues that cannot be resolved at the institution level.
- Conducts technical assistance visits to institutions.
- Assists institutions with timely OSHA injury and illness reporting requirements.
- Monitors the effectiveness and uniformity of Regional occupational safety and health programs.
- Monitors reports and other occupational safety and health data generated by institution personnel.
- Notifies the NESCA of OSHA citations and complaints and forwards the citation and complaints to the Chief, Occupational Safety Compliance.
- Monitors occupational safety and health reports to identify and track:

    - Safety trends.
    - ACA Accreditation and Reaccreditation issues.
    - Program Review findings.
    - Operational review findings.
    - OSHA citations and complaints.
    - OSHA injury and illness reporting requirements.
    - Training needs.
    - Injury rates.

- Assists in conducting institutional OSHA Compliance Audits.
- Serves as the regional technical resource for emergency response procedures involving natural disasters, chemical, biological, radiological/nuclear, and explosive incidents.
- Monitors Program Review findings relating to occupational safety and health issues.
- Identifies and assists in the implementation of corrective actions to address Program Review findings.
- Assists institutions in the implementation of SCBA fit test and training programs.
- Serves as the Regional technical resource for emergency response procedures involving occupational safety and health emergencies.
- Provides quarterly updates to the NESCA and Chief, Occupational Safety Compliance on:

- ACA visits.
- Government Owned Vehicle accidents.
- Program Reviews.
- Regional occupational safety and health initiatives.
- Safety incidents.
- Status of corrective action on OSHA citations and complaints.
- Updates on serious injuries and hospitalizations.

f. **Certified Industrial Hygienist (Central Office).** The Central Office Certified Industrial Hygienist reports to the Chief, Occupational and Employee Health, on issues relating to occupational health and industrial hygiene. He/she:

- Provides occupational safety and health consultation to Institutional and Regional ESCAs (e.g., indoor air quality, workplace mold, and other workplace and industrial hygiene stressors).
- Reviews Safety Data Sheets and provides Hazard Communication guidance for Job Hazard Assessments for FPI and BOP facilities.
- Develops scopes of work for industrial hygiene contractors and reviews contractor reports for technical accuracy and recommendation effectiveness.
- Recommends effective and appropriate PPE for staff/inmate use.
- Assists in drafting responses to regulatory agencies (i.e., OSHA) regarding workplace health and safety issues.
- Provides guidance on potentially hazardous new chemicals, processes, or operations within the correctional environment for FPI and BOP facilities.
- Assists and provides Chief, Occupational and Employee Health, with technical input for industrial hygiene policies.
- Collects and analyzes injury surveillance data of workplace injuries.
- Must maintain American Board of Industrial Hygiene (ABIH CIH) certification required for duties.

g. **Occupational Safety Compliance Specialist (Central Office)**. The Central Office Occupational Safety Compliance Specialist reports to the Chief, Occupational Safety Compliance, on issues relating to occupational safety. He/she serves as a technical resource to Central Office, Regional, and institution staff in the areas of:

- OSHA-related programs.
- OSHA citations and complaints.
- Bureau policy relating to occupational safety and health.
- Occupational safety and health training.
- Accident investigation.

He/she will be called on to participate in:

- After-action reviews.
- Data collection.
- Development and delivery of occupational safety and health training.
- Responses to OSHA citations and complaints.
- Occupational safety work groups.
- OSHA compliance audits.
- ACA accreditation and reaccreditations.
- Project plan and specification review.
- Technical assistance visits.

h. **Environmental and Safety Compliance Administrator (ESCA).** The Environmental and Safety Compliance Administrator (ESCA) advises the institution Chief Executive Officer (CEO) on occupational safety and health issues. He/she works at the department head level with other institution managers to achieve safety goals. When policy and regulations are not specific, he/she must exercise professional judgment to maintain a reasonable level of occupational safety and health protection at the institution. He/she serves as the institution's technical resource for emergency response procedures involving accidents, injuries, deaths, and similar emergencies.

i. **Other Environmental and Safety Compliance Personnel (Institution)**. Other Environmental and Safety Compliance Department staff report to the ESCA and assist in the implementation of the institution's occupational safety and health program.

j. **Environmental and Safety Compliance Administrator Trainee.** The Environmental and Safety Compliance Administrator Trainee advises the institution ESCA on occupational safety and health issues. He/she works with the ESCA and other institution managers to achieve safety goals. When policy and regulations are not specific, he/she must exercise professional judgment to maintain a reasonable level of occupational safety and health protection at the institution.

k. **Environmental and Safety Compliance Alternates**. If the institution ESCA is the only full-time Environmental and Safety Compliance Department staff member, the CEO must appoint at least one safety alternate to provide department coverage during the ESCA's absence. The CEO at an institution with two or more full-time Environmental and Safety Compliance Department staff is highly encouraged to appoint one or more safety alternates.

l. **Chief Executive Officers.** The Chief Executive Officer (CEO) must:

- Support institution occupational safety and health program initiatives.
- Monitor the effectiveness of the institution occupational safety and health program.

- Ensure adequate Environmental and Safety Compliance Department staffing to administer the institution occupational safety and health program.
- Ensure compliance with this policy and applicable safety and health regulations/standards.
- Ensure periodic occupational safety and health inspections of the facility are conducted by technically competent personnel.
- Ensure prompt abatement of unsafe and/or unhealthful working conditions.
- Ensure accurate recordkeeping for occupational safety and health issues.
- Ensure that adequate occupational safety and health training is provided to management, supervisory, safety, and collateral duty safety personnel, as well as all other institution personnel.
- Ensure employees are not subject to restraint, interference, coercion, discrimination, or reprisal for exercising their rights under, or participating in, the Bureau's occupational safety and health program and OSHA regulations.
- Ensure all staff are adequately trained in safety and health initiatives.

m. **Supervisors.** All supervisors must:

- Perform their duties in the safest possible manner.
- Ensure safety practices are followed and implement corrective actions.
- Ensure personnel are trained in occupational safety and health.
- Comply with this policy.
- Familiarize themselves with hazards in particular jobs or the physical surroundings of employees.
- Ensure that personnel are aware of the hazards in particular jobs.
- Immediately report all injuries, accidents, or similar emergencies to the Environmental and Safety Compliance Department.
- Ensure that injured personnel receive appropriate medical attention.
- Ensure that accident and injury reports are completed.

n. **Employees**. Employees must:

- Perform their duties in the safest possible manner.
- Comply with this policy.
- Immediately report all incidents, injuries, illnesses, or similar emergencies to their supervisors and the Environmental and Safety Compliance Department.
- Immediately report hazards or unsafe acts to their supervisors and/or to the ESCA.
- Complete necessary forms for injuries or illnesses.

2 . **IMMINENT DANGER.** When a member of the Environmental and Safety Compliance Department determines that conditions or practices could reasonably and immediately be

expected to cause death or serious physical harm, he/she must inform affected employees of the danger and shut down the area, work, or process until the danger is eliminated.

Written notification of an imminent danger determination, identifying both the hazardous conditions and actions taken, must be submitted to the CEO, RESCA, NESCA, and local Union President or designee.

The area, work, or process may be reopened/restarted only after the ESCA conducts an inspection and provides written approval. A copy of the written approval must be provided to the CEO, RESCA, NESCA, and local Union President or designee.

The RESCA and NESCA must review all actions taken as a result of an imminent danger determination.

3. ENVIRONMENTAL/FIRE/SAFETY TRAINING RECORDS

All records for Environmental/Fire/Safety training conducted at the institution must be maintained by the department providing the training.

4. OCCUPATIONAL SAFETY AND HEALTH TRAINING REQUIREMENTS

a. **Environmental and Safety Compliance Department Staff.** Environmental and Safety Compliance Department staff must complete the following training:

- Electrical Standards (OSHA 3095).
- Machinery and Machine Guarding Standards (OSHA 2045).
- OSHA Guide to Industrial Hygiene (OSHA 521).
- OSHA Standards for Construction (OSHA 510).
- OSHA Standards for General Industry (OSHA 511).
- Permit-Required Confined Space Entry (OSHA 2264).
- Respiratory Protection (OSHA 2225).

b. **All Staff (Institution).** Institution staff must be trained during Introduction to Correctional Techniques Phase I and Annual Training in the following:

- Asbestos awareness.
- Confined Space Identification.
- Energy Control Program (Lockout/Tagout).
- Hazard Communication Program.
- Hearing Conservation Program.
- Conducting inmate safety training.

- Monthly/weekly departmental inspections.
- Respiratory Protection Program.

c. **Administrators, Managers, and Supervisors (Institution Duty Officers).** All administrators, managers, and supervisors must be trained annually in inspection techniques needed to determine compliance with the following requirements:

- Applicable occupational safety and health regulations and standards.
- This policy.

d. **Inmate Training**. Each inmate must receive familiarization training during Institution Admission and Orientation on occupational safety and health programs. He/she must sign the forms BP-A0169, Uniform Basic Safety Regulations, and BP-A0139, Notice of Right to File for Compensation for a Work-Related Injury. A copy of each form must be placed in the Inmate Central File.

Upon assignment to a job or detail, each inmate must receive initial training by his/her supervisor concerning safe work methods and hazardous materials. Refresher training must be provided annually or whenever there is a work process change. At a minimum, training must include demonstration of safety features and practices. Workers must be trained to recognize hazards involved in the workplace, understand protective devices and clothing, and report deficiencies to their supervisors. Training must be documented and signed by the inmate.

5. INSTITUTION SAFETY COMMITTEE

a. **Institution Safety Committee Membership.** The Institution Safety Committee must include department heads (including the ESCA and Facilities Manager(s)) designated by the CEO, UNICOR representation, and Union representation (per the Master Agreement, Article 27). Other staff should be invited to Safety Committee meetings as needed to discuss issues involving their areas.

The ESCA must chair the committee and designate a recorder to prepare minutes. Minutes must be forwarded to the committee members, including the local Union and to the RESCA.

The committee must meet quarterly. More frequent meetings may be required based on other requirements (e.g., Environment of Care requirements at Medical Centers). At a minimum, the following topics must be reviewed:

- Accidents and injuries.
- Environmental issues as required by the Program Statement **National Environmental Protection Policy**.

- Fire safety issues as required by the Program Statement **National Fire Protection Policy**.
- Hazardous complaint log.
- Inspections.
- Pest Control.
- Operational/Program Review reports.
- Environmental/Fire/Safety Training.

b. **Work Programming Committee**. The ESCA must be a member of the Work Programming Committee.

6. **INSPECTIONS**

a. **Weekly Inspections.** The Institution Duty Officer must inspect all areas of the institution weekly, using form BP-A0506, Institution Fire/Safety and Sanitation Inspection.

b. **Monthly Inspections**. All areas of the institution must be inspected monthly by Environmental and Safety Compliance staff.

c. **Annual Inspections**. In addition to the monthly inspection requirement, annual inspections of the following must be completed and documented.

(1) **Sanitation Inspection.** The annual sanitation inspection may be conducted by any of the following:

- Environmental and Safety Compliance Department staff from another BOP facility.
- RESCA.
- Central Office Safety Compliance Staff.

If deficiencies are noted on the annual sanitation inspection, documentation by an independent outside source must be maintained to show deficiencies have been corrected.

(2) **Work, Health, and Safety Inspection.** The annual work, health, and safety inspection may be conducted by any of the following:

- ESCA.
- Environmental and Safety Compliance Department staff from another BOP facility.
- RESCA.
- Central Office Safety Compliance Staff.

d. **Inspection Records.** Inspection must be documented by a written report:

- **Weekly/Monthly Inspections.** Written reports of weekly and monthly inspections, including deficiencies, must be sent to the department head and forwarded to the Warden, through the Associate Warden, for review and corrective action if needed. The reports and corrective actions taken must be kept in the Environmental and Safety Compliance Department for three years.
- **Annual Inspections.** Written reports of annual inspections, including deficiencies and corrective actions taken, must be kept in the Environmental and Safety Compliance Department for three years.

7. TECHNICAL ASSISTANCE VISITS

The CEO or Regional Director may request technical assistance visits. Requests for Central Office technical support must be routed through the Regional Director to the Assistant Director, HSD.

8. REPORTING HAZARDS

Personnel are encouraged to report unsafe or unhealthful conditions to their supervisors. Since many safety and health problems can be eliminated as soon as they are identified, the existence of formal channels of communication does not preclude immediate corrective action by a supervisor in response to oral reports of unsafe or unhealthful working conditions.

Any person who believes that an unsafe or unhealthful condition exists in a workplace where he/she is employed has the right to report the unsafe or unhealthful condition to the ESCA, CEO, Regional or Central Office staff, or directly to OSHA, U.S. Department of Labor (DOL).

Each report of an existing or potential unsafe or unhealthful working condition must be recorded in a log maintained in the Environmental and Safety Compliance Department. A copy of each report must be presented to the Institution Safety Committee at the next meeting. Log entries must contain:

- Date.
- Time.
- Code/reference/file number.
- Location of condition.
- Brief description.
- Classification (imminent danger, serious, or other).
- Date and nature of action taken.

The Environmental and Safety Compliance Department must conduct an inspection immediately upon notification of imminent danger conditions, within 8 hours for potentially serious conditions, and 3 working days for other than serious conditions.

A written summary must be provided to the local Union and the employee or inmate upon request. Distribution of the employee report must be per the Master Agreement.

9. **OSHA POSTER**

The Bureau Occupational Safety and Environmental Health Program poster must be displayed in a conspicuous location frequented by employees and inmates. The poster details the Bureau program and how to file a report.

10.**ACCIDENTS**

Work-related accidents and injuries must be reviewed and documented by the supervisor and the Environmental and Safety Compliance Department. Documentation of property damage accidents must be retained in the Environmental and Safety Compliance Department for three years.

11. **REPORTS**

a. **Serious Accidents/Incidents**. The ESCA must notify the CEO; RESCA; Chief, Occupational Safety Compliance; and OSHA of the following:

- All work-related fatalities within 8 hours.
- All work-related inpatient hospitalizations, amputations, and losses of an eye within 24 hours.

Note: Inpatient hospitalizations solely for observation or diagnostic testing do not need to be reported to OSHA. The inpatient hospitalization must be for treatment purposes.

Only fatalities occurring within 30 days of the work-related incident must be reported to OSHA. Further, for an in-patient hospitalization, amputation, or loss of an eye, these incidents must be reported to OSHA only if they occur within 24 hours of the work-related incident.

The report can be made to OSHA by:

- Calling OSHA's toll free number at 1-800-321-OSHA.
- Calling the closest OSHA Area Office during normal business hours.
- Online through the OSHA website.

b. **Motor Vehicle Accidents.** The Environmental and Safety Compliance Department must review accidents involving Government motor vehicles using Standard Forms 91, 94, and 95. A summary report for each motor vehicle accident resulting in an injury must be forwarded to the RESCA and Chief, Occupational Safety Compliance. In addition, a copy of the accident report must be forwarded to the institution Facilities Department.

c. **Outside Visitor Accidents.** Accidents involving outside visitors must be reported to the Institution Duty Officer, Environmental and Safety Compliance Department, Health Services Department, and Operation Lieutenant.

12. EXTERNAL AGENCY VISITS

a. The CEO must ensure that notification is sent to the Chief, Occupational Safety Compliance, and RESCA of:

- OSHA requests to visit/inspect.
- OSHA unannounced visits.
- OSHA citations and complaints.
- Outside visit or inspection related to other occupational safety or health issues.
- Work-related deaths or serious injuries.

b. **Coordination.** Institution management must coordinate all OSHA site visits/inspections through the Chief, Occupational Safety Compliance.

c. **Reporting.** The CEO must ensure a copy of all outside visit reports are sent to the RESCA. The RESCA must forward a copy to the NESCA and Chief, Occupational Safety Compliance, within 48 hours of receipt.

13. INMATE INJURY INVESTIGATION

a. **Work-Related Injuries.** The purpose of an inmate injury investigation is to find the cause of the injury. Work-relatedness for compensation purposes is concluded by determining whether the injury took place at the assigned workplace during assigned hours and was incidental to the employment.

The assigned workplace is any place the inmate is authorized to be performing an assignment, not just the work station. For example, if a worker slipped on the way to the bathroom from a work station, it is considered a work injury. If he/she slipped on the sidewalk outside the building on the way to lunch, it is not a work injury. The Institution Safety Committee must decide each case individually. Listed below are procedures for documenting inmate injuries:

- Complete a BP-A0140 (Part 1, Injury Report) for all inmate work-related injuries.
- Lost-Time Work Injuries require a completed BP-A0140 (Part 2, Lost Time Follow-up Report).
- Lost-time compensation must be paid per the Federal Inmate Compensation Act.
- The detail of assignment at the time of injury is responsible for lost-time compensation, including for those transferred to a Medical Center for additional care.

b. **Transfer of Records.** Copies of injury reports maintained in the Environmental and Safety Compliance Department should not be forwarded unless requested by the receiving institution.

c. **Records Retention.** Inmate injury records must be retained for the duration of the sentence plus three years.

14. INMATE ACCIDENT COMPENSATION (IAC)

Compensation may be awarded via the following two separate programs: **Lost-Time Wages** and **Inmate Accident Compensation** for work-related physical impairment or death.

a. **Lost-Time Wages** may be awarded to inmates (*while still incarcerated)* for work-related injuries resulting in time lost from the work assignments. Lost-time wages are paid for time lost in excess of three consecutively scheduled work days. The day of injury is considered to be the first work day, regardless of the time of the injury.

In order to be eligible for Lost-time wages, the inmate must have been assigned to one of the following when the injury occurred:

- Federal Prison Industries, Inc.
- Paid institutional work assignments involving the operation or maintenance of a Federal correctional facility.
- Approved work assignments for other Federal entities.

Procedures for lost-time wages while the inmate remains incarcerated are in 28 CFR, Part 301.

The detail of assignment at the time of injury is responsible for lost-time compensation, including for those inmates transferred to a Medical Center for additional care.

b. Inmate Accident Compensation may be awarded to *former* Federal inmates *(post-incarceration, or upon release to community confinement)* or their dependents for physical impairment or death resulting from injuries sustained while performing work assignments.

In order to be eligible for Inmate Accident Compensation, the inmate must have been assigned to one of the following when the injury occurred:

- Federal Prison Industries, Inc.
- Paid institutional work assignments involving the operation or maintenance of a Federal correctional facility.
- Approved work assignments for other Federal entities.

c. **Providing Documentation for Inmate Accident Compensation Process.** The Inmate Accident Compensation Program Coordinator processes claims for compensation for impairment or death, and manages all claims processed at the Central Office level for inmates released from a Bureau of Prisons correctional facility upon expiration of sentence, parole, final discharge from incarceration of a pretrial inmate, or transfer to a Residential Reentry Center or other non-Federal facility at the conclusion of the period of confinement in which the injury occurred.

Institutions should ensure that the following steps are completed:

- *Inmate Claim for Compensation Resulting from Work Injury Form*. Within 45 days before an injured inmate's release from prison or transfer to a Residential Reentry Center, the inmate must notify the ESCA regarding his/her intentions to file a claim. He/she must complete the Inmate Claim for Compensation Resulting from Work Injury Form (BP-A0658).

- *Physical Examination of Inmate by Qualified Physician.* The physical examination to determine and assess the impairment must be completed as far in advance of release as possible by a qualified physician. If this is not completed, the IAC Program Coordinator must be advised.

  Note: Examination findings may be documented on the reverse of form BP-A0658. Substantiated percentages of permanent or temporary impairment must be included. The completed form must be returned to the ESCA after the examination. BOP physicians not qualified in impairment assessments under American Medical Association guidelines **should not** complete the form regarding impairment findings.

- *Assemble All Inmate Medical Records and Forward to IAC Coordinator:* The most recent BEMR or medical records of the inmate seeking compensation must be gathered and be included in the IAC packet at the time of release.

- *Compile the IAC Packet:* The ESCA must check the completed BP-A0658 and compile the inmate's IAC Packet to send to the Inmate Accident Compensation Program Coordinator in the Central Office upon the inmate's release. The packet should include the following:

  - BP-A0658 (Completed).
  - BP-A0362 (Inmate Injury Assessment and Follow-Up) or BEMR report of injury.
  - Medical Records –
    - Outpatient entries dealing with the claim from date of injury to release. (Spot-check entries before the claimed injury for possible preexisting conditions.)
    - X-Ray and diagnostic procedure reports on the injury.
    - Consultant reports on the injury.
    - Hospital discharge summaries on the injury.
    - Report of Medical History – Use the most recent before the injury.
    - Report of Medical Examination – Use the most recent before the injury.

  - BP-A0140 and lost-time follow-up report.
  - BP-A0169s signed by inmate.
  - BP-A0139.
  - Witness statements (if any).
  - Memoranda of investigations (if any).
  - Last progress report (as it deals with marital status and release plans used in determining amount of compensation).
  - Photographs (if any).

15. CONSTRUCTION AND RENOVATION PROJECTS

The Environmental Safety Compliance Administrator must participate on all construction and renovation project committee meetings and must be notified of all construction and renovation projects.

a. **Plan Review.** Plans for renovations, alterations, additions, and new construction must be approved by the institution ESCA. The ESCA's review focuses on compliance with occupational safety and health requirements and BOP policy.

b. **Pre-Construction Meetings**. The ESCA must attend pre-construction and job progress meetings to advise project staff on occupational safety and health issues.

c. **Monitoring.** The ESCA must monitor construction and renovation projects to ensure compliance with approved design and safety requirements. Communications with the contractor must be made through the Contracting Officer's Technical Representative (COTR).

d. **Unsafe Work Conditions.** If an unsafe work condition is observed, the ESCA must take the following steps:

- Advise the Facilities Manager, Project Representative, and Contracting Officer of the unsafe work condition.
- Keep a log of unsafe incidents and corrective actions. If a resolution cannot be reached, notify the CEO; Chief, Occupational Safety Compliance; RESCA; and appropriate regulatory authorities.
- Conduct follow-up inspections to ensure corrective action occurred and continued compliance exists.
- For imminent danger situations, see requirements in Chapter 1, Section 2 of this policy.

16. DRIVER LICENSING

For purposes of licensing, there are three categories of drivers: Inmate drivers, employee drivers, and employee incidental drivers.

a. **Employee Drivers - Commercial Driver's License (CDL).** Employee drivers who operate a vehicle on public roads or highways (as defined by DOT in Title 49, CFR) requiring CDL's must:

- Have a valid CDL and meet Federal Motor Carrier Safety Administration Commercial Driver's License Standards.
- Carry Bureau identification when operating a vehicle on official business.

b. **Employee Incidental Drivers**. Employee drivers who operate a vehicle on or off institution grounds that does not require a CDL must:

- Have a valid state license for the type of vehicle being operated.
- Carry Bureau identification when operating a vehicle on official business.

Inmate Drivers – On Institution Grounds. Inmate drivers who operate vehicles or equipment on institution grounds must be issued an inmate driver/operator permit. The permit, issued by the garage foreman, must identify the vehicle or equipment the inmate is authorized to operate.

c. **Inmate Drivers – Off Institution Grounds.** Inmate drivers who operate vehicles or equipment off institution grounds must be issued an inmate driver/operator permit. The permit, issued by the garage foreman, must identify the vehicle or equipment the inmate is authorized to operate. The inmate driver permit must contain the following statement in the "Restrictions"

section: "The bearer is a Federal Prisoner of the (**Institution**). In case of emergency call (**Institution Phone**)."

The inmate must have a valid state license for the type of vehicle being operated.

d. **Inmate Drivers – Commercial Driver's License (CDL)**. Inmate drivers required to operate a commercial motor vehicle on public roads or highways (as defined in Title 49, CFR) must have a valid commercial driver's license (CDL) and meet Federal Motor Carrier Safety Administration Commercial Driver's License Standards.

17. SEAT BELT USE

Personnel on official business must fasten seat belts when a vehicle is in motion. Seat belts must be worn by occupants of vehicles used on official business (except passengers on buses).

18. DISTRACTED DRIVING

Drivers must follow all state distracted driver laws. Regardless of state law, personnel must not engage in text messaging when driving a vehicle on official Government business.

Chapter 2. Occupational Safety

1. HAZARD ASSESSMENT

A hazard assessment of all work areas must be conducted by the Environmental and Safety Compliance Department in conjunction with affected department head(s). When hazards cannot be eliminated, administrative and/or engineering controls must be implemented. As a last line of defense, workers must use Personal Protective Equipment (PPE) to limit exposure to hazardous environments.

The hazard assessment must:

- Be documented in writing.
- Identify the work area being assessed.
- Be certified by an Environmental and Safety Compliance Department staff member.
- Contain the name of the certifying individual.
- Contain the date of the hazard assessment.

The hazard assessment must be updated anytime operations or work hazards change.

A copy of the hazard assessment must be provided to affected departments and made available to employees working in that area.

The affected department is responsible for providing training, including the use of PPE, to individuals assigned to an area or task addressed in a hazard assessment.

a. **Personal Protective Equipment (PPE).** PPE such as safety shoes, eye and face protection, hard hats, gloves, respirators, lifelines and harnesses, and hearing protection must be used when required by an applicable OSHA Regulation, or as deemed necessary by the Environmental and Safety Compliance Department. This PPE must be purchased and maintained by the department using the equipment.

b. **Foot Protection.** Safety shoes meeting requirements of the American Society for Testing and Materials (ASTM) are required in foot hazard areas, designated by Institution Supplement, in accordance with the Master Agreement. Toe caps or foot guards may not be worn in lieu of safety shoes.

2. **FIRING RANGES**

A hazard assessment must be conducted of the firing range (BOP-owned ranges and contracted ranges) to determine any potential safety concerns with range construction or use of the range. (See Chapter 3, Section 8. for additional information on noise exposure at firing ranges.)

The range must be constructed and maintained to help prevent hazards to the staff utilizing the range. The use of railroad ties, stacked lumber, or rubber tires facing the shooter must not be used due to the possibility of lead build-up, ricochet, and back-splatter. Other items within the range area (inlets, drains, pavement, etc.) may also need to be protected to avoid ricochet.

3. **WALKING-WORKING SURFACES**

OSHA Standard 29 CFR 1910.21-30, Subpart D, addresses requirements for a wide variety of ladders (fixed and portable), scaffolding, walking surfaces, and guard railings used in general industry settings. Requirements contained in 29 CFR 1926 will govern temporary stairs, ladders, and working surfaces on construction/renovation sites.

The institution must develop a written Fall Protection Program to address protection of personnel working on elevated walking-working surfaces. In areas where a standard railing is utilized as a means for fall protection, the use of chain, rope, cable, or other similar material is not acceptable as a substitute for standard railing.

The following basic requirements apply to common work surfaces in this section:

a. **Stairs and Walkways.** Floors and stairways must be maintained in a clean, dry manner and free of nails, splinters, holes, loose boards, corrosion, snow, or ice.

Aisles and passageways, including in housing units, must be kept clear and in good repairs, with no obstruction across or in aisles that could create a hazard.

b. **Ladders.** At a minimum, ladders must comply with the following:

- Ladders must be equipped with functional non-slip safety feet.
- The joints between rails and the steps must be tight and secure.
- Ladder rungs must be kept free of grease, oil, and foreign substances that would cause a slip.
- Wood ladders cannot be painted or stained in a manner that would cover a defect and hinder inspection.
- All wood components must be free of splits or damage.
- The metal spreaders must be of sufficient size and strength and function properly.

■ Extension ladder rope must be free of frays and damage.

Fixed ladders must comply with OSHA Standard 29 CFR 1910.23.

Ladders that are not covered by OSHA regulations (i.e., fiberglass, aluminum) must be used in accordance with manufacturer's recommendations.

c. **Scaffolding.** Portable and fixed scaffolding used in general industry must meet the requirements in OSHA standard 29 CFR 1926, subpart L. Training and fall protection programs must be specific to the type of scaffolding being used.

Personnel utilizing scaffolding must be trained on scaffold assembly, inspection, and fall protection.

Unassembled scaffolding in storage must be protected from damage and weather that could deteriorate its integrity.

All planking must be Scaffold Grade as recognized by grading rules for the species of wood used.

Scaffolds must not be loaded in excess of the working load for which they are designed.

All personnel who are involved in erecting, disassembling, moving, operating, repairing, maintaining, or inspecting a scaffold must receive appropriate training to recognize any hazards associated with the use of the scaffolding and associated work.

d. **Loading Docks.** Loading docks four feet or more in height must be guarded by a standard railing on all open sides, except where there is entrance to a ramp, stairway, or fixed ladder.

The NFPA Life Safety Code requires a guardrail on any section of the loading dock that is part of a required exit, when the dock height is 30 inches or more.

If mechanical means to secure trucks or trailers to the loading dock are not available, signs must be posted designating that the use of wheel chocks is required.

e. **Lofts, Mezzanines, Work Platforms.** All lofts, mezzanines, and work platforms designed for storage must have a posted load limit. Storage in excess of the posted load limit is not permitted.

f. **Work Performed on Roofs.** Work performed on roofs may include activities such as facilities maintenance, Correctional Services security inspections, etc.

When work is performed less than 15 feet from the roof edge, a guardrail system, safety net system, travel restraint system, or personal fall arrest system must be in place.

When work is performed at least 15 feet or more from the roof edge, a guardrail system, safety net system, travel restraint system, personal fall arrest system, or a designated area must be in place. Fall protection is not required provided the work is both infrequent and temporary, along with implementing and enforcing a work rule prohibiting employees from going within 15 feet of the roof edge without the use of fall protection.

4. **PAINTING OPERATIONS**

Individuals using spray guns must wear Personal Protective Equipment in accordance with the institution's hazard assessment.

Portable airless spray gun nozzles must be kept clear of body parts due to the extreme pressure.

When flammable or combustible materials are sprayed, booths and operations must comply with 29 CFR 1910.107 and NFPA 33.

Each spray area must be provided with mechanical ventilation that is capable of confining and removing vapors and mists to a safe location and confining and controlling combustible residues, dusts, and deposits.

Spray areas equipped with overspray collection filters must have visible gauges, audible alarms, or an effective inspection program to ensure that the required air velocity is being maintained.

5. **CONFINED SPACE PROGRAM**

OSHA Standard 29 CFR 1910.146 addresses requirements for a wide variety of permit and non-permit required confined spaces. Only trained entrants, attendants, and entry supervisors will be allowed to participate in the permit-required confined space activities.

The Facilities Department shall cover the costs of the program.

Institutions must develop a written permit-required confined space program, including:

- Institution confined space survey.
- Confined space identification.
- Permit system.
- Equipment.

- Roles and responsibilities.
- Rescue services.
- Training.

a. **Institution Confined Space Survey.** The ESCA and Facilities Manager must perform an institution survey to identify permit-required and non-permit-required confined spaces. The results of the survey and space classifications must be documented as part of the written confined space program.

b. **Confined Space Identification.** Permit required spaces must be identified with a warning sign or other equally effective method to prevent unauthorized entry.

c. **Permit System.** A permit system to authorize entry into a permit-required confined space must be in place. The ESCA must be notified prior to any confined space entries.

On expiration of the permit, it must be returned to the Environmental and Safety Compliance Department.

All issued permits must be retained for a minimum of three years.

d. **Equipment.** Institutions with permit-required confined spaces must have the following equipment available:

- Testing and monitoring equipment (including calibration equipment) with the ability to monitor oxygen, combustible gases and vapors, and toxic gases and vapors.
- Ventilating equipment capable of maintaining acceptable entry conditions.
- Communication equipment.
- Personal Protective Equipment.
- Lighting equipment.
- Barriers to guard entrances.
- Equipment to rescue or retrieve entrants.

Institution-made equipment is prohibited.

Equipment must be calibrated, tested, and maintained in accordance with manufacturers' or testing standard requirements.

e. **Roles and Responsibilities.** Individuals involved with confined space entry will have specific roles and responsibilities. All individuals must receive training in their specific roles and responsibilities.

Inmates are not permitted to fulfill the role of the entry supervisor and/or attendant in permit-required confined space entry.

f. **Rescue Services.** Institutions must provide a means of rescue for individuals involved with permit-required confined space entry.

(1) **Outside Rescue Services.** Institutions using an outside rescue service must:

- Ensure the rescue services have the ability to respond in a timely manner with appropriate equipment.
- Provide a copy of the written permit-required confined space program to the outside rescue service.
- Provide the rescue team or service an opportunity to inspect and use institution confined spaces for training purposes.
- Notify the outside rescue team or service prior to entry to verify their response availability. This contact must be documented on the permit form.

(2) **In-house Rescue Team.** Institutions using an in-house rescue team must:

- Provide team members with PPE and all equipment needed to conduct a permit-required confined space rescue.
- Train team members to perform assigned rescue duties.
- Ensure one team member trained in CPR and basic first aid is available during entry.
- Ensure team members practice making permit-required confined space rescues at least once every 12 months.

g. **Training.** All affected personnel must receive training as outlined in this section. The training must be documented and contain the following information:

- Name of participant.
- Date of training.
- Name and signature of instructor.

6. CONTROL OF HAZARDOUS ENERGY (LOCKOUT/TAGOUT)

OSHA Standard 29 CFR 1910.147 addresses requirements for an energy control program. Institutions must develop a written Energy Control Program that includes, at a minimum:

- Energy control procedures.
- Periodic inspections.
- Employee training.

- Lockout devices and equipment.
- Inmate Locks.
- Shift Change, Transfer of Authority, Outside Service Personnel (Contractors).

a. **Energy Control Procedures.** Specific energy control procedures must be developed for all equipment with multiple energy sources. Affected departments must assist the ESCA in the identification of equipment/systems requiring energy control procedures.

Energy control procedures must contain the following elements:

- Scope.
- Purpose.
- Authorized personnel.
- Rules.
- Techniques to control hazardous energy, including:

  - Specific statement of the intended use of device.
  - Specific steps for shutting down, isolating, blocking, and securing equipment.
  - Specific steps for the placement, removal, and transfer of devices.
  - Specific requirements for testing effectiveness of energy control measures.

b. **Periodic Inspections.** An annual periodic inspection of each energy control procedure must be conducted by an authorized employee. The authorized employee performing the inspection may be someone who previously has or currently implements the energy control procedure being inspected, as long as he/she is not implementing any part of the energy control procedure while it is being inspected. The periodic inspection must include every employee authorized to utilize the procedure being inspected. The inspection must be certified by documenting the periodic inspection. Documentation must include:

- Machine or equipment being inspected.
- Date of the inspection.
- Employee(s) included in the inspection.
- Person performing the inspection.
- Signature of the person certifying the inspection.

The person certifying the annual inspection must be someone other than the inspector or employees included in the inspection.

c. **Training.** Training must be provided for the following individuals:

(1) **Authorized Personnel.** Authorized personnel must receive training in the following:

- Recognition of hazardous energy sources.
- Magnitude of the energy available in the workplace.
- Methods necessary for energy isolation and control.

(2) **Affected Personnel.** Affected personnel must be instructed in the purpose and use of energy control procedures.

(3) **All Other Personnel**. All other personnel must be instructed in the prohibition of attempting to reenergize equipment that has been locked/tagged out.

Additional training must be conducted for all authorized and affected personnel whenever:

- There is a change in their job assignments.
- There is a change in machines, equipment, or processes that present a new hazard.
- There is a change in the energy control procedure.

Additional training must also be conducted whenever a periodic inspection reveals retraining is necessary.

d. **Lockout Devices and Equipment**. Devices used to secure energy sources must be:

- Standardized, identifiable, and durable.
- Capable of withstanding the environmental and physical demands placed on them.
- Not used for any other purpose.

e. **Inmate Locks**. Authorized inmates must be issued and utilize designated color-coded combination locks with master key access when working on circuits/equipment requiring lockout/tagout.

f. **Shift Changes, Transfer of Authority, Outside Service Personnel (Contractors).** If a machine remains locked out over a period of time or repairs continue by other employees through more than one shift, the oncoming employee affixes his/her lock to the machine before the off going employee removes his/her lock. The off going employee briefs the oncoming employee, then removes his/her lock. Other means of accommodating shift change must be approved through the Central Office Safety Branch.

When outside servicing personnel are engaged in activities covered by this section, the ESCA must review the outside contractor lockout procedures prior to commencing work. The department affected must ensure outside personnel comply with approved energy control

procedures. If outside employers do not have documented lockout or tagout procedure(s), they must ensure their staff comply with the institution's written energy control procedures.

7. **TIRE SERVICE**

OSHA Standard 29 CFR 1910.177 addresses requirements for servicing multi-piece and single-piece rim wheels used on large vehicles such as trucks, tractors, trailers, buses, and off-road machinery.

The use of a local tire service vendor to repair multi-piece rim wheels is recommended.

This standard does not apply to the servicing of rim wheels used on automobiles, or on pickup trucks and vans using automobile tires or truck tires designated light trucks (LT).

The ESCA must ensure that a facility-specific tire service and inflation procedure is developed to address tire maintenance activities. Tire service charts must be posted in the tire service area.

a. **Training.** Personnel inflating tires and servicing single and multi-piece rims must be trained on:

- Hazards associated with tire service and inflation.
- Institution-specific procedures.
- Use of tire service charts.
- Reading tire pressure placards.
- Restraining devices and barriers for inflating tires on multi-piece rims (bolted and unbolted from vehicles).

b. **Equipment.** Airline assemblies used for inflating tires must consist of:

- Clip-on chuck.
- In-line valve with a pressure gauge or a pre-settable regulator.
- Sufficient hose length between the clip-on chuck and the in-line valve to allow the employee to stand outside the trajectory (path of travel during explosion).

8. **POWERED INDUSTRIAL TRUCKS**

OSHA Standard 29 CFR 1910.178 addresses requirements for powered industrial truck operation used in general industry settings.

A Powered Industrial Truck (PIT) is a mobile, power-propelled truck used to carry, push, pull, lift, stack, or tier materials. The forklift is the most common PIT; however, utility carts (Cushman, EZ Go, Taylor-Dunn, Gator, etc.) may fall under this designation.

Powered industrial trucks must be operated and maintained in accordance with manufacturers' requirements.

Modifications to or the use of attachments with the powered industrial truck must be performed or approved in writing by the manufacturer.

The operator manual must be maintained in a legible condition and readily accessible within the powered industrial truck operational area. It is recommended additional copies of the operator manual be maintained in the Environmental and Safety Compliance Department.

A survey must be conducted to identify powered industrial trucks being operated within the institution. Upon completion of the survey, each institution must ensure a program is in place for all powered industrial trucks. The program must meet the requirements of 29 CFR 1910.178, and any additional requirements noted in the manufacturer's operator manual.

a. **Training.** Operators of these vehicles must be trained to operate the vehicle in accordance with the manufacturer's recommendations as outlined in the operator manual. Training must be documented and include, at a minimum:

- Name of the operator.
- Date of training.
- Date of the evaluation.
- Name and signature of the person(s) performing the training or evaluation.

An operator's performance must be re-evaluated every three years.

Retraining must be performed when the operator is involved in an accident.

b. **Inspections.** A pre-use inspection of the powered industrial truck must be completed each shift. This inspection must be documented.

Pre-use inspection documentation must be retained for a minimum of 30 days.

Inspections are not required during a shift when the vehicle is not being operated.

Additional visual inspections must be conducted throughout the shift any time the vehicle has been left unattended. These inspections are not required to be documented.

Powered industrial trucks must be removed from service until all discrepancies identified on inspections are corrected.

Powered industrial trucks must be equipped with a:

- Cage over the driver's compartment. (if capable of lifting loads above the height of the driver).
- Seat belt or similar restraints (if required by the manufacturer).
- Backup alarm that sounds when the truck reverses.
- Strobe light (if vehicle is used indoors).
- Horn.

Vehicles with modifications not approved by the manufacturer, defective or damaged safety devices, operational systems, controls, and structural features must be removed from service and "red tagged" until repaired by authorized service personnel.

Battery charging and propane fuel tank storage must be at designated locations approved by the ESCA.

Powered industrial trucks must not be used to tow trailers unless approved by the manufacturer.

9. **PERSONNEL LIFTS (AERIAL LIFTS/SCISSOR LIFT/BOOM TRUCK)**

Personnel lifts are governed under various OSHA and ANSI standards, depending on the type of personnel lift. Manufacturers' requirements must be followed when operating and maintaining personnel lifts.

a. **Training.** Only properly trained and authorized personnel are permitted to operate personnel lifts. At a minimum, training must consist of the requirements outlined in the manufacturer's operating and maintenance manual.

The operator must be trained on the same model of personnel lift or one having operating characteristics consistent with the one used during work site operation.

Training must consist of a combination of formal instruction, practical training, and evaluation of the operator's performance in the workplace.

Training must include the actual operation of the lift for a sufficient period of time to demonstrate proficiency and knowledge in the actual operation of the lift.

Training must be documented and include, at a minimum:

- Name of operator.
- Date of training.
- Name and signature of the person(s) performing the training or evaluation.
- List of equipment covered by the training.

b. **Inspections.** A pre-use inspection of the personnel lift must be completed each shift. This inspection must be documented.

Pre-use inspection documentation must be retained for a minimum of 30 days.

Inspections are not required during a shift when the personnel lift is not being operated.

Additional visual inspections must be conducted throughout the shift any time the personnel lift has been left unattended. These inspections are not required to be documented.

An annual inspection must be performed by a qualified source, in accordance with ANSI standards. The department accountable for the lift is responsible for funding and scheduling annual inspections.

Personnel lifts must be removed from service until all discrepancies identified on inspections are corrected.

An operator manual must be physically located on each personnel lift at all times. It is recommended additional manuals be maintained in the Environment and Safety Compliance Department.

The department operating personnel lifts is responsible for purchasing PPE and fall protection equipment appropriate for tasks being performed and maintaining appropriate inspection records for the equipment.

10. MACHINE GUARDING

OSHA Standards 29 CFR 1910.211 through 1910.219 addresses requirements for machine guarding. In addition to general requirements for all machines outlined in 29 CFR 1910.212, a wide variety of equipment types and applications must be evaluated to determine machine guarding requirements. The ESCA is responsible for making final determinations regarding machine guarding requirements:

- Equipment that may cause injury during sudden or unexpected startups must have anti-restart devices.
- Guards must be provided at the point of operation to protect operators from injury.
- Power transmission belts, pulleys, gears, shafts, and moving parts must be guarded.
- Power controls must be within the operator's reach without leaving their positions at the point of operation.
- Stationary equipment must be anchored to the floor to prevent "walking" due to vibration.

For abrasive wheel machinery:

- Work rests on bench/floor grinders must be kept adjusted closely to the wheel with a maximum opening of 1/8 inch.
- Tongue guards on bench/floor grinders must be kept adjusted to the diameter of the wheel, with a maximum opening of 1/4 inch.
- Bench and pedestal grinders must be permanently mounted.
- Portable grinders (wheels greater than 2" in diameter) must have safety guards.
- The top half of the wheel on portable grinders must be enclosed.

11. CLEANING WITH COMPRESSED AIR

Air lines used for cleaning must be reduced below 30 psi and have nozzles with venturi-type features for chip guarding. Cleaning with air lines is not permitted in electronics de-manufacturing (or similar) operations, where dust with heavy metals could be dispersed.

12. LAWN EQUIPMENT

Operators of lawn equipment must receive equipment-specific training during Initial Job Orientation (IJO) in accordance with the manufacturer's recommendations as outlined in the operator manual.

Operators of equipment (edgers, line trimmers, leaf blowers, lawn vacuums, chain saws, mowers, and similar equipment) must use PPE as identified in the institution hazard assessment.

Operating controls must be clearly identified. Other than ergonomic adjustment of seats and controls engineered into the equipment design, modification of operator controls and safety devices is prohibited.

Riding equipment must not be operated on inclines exceeding the manufacturer's limit.

13. **WELDING, CUTTING, AND BRAZING**

OSHA Standard 29 CFR 1910.251 through 1910.255 addresses requirements for welding, cutting, and brazing in General Industry environments. Refer to 29 CFR 1926 for construction-related activities.

All welders must receive training regarding proper safety precautions prior to conducting any welding operations.

Appropriate PPE must be provided.

Mechanical ventilation must be provided when cutting and welding operations are conducted in any of the following areas:

- Spaces with less than 10,000 cubic feet per welding machine.
- Rooms/areas with a ceiling less than 16 feet.
- Confined spaces.

The ventilation must be at the minimum rate of 2,000 cubic feet per minute per welding machine, except where local exhaust hoods and booths are used in accordance with the OSHA standard.

Respiratory protection may be used in lieu of mechanical ventilation with the approval of the ESCA.

Other personnel exposed to the same atmosphere as the welders must be protected from the hazards associated with welding operations.

Welding cables and insulation must be undamaged and cable terminals must be guarded from accidental contact.

In arc welding operations, cables with splices within 10 feet of the holder must not be used. The welder must not coil or loop welding electrode cable around parts of his/her body. Cables with damaged insulation or exposed bare conductors must be replaced.

All regulators and hoses must be checked daily for damage or worn parts.

On oxy-fuel welding and cutting equipment, a flashback arrestor must be installed between the regulator and hoses of both tanks.

Where a cylinder is designed to accept a cap, valve protection caps must always be in place, hand-tight, except when cylinders are in use or are connected for use.

Cylinders on welding equipment being stored and not in use must have the regulator disconnected and valve protection caps in place.

14. **HOT WORK PLAN**

The ESCA must ensure that a written hot work plan is developed. The plan must outline a permit process for operations. A written hot work permit must identify the area where hot work will be conducted and all required precautions.

Before hot work is permitted, the area must be inspected by the Environmental Safety Compliance Department.

The area must be made safe by removing combustibles or protecting combustibles from ignition sources.

Noncombustible or flameproof screens or shields must be provided to protect bystanders.

Appropriate PPE must be provided to personnel conducting hot work operations.

Hot work permits are not required for operations conducted in the welding shop area.

Issued hot work permits must be retained for a minimum of three years.

15. **ELECTRICAL**

OSHA Standard 29 CFR 1910.301 through 1910.399 addresses Electrical Requirements in General Industry Environments. Refer to 29 CFR 1926 for construction-related activities. In addition, all electrical installations must be in accordance with the latest edition of the National Electric Code.

a. **Non-Qualified Personnel.** Non-qualified staff/non-facilities staff and inmates are prohibited from working on any energized electrical circuits or equipment.

b. **Protective Equipment.** Protective equipment must be provided, maintained, and tested in accordance with the Program Statement **Facilities Operations Manual.**

c. **High Voltage (Over 600 Volts).** Inmates are prohibited from working on circuits/equipment with a rated capacity in excess of 600 volts.

Accessible aboveground power lines must be marked “Danger High Voltage.”

d. **Ground Fault Protection.** Ground fault protection must comply with the National Fire Codes for single-phase receptacles in wet or damp areas. At a minimum, protection must be provided for:

- Receptacles within six feet of sinks, toilets, and showers.
- Receptacles in kitchen areas.

In addition, ground fault protection must be provided for drinking fountains and vending machines.

A Ground Fault Circuit Interrupter (GFCI) must be utilized with corded hand-held power tools and extension cords used during construction or maintenance activities.

The ESCA must evaluate the need for GFCI protection used during floor care activities.

e. **Electrical Maintenance**

- Each electrical box must have a cover, faceplate, or fixture canopy.
- Sufficient access and work space must be provided and maintained around all electrical equipment to permit ready and safe operation and maintenance.
- Electrical panel boards, boxes, cabinets, and switch enclosures must be covered or isolated to prevent accidental contact with energized parts, and to protect electrical switches, relays, and wiring from damage.
- Connections, joints, and fittings on all cable, conduits, and raceways must be tight.
- Continuity of grounding must be maintained.
- Metallic boxes, enclosures, and conduits must be free of rust and corrosion.
- Disconnect switches (including service entrance, feeders, and branch circuits) must be legibly and durably marked at the point of origin to indicate the area/equipment controlled by each switch.

f. **Flexible Cords.** Flexible cords (and extension cords) must not:

- Be used as a substitute for fixed wiring.
- Run through a wall, ceiling, floor, or under a carpet/rug.
- Run through a doorway, window, or similar opening.
- Be attached to a building surface.

- Be concealed behind a wall, ceiling, or floor.

Flexible cords must not be altered.

Flexible cords must be constructed in a manner that does not expose the user to any current-carrying components except the prongs, blades, or pins.

Flexible cords must not be used when grounding blades/pins are broken or missing.

Flexible cords must not be used if frayed or damaged.

Junction boxes designed for use in fixed wiring applications must not be used as part of a

flexible/extension cord.

16. **EXCAVATIONS/TRENCHING**

OSHA Standard 29 CFR 1926.650 through 1926.652 addresses requirements for excavations and trenching.

The Facilities Manager and ESCA must approve all excavations/trenching operations prior to the start of work.

Safe access and egress must be provided in trench excavations greater than four feet deep. Access and egress points must be located within 25 feet of all workers.

An excavation or trench greater than five feet deep must be shored or sloped to the angle of incidence; or another method of protection, such as a trench box designed and constructed in accordance with OSHA standards, must be provided for workers.

17. **COMPRESSED GAS STORAGE**

Stored gas cylinders must:

- Be secured to prevent tipping.
- Have valves closed.
- Have protection caps in place.

Compressed gas cylinders must be stored away from radiators and other heat sources, in a well-ventilated, dry location, at least 20 feet from highly combustible material.

Compressed gas cylinders must be stored away from elevators, stairs, or exits. Cylinders must be secured to prevent them from being knocked over or damaged.

Oxygen cylinders must be stored at least 20 feet from fuel-gas cylinders or combustible materials such as oil or grease, or be separated by a wall at least five feet high with a fire resistance rating of at least one-half hour.

18. **CHLORINATION ROOMS**

Chlorination rooms must be secured and equipped with mechanical ventilation that is on continuously or automatically activates when the door opens.

Chlorine cylinders must:

- Be secured to prevent tipping.
- Have valves closed when not in use.
- Have protection caps in place when not in use.

Chlorination rooms must have an electronic leak detection and alarm device that gives an audible and visual alarm.

19. **KILNS**

Dry clay (slip powder) must not be used due to silica hazards and possible asbestos. The use of premixed clay is allowed.

Sanding of dry ceramic items is prohibited.

Kilns must be enclosed in a 1-hour rated room with self-closing doors. Kilns require an external exhaust for adequate ventilation when in operation.

20. **PORTABLE POWER TOOLS AND HAND-HELD EQUIPMENT**

OSHA Standard 29 CFR 1910.241 through 1910.244 addresses requirements for portable power tools and other hand-held equipment used in general industry. Refer to 29 CFR 1926 for construction-related activities.

A wide variety of equipment types and applications must be evaluated to determine proper requirements. The ESCA is responsible for making the final determination regarding safety requirements.

Power tools must be equipped with functional guards or shields.

Hand tools must be free of visible signs of damage or severe wear.

Broken tools must be removed from service.

21. **CRANES**

OSHA Standard 29 CFR 1910.179 through 1910.184 addresses requirements for cranes, derricks, and slings used in general industry environments. Refer to 29 CFR 1926 for construction-related activities.

Cranes must be inspected and tested in accordance with the manufacturer's recommendation.

a. **Inspections.** At a minimum, operators must conduct a visual inspection of the crane at the beginning of the work day.

In addition to the daily visual inspection, hooks and hoist chains/cables must be inspected monthly and documented on a written certification record that includes:

- Date of inspection.
- Signature of person performing the inspection.
- Serial number or other identifier of the hook or chain inspected.

A complete inspection of all components of the crane must be performed at least annually. The inspection must be performed by competent crane inspector.

b. **Testing.** Prior to initial use, new, altered, or extensively repaired cranes must be operationally tested for hoisting, lowering, trolley travel, bridge travel, limit switches, locking, and safety devices. They must be load-tested by or under the direction of a competent inspector, in compliance with 29 CFR 1910.179.

The crane must not be placed in service if the inspection or test shows any condition adversely affecting the safety of the equipment.

Documentation for inspections and testing must be retained for a minimum of three years.

22. **TRANSPORTATION**

Vehicles used for transporting persons must be fitted with seats or benches that are rigidly fixed to the vehicle.

There must be no more people riding on a vehicle than there are seats.

Drivers must not move the vehicle until all passengers are seated. Passengers cannot ride standing up, with legs dangling over fenders, bumpers, or tailgates, or on loads that may shift or tip.

People may not be transported in the beds of trucks.

Drivers may not allow persons to get on or off a vehicle in motion.

Heavy Equipment. Heavy equipment and farm equipment must be transported only on lowboy trailers specifically made to haul this type of equipment.

Heavy equipment must be chained and blocked on the trailer. Any truck/trailer combination used to move heavy equipment on the highways must be driven by a person with a valid state CDL.

The Federal Highway Administration's (49 CFR Parts 350-399) Motor Carrier Safety Regulations must be followed.

Any movement or loading of heavy equipment by inmates must be under staff supervision.

Keys must be removed from any truck or other motorized equipment left unsupervised.

Only trained personnel are permitted to operate heavy equipment and farm machinery.

All tractors, bulldozers, etc., over 20 H.P. must have seatbelts and rollover protection. Equipment and farm machinery unable to reach a maximum speed of 25 mph when driven on public roads must display a "slow moving vehicle" emblem.

Chapter 3. Occupational Health

1. INJURY RECORDKEEPING

The Environmental and Safety Compliance Department is responsible for maintaining the following documentation for work-related recordable injuries:

- OSHA 300, Log of Work-Related Injuries and Illnesses.
- OSHA 300a, Summary of Work-Related Injuries and Illnesses.
- OSHA 301, Injury and Illness Incident Report.

A recordable injury or illness is defined as any injury or illness resulting in death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, or loss of consciousness.

OSHA's recordable injury definition and recording requirements should not be confused with employee compensation definition and entitlement. See the Program Statement **Workers' Compensation Program**.

a. **OSHA 300, Log of Work-Related Injuries and Illnesses.** OSHA 300, Log of Work-Related Injuries and Illnesses, is used to chronologically record reportable work-related injuries during the calendar year. The agency is required to log injury entries on the OSHA 300 within 7 calendar days of receiving information that a recordable injury or illness has occurred.

It is administratively acceptable to keep separate OSHA 300 logs for staff and inmate workers.

The individual completing the OSHA 300 must provide a complete injury description. Lost works days or work days with a job transfer or restriction must be recorded up to 180 calendar days. The OSHA 300 is a living document; information on the log must be updated during the five-year retention period.

The following injuries and illnesses are considered privacy concern cases; the employee's name may not be placed on the OSHA 300:

- An injury or illness to an intimate body part or the reproductive system.
- An injury or illness resulting from a sexual assault.
- Mental illnesses.
- HIV infection, hepatitis, or tuberculosis.
- Needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material.

- Other illnesses, if the employee voluntarily requests that his/her name not be entered on the log.

In such cases, enter "privacy case" followed by a case number in the space normally used for the employee's name on the OSHA 300 log. A second log should be kept that coordinates the Privacy Case number with an injured employee's name in such cases.

b. **OSHA 300a, Summary of Work-Related Injury and Illnesses.** OSHA 300a, Summary of Work-Related Injury and Illnesses, must be completed by the Environmental and Safety Compliance Department at the end of the calendar year. The completed form must be signed by the Warden or CEO and posted on a staff bulletin board and an inmate bulletin board beginning February 1 through April 30 for the preceding calendar year. The posting location must be in a conspicuous place where notices to employees are customarily posted. OSHA 300a forms are not required to be updated after the form is completed and signed.

c. **OSHA 301, Injury and Illness Incident Report.** An OSHA 301, Injury and Illness Incident Report Form, must be completed for all recordable cases logged on the OSHA 300 form. The Environmental and Safety Compliance Department is responsible for reviewing completed OSHA 301 forms for accuracy and maintaining forms with injury recordkeeping or compensation records.

d. **Record Submission to OSHA.** Records must be submitted to OSHA in accordance with the provisions of 29 CFR Parts 1960 and 1904.

e. **Record Retention.** OSHA recordkeeping documentation must be retained for a minimum of five years.

2. RESPIRATORY PROTECTION PROGRAM

OSHA Standard 29 CFR 1910.134 addresses requirements for a Respiratory Protection Program. The ESCA is the program administrator responsible for identifying respiratory hazards, selecting the appropriate NIOSH-certified respirator and filter, and coordinating required elements of an effective program.

a. **Written Program.** The ESCA must develop a comprehensive written program that addresses institution-specific respiratory hazards. The written program must be updated as necessary to reflect any changes in the workplace that affect respirator use.

The written program must address the following elements:

- Procedures for selecting respirators for use in the workplace.

- Medical evaluation procedures.
- Fit-testing procedures.
- Procedures for proper use of respirators in routine and reasonably foreseeable emergency situations.
- Procedures and schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding, and otherwise maintaining respirators.
- A change schedule for canisters and cartridges.
- Procedures to ensure adequate air quality, quantity, and flow of breathing air for atmosphere-supplying respirators.
- Training requirements.
- SCBA Procedures.
- Procedures for regularly evaluating the effectiveness of the program.

b. **Medical Evaluation Procedures.** Personnel participating in the Respiratory Protection Program must initially complete the OSHA medical questionnaire and be medically cleared by a physician or other licensed health care professional (PLHCP) prior to respirator use.

The PLHCP must be provided information concerning the duration and frequency of respiratory use, the type and weight of the respirator, physical work, exertion, other protective equipment required for the task, and the anticipated work environment temperature and humidity. After reviewing an employee's medical questionnaire and work conditions, and conducting an in-person exam if indicated, the PLHCP makes a medical determination approving or denying the employee's ability to wear a respirator.

The PLHCP must provide only the following information:

- Any limitations on respirator use related to the medical condition of the employee, or relating to the workplace conditions in which the respirator will be used, including whether or not the employee is medically able to use the respirator.
- The need if any for follow-up medical evaluations.
- A statement that the PLHCP has provided the employee with a copy of the PLHCP's written recommendation.

This decision must be documented and provided to the ESCA. The original questionnaire and a copy of the approval decision must be retained in the worker's health record.

Full medical evaluation questionnaires are not necessary every year. The individual being fit-tested must provide written affirmation that there have been no changes in his/her medical status since the last full medical evaluation. If any changes are reported, a full medical evaluation must be completed prior to respirator use.

Note. The privacy rule applies to all forms of individuals' protected health information, whether electronic, written, or oral.

c. **Fit-Testing.** All tight-fitting respirators require a fit test prior to initial use and at least annually thereafter.

In addition, a fit test is required whenever changes occur that could affect respirator fit. Such conditions include, but are not limited to, facial scarring, dental changes, cosmetic surgery, or an obvious change in body weight.

The fit test must not be conducted if there is any hair growth between the skin and the facepiece sealing surface, such as stubble beard growth, beard, mustache, or sideburns that cross the respirator sealing surface.

d. **Facepiece Seal Protection.** If an employee wears corrective glasses or goggles or other PPE, such equipment must be worn in a manner that does not interfere with the seal of the facepiece.

e. **Training.** Personnel participating in the respiratory protection program must be instructed in the respiratory hazards to which they are potentially exposed during routine and emergency situations. Training must be completed at least annually, and may be conducted more often if necessary. Respirator training must include:

- Why the respirator is necessary and how improper fit, usage, or maintenance can compromise its protective effect.
- The limitations and capabilities of the respirator.
- How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions.
- How to inspect, put on and remove, use, and check the seals of the respirator.
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators.

The training must be conducted in a manner that is understandable to the employee.

The training must be provided prior to requiring the employee to use a respirator in the workplace.

f. **Respirator Maintenance.** Respirators must be maintained, cleaned, and disinfected as necessary, and stored in a manner to protect them from physical damage. At a minimum, respirators must be inspected before use and during cleaning. Inspection must include an examination of all components in accordance with the manufacturer's requirements.

g. **SCBA Procedures**. SCBA must be provided to facilitate evacuation of building occupants. SCBA must be stored in multiples of two in locations determined by the ESCA. In addition, SCBA must be:

- NFPA-compliant and NIOSH-certified.
- Equipped with one-hour-rated air cylinders.
- Recharged when air pressure falls below 90% of the rated capacity.
- Used in pairs with a two person back-up team equipped with SCBA available.

h. **Record Retention.** Records for the following must be maintained:

- Medical evaluation documentation must be maintained for the duration of employment plus 30 years. This documentation must be maintained in the personnel medical file.
- Fit-test records must be maintained for respirator users until the next fit test is administered.
- Training records must be maintained for respirator users until the next training session is administered.

3. HAZARD COMMUNICATION

OSHA Standard 29 CFR 1910.1200 addresses the requirement for a Hazard Communication Program. The ESCA is the technical expert responsible for evaluating and approving the use of chemical products.

a. **Written Program.** A written Hazard Communication Program must be developed to communicate chemical information and hazards. The written program must include:

- Safety Data Sheets.
- Labels and other forms of warning.
- Employee information and training.

b. **Safety Data Sheets (SDS)**. SDS must be readily accessible to employees when they are in their work area.

c. **Labels and Other Forms of Warning:** When possible, hazardous chemicals must be stored in their original containers with labels intact. If chemicals are dispensed to other containers, those containers must be labeled with substantially the same information as the original container.

d. **Training.** Personnel working with or in the vicinity of hazardous chemical products must be provided appropriate training. At a minimum, the training must include:

- Methods and observations that may be used to detect the presence or release of a hazardous chemical in the work area.
- The hazards of the chemicals in the work area.
- Measures employees can take to protect themselves from these hazards.
- The details of the Hazard Communication Program, including an explanation of the labels received on shipped containers and the workplace labeling system, and the SDS, including the order of information and how employees can obtain and use the appropriate hazard information.

Training must be completed at the time of an initial assignment, and whenever a new chemical hazard is introduced into a work area.

4. CHEMICAL CONTROL AND ACCOUNTABILITY

A written plan must be developed to include policy, procedure, and practice to govern the control and use of all flammable, toxic, and caustic materials.

Institution rules on use and storage of hazardous products must be based on their relative hazards. Information on the relative hazards can be obtained by reviewing the SDS and/or other material provided by the chemical manufacturer.

Approval must be obtained from the Environmental and Safety Compliance Department prior to purchase of any new chemical. In addition, the ESCA must approve all chemicals sold through the commissary.

Gasoline/diesel/propane must be controlled and supervised in accordance with the Program Statement **Correctional Services Procedures Manual**.

For all other hazardous products, the ESCA determines the level of supervision. Hazardous products, as determined by the ESCA, must be inventoried and controlled in accordance with the **Correctional Services Procedures Manual.**

Care must be exercised in storing incompatible chemicals so that inadvertent mixing does not occur.

Inmate-type combination locks must not be used to secure toxic, flammable, or caustic materials.

5. **TOXIC AND HAZARDOUS SUBSTANCES AND LEAD**

29 CFR 1910.1000 of OSHA regulations is the governing authority for determining employees' exposure to any material listed in table Z-1, Z-2, or Z-3 of that section. A determination of noncompliance with permissible exposure limits (PELs) requires measurement and documentation of an overexposure to at least one employee. For air contaminants with PELs, sampling must be conducted by a qualified source.

When testing indicates controls are needed to prevent atmosphere contamination, engineering control measures must be used if possible (e.g., enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials).

a. **Lead.** Projects involving lead must comply with Federal, state, and local laws and regulations. Guidelines from 29 CFR 1926, Lead Exposure in Construction, are the minimum standards for operational and maintenance procedures. Before beginning any work involving lead, the ESCA must review the project**.**

Personnel who have received training and follow proper health and safety requirements may work on projects where lead-contaminated materials are found.

Lead paint may only be used and stored in Bureau facilities if approved by the NESCA.

Indoor firing ranges used by BOP staff (whether owned and operated by the BOP or contracted) must have properly permitted exhaust ventilation engineered to maintain airborne lead particulate concentrations below 30 micrograms per cubic meter (30 ug/m^3) as an 8-hour time-weighted average.

b. **Asbestos.** If a substance is suspected to be an asbestos-containing material (ACM), it must be handled as such until proven otherwise by laboratory analysis. Except for UNICOR brake shoe and clutch operations, at no time may known or suspected ACM be removed or disturbed without the approval of the ESCA and the Facilities Manager on an "Asbestos Work Permit."

Other than small-scale emergency repair/cleanup or UNICOR brake or clutch work, projects involving asbestos must be contracted and meet the requirements of 29 CFR 1926. Inmates must not work on projects that involve abatement or repair of asbestos, except UNICOR inmates completing brake or clutch work who have received verifiable training. These inmates may inspect, remove, and repair asbestos brake and clutch assemblies per 29 CFR 1910 Subpart Z.

Qualified staff may perform short-duration, small-scale operations involving no more than one glove bag of asbestos-containing material per 29 CFR 1926. Examples: pipe repair, valve replacement, and patch or repair jobs on asbestos insulation.

c. **Respirators and Protective Clothing.** Work involving known or suspected ACM requires (at a minimum) half-face respirators with filters and disposable coveralls.

Respiratory protection and disposable full-body coveralls must be worn by personnel doing asbestos brake or clutch work until initial personal air monitoring indicates asbestos levels below the OSHA exposure limit.

d. **Automotive Work**. Except for UNICOR brake and clutch operations, institutions must never allow personnel to replace or remove asbestos-lined equipment from a vehicle, including brake pads, brake shoes, and clutch linings.

Contract work must be done on an as-needed basis until asbestos-containing material is removed and documented in the vehicle file. Documentation must indicate "non-asbestos replacement parts" and the installation date.

These procedures also apply to Automotive Vocational Training (VT) programs. Mock training aids using non-asbestos-containing materials may be used instead of hands-on training. "Live" work may only be done on documented non-asbestos-containing materials.

e. **Responsibilities.** The ESCA must ensure that:

- Monthly inspections document needed repairs on known or suspected ACM. Institutions with documentation that they are free of asbestos-containing material can eliminate these inspections.
- Work orders are forwarded to the Facilities Manager, who must ensure:

  - New projects potentially involving asbestos removal are presented to the Work Programming Committee.
  - Proper work procedures are followed by facilities staff working with asbestos.
  - PPE is provided and used (UNICOR funds PPE for its facilities).
  - Waste generated during facilities-related asbestos work is disposed of properly.

The UNICOR Factory Manager must ensure:

- Staff supervising brake and clutch repair operations receive training from an outside source, per 29 CFR 1910 Subpart Z. This qualifies the supervisor to train inmates who perform asbestos brake removal.
- Inmates who work on known or assumed asbestos-containing brakes and clutch linings receive training from a qualified supervisor, per 29 CFR 1910 Subpart Z.

- Proper work procedures are followed by personnel working with known or assumed asbestos-containing brakes and clutch linings.
- Through the services of an industrial hygienist, initial and annual personal air monitoring of workers is provided to confirm the effectiveness of engineering controls and workplace practices.
- Asbestos waste generated during UNICOR-related asbestos work is disposed of properly.
- With the assistance of the Environmental and Safety Compliance Department, a written Asbestos Brake and Clutch Removal Plan details engineering controls, work practices, training methods, and waste disposal procedures.

f. **Removal/Demolition.** Removal/demolition projects involving asbestos-containing materials must adhere to OSHA 29 CFR 1926 and EPA 40 CFR 61 Subpart M (National Emission Standard for Hazardous Air Pollutants), and state and local requirements. Due to the complexity of such projects and their strict regulatory safeguards, in-house asbestos removal or demolition (except for small-scale emergency repair/cleanup) is prohibited.

Contracts for asbestos abatement projects and specifications must be approved by the Regional Facilities Administrator and the RESCA before work begins. While specifications vary from project to project, compliance with applicable regulations is mandatory.

As required by 40 CFR 61 Subpart M, the Regional EPA Asbestos Coordinator or governing state environmental agency must be notified in writing at least 20 days before the start of an asbestos removal or demolition project. A copy of the notification must be kept in the Facilities project file.

6. EYE WASH STATIONS AND SHOWERS

Emergency eye wash/shower stations must be provided at locations in accordance with the institution's hazard assessment. At a minimum, an eye wash station must be provided in areas where powered industrial truck battery maintenance is performed.

Note. Does not apply to areas where power industrial truck batteries are charged only, no maintenance is performed, batteries are not removed from the trucks, and no electrolyte is stored in the area.

7. VENTILATION

a. **Ventilation Survey.** A ventilation survey must be conducted in inmate cells/rooms, officer stations, and dining areas to determine if ventilation is provided in accordance with the following requirements. The ventilation surveys must be conducted and documented by a qualified source at least once per ACA accreditation cycle.

b. **All Institutions Other Than High Rise Institutions**

(1) **Institutions Built Prior To 1990**. At least 10 cubic feet of fresh or recirculated filtered air per minute per person must be provided for inmate cells/rooms, officer's stations, and dining areas.

(2) **Institutions Built After 1990**. At least 15 cubic feet of outside or recirculated filtered air per minute per person must be provided for inmate cells/rooms, officer's stations, and dining areas.

c. **High Rise Institutions.** The institution ventilation system must supply at least 15 cubic feet per minute of circulated air per occupant, with a minimum of five cubic feet per minute of outside air. Toilet rooms and cells with toilets must have no less than four air changes per hour.

d. **Record Retention.** Records for the current ventilation survey must be retained for a minimum of three years and maintained in the Environmental and Safety Compliance Department.

8. **NOISE**

a. **Housing Unit Noise Survey.** An inmate housing unit noise survey must be conducted by a qualified source annually, with at least one measurement taking place during nighttime and one during daytime.

The intent of this survey is to ensure that noise produced by mechanical systems (e.g., noisy pipes, fans, ice machines, or mechanical rooms) adjacent to inmate sleeping areas does not exceed 70 dBA.

Noise surveys must be conducted with calibrated equipment on the A scale. Documented calibration results must be included with the noise report. A plan of action must be developed to eliminate high noise above the ACA standard thresholds.

b. **Records Retention.** Records for housing unit noise surveys must be retained for three years and maintained in the Environmental and Safety Compliance Department.

c. **Occupational Noise Exposure/Hearing Conservation Program.** OSHA Standard 29 CFR 1910.95 addresses requirements related to occupational noise exposure in general industry settings. The ESCA is responsible for coordinating required elements of an effective Hearing Conservation Program.

The Health Services Administrator is responsible for maintaining calibrated audiometric testing equipment, conducting baseline and annual audiograms, and maintaining audiometric testing records.

If the institution does not have audiometric testing equipment, the Health Service Administrator must hire an outside contractor to conduct required audiometric testing.

d. **Written Program.** A written Hearing Conservation Program must be developed that includes the following:

- Institution noise survey/employee monitoring.
- Employee notification.
- Observation of monitoring.
- Audiometric testing program/test requirements.
- Hearing protectors/attenuation.
- Training program.
- Recordkeeping.

e. **Institution Noise Survey/Employee Monitoring.** The ESCA must conduct an institution-wide noise survey to identify any noise levels at or above the 85 decibel, 8-hour time weighted average (TWA) OSHA action level. Subsequent noise surveys must be conducted when equipment or operations change.

Note: Individual employee monitoring may be required, depending on the work environment. Individual monitoring can be completed using dosimeters.

f. **Employee Notification.** Personnel enrolled in the Hearing Conservation Program must:

- Receive notification they have been enrolled in a Hearing Conservation Program and informed of monitoring results;
- Receive a baseline audiogram prior to exposure, or within 6 months of noise exposure.

g. **Observation of Monitoring.** Personnel must be allowed to observe any noise measurements conducted.

h. **Audiometric Testing Program/Test Requirements.** Audiometric testing must be conducted by qualified individuals using calibrated audiometric testing equipment.

The results must be reviewed by a qualified technician, provider, audiologist, or other qualified person specified in 29 CFR 1910.95(g)(3). All hearing test documentation, such as audiograms and any subsequent evaluations, must be retained in the individual's medical file.

An initial baseline audiogram must be conducted on persons when first enrolled in the Hearing Conservation Program.

An annual audiogram must be conducted and the results compared against the baseline audiogram to identify a threshold shift, or loss or hearing.

If the annual audiogram shows that an employee has suffered a standard threshold shift (STS), the hearing test should be repeated within 30 days. Repeat STS should prompt clinical evaluation by a physician or audiologist. The worker must be notified in writing within 21 days that a persisting STS has occurred.

If an STS is deemed permanent, the worker's "baseline" audiometric levels must be reset, and future tests compared to these new levels.

i. **Hearing Protectors/Attenuation.** Hearing protection must be selected that will attenuate the 8-hour TWA exposure below 85 decibels. The style of hearing protection should not interfere with the use of other PPE or create a new hazard.

j. **Training Program.** Persons enrolled in the Hearing Conservation Program must receive training initially and annually on:

- The effects of noise on hearing.
- The purpose of hearing protectors; the advantages, disadvantages, and attenuation of various types; and instructions on selection, fitting, use, and care.
- Purpose of audiometric testing, and an explanation of the testing procedures.

k. **Recordkeeping.** Employee audiometric test records must be maintained in the employee's medical file located in the Health Services Department. The record must include:

- Name and job classification of the employee.
- Date of the audiogram.
- Examiner's name.
- Date of the last acoustic or exhaustive calibration of the audiometer.
- Employee's most recent noise exposure assessment.

In addition, the institution must maintain accurate records of the measurements of the background sound pressure levels in audiometric test rooms.

l. **Records Retention.** Records for the following must be maintained:

- Audiometric testing records must be retained for the duration of employment. The records are maintained in the personnel medical file.
- The current institution-wide noise survey conducted for occupational noise exposure must be maintained in the Environmental and Safety Compliance Department.

m. **Firing Ranges.** The institution-wide noise survey must include staff utilizing the firing range or other training facilities during qualification. The survey must include all courses of fire (ART, BPT, SORT, etc.) and must also include firearms instructors to determine noise exposure.

n. **Airlift Operations.** Staff participating in airlift operations must use hearing protection when exposed to high noise levels created by aircraft engines.

9. **LIGHTING**

a. **Inmate Rooms/Cells.** A lighting survey of inmate rooms/cells must be conducted by a qualified source at least once per ACA accreditation cycle.

Lighting levels in inmate rooms/cells must be at least 20-foot-candles at desk level and in personal grooming areas. If applicable, education, recreation, leisure centers, and multipurpose areas designated as primary or secondary reading/writing areas should be included in lighting surveys.

b. **Institution-Wide Lighting Survey.** The Environmental and Safety Compliance Department must assess light levels throughout the facility to determine if sufficient lighting is available based on the tasks performed. Since lighting levels generally vary throughout the room/area, the lighting survey should reflect the average level over the area where tasks are performed. Lighting sources may also be a combination of task lighting and ceiling lighting.

The following chart can be used as a guide for recommended illumination levels:

Minimum Recommended Illumination

Area	Foot Candles	Area	Foot Candles
General Areas:		**Service Areas:**	
Offices	30	Stairwells	5
Control Room	30	Elevators	5
Conference Rooms	30	Corridors	5
Training Rooms	30	Restrooms	10
Lobby Areas	20		

Inmate Living Units:		**Food Service:**	
Desk Level (Writing)	20	Dining Room	15
Grooming Areas	20	Kitchen	50
		Dish Room	20
Education/Recreation:		**Facilities Areas:**	
Classrooms	30	Maintenance Shops	20
Libraries	20	Electrical/Generator Rooms	
Gymnasium	20	Mechanical Rooms	20
VT Shops	20		20
Trust Fund Areas:		**Health Service Areas:**	
Warehouse Areas	10	Exam Rooms	50
Commissary	20	Laboratory	50
Laundry	30	Pharmacy	75
UNICOR Areas:			
Production Areas *(Additional task lighting may be needed depending on type of production)*	30		
Warehouse Areas	10		
Maintenance Areas	20		

c. **Records Retention.** Records for current lighting surveys must be maintained in the Environmental and Safety Compliance Department.

10. PEST CONTROL

Each institution must develop a written plan for pest control measures. The written plan must include, at a minimum, the following:

- Pest Inspections.
- Pesticide Application Logs.

a. **Inspections**. Monthly inspections must be conducted throughout the institution to determine the presence of insects, rodents, or vermin. These inspections must be documented and kept in the Environmental and Safety Compliance Department for a minimum of three years.

b. **Pesticide Application Logs.** A log must be maintained to document any pesticide application (whether applied by in-house personnel or contractors). The log must include the following:

- Date of pesticide application.
- Area of pesticide application.
- Type of pesticide used.
- Signature of person applying pesticide.

The logs must be kept in the Environmental and Safety Compliance Department for a minimum of three years.

Restricted-use pest control products governed by Federal regulation must not be used at Bureau facilities unless applied by a licensed contractor.

In-house personnel applying non-restricted-use pesticides need not be licensed as a pest control operator.

Pesticides must be mixed, applied, and disposed in accordance with manufacturer label instructions.

The SDS for all pesticides used (whether applied by in-house personnel or contractors) must be kept on file and be readily accessible to employees in accordance with the Hazard Communication Program.

All pesticide mixing and application equipment must be labeled "Contaminated with Pesticide."

11. **SECURITY X-RAY MACHINES:**

Security x-ray machines must be operated per the manufacturer's guidelines. Each employee who operates an x-ray machine must be trained in accordance with the manufacturer's specifications. A copy of the operating instructions must be posted by the machine.

X-ray machines must be tested for proper operation in accordance with the manufacturer's requirements. Documentation must be kept by the Captain.

An area exposure badge must be provided for security x-ray machines. The badge must be exchanged quarterly; used badges must be sent to a laboratory for testing. The department head accountable for x-ray equipment is responsible for providing, collecting, and testing badges. Test results must be made available to staff operating the X-ray machines upon request.