### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) requires State On-Site Consultation program consultants to compile the list of all serious and any imminent danger hazards identified during a consultation visit with the hazard correction due dates mutually agreed upon by the employer and the consultant (see 29 CFR 1908.6(e)(8)). The unedited List of Hazards is the official document that must be posted by the employer at the workplace.

OSHA estimates that it will take the consultant an average of 5 minutes to compile the list. This estimate does not include the time for gathering information about particular workplace hazards and applicable standards, since that is done as a corollary of the On-Site Consultation process.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

### Appendix B

### Sample List of Hazards

(Preferred Format)

### LIST OF HAZARDS (SERIOUS)

This List of Hazards must be posted, unedited, in a prominent place where it is readily observable by all affected employees for three (3) working days, or until the hazards are corrected, whichever is later.

VISIT NUMBER: 515196904 VISIT DATE(S): 03/16/2020

T & R Eye Center 432 Main Street Dallas, TX 75003

This notification of serious hazards and any imminent danger hazard(s) identified during the consultation visit is **not** a citation. The T & R Eye Center is a voluntary participant in the Consultation program and has agreed to correct the hazards on this list within the hazard correction due date(s) specified. The T & R Eye Center has also agreed to make information on other-than-serious hazards as well as corrective actions proposed by the consultant available to employees upon request.

ITEM	0001	STANDARD	1910.0132(d)(01)
INSTANCE	A	CORRECTION DUE DATE:	4/6/2020

**DESCRIPTION:** The location of the hazard, the description of the hazardous condition, a list of job titles exposed to the hazard, the recommended hazard correction method, and interim protection measures (e.g., any personal protective equipment needed to protect employees from the hazard, use of portable equipment pending repair of faulty equipment).

ITEM	0002	STANDARD	1910.0151(c)
INSTANCE	A	CORRECTION DUE DATE:	4/6/2020

**DESCRIPTION:** The eyewash station in the Battery Room is placed correctly; however, only hot water can be accessed which would cause further injury to the eye(s). Maintenance personnel work in the Battery Room. An eliminator valve plumbed into the system would eliminate this problem. A portable eyewash station in the Battery Room is recommended pending repairs.

Note: The Occupational Safety and Health Administration (OSHA) requires State On-Site Consultation program consultants to compile the list of all serious, other-than-serious, and imminent danger hazards as well as regulatory violations identified during a consultation visit with the hazard correction due dates mutually agreed upon by the employer and the consultant, when the employer seeks to participate in the Safety and Health Achievement Recognition Program (SHARP) or Pre-SHARP. State Plans that require the verification of hazard correction for all hazard classifications also use this list. In these instances, the heading may reflect: List of Hazards (Serious and Other-than-Serious).

### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) requires State On-Site Consultation program Consultants to review the Interim Year Safety and Health Achievement Recognition Program (SHARP) Site Self-Evaluation Template completed and submitted by employers participating in SHARP and provide any necessary technical assistance.

Employers participating in SHARP must conduct continuous assessment of the effectiveness of the safety and health program implemented in their workplace; complete the Interim Year SHARP Site Self-Evaluation Template in the year following the last on-site evaluation by the Consultant to assess criteria for SHARP participation; and submit the template to the Consultation program.

In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve the confidentiality of information obtained as a result of a consultative visit, including information that contains or might reveal a trade of secret of the employer.

OSHA estimates that it will take an employer an average of 3 hours to complete the self-evaluation and a Consultant an average of 2 hours to review and provide any necessary technical assistance to facilitate effective safety and health program implementation by small business employers participating in SHARP.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

### Appendix E

# Interim-Year Safety and Health Achievement Recognition Program (SHARP) Site Self-Evaluation Template

Address:

Title/Position:

I.	Safety and Health Program Recommendations and Status: SHARP participants are committed to
	continue maintaining and improving their Safety and Health Programs. Please explain the systems you
	are working on to maintain or improve or any recommendations you are acting on, and any actions you
	have taken to improve your safety and health program in the past year.

Status:

B. Program/Recommendations:
Status:

C. Program/Recommendations:

A. Program/Recommendations:

**Establishment Name:** 

Date:

Employer/Representative's Name:

D Program/Recommendations:

D. Program/Recommendations: Status:

II. Significant Events: Please discuss below any significant events that have occurred over the past year and the steps that you have taken to ensure that your safety and health program is operating effectively. (Include any fatalities, catastrophes, imminent danger incidents, recordable serious injuries and illnesses, complaints, OSHA enforcement inspections, and the results of all investigations and program changes made.)

A. Event: Correction:

Status:

Year	Hours Worked			
	Hours worked	Sum of Columns H + I*	Rate	
nnlover's Two	-Year or Three-Year R	ate:		
	r Statistics (BLS) Aver			
ercent Below th	 he BLS Rate:			
OSHA Form 30	20	_		
SHA FOIII 30	JU			
	TRC Rate	Calculation		

Employer's Two-Year or Three-Year Rate:

BLS Average for NAICS: \_\_\_\_ Percent Below the BLS Rate:

\*OSHA Form 300

Days Away, Restricted, or Transferred (DART) Rate and Total Recordable Case Rate (TRC)

B. Event:

III.

Correction:

**Requirements:** 

IV. **Other Safety and Health Program Improvements**: Please outline improvements that you have made or activities you have engaged in to improve your safety and health program.

Please provide accurate information. Submit a copy of your establishment's most recent OSHA Forms 300 and 300A as well as injury and illness incident reports with the self-evaluation. You must promptly correct any deficiencies noted by the Consultation program upon review.

#### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) requires that State On-Site Consultation program Consultants assist small business employers participating in SHARP with developing an Action Plan with goals and timelines to assure the continuous improvement of their workplace safety and health program; and to assist small business employers participating in Pre-SHARP with developing an Action Plan with goals to correct deficiencies in their safety and health program implementation. The Optional Safety and Health Program Action Plan Tool is a supplemental resource that small business employers may use and is not a requirement for receiving any Consultation service or participating in SHARP or Pre-SHARP.

Consultants must have a completed Action Plan developed in collaboration with the employer before the Consultation Program Manager who oversees a State On-Site Consultation program recommends an applicant for participation in SHARP or Pre-SHARP.

In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve the confidentiality of information obtained as a result of a consultative visit, including information that contains or might reveal a trade of secret of the employer.

OSHA estimates that it will take each employer and Consultant an average of 4 hours to collaborate in developing the Action Plan.

The implementation of the Action Plan will assist SHARP and Pre-SHARP participants with continuing to maintain a safe and healthful workplace for their workers.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

### Appendix F

### Occupational Safety and Health Program Action Plan Template

### NOTES:

- 1. The first page of this Action Plan (containing the instructions below) will be printed on the Consultation program's letterhead.
- 2. Consultation programs should review the Safety and Health Program Resource List on the On-Site Consultation Program's limited access web page.
- 3. Each workplace is different, therefore, an Action Plan must be site specific.
- 4. F-1 is the Action Plan Template for Consultation programs to use for SHARP or Pre-SHARP participants. Although the template shows only Goal 1 for all safety and health program elements listed, Consultation programs will expand the template as necessary to include all identified goals (e.g., Goal 1, 2, etc.). Suggested action items for accomplishing a goal should be listed under "recommendations." Consultation programs may also use this template to develop Action Plans for establishments that are not participating in SHARP or Pre-SHARP, to help those employers identify goals for improving workplace safety and health as well as how to achieve them.
- 5. F-2 is an optional Action Plan tool that employers may use to execute the action items for achieving goals at their establishments and/or send status updates to the Consultation program.

### **Instructions**

### **Pre-SHARP Participation Requirements**

This Action Plan outlines the necessary action items and time frames for completing them, in order for your company to achieve the safety and health goals and objectives for addressing deficiencies in your Safety and Health Program and attain the Safety and Health Achievement Recognition Program (SHARP) status. All portions of this Action Plan must be completed by the conclusion of the deferral period granted by the Regional Administrator or State Designee.

Based on your present Total Recordable Case (TRC) and Days Away, Restricted, or Transferred (DART) rates,
as well as the mutually agreed upon goals and timeframes for achieving them, you must submit progress
reports describing your activities and the completion of your goals in the Action Plan on,
, and to the Consultation Program Manager (CPM), and meet all requirements for
Pre-SHARP participation, to continue in the programmed inspection deferral status.

If you are not able to accomplish a goal in the determined timeframe, you must contact the CPM to request an extension of the timeframe for achieving that specific goal. Please note that your Deferral Period is not to exceed a total of 18 months, including extensions, from the last hazard correction due date. Do not hesitate to contact the Consultation program for technical assistance.

### **SHARP Participation Requirements**

This Action Plan outlines measures for achieving your organization's safety and health goals and objectives for continuous workplace safety and health improvement. You are responsible for diligently implementing, reviewing, and updating the Action Plan. Changes to the Action Plan must be coordinated with the Consultation program. Do not hesitate to contact the Consultation program for technical assistance.

### F-1: Action Plan Template for SHARP or Pre-SHARP Participation

Establishment Name:	Establishment Address:
Consultation Visit Number:	Consultation Visit Date(s):
Last Hazard Correction Due Date:	

	Safety and Health Program Goals
Management Leadership:	
Goal 1:	
Recommendations:	
To be completed by:	

### **Employee Participation:**

Goal 1:

Recommendations: To be completed by:

### Hazard Identification and Assessment:

Goal 1:

Recommendations: To be completed by:

### Hazard Prevention and Control:

Goal 1:

Recommendations: To be completed by:

### Safety and Health Education and Training:

Goal 1:

Recommendations: To be completed by:

### Safety and Health Program Evaluation and Improvement:

Goal 1:

Recommendations: To be completed by:

### Total Recordable Case (TRC) and Days Away, Restricted, or Transferred (DART) Goals

	TRC	DART
	Rate	Rate
Current Employer's Incident Rate Data		
Bureau of Labor Statistics (BLS) Average Rates for the North American Industry		
Classification System (NAICS) Code:		
Percentage Above the BLS Rates for the NAICS Code		
Incident Rate Reduction Goals		

### F-2: Optional Safety and Health Program Action Plan Tool for Implementation at Workplaces

### **Action Plan**

Address:

Establishment Name:

Visit Date(s): Last Hazard Correction Due Date:

overall aim) achievements to reach a need to do to meet your objectives)	Dates Accomplish Goals
EXAMPLE ONLY  a. Conduct routine inspections.  b. Conduct routine maintenance.  c. Promptly conduct repairs.  d. Assess changes/new operations before implementing them.  c. Supervisors and managers review and implement.  e. Supervisors and trained employee]  e. Supervisors and managers review and implement.  e. Supervisors and trained employees, industry guidelines, manufacturer's recommendations, OSHA, NIOSH tools)  a. [insert name or title of assigned employee]  b. [insert name or title of assigned employee]  c. [insert name or title of assigned employee]  e. [inset name or title of assigned employee]  e. Supervisors and managers review and implement.  Supervisors and managers review and implement.  e. Supervisors and managers review and implement.  Supervisors and employee]  e. Supervisors and employee]	date] to complete assigned tasks.  b. [insert date] 2. Budget funds to completion.  c. [insert conduct on-track for timely completion.  t c. [insert conduct on-track for timely completion.  date] repairs and completion.  t d. [insert routine maintenance. c. Completed.

Estimated Costs of Injuries and Illnesses and Impact on Profitability (Use OSHA \$afety Pays tool).					
Direct Costs:	Indirect Costs:	Total Costs:	Sales to Cover Indirect Costs:		
Sales to Cover To	otal Costs:		<del></del>		
	Improving workplace	safety and health will eve	ntually result in cost savings for your business.		

1218-0110

Expiration: 4-30-28

#### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) requires that State On-Site Consultation program Consultants review the Process Safety Management of Highly Hazardous Chemicals (PSM) Interim Year Safety and Health Achievement Recognition Program (SHARP) Site Self-Evaluation Template completed and submitted by employers; and provide technical guidance as necessary to facilitate the effective implementation of PSM Program elements by small business employers participating in SHARP.

Employers participating in SHARP with processes covered by the PSM standard must conduct continuous assessment of the effectiveness of the implemented PSM Program elements in their workplace; complete the PSM Interim Year SHARP Site Self-Evaluation Template in the year following the last on-site evaluation by the Consultant to assess criteria for SHARP participation, and submit it to the Consultation program.

In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve the confidentiality of information obtained as a result of a consultative visit, including information that contains or might reveal a trade of secret of the employer.

OSHA estimates that it will take an employer 4 hours to assess the PSM Program elements implemented in the workplace and complete the PSM Interim Year SHARP Site Self-Evaluation. OSHA estimates that it will take the Consultant 2 hours to review an employer's self-evaluation and provide any technical assistance needed.

The assessment of the PSM Program elements by small business employers, as well as the technical assistance provided by Consultants will facilitate effective program implementation.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

## Appendix L-2: Process Safety Management of Highly Hazardous Chemicals (PSM) Interim Year Safety and Health Achievement Recognition Program (SHARP) Site Self-Evaluation Template

### Name of Establishment: Date:

- 1. Explain how all the findings from the previous Compliance Audit were resolved and if documented corrective actions (29 CFR 1910.119(o)(4)) were all implemented and functioning adequately.
- 2. Explain how all Process Hazard Analyses (PHA) findings (29 CFR 1910.119(e)(3) through (e)(3)(vii)) were addressed (29 CFR 1910.119(e)(5)).
- 3. Was a PHA revalidation due? If yes, was it completed as specified in 29 CFR 1910.119(e)(4)&(6)? Please, provide a copy of the revalidated PHA, if applicable.
- 4. Was refresher training required for any operators this year (29 CFR 1910.119(g)(2))? If yes, was it completed as required? Please, provide operators training record(s), if applicable.
- 5. Were any new operators and/or maintenance personnel hired? Were newly hired operators provided initial training before being assigned tasks (29 CFR 1910.119(g)(1)(i))? Were newly hired maintenance personnel trained as required before being assigned tasks (29 CFR 1910.119(j)(3))? Please provide training records, if applicable.
- 6. Have all previous incident investigation findings been resolved (29 CFR 1910.119(m)(5))? If no, please explain. Please, provide the investigation report(s) and an explanation of how findings were addressed.
- 7. Did any incident(s) occur involving the PSM covered process since the most recent SHARP evaluation (29 CFR 1910.119(m) through (m)(7))? If yes, describe the incident(s), attach the incident investigation report(s), include the measures taken to resolve findings (29 CFR 1910.119(m)(5)).
- 8. Was the schedule in the written plan for routine testing, inspection and maintenance of equipment (29 CFR 1910.119(j)(2); 29 CFR 1910.119(j)(4) through (j)(4)(iv)) implemented and followed as required? If not, please explain why. Please, submit equipment testing, inspection and maintenance records.
- 9. Are engineering and administrative controls (29 CFR 1910.119(e)(3)(iii)) functioning and maintained effectively to protect workers from exposure to hazards? Have there been any issues with engineering controls; administrative controls; and/or personal protective equipment, if applicable (29 CFR 1910.119(f)(1)(iii)(B); 29 CFR 1910.132))? Please, explain your response.

- 10. Were operating procedures reviewed and certified annually as current and accurate (29 CFR 1910.119(f)(3))? If not, please explain; otherwise, submit a copy of the certified review findings.
- 11. Have there been any changes that required applying the Management of Change (MOC) procedures? If yes, were MOC procedures properly applied, and were they adequate for safe operations (29 CFR 1910.119(l)(1) and (j)(5)? Please, describe the changes and MOC procedures used, if applicable.
- 12. Describe any additional relevant self-evaluation findings.

### **Instructions:**

- 1. Please, review the requested information and provide accurate responses to assess the effectiveness of your PSM Program implementation.
- 2. Appropriate documentation may be submitted in lieu of explanations.
- 3. Please, implement corrective actions to address any findings and document them in this report.
- 4. Employers participating in SHARP, completing this PSM Interim Year SHARP Site Self-Evaluation Template, must also complete Appendix E, Interim Year SHARP Site Self-Evaluation Template.

### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) developed the Worksheet for Determining the "Applicability of the Process Safety Management of Highly Hazardous Chemicals Standard (PSM) to an Establishment" for State On-Site Consultation program Consultants to apply before conducting a consultation visit, when there is reason to suspect that a process(es) in the workplace is subject to the standard.

In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve the confidentiality of information obtained as a result of a consultative visit, including information that contains or might reveal a trade of secret of the employer.

OSHA estimates that a Consultant will take an average of 2 hours to use the worksheet to assess workplace processes and determine if the PSM standard applies to an establishment.

A determination that the PSM standard applies to a process in a workplace will enable the Consultant to gather appropriate safety and health information before a consultation visit and be adequately prepared to provide technical assistance to the employer during the on-site evaluation.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

### Appendix L-3: Determining the Applicability of the Process Safety Management Standard to an Establishment

(1) **Chemical Inventory Table:** Gather Information on the chemicals used at the establishment.

List of Chemicals <sup>1</sup> Used at the Establishment covered by the Process Safety Management (PSM) Standard, 29 CFR 1910.119	Intended Inventory (according to the employer; 29 CFR 1910.119(d)(2)( i)(C))	Specify OSHA threshold quantity	Quantity of Chemical at Establishment	Where in the Process is the Chemical Used?	Comments

### (2) Review Any Claimed Exemptions such as:

- o Retail facilities (29 CFR 1910.119(a)(2)(i));
- o Oil or gas well drilling or servicing operations (29 CFR 1910.119(a)(2)(ii);
- o Normally Unoccupied Remote Facilities NURF Decision (i.e., <u>OSHA Letter of Interpretation</u>, Evaluation of scenarios regarding PSM requirements related to normally unoccupied remote facilities and natural gas processing plants (gas plant), February 16, 2005; 29 CFR 1910.119(a)(2)(iii));
- o Aggregations (i.e. <u>OSHA Letter of Interpretation</u>, Remote distance, close proximity and other PSM questions, February 15, 1994);
- o Hydrocarbon fuels used solely for workplace consumption as a fuel if such fuels are not part of a process containing another highly hazardous chemical covered by 29 CFR 1910.119(a)(1)(ii)(A);
- o Flammable liquids with a flashpoint below 100°F (37.8°C) stored in atmospheric tanks or transferred which are kept below their normal boiling point without benefit of chilling or refrigeration MEER Decision (i.e., OSHA Letter of Interpretation, OSHA enforcement policy of the PSM standard distilleries and related facilities in SIC 2085, March 14, 2003; 29 CFR 1910.119(a)(1)(ii)(A)&(B));
- o Appropriations exemptions (farming, employer size) Enforcement Exemptions and Limitations under the Appropriations Act, CPL 02-00-051; and
- o Distillery exemption (OSHA Letter of Interpretation, OSHA enforcement policy of the PSM standard distilleries

<sup>&</sup>lt;sup>1</sup> Chemicals listed in 29 CFR 1910.119, Appendix A, at or above the threshold quantity set by OSHA; or a flammable liquid or gas in a quantity of 10,000 pounds or more; or used in the manufacture of explosives or pyrotechnics as defined in 29 CFR 1910.109.

	Findings:
(3)	Review PSM Guidance in Applicable OSHA Enforcement Memos (see: <a href="www.osha.gov/enforcement">www.osha.gov/enforcement</a> ; select the Enforcement Memos tab).
	Findings:
(4)	<b>Verify PSM Applicability</b> – Provide details on the scope and applicability of the PSM standard to the establishment.
	Findings:

and related facilities in SIC 2085, March 14, 2003).

### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) requires that State On-Site Consultation program Consultants use the Incident Investigation Reporting Template to report findings and recommendations when incidents (e.g., fatalities, catastrophes, severe injury reports) occur at SHARP or Pre-SHARP sites.

Consultants will use the reporting template to determine the root causes of workplace incidents, the effectiveness of the implemented safety and health program, as well as report findings and recommendations for assuring a safe and healthful workplace.

In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve the confidentiality of information obtained as a result of a consultative visit, including information that contains or might reveal a trade of secret of the employer.

OSHA estimates that it will take an average of 6 hours for a Consultation program to conduct an on-site investigation and report findings and recommendations using the template.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

### Appendix M

### Incident Investigation Reporting Template (SHARP and Pre-SHARP Establishments)

Note: When required in this Instruction to complete Appendix M, only the List of Hazards is required (when applicable) and any other documentation deemed necessary by the CPM.

SECTION 1
Incident Investigation Date: Visit Number: Request Number:
User ID: Region: State:
Date of Incidence: OSHA Inspection Date:
OSHA Inspection # (if applicable):
Select One:
Fatality Catastrophe Imminent Danger Formal Complaint
Referral - Severe Injuries only
SECTION 2  Establishment Name:
Establishment Address:
OIS Site ID #: Union Name (if applicable):
Select One Program: SHARP Pilot Pre-SHARP SHARP Pilot
Current Program Status: Duration in Program:
Last Renewal Date of Program: Last Evaluation Date of Program:
Number of Employees at the establishment:
Number of Contractors at the establishment:
Number of Temporary and/or Seasonal Employees at the establishment:

SECTION 3 (Please complete this section with information pertaining to the incident only)
Total Number of Fatalities: Total Number Injured: Total Number Ill:
Number of Employees: Fatalities Injured Ill
Number of Contractors: Fatalities Injured III III
Number of Temporary and/or Seasonal Employees: Fatalities Injured Ill Ill
Were Employees Performing the Activities Related to the Incident? Yes No
Were Contractors Performing the Activities Related to the Incident? Yes No Were Temporary or Seasonal Employees Performing the Activities Related to the Incident?  Yes No SECTION 4
Description of Incident:
<b>Instructions</b> : Please provide a description of the incident (i.e., what happened, where, when, how).
On-Site Consultation program's Findings (Root Causes): [See OSHA's Incident (Accident) Investigations: A Guide for Employers, December 2015]
In this section, the Consultation program will specify its investigation findings (i.e., root causes – Why did the incident happen?) and the safety and health program deficiencies identified. For example, if a hazard assessment was not conducted and resources were not provided to purchase an appropriate guard – this is a hazard identification and control deficiency with a potential management leadership failure (to provide adequate funding). Multiple deficiencies can occur concurrently.
On-Site Consultation program's Recommendations for Corrective Actions:
Instructions: The Consultation program will recommend specific corrective actions that the employer participating in SHARP or Pre-SHARP must implement to address the deficiencies identified during the investigation. It is important to assure a safe and healthful work environment that is the corner stone of SHARP. For example, train supervisors on how to conduct hazard assessments (to find and fix hazards) and management should assure an adequate budget for implementing safety and health measures. The recommendations may be included in the employer's Action Plan (as appropriate).
The safety and health of all employees at the establishment is paramount. The integrity of SHARP, the Consultation program, and OSHA is vital.
<b>Additional Information</b> (if any): For example, include any additional input from the employer in this section.

**Investigation Reporting Guidance** 

To access this incident, visit OSHA.gov, select Data & Statistics, then select Inspection Information.

### **Incident Description**

An employee was operating a custom bending press break machine. He was bending a small metal part, which kept slipping out of place. The employee tried to hold it in place with his finger while operating the press with his foot to bend the metal. The metal slipped and the press came down on his left index finger instead of the metal part, smashing and amputating it, just proximal to the fingernail bed.

OSHA issued a citation to the employer with an initial penalty amount of \$4,900 which was reduced to \$2,940 for not complying with 29 CFR 1910.212(a)(3)(ii).

### 1910.212(a)(3)(ii)

The point of operation of machines whose operation exposes an employee to injury, shall be guarded. The guarding device shall be in conformity with any appropriate standards, therefore, or, in the absence of applicable specific standards, shall be so designed and constructed as to prevent the operator from having any part of his body in the danger zone during the operating cycle.

Consultation program's Findings (Root Causes): (See OSHA's <u>Incident (Accident) Investigations: A Guide for Employers</u>, December 2015.)

Below are some questions that the consultant or CPM may ask to identify safety and health program deficiencies assuming this incident (#1039807.015) occurred at a SHARP establishment:

Why was the point of operation of the press not guarded? Is this how the press has been operated in the workplace? When was the press installed in the workplace? Was it installed prior to the SHARP approval or afterwards? If it was in the workplace at the time of the SHARP approval, was it assessed during the approval process (i.e., hazard assessment)? If yes, what was the assessment finding? Did the employer have a guard for the point of operation at the time of SHARP assessment? If yes, what happened afterwards? Subsequent to the SHARP approval, was the press used without the guard (i.e., workplace modus operandi)?

If the press was installed after SHARP approval, did the employer notify the Consultation program – as required for changes in the workplace that might introduce new hazards? If there was no guard for the press - why was a guard not purchased? Are there adequate resources to meet the safety and health needs of the workplace? Was a hazard assessment conducted for the press? If not, why was a hazard assessment not conducted? Was the supervisor aware of the regulatory requirement to guard the press? If not, why? If yes, why did the supervisor not ensure compliance with the standard?

What did employees say about using the press (the consultant must interview employees who use the press or work in the area and have observed the press in use)? Were employees aware of the hazard? If yes, what action did they take to address it (e.g., express their concern to their supervisor, submit a work order request for a guard)? If employees took any action, what was the outcome? If employees did not take any action – why not? Did employees recognize the hazard? Was the employee involved in the incident trained to use the press? Have other employees who work with the press received training? Who provided the training? If the training was provided in-house, was the trainer found to be proficient? Was training effectiveness verified by the supervisor (e.g., observed employees using with the press)? Did employees who use the press experience near-misses prior to this incident? What was the proper procedure (i.e., if there was an established procedure) for employees to perform the task?

### **Consultation Program's Recommendations for Corrective Actions**

Recommendations will be made to address findings or root causes. For example, if there was a finding that the employee was never trained about the point of operation hazard and how to operate the equipment properly – then establishing processes to ensure that all employees receive the proper training before starting work for this operation and all other operations at the SHARP establishment would be a recommendation. The recommendation must also include verifying training effectiveness and retraining employees when necessary.

### **Paperwork Reduction Act Notice**

Persons are not required to respond to this collection of information unless it displays a valid OMB control number. The Occupational Safety and Health Administration (OSHA) requires that State On-Site Consultation program Consultants assessing processes covered by the Process Safety Management of Highly Hazardous Chemicals (PSM) standard apply the PSM Evaluation Worksheet. The worksheet is supported by five (5) optional tables (i.e., Table C-1: Hazards of Highly Hazardous Chemicals (HHCs) Used at the Establishment; Table C-2: Relief System Design and Design Basis Used at the Establishment; Table D: Assessment of the Employer's Written Schedule for Implementing Process Hazard Analysis Recommendations; Table E: Review of Equipment Inspection Records; and Table M: Workers Training Review. (Note: The table lettering corresponds with the lettering of the PSM Program element in the PSM Evaluation Worksheet.)

Consultants must complete all PSM Evaluation Worksheet information before the Consultation Program Manager who oversees a State On-Site Consultation program recommends an applicant for participation in the Safety and Health Achievement Recognition Program (SHARP) or Pre-SHARP whenever the workplace includes one or more processes covered by OSHA or the State Plan's PSM standard.

In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve the confidentiality of information obtained as a result of a consultative visit, including information that contains or might reveal a trade secret of the employer.

It is estimated that Consultants will take an average of 4 hours to complete 12-18 entries of the PSM Evaluation Worksheet for a limited-service consultation visit; and an average of 12 hours to complete all 53 entries of the worksheet for a full-service consultation visit or SHARP/Pre-SHARP evaluation. This includes the time for reviewing instructions, searching existing data sources, gathering relevant data, conducting an on-site evaluation, as well as completing the worksheet and any optional tables the Consultant chooses to use.

The application of these PSM tools for small business workplaces, will enhance the quality of Consultation services provided to employers who request technical assistance with PSM processes in their workplace.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

### Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet

### **PSM Program Elements**

- A. Compliance Audit
- B. Incident Investigation
- C. Process Safety Information (PSI)
- D. Process Hazard Analyses (PHA)
- E. Mechanical Integrity (MI)
- F. Operating Procedures
- G. Management of Change (MOC)
- H. Pre-Startup Safety Review (PSSR)
- I. Hot Work Permit
- J. Emergency Planning and Response
- K. Employee Participation
- L. Contractors
- M. Training
- N. Trade Secrets

### Notes:

- a. Text in italics represent *Employee Participation* or *Training requirements (outside the training element, 29 CFR 1910.119(g))* specified in various PSM Program elements.
- b. Consultants will assess worker protection and participation requirements in the PSM standard for all workers at a site (i.e., host employer's workers, contract workers, temporary workers, etc.).
- c. Consultants will apply appropriate technical resources.

	Appendix L-1: On-Site Consultation Pro	gram PSM E	Evaluation Worksheet
	Name of Establishment: Visit Da	ite(s):	Report Date:
	Describe the PSM covered process(es)/Selected Unit(s) ev	luated at the establishm	ne establishment:
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations
A	Compliance Audit		
1	a. Was a compliance audit completed at least every three years? (o)(1)		
	b. Does the audit include an evaluation of compliance with all the required paragraphs of the PSM standard? (o)(1)		
	Evaluation Tip: Compliance audit reports should be looked at closely for an understanding of how the PSM covered process functions, how adjacent processes or other operations near the PSM covered process interact, and potential safety impact.		
	c. Does the audit include a report of the findings? (o)(3)		
	d. Was the compliance audit conducted by at least one person knowledgeable about the process? (0)(2)		
	e. Did the employer retain the two most recent compliance audit reports? (o)(5)		
2	Were all deficiencies noted in the compliance audit report documented as corrected? (o)(4)		
	Evaluation Tips: Spot check during your walkthrough of the facility to determine if deficiencies were corrected as documented. Did the employer implement appropriate corrective measures? Did you find additional deficiencies that should have been identified during the compliance audit and corrected? The consultant should use technical resources such as consensus standards to make a determination.		
3	Additional evaluation findings?		
<b>B</b> 4	a. Were <u>proper</u> incident investigations conducted for all incidents that resulted in or could reasonably have resulted in a catastrophic release of highly hazardous chemicals (HHCs) in the process area or Selected Unit; as soon as possible, but not later than 48 hours following an incident? (m)(1), (m)(2), (m)(4)		
	b. Did the employer establish a system to promptly address and resolve the incident report findings and recommendations? (m)(5)		
	c. Did the employer document corrective actions from the		

	Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet		
	Name of Establishment: Visit Da		Report Date:
	Describe the PSM covered process(es)/Selected Unit(s) eva	aluated at t	he establishment:
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations
	report? (m)(5) Were the documented corrective actions implemented at the establishment?  Evaluation Tips: Verify during walkthrough if recommendations/documented corrective actions were implemented; and if they are effective (e.g., through observations and interviews). Did incident investigations identify the factors that contributed to an incident (to accomplish this employers should focus on identifying root causes)? Are corrective actions adequate to prevent recurrence? Are catastrophic incidents addressed in the Process Hazard Analyses (PHA)?  d. Were incident investigation reports retained for five		
5	years? (m)(7)  Did incident investigation teams comprise at least one person knowledgeable about the process area/Selected Unit; a contractor employee if contractor work was involved; and other knowledgeable and experienced persons? (m)(3)		
6	a. Were incident investigation reports reviewed with all affected employees whose job tasks are relevant to the incident findings? (m)(6)  b. How did the employer review the report with affected employees (e.g., meetings to discuss the report – findings and corrective actions proposed/taken)? Did employees provide any input or feedback? Were employees input/feedback incorporated where relevant?  Evaluation Tips: Identify and interview affected employees, supervisors, and managers. Please note that consultants should assess if the report was reviewed with all affected employees (i.e., host employer's workers, contract employees, temporary workers, etc.).		
7 <b>C</b> 8	Additional evaluation findings?  Process Safety Information (PSI)  a. Did the written PSI include information pertaining to hazards of the HHC used in the process/Selected Unit:  i. Toxicity information?  ii. Permissible exposure limits?  iii. Physical data?  iv. Reactivity data?  v. Corrosivity data?  vi. Thermal and chemical stability data?  vii. Hazardous effects of inadvertently mixing		

	Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet			
	Name of Establishment: Visit Da		Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) ev	ed Unit(s) evaluated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
	different materials that could foreseeably occur? (d)(1) through (d)(1)(vii) b. Collect and review the following information:			
	<ul><li>i. List of HHCs used</li><li>ii. Maximum intended inventory</li><li>iii. Quantity of HHC present</li></ul>			
	May use Table C-1 as a guide.  Note: Safety Data Sheets (SDSs) meeting the requirements of 29 CFR 1910.1200(g) may be used to comply with this			
	requirement if they contain the information required by 29 CFR 1910.119(d)).			
9	a. Did the PSI include information pertaining to the technology of the process/Selected Unit? (d)(2) b. Were block flow diagrams available and accurate?			
	(d)(2)(i)(A) c. Process chemistry? (d)(2)(i)(B)			
	Evaluation Tips: Where chemical mixing is done: Are there controls in place to ensure that process chemicals are not impure or contaminated? Are there procedures in place to prevent mixing wrong chemicals or mixing chemicals with the wrong concentration?			
	d. Maximum intended inventory? (d)(2)(i)(C)			
	Evaluation Tips: Is the maximum intended inventory documented? Is the process operating above the documented maximum inventory? Are inventory limit controls functioning properly to prevent exceeding the maximum intended inventory?			
	e. Were safe upper/lower design and operational limits for such items as pressures, temperatures, flow rates and compositions documented? (d)(2)(i)(D)			
	Evaluation Tips: How were the design and operational limits identified (e.g., manufacturer's recommendations, Recognized and Generally Accepted Good Engineering Practices (RAGAGEP)?) Are workers knowledgeable about the limits? What measures are implemented to operate within set limits?			

	Appendix L-1: On-Site Consultation Proposition Proposition Proposition   Name of Establishment: Visit Da		Evaluation Worksheet Report Date:
	Describe the PSM covered process(es)/Selected Unit(s) ev	. ,	
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations
	f. Were the consequences of deviation documented?  (d)(2)(i)(E)  Evaluation Tips:  What emergency procedures are in place to mitigate (if feasible) or respond to a failure/deviation?		
	g. Where original technical information no longer exists, was technical information developed in conjunction with the PHA in sufficient detail to support the hazard analysis? (d)(2)(ii)		
10	Did the PSI include <u>information pertaining to equipment</u> <u>used</u> in the process/Selected Unit such as: (d)(3)		
	a. Materials of construction? (d)(3)(i)A) b. Were Piping and Instrumentation Diagrams (P&IDs) available and accurate? (d)(3)(i)(B)		
	c. Electrical classification? (d)(3)(i)(C) d. Relief system design and design basis? (d)(3)(i)(D)  May use Table C-2 as a guide.		
	e. Ventilation system design? (d)(3)(i)(E)  f. Design codes and standards employed? (d)(3)(i)(F)  g. Material and energy balances for processes built after May 26, 1992? (d)(3)(i)(G)		
	h. Safety systems (e.g., interlocks, detection or suppression systems) (d)(3)(i)(H) i. Does equipment comply with Recognized and Generally		
	Accepted Good Engineering Practices (RAGAGEP)? (d)(3)(ii)  j. Is existing equipment designed and constructed in		
	accordance with codes, standards, or practices that are no longer in use?		
	If yes, how did the employer determine that the equipment is designed, maintained, inspected, tested, and operating in a safe manner (this information must also be documented by the employer)? (d)(3)(iii)		
	Evaluation Tips: Are safety systems for equipment adequate? Is there impact from adjacent equipment or operation? Are equipment and wiring used in the process area of the proper electrical classification for the process area? Is equipment in deficient condition used? Is equipment operated outside of its normal operating limit?		

Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet				
	Name of Establishment: Visit Da	te(s):	Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) eva	ted Unit(s) evaluated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
l	Additional evaluation findings?			
	Process Hazard Analyses (PHA)			
2	Has a PHA been performed for the process/Selected Unit such that it:			
	a. Addresses <u>all hazards</u> of the process/Selected Unit? (e)(3)(i)			
	Evaluation Tips: Process hazard evaluations should include an assessment of how deviations from the design plan could occur, such as, high/low/no flow, high/low/no pressure, high/low temperature.			
	b. Uses an appropriate methodology or combination of methodologies to evaluate hazards (e.g., what-ifs, checklists, what-ifs/checklists, hazards and operability study (HAZOP), failure mode and effects analysis (FMEA), fault tree analysis, or an appropriate equivalent method)?  (e)(2) through (e)(2)(vii)			
	c. Identifies previous incidents which had a likely potential for catastrophic consequences in the workplace? (e)(3)(ii)			
	d. Identifies engineering (i.e., safety systems) and administrative controls applicable to the hazards and their interrelationships such as appropriate application of detection methodologies to provide early warning of releases? Are work practices and PPE addressed?  (e)(3)(iii); (f)(4); (f)(1)(iii)(B)			
	Evaluation Tip: Are engineering and administrative controls, safe work practices, and PPE adequate to prevent workers exposure to identified hazards?			
	e. Identifies the consequences of failure of engineering and administrative controls? (e)(3)(iv)			
	f. Incudes a qualitative evaluation of a range of possible safety and health effects of the failure of control measures on employees? (e)(3)(vii)			
	Evaluation Tip: Is the qualitative evaluation adequate?			
	g. Adequately assesses facility siting? (e)(3)(v) h. Properly assess human factors? (e)(3)(vi)			

	Appendix L-1: On-Site Consultation Pro				
	Name of Establishment: Visit Da	ite(s):	Report Date:		
	Describe the PSM covered process(es)/Selected Unit(s) ev	aluated at t	luated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations		
	Evaluation Tip: Were measures taken to eliminate or reduce the frequency and/or consequences/severity of potential incidents involving human factor issues?				
13	a. Did the employer consult with employees and their representatives on the conduct and development of the PHA [and all other information required to be developed by the PSM standard (29 CFR 1910.119)]? (c)(2)				
	b. Were the original PHA and revalidations conducted by a team that included at least one employee with experience and knowledge specific to the process evaluated? Was at least one team member knowledgeable in the specific PHA methodology used? (e)(4)				
	c. Is the PHA updated and revalidated at least every five years? (e)(6)				
	d. Are all initial PHAs, updates or revalidations and documented resolution of recommendations kept for the life of the process? (e)(7)				
14	a. Does the employer have a system (written or otherwise) for promptly addressing PHA findings and recommendations? (e)(5)				
	May use Table D-1 as a guide.				
	Evaluation Tips: What is the employer's system – interview employees, supervisors and managers; review relevant documentation? Is there a written schedule of when actions are to be completed? Are actions/recommendations communicated to maintenance and other employees whose job tasks are in the process and who may be affected by the actions/recommendations? (e)(5				
15	b. Does the system properly address PHA findings?  Can workers and their representatives request and receive				
13	access to PHA and other information required by the PSM standard? (c)(3)				
E	Mechanical Integrity (MI)				
16	Are there written MI procedures to ensure that process equipment is maintained in good working condition, including the following:  i. Pressure vessels and storage tanks ii. Piping systems, components, valves iii. Relief and vent systems and devices				
	iv. Emergency shutdown systems v. Controls (including monitoring devices and				

	Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet			
	Name of Establishment: Visit Da		Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) eva	/Selected Unit(s) evaluated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
17	sensors, alarms, and interlocks) vi. Pumps (j)(1)&(2)  Evaluation Tips: Spot check safety systems identified in the PHA for written and implemented MI procedures. Check for proper installation of insulation, moisture and/or ice formation on insulated lines, evidence of corrosion, name plates for relief valves and pressure vessels, leakages, machine room equipment and condition, and ventilation system condition?  a. Did the employer implement procedures for proper inspections and testing of process equipment? (j)(4)(i)			
	b. Are required tests/inspections performed on process equipment as recommended by the manufacturer and RAGAGEP? (j)(4)(ii)			
	c. Is the frequency of tests/inspections performed on process equipment as recommended by the manufacturer and RAGAGEP, and more frequently if determined to be necessary due to previous operating occurrence(s)?  (j)(4)(iii)  d. Did the employer document each inspection and test			
	conducted on process equipment (i.e., date of the inspection/test, name of the person that did it, equipment serial number/other identifier, description of the inspection/test performed, and the results)? (j)(4)(iv)			
	e. Did the employer correct equipment deficiencies that are outside acceptable operating limits (as defined by the PSI), before further use; or in a safe and timely manner when protective measures are implemented to assure safe operation? (j)(5)			
	May use Table E as a guide.  Evaluation Tips: Review testing and inspection records for process equipment (this should include associated safety systems) for the process/Selected Unit.			
	Note: Testing and inspection are different. Testing and inspection must be performed on process equipment, using procedures that follow recognized and generally accepted good engineering practices. The frequency of tests and inspections of process equipment must conform to			

	Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet			
	Name of Establishment: Visit Da		Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) ev	es)/Selected Unit(s) evaluated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
	manufacturers' recommendations and good engineering practices, or more frequently if determined to be necessary by prior operating experience. Each test and inspection on process equipment must be documented, identifying the date of the test or inspection, the name of the person who performed the test or inspection, the serial number or other identifier of the equipment on which the test or inspection was performed, a description of the test or inspection performed, and the results.  Request and review work orders for controls in the process/Selected Unit to assess control deficiencies that			
	exist.  Inspect equipment during the walkthrough (this should include associated safety systems):  Does it appear that equipment is being maintained in good working condition? Is there evidence that corrective actions were implemented and effective? Are associated control measures/safety systems inspected, tested, and maintained in good operating conditions?			
	Were metal thickness measurements adequately addressed? Assess the frequency of metal thickness measurements and indications (e.g., wall thinning could result in rupture or leak) in the process/Selected Unit – do spot checks.			
18	Did the employer have a Quality Assurance program for the process/Selected Unit to verify the following:			
	a. New equipment is suitable for process application? (j)(6)(i)			
	b. Appropriate checks and inspections are performed to assure that equipment is installed properly and consistent with design specifications and the manufacturer's instructions? (j)(6)(ii)			
	c. Spare parts, maintenance materials, and equipment are suitable for the process application for which they will be used? (j)(6)(iii)			
19	Are workers involved in maintaining the ongoing integrity of process equipment trained in an overview of the process and its hazards, as well as in the procedures applicable to their job tasks to assure that each worker can perform the job tasks in a safe manner? (j)(3)			
20 F	Additional evaluation findings?			
<b>F</b> 21	a. Did the employer develop and implement written operating procedures with clear instructions for safely			

Name of Establishment: Visit Da	te(s):	Evaluation Worksheet Report Date:	
Describe the PSM covered process(es)/Selected Unit(s) eva	Selected Unit(s) evaluated at the establishment:		
29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
conducting activities consistent with the PSI for the process/Selected Unit? (f)(1)			
b. Are operating procedures readily accessible to			
employees who work in or maintain a process? (f)(2)			
c. Are operating procedures reviewed as often as necessary			
to reflect current operating practices, including changes			
that result from changes in process chemicals, technology,			
equipment and facilities? (f)(3)			
d. Does the employer certify annually that operating			
procedures are current and accurate? (f)(3)			
Do operating procedures for the process/Selected Unit			
address at least the following:			
a. Steps of each operating phase, including:			
<ul><li>i. Initial startup</li><li>ii. Normal operations</li></ul>			
1			
iii. Temporary operations iv. Emergency shutdowns			
v. Emergency shutdowns v. Emergency operations			
vi. Normal shutdown			
vii. Startups following a turnaround or emergency			
shutdown			
(f)(1)(i)(A) through $(G)$			
b. Operating limits, including consequences of deviation,			
and steps required to correct or avoid deviation?			
(f)(1)(ii)(A)&(B)			
(d)(2)(i)(E)			
Evaluation Tips:			
Interview operators – Do workers know the consequences			
of deviation identified in the PSI? Do workers know the			
steps to avoid deviation? Do workers know what is			
required to correct deviation?			
c. Safety and health considerations, including the			
following:			
i. Chemical properties and hazards of chemicals used			
in the process			
ii. Precautions necessary to prevent exposure			
iii. Control measures to take when there is physical			
contact or airborne exposure			
iv. Quality control for raw materials and control of			
hazardous chemical inventory levels			
v. Any special or unique hazards?			

	Appendix L-1: On-Site Consultation Prog			
	Name of Establishment: Visit Da	te(s):	Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:			
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
	Evaluation Tips: Interview workers to determine if they are aware of safety and health considerations? Observe workers – are they performing their tasks safely?			
	d. Safety Systems and their functions? (f)(1)(iv)			
	Evaluation Tips: Review operating procedures and PSI: Was PSI incorporated into operating procedures? Do procedures incorporate safety mechanisms, i.e., engineering and administrative controls and PPE?			
	Do workers know the proper procedures to safely do their work? For example, confirm workers understanding of the process, procedures, and how they do their work (e.g., via interviews, observation). Do workers accounts deviate from the written procedures?			
23	Are operating procedures easily accessible to employees who work in the process, including maintenance workers? (f)(2)			
	Evaluation Tips: Where are operating procedures kept? How do workers access them? Do workers know the operating procedures to follow?			
24	Did the employer develop and implement safe work practices that apply to its employees and contractor employees to:			
	a. Control hazards during operations such as lockout/tagout; confined space entry; opening process equipment or piping?			
	b. Control entrance into the facility by maintenance, contractor, laboratory, or other support personnel? (f)(4)			
	Evaluation Tip: Consultants should assess worker protection and participation requirements specified in the PSM standard for all workers at a site (i.e., host employer's workers, contract workers, temporary workers, etc.).			
25	Additional evaluation findings?			
<b>G</b> 26	Management of Change (MOC)  Are there written procedures for managing change (except for "replacements in kind") to process chemicals, technology, equipment, and procedures, as well as changes to facilities that affect the covered process/Selected Unit?			

	Appendix L-1: On-Site Consultation Prog Name of Establishment: Visit Da		Evaluation Worksheet Report Date:
	Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1))) (1)(1)	Yes/No	Findings and Recommendations
	Evaluation Tips: Review procedures that address responsibilities, steps for assessing risks and approving changes, requirements for reviewing designs for temporary and permanent changes, steps needed to verify that modifications have been made as designed, variance procedures, time limit authorizations for temporary changes, and steps required to return the process to status quo after temporary changes. Inquire how changes are evaluated on short notice and communicated to employees.  Note: Temporary changes have caused a number of		
	catastrophes over the years, and employers must establish ways to detect both temporary, and permanent changes. It is important that a time limit for temporary changes be established and monitored since otherwise, without control, these changes may become permanent. Temporary changes are subject to the management of change provisions. In addition, the management of change procedures are used to ensure that equipment and procedures are returned to their original or designed conditions at the end of the temporary change. Proper documentation and review of these changes are invaluable to ensuring that safety and health considerations are incorporated into operating procedures and processes.		
27	Do MOC procedures assure that the following are addressed prior to any change in the process/Selected Unit?  i. Technical basis for the proposed changed ii. Impact of the change on safety and health iii. Modifications to operating procedures iv. Necessary time period for the change v. Authorization requirements for the proposed change (1)(2)		
	Evaluation Tips: Follow with a review of recent equipment, process, operations, and/or HHC changes that would require an MOC.		
28	a. Did the employer update the operating procedures, practices, and/or the PSI affected by a change in the PSM covered process/Selected Unit? (1)(4)&(5) b. Were P&IDs completed for a new facility or updated for		

	Appendix L-1: On-Site Consultation Pro	gram PSM	<b>Evaluation Worksheet</b>	
	Name of Establishment: Visit Da	te(s):	Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:			
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
	area/Selected Unit? (d)(3)(i)(B)  c. Were affected employees and contractors informed and trained on a change in the PSM covered process/Selected Unit prior to start-up? (1)(3)			
29	Additional evaluation findings?			
H	Pre-Startup Safety Review (PSSR)			
30	Indicate if this is a new facility or modification of an existing facility requiring a change in PSI. If yes, was PSSR conducted, and completed prior to the introduction of HHCs to the process?  (i)(1)			
31	Did PSSR verify that construction and equipment is in accordance with design specifications? (i)(2)(i)			
32	Did PSSR verify that safety, maintenance, operating and emergency procedures are in place and adequate? (i)(2)(ii)			
33	<ul><li>a. Were Management of Change (MOC) procedures followed for changes or modifications to an existing facility?</li><li>b. For a new facility was a PHA performed and</li></ul>			
2.4	recommendations resolved or implemented before startup? (i)(2)(iii)			
34	Did PSSR verify that each employee involved in operations in the process/Selected Unit received training before startup?  (i)(2)(iv)			
35	Additional evaluation findings?			
I	Hot Work Permit			
36	Does the employer issue a hot work permit for hot work operations conducted on or near a covered process/Selected Unit? (k)(1)			
	Evaluation Tips: Does the establishment have a procedure for evaluating hot work hazards on or near PSM covered processes before issuing a hot work permit?			
37	a. Does the employer retain a statistically-valid number of hot work permits to comply with the audit requirements of 29 CFR 1910.119(o)(1) at least every three years?			
	Note: 29 CFR 1910.119(k) specifies that the hot work permit must be kept on file until completion of the hot work, however::  i. To comply with the provisions of 29 CFR			
	1910.119(o)(1), an employer must audit the procedures and practices required by PSM and assure they are adequate and are being followed.			

Appendix L-1: On-Site Consultation Proceedings of Proceedings of Proceedings of Procedure (Procedure of Procedure of Proce	rogram PSM F Date(s):	Evaluation Worksheet Report Date:	
Describe the PSM covered process(es)/Selected Unit(s)	evaluated at th	aluated at the establishment:	
29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1)		Findings and Recommendations	
refers to 29 CFR 1910.119(o)(1)))			
<ul> <li>ii. Since hot work permits are part of the hot work procedure, OSHA expects that employers would audit a statistically-valid number of hot work permits to assure they were completed and implemented per their procedure.</li> <li>iii. Therefore, the employer would need to retain a statistically-valid number of hot work permits to comply with the audit requirements of 29 CFR 1910.119(o)(1) (see OSHA Letter of Interpretation PSM compliance for ammonia refrigeration systems, July 12, 2006, response 10, updated July 7, 2015.</li> </ul>			
7, 2015, Question #4), which requires "employers to certify that they have evaluated compliance with the provisions of 29 CFR 1910.119 at least every three years, to verify that the procedures and practices developed under the standard are adequate and are being followed."	1		
<ul> <li>b. Do hot work permits:: <ol> <li>Document that the fire prevention and protection requirements in 29 CFR 1910.252(a) have been implemented prior to beginning hot work operations?</li> <li>Specify the date authorized for hot work?</li> <li>Document the identity of the object on which hot work is to be performed?</li> </ol> </li> </ul>			
Evaluation Tips: Review the hot work permit – does it require workers to apply appropriate safe work practices to prevent a fire (29 CFR 1910.252(a))?			
Is there a procedure in place to periodically verify safe work practices identified in hot work permits are followed during hot work operations?			
Interview employers, supervisors, and workers. For instance, do they know that appropriate safe work practices to prevent a fire are required during hot work operations?	S		
<b>Emergency Planning and Response</b>			
Was an emergency action plan (EAP) established and implemented for the entire establishment, covering at a minimum:			
<ul> <li>i. Procedures for reporting a fire or other emergency</li> <li>ii. Procedures for emergency evacuation, including</li> <li>type of evacuation and exit route assignments;</li> </ul>	;		

	Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet			
	Name of Establishment: Visit Da		Report Date:	
	Describe the PSM covered process(es)/Selected Unit(s) ev	aluated at t	he establishment:	
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations	
39	iii. Procedures to be followed by employees who remain to operate critical plant operations before they evacuate;  iv. Procedures to account for all employees after evacuation;  v. Procedures to be followed by employees performing rescue or medical duties; and  vi. The names and job titles of employees that may be contacted by employees who need more information about the EAP or explanation of their duties under the plan.  (n)  29 CFR 1910.38(c)  Evaluation Tip: Interview employees (i.e., host employer's workers, contract workers, temporary workers, etc.). Do employees know the emergency procedures for the process area/Selected Unit? How are emergencies communicated to all employees at the establishment? Is the employer also subject to hazardous waste and emergency response provisions in 29 CFR 1910.120 (a), (p) and (q).  Did the EAP include procedures for handling small releases of chemicals in the process area/Selected Unit?  (n)  If employees are engaged in emergency response to hazardous substance releases (except clean-up operations), does the EAP address the following:  i. Coordination with outside parties?  ii. Personnel roles, lines of authority, training, and communication?  iv. Safe distances and places of refuge?  v. Site security and control?  vi. Evacuation routes and procedures?  vii. Decontamination?  viii. Emergency medical treatment and first aid?  ix. Emergency alerting and response procedures?  x. Critique of response and follow-up?  xi. PPE and emergency equipment?  29 CFR 1910.120(q)			
41	<ul><li>a. Has the host employer reviewed the EAP with each employee covered by the plan:</li><li>i. When the plan was developed or the employee was</li></ul>			
	initially assigned to a job?  ii. When the employee's responsibilities under the			

	Appendix L-1: On-Site Consultation Pro				
	Name of Establishment: Visit Da	ite(s):	Report Date:		
	Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:				
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations		
	plan changed? iii. When the plan was changed? (c)(2) 29 CFR1910.38(f)  b. Did the host employer explain applicable provisions of the establishment's EAP to contract workers in the process/Selected Unit before they started work? (h)(2)(iii)				
42	Evaluation Tip: Interview contract workers: do they know the emergency procedures for the process area/Selected Unit? Additional evaluation findings?				
K	Employee Participation (See additional employee participation evaluation criteria in other elements)				
43	Does the employer have a written plan of action developed for employee participation? (c)(1)  Evaluation Tip: If yes, interview employees to verify implementation.				
44	Were employees involved in developing elements of the PSM Program? (c)(2)  Evaluation Tip: Interview employees to verify/clarify their involvement and if they understand the program.				
45	Additional evaluation findings?				
L	<b>Contractors</b> (See additional information in Emergency Planning and Response)				
	Describe the PSM covered process/Selected Unit that was evaluated (if different from above):				
46	Were the following host employer responsibilities performed as required:  a. Did the employer obtain and evaluate information on contractors' safety performance and programs before				
	selection? (h)(2)(i)  b. Did the employer periodically evaluate the performance of contract employers in fulfilling their obligations? (h)(2)(v)				
	c. Did the host employer inform contract employees of the known potential fire, explosion or toxic release hazards related to their jobs and the process/Selected Unit before starting work? (h)(2)(ii)				

Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet					
Name of Establishment: Visit	Name of Establishment: Visit Date(s): Report Date:				
Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:					
29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CF 1910.119, except otherwise specified. For example, (o)(refers to 29 CFR 1910.119(o)(1)))		Findings and Recommendations			
Evaluation Tip: Are contract workers aware of the hazards of their work and the PSM covered process?					
d. Did the host employer develop and implement safe wo practices that apply to employees and contractors consists with 29 CFR 1910.119(f)(4) to:  i. Control hazards during operations such as lockout/tagout, confined space entry, opening process equipment; ((f)(4))  ii. Control entrance into a facility by maintenance, contractor, laboratory, or other support personnel ((f)(4)); and  iii. Control contractors' entrance, presence, and exit from the process area/Selected Unit? ((h)(2)(iv))	ent l;				
Evaluation Tip: During the walkthrough observe how contract workers are others enter and exit the process area/Selected Unit: are appropriate procedures followed? What control measure are in place (e.g., permit system or work authorization system)? Consultants should assess worker protection and participation requirements specified in the PSM standard for all workers at a site (i.e., host employer's workers, contract workers, temporary workers, etc.).	s				
e. Did the host employer maintain contractors' Injury and Illness logs related to the contractor's work in the process area/Selected Unit? (h)(2)(vi)					
a. Did the contract employer establish procedures to assu contract employees follow the safety rules for the facility including safe work practices required by 29 CFR 1910.119(f)(4)? (h)(3)(iv)					
b. Did the contract employer ensure that contract employees are aware of the known potential fire, explosion or toxic release hazards related to their jobs and the process/Selected Unit, as well as the applicable provision of the EAP before starting work? (h)(3)(ii)					
<ul> <li>c. Was there a process in place to report unique hazards found or created by the contract employer's work?</li> <li>(h)(3)(v)</li> <li>d. Were contract employees trained in the work practices safely perform their job tasks? (h)(3)(i)</li> </ul>	s to				
e. Was there a training record with each contract employee's identity, training date, and means used to ver that the employee understood the training? (h)(3)(iii)	rify				

	Appendix L-1: On-Site Consultation Program PSM Evaluation Worksheet				
	Name of Establishment: Visit Date(s): Report Date:				
	Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:				
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations		
48	Additional evaluation findings?				
M	Training (Additional training evaluation criteria are specified in the MI, MOC, and Contractors elements) May use Table M as a guide.				
49	a. Has each worker involved in operating a process, or before being involved in operating a newly assigned process, been trained in an overview of the process and operating procedures including:  i. Steps for each operating phase? (i.e., initial startup, normal operations, temporary operations, emergency shutdown, emergency operations, normal shutdown, and startup following a turnaround or emergency shutdown)  ii. Operating limits? (i.e., consequences of deviations and steps required to avoid deviations)  iii. Safety and health considerations? (i.e., properties and hazards of chemicals used and precautions for preventing exposure)  iv. Safety systems and their functions?  (g)(1)(i)  (f)				
50	b. Did the training include an emphasis on specific safety and health hazards, emergency operations including shutdown, and safe work practices applicable to the worker's job tasks?  (g)(1)(i)  Evaluation Tips: Observe workers performing tasks and interview them. Are workers applying proper techniques to safely do their work? Do they know and understand the proper procedures to safely complete their assigned tasks?  a. Has refresher training been provided at least every three years, and more often if necessary, to each worker involved in operating the process?(g)(2)				
51	b. Did the employer consult with workers to determine the appropriate frequency of refresher training?(g)(2)  Evaluation Tips:  Do workers know the current, documented operating procedures? Are workers able to apply the current procedures effectively? If feasible, observe workers to verify if they are following specified procedures.  a. Has the employer provided a means for ascertaining if each employee involved in operating the process has				

	Appendix L-1: On-Site Consultation Pro	gram PSM E	Evaluation Worksheet
	Name of Establishment: Visit Da		Report Date:
	Describe the PSM covered process(es)/Selected Unit(s) evaluated at the establishment:		
	29 CFR 1910.119 (The references in this table refer to paragraphs of 29 CFR 1910.119, except otherwise specified. For example, (o)(1) refers to 29 CFR 1910.119(o)(1)))	Yes/No	Findings and Recommendations
	received and understood training?(g)(3)		
	b. Do training records contain the identity of the worker, the training date, and means used to verify the employee understood the training? (g)(3)		
	Evaluation Tips: Interview/observe workers, review incident logs (et al) to ascertain training effectiveness.		
52	Did workers receive additional training to effectively perform their job tasks such as training required by trade schools (e.g., electricians), and applicable OSHA standards (e.g., 29 CFR 1910.1200(h)(3), Hazard Communication Standard)?		
53	Additional evaluation findings?		

Г

# Safety and Health Program Assessment Worksheet Form 33

Request Number		Visit Number	Visit Date		
Employer					
Site Location					
Legend: 0=No; 1=No, Needs major improvement; 2=Yes, Needs minor improvement; 3=Yes; NA= Not Applicable; NE= Not Evaluated; *=Stretch items Attribute of Excellence					

Synthesis Item Score	Score
Hazard Anticipation and Detection Score	
Hazard Prevention and Control Score	
Planning and Evaluation Score	
Administration and Supervision Score	
Safety and Health Training Score	
Management Leadership Score	
Employee Participation Score	
Total Score	
Average Score	

Hazard Anticipation and Detection	Score
1. A Comprehensive, baseline hazard survey has been conducted within the past five (5) years	
Comments:	
2. Effective safety and health self-inspections are performed regularly	
Comments:	
3. Effective surveillance of establishment hazard controls is conducted.	
Comments:	
4. An effective hazard reporting system exists.	
Comments:	
5. Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs.	
Comments:	
6. Accidents are investigated for root causes.	
Comments:	
7. Safety Data Sheets are used to reveal potential hazards associated with chemical products in the workplace.	
Comments:	I

Hazard Anticipation and Detection	Score
8. Effective job hazard analysis is performed.	
Comments:	
9. Expert hazard analysis is performed.	
Comments:	
10. *Incidents are investigated for root causes.	
Comments:	

Hazard Prevention and Control	Score
11. Feasible engineering controls are in place.	
Comments:	
12. Effective safety and health rules and work practices are in place.	
Comments:	
13. Applicable OSHA-mandated programs are effectively in place.	
Comments:	
14. Personal protective equipment is effectively used.	
Comments:	
15. Housekeeping is properly maintained.	
Comments:	
16. The organization is properly prepared for emergency situations.	
Comments:	
17. The organization has an effective plan for providing competent emergency medical care to employees and others present at the site.	
Comments:	
18. *Effective preventive maintenance is performed.	
Comments:	•
19. An effective procedure for tracking hazard correction is in place.	
Comments:	

Planning and Evaluation	Score
20. Workplace injury/illness data are effectively analyzed.	
Comments:	
21. Hazard incidence data are effectively analyzed.	
Comments:	
22. A safety and health goal and supporting objectives exist.	
Comments:	
23. An action plan designed to accomplish the organizations safety and health objectives is in place.	
Comments:	
24. A review of in-place OSHA-mandated programs is conducted at least annually.	
Comments:	1
25. *A review of the overall safety and health management system is conducted at least annually.	
Comments:	•

26. Safety and health program tasks are each specifically assigned to a person or position for performance or coordination.  Comments:  27. Each assignment of safety and health responsibility is clearly communicated.  Comments:  28. *An accountability mechanism is included with each assignment of safety and health responsibility.  Comments:  29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.  Comments:	Score
27. Each assignment of safety and health responsibility is clearly communicated.  Comments:  28. *An accountability mechanism is included with each assignment of safety and health responsibility.  Comments:  29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.	
Comments:  28. *An accountability mechanism is included with each assignment of safety and health responsibility.  Comments:  29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.	
28. *An accountability mechanism is included with each assignment of safety and health responsibility.  Comments:  29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.	
responsibility.  Comments:  29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.	
29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.	
and timely information to perform their duties.	
Comments:	
Commence.	
30. Individuals with assigned safety and health responsibilities have the authority to perform their duties.	
Comments:	
31. Individuals with assigned safety and health responsibilities have the resources to perform their duties.	
Comments:	
32. Organizational policies promote the performance of safety and health responsibilities.	
Comments:	
33. Organizational policies result in correction of non-performance of safety and health responsibilities.	
Comments:	

Safety and Health Training	Score
34. Employees receive appropriate safety and health training.	
Comments:	
35. New employee orientation includes applicable safety and health information.	
Comments:	
36. Supervisors receive appropriate safety and health training.	
Comments:	
37. *Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.	
Comments:	
38. Safety and health training is provided to managers.	
Comments:	
39. *Relevant safety and health aspects are integrated into management training.	
Comments:	

Management Leadership	Score
40. Top management policy establishes clear priority for safety and health.	

Management Leadership	Score
Comments:	
41. Top management considers safety and health to be a line rather than a staff function.	
Comments:	
42. *Top management provides competent safety and health staff support to line managers and supervisors.	
Comments:	
43. Managers personally follow safety and health rules.	
Comments:	
44. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.	
Comments:	
45. Managers allocate the resources needed to properly support the organizations safety and health system.	
Comments:	
46. Managers assure that appropriate safety and health training is provided.	
Comments:	
47. Managers support fair and effective policies that promote safety and health performance.	
Comments:	
48. Top management is involved in the planning and evaluation of safety and health performance.	
Comments:	
49. Top management values employee involvement and participation in safety and health issues.	
Comments:	

Employee Participation	Score
50. There is an effective process to involve employees in safety and health issues.	
Comments:	
51. Employees are involved in organizational decision making in regard to safety and health policies.	
Comments:	
52. Employees are involved in organizational decision making in regard to the allocation of safety and health resources.	
Comments:	
53. Employees are involved in organizational decision making in regard to safety and health training.	
Comments:	
54. Employees participate in hazard detection activities.	
Comments:	
55. Employees participate in hazard prevention and control activities.	
Comments:	
56. *Employees participate in the safety and health training of co-workers.	
Comments:	,
57. Employees participate in safety and health planning activities.	
Comments:	
58. Employees participate in the evaluation of safety and health performance.	
Comments:	

## **Paperwork Reduction Act Notice**

OMB Number: 1218-0110 Expiration Date: 4-30-28

Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. OSHA requires that all State On-site Consultants (Consultants) use the Revised Form 33 if they collect information in the course of their visit which would allow them to fill out a portion of the Form. When the Consultation Project Manager recommends an applicant for the OSHA Safety and Health Achievement Recognition Program (SHARP), which exempts the employer from an OSHA Enforcement inspection as long as the applicant remains a SHARP site, managers must complete all Revised Form 33 information. In accordance with 29 CFR 1908.6(h)(1) and (2), Consultants must preserve their confidentiality of information obtained as the result of a consultative visit which contains or must reveal a trade of secret of the employer. It is estimated that Consultants average 60 minutes to complete 12-18 entries on the form (for a general consultation visit) and Consultants average 5 hours to complete all 58 entries on the form (for a comprehensive consultation visit or SHARP evaluation), including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed and completing the form. The Form serves as a comprehensive evaluation tool. The information obtained from the form is used to evaluate an employer's safety and health management system. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Small Business Assistance, Occupational Safety and Health Administration, Room N-3660, 200 Constitution Avenue, NW, Washington, DC 20210.

Table C-1: Hazards of Highly Hazardous Chemicals (HHCs) Used at the Establishment (Optional)

List of HHCs Used	Maximum Intended Inventory (according to the employer, see 29 CFR 1910.119(d ) (2) (i)(C))	Quantity of HHC  (Is the maximum intended inventory exceeded? Are controls appropriate to prevent exceeding it (29 CFR 1910.119(e) (3))?	Toxicity Information?  YES/NO Explain	Permissible Exposure Limits available? YES/NO Explain	Physical data available?  YES/NO Explain	Reactivity data available? YES /NO Explain	Corrosivity data available? YES/NO Explain	Thermal and chemical stability data available? YES/NO Explain	Hazardous effects of inadvertently mixing different materials that could foreseeably occur noted?  YES/NO Explain

1218-0110

Table C-2: Relief System Design and Design Basis Used at the Establishment (Optional)

Spot check	Relief valve	Is relief system	RAGAGEP/design	Additional findings (e.g.,
location	description	design and design	codes and standards	equipment in deficient condition
	(29 CFR	basis complete?	used?	is used; 29 CFR 1910.119(j)(5))
	1910.119(d)(3)	(29 CFR 1910.119	(29 CFR	
	(i)(D))	(d)(3)(i)(D)	1910.119(d)(3)(ii)&(iii))	

Table D: Assessment of the Employer's Written Schedule for Implementing Hazard Analysis Recommendations (Optional)

P	ro	ce	es
P	ro	C	ess

Spot-check	Describe the recommended	Was the Action Item	Additional Evaluation
location	action item, including the	Completed?	Findings/Corrective Actions
	estimated completion date	Yes/No	
	29 CFR 1910.119 (e)(5)	29 CFR 1910.119 (e)(5)	

1218-0110

**Table E: Review of Equipment Inspection Records (Optional)** 

Equipment (insert equipment description, serial number or other identifier and inspection date)	Location of spot checks	Name/ Position of person who conducted the inspection or test?	Describe inspection or test performed and results? (29 CFR 1910.119(j) (4))	Procedures followed (e.g., manufacturer's instructions or other accepted sources*; 29 CFR 1910.119(j)(4) (ii))	Were recommendations followed for testing, inspecting, or replacement frequencies? (29 CFR 1910.119(j)(4)(iii)) YES/NO Explain	Were identified deficiencies corrected (29 CFR 1910.119 (j)(5))? YES/NO Explain	Additional Evaluation Findings/ Corrective Actions
Pressure vessel				(11))	Ехріані		
Storage tank							
Piping system/valve Relief/ventilati							
on system (include relief valve)							
Emergency shutdown system							
Control systems							
Pump and/or compressor							

(\*Other accepted sources include: American Petroleum Institute (API) 570, Piping Inspection Code: In-service Inspection, Rating, Repair, and Alteration of Piping Systems; and API 510, Pressure Vessel Inspection Code: In-Service Inspection, Rating, Repair, and Alteration, RAGAGEP)

1218-0110

Table M: Workers Training Review (Optional)

Note: All workers must receive required training to safely perform their duties, i.e., host employer's workers, contract workers, temporary workers, etc.

Required Training Workers To Receive Training		Minimum Training Requirements	Findings
Initial Training 29 CFR 1910.119(g) (1)(i)	(1) Each worker presently involved in operating a process  (2) Each worker before being involved in operating a newly assigned process	<ul> <li>(1) Overview of the process.</li> <li>(2) Operating procedures specified in 29 CFR 1910.119(f):</li> <li>Steps for each operating phase (i.e., initial startup, normal operations, temporary operations, normal shutdown, emergency shutdown, emergency operations, and startup following a turnaround or emergency shutdown;</li> <li>Operating limits (i.e., consequences of deviations and steps required to avoid deviations);</li> <li>Safety and health considerations (i.e., properties and hazards of chemicals used, as well as precautions for preventing exposure); and</li> <li>Safety systems and their functions.</li> <li>(3) Training must include an emphasis on specific safety and health hazards, emergency operations including shutdown and safe work practices applicable to the employee's job tasks.</li> </ul>	
In-Lieu of Initial Training  29 CFR 1910.119(g) (1)(ii)  Refresher Training (29 CFR 1910.119(g) (2))	Each worker already involved in operating a process on May 26, 1992  Each worker involved in operating a process	An employer may certify in writing that the employee has the required knowledge, skills, and abilities to safely carry out the duties and responsibilities specified in the operating procedures.  (1) Must be provided at least every three (3) years, and more often if necessary.  (2) Employer in consultation with workers involved with operating the process shall determine the appropriate frequency of refresher training.  (3) To assure that the worker understands and adheres to the current operating procedures.	
Maintenance Activities Training	Each worker involved in maintaining the ongoing integrity of process equipment	(1) Overview of the process. (2) Process hazards.	

Required Training	Workers To Receive Training	Minimum Training Requirements	Findings
(29 CFR 1910.119(j)		(3) Procedures applicable to the	
(3)		worker's job tasks to assure that the	
		worker can perform the job tasks in a	
		safe manner.	
Host Employers	All workers' training	(1) The employer must ensure that	
Training		each worker involved with operating	
<b>Documentation</b>		a process has received and understood the training required by	
(29 CFR 1910.119(g)		29 CFR 1910.119.	
(3))		25 CTR 1510.115.	
		(2) The employer must prepare a	
		record which contains:	
		• Identify of the worker;	
		Date of training; and	
		Means used to verify that the  yearless and arctical the training	
Contractors Training		worker understood the training.  The contract employer must ensure	
Contractors framing	Contract Workers	that:	
	0 0 111 111 111 111 111 111 111 111 111		
		(1) Each contract worker is trained in	
		the work practices necessary to	
		perform his/her job.	
		29 CFR 1910.119(h)(3)(i)	
		(2) Each contract worker is instructed	
		in the known potential fire,	
		explosion, or toxic release hazards	
		related to his/her job and the process,	
		and the applicable provisions of the	
		emergency action plan.	
		29 CFR 1910.119(h)(3)(ii)	
		(3) Each contract worker follows the	
		safety rules of the facility including	
		safe work practices required by 29	
		CFR 1910.119(f)(4).	
		29 CFR 1910.119(h)(3)(iv)	
Contractors Training	All contract workers' training	(1) The contract employer must	
Documentation		document that each contract worker has received and understood the	
29 CFR 1910.119(h)		training required by this paragraph.	
(3)(iii)			
		(2) The contract employer must	
		prepare a record that contains the:	
		III day off	
		• Identity of the contract worker;	
		<ul><li>Date of Training; and</li><li>Means used to verify that the</li></ul>	
		employee understood the training.	
Management of	Employees involved in operating a	Affected employees shall be	
Change Training	process and maintenance and	informed of, and trained in, the	
	contract employees whose job	change prior to start-up of the	
29 CFR	tasks will be affected by a change	process or affected part of the	
1910.119(1)(3)	in the process	process.	
Additional training as required	All affected workers (i.e., workers involved in applicable job tasks or	(1) Training specified in applicable OSHA standards such as 29 CFR	
as required	potentially exposed to hazards)	1910.1200(h)(3), Hazard	
	posentially exposed to nazards)	Communication Standard.	
	1		1

Required Training	Workers To Receive Training	Minimum Training Requirements	Findings
		(2) Other required training such as those specified by trade schools (e.g., electricians).	

1218-0110