

TABLE OF CONTENTS

CHAPTER 2: SAFETY PLANS AND PROGRAMS

Section	1.	Asbestos and Training Program
	2.	Biological Hazards
	3.	Bloodborne Pathogen Awareness Plan
	4.	Competent Person
	5.	Confined Space Entry Program
	6.	Crisis Management Program
	7.	Electrical Safety Program
	8.	Employee Access to Medical Records
	9.	Employee Emergency Plan
	10.	Fall Protection Program
	11.	Fleet Vehicle Program
	12.	Forklift Operation Program
	13.	Hazard Communication and Right to Know Program
	14.	Lead Awareness Program
	15.	Lockout / Tagout Program
	16.	Respiratory Protection Program
	17.	Silica Awareness Program
	18.	Lost Day Guidelines

ASBESTOS AND TRAINING POLICY

Policy Directive:

The intent of the Belair Companies and its affiliates (Belair) Asbestos and Training Policy is to fulfill the following needs:

1. Avoid unnecessary worker exposure to asbestos containing materials (ACM).
2. Avoid improper worker handling and disposal of asbestos containing material.
3. Identify construction sites (suspected to be impacted with ACM), which may pose harmful working conditions to workers.

Training Goals:

At a minimum, Belair wants one employee on each earthwork, demolition, or environmental site to have Asbestos Awareness Training.

All Belair laborers and operators who work on earthwork, utilities, demolition, or environmental sites will have Asbestos Awareness.

Belair operators will have the 40 hours Asbestos Worker or Contractor/Supervisor Training as needed per location.

Intended Employee Training:

Belair foremen, operators, and laborers involved with site earthwork, utilities demolition, and environmental activities.

Required Training:

Asbestos Awareness training is required for all foremen, laborers, and operators directly involved with demolition, utilities, environmental, and earthwork activities.

Additional Training, Operators Only:

Operators who may be required to operate equipment as an integral part of an asbestos abatement (i.e., loading trucks with asbestos impacted soil and debris) will also be required to have and maintain the 40 hour Asbestos Worker or Contractor/Supervisor training.

Belair historically encounters sites and situations requiring asbestos worker or contractor/supervisor training approximately 10 events per year. With this frequency of occurrence, the additional asbestos training will be maintained at a minimum to the following positions:

1. Yard Operations Foreman
2. Demolition Foreman
3. Environmental Foreman

The personnel with additional asbestos training will be directed to the necessary sites, as their qualifications are needed.

Belair will monitor the frequency of the demand for additionally trained operators every season and determine the necessity of additional training. *Note: It is not the intent of Belair to use its employees for conventional asbestos abatement activities.*

Communication:

In the event that a suspect asbestos containing material is identified on site, work shall cease in the area. Secondly, the project manager shall be informed of the conditions and materials encountered at the site. If the project manager cannot be contacted, alternate contacts shall be the Superintendent or Dispatch. Thirdly, the Project Manager shall inform the state appointed Belair Asbestos Policy Coordinator and address a response action to safely manage the situation.

The determined response action shall maintain the best management practices to comply with the local and state rules, and protect Belair Stakeholders.

Citations:

Any breach of this policy will fall within the citation policy at Belair Excavating.

S.W.O.T.

Issues that may affect the training directives at Belair include the following:

- Changes in state, federal, and local regulations
- Union training requirements
- Financial balance between maintaining training and working on selected tasks

BIOLOGICAL HAZARDS

Working on projects involving septic tanks, sewage pipes, or landfills with buried bio-hazardous waste can potentially expose workers to infectious hazards. Blood borne pathogens include infectious micro-organisms found in human body fluids such as human immuno-deficiency virus (HIV) and hepatitis. Employees must avoid contact with blood or other body fluids and use personal protective equipment as a barrier for protection. Administering first aid poses a potential contact risk. Although some employees are trained in first aid and cardio-pulmonary resuscitation (CPR), no employee shall be required to perform first aid or CPR unless they choose to do so.

BELAIR does not have job classifications in which all employees in the category would be expected to incur exposure to blood or other potentially infectious material. If projects arise involving work with potential biological hazards, such as sanitary sewer systems, exposure to medical wastes or environments, contact the company Safety Director to determine if any special requirements exist for your activities.

The following practices and procedures will be implemented to minimize or eliminate occupational exposure to blood borne pathogens:

- **HIV:** AIDS is caused by the HIV virus, which attacks the body's immune system, destroying your defenses against infection. It is spread when there is an exchange of infected blood, vaginal fluids, or semen.
- **HBV:** Hepatitis B Virus: this is a virus which infects the liver. It is acquired by the exchange of blood and saliva.
- **Universal Precautions:** The concept of Universal Precautions means that one assumes all human blood and certain human body fluids are infectious for HIV, hepatitis, or other blood borne pathogens. Employees should therefore avoid any unnecessary exposure to blood or other specified bodily fluids at all times.
- **Engineering and Work Practice Controls:** These controls reduce or eliminate employee exposures by either removing or isolating the hazard or isolating the worker from exposure. The following are examples of engineering and work practice controls:
 - Employees with lesions, cuts, or other skin conditions should take extra precaution to avoid direct contact with blood or other infectious materials.
 - Wash hands and skin with soap and water immediately or as soon as possible following contact with blood or other potentially infectious materials. Where hand washing facilities are not available, antiseptic hand cleaners or towelettes should be available. Employees should then wash hands or skin with soap and water once available.

- Flush mucous membranes (eyes, nose, mouth) with water immediately or as soon as possible following contact with blood or other potentially infectious materials.
- All procedures involving potential exposure to infectious materials should be performed in a manner that minimizes splashing or spattering of these substances.
- Personal Protective Equipment is used if occupational exposure remains after implementation of engineering and work practice controls, or if these controls are not feasible. Personal protective equipment is considered appropriate only if it does not permit blood or other potentially infectious materials to pass through the employees' clothes or come in contact with their skin, eyes, mouth, or other mucous membranes under normal working conditions. The following are personal protective equipment practices:
 - Gloves should be worn by the employee when contact with blood or other potentially infectious materials is possible. Disposable gloves will be replaced as soon as practical when visibly contaminated, torn or punctured. Disposable gloves will not be washed or decontaminated for re-use. Utility gloves may be decontaminated for re-use if the integrity of the gloves are not compromised (for example torn, cracked, or deteriorated). Hands should be washed with soap and water upon removal of gloves.
 - Masks or protective eyewear will be worn when performing procedures that are likely to splash or spray potentially infectious materials.
 - Protective body clothing will be worn by employees when performing procedures likely to generate splashes of blood or body fluids. Remove contaminated clothing as soon as possible.
 - Remove contaminated personal protective equipment prior to leaving the area.

Other Infectious Agents

Another potential biological hazard is contracting Lyme Disease from deer ticks while performing field activities. Typically, this disease is transmitted by the bite of a small deer tick, normally resulting in a characteristic rash resembling a circle around or near the bite area. All field employees should become aware of the symptoms of such exposure and immediately consult their physician if they believe exposure to Lyme Disease has occurred.

The topic of biological hazards is extensive and cannot be adequately addressed in this document. Therefore, project managers, or employees should consult with the corporate health and safety officer for special requirements if they will be working on projects with potential exposure to blood borne pathogens or other infectious agents.

BLOODBORNE PATHOGEN AWARENESS PLAN

First responders have a possible exposure to bloodborne pathogens. Exposure could occur when treating an injured employee. The purpose of the Bloodborne Pathogen Awareness Plan is to eliminate or minimize employee occupational exposure to this risk.

Volunteer first aid responders must use protective equipment and submit to post-incident procedures. Reporting of all first-aid incidents involving exposure must be done before the end of the work shift during which the incident occurs. Reports of first-aid incidents must include the names of all first-aid providers and a description of the circumstances of the accident including date and time, as well as determination of whether an exposure incident, as defined in the standard, has occurred.

An exposure incident means a specify eye, mouth, other mucous membrane or non-intact skin contact with blood or other potentially infectious materials.

BLOODBORNE PATHOGENS COMPLIANCE LIST

The following checklist serves as a quick reference for Belair to evaluate our level of compliance with the OSHA Occupational Exposure to Bloodborne Pathogens Standard (29 CFR 1910.1030)

- Exposure Control Plan
- Engineering and Work Practices
- Personal Protective Equipment
- Housekeeping Practices
- Hepatitis B Vaccination
- Labeling
- Training
- Recordkeeping

BLOODBORNE PATHOGENS

In compliance with OSHA and as a dimension of Belair's Health and Safety Program, employees must comprehend the dangers and risks associated with blood borne pathogens. Understanding the procedures and actions that one must follow will greatly reduce the risk of infection as well as death.

Terms

Bloodborne pathogen:	Any pathogenic organism in human blood than can cause disease in humans.
HBV:	Hepatitis B Virus; which is a virus that infects the liver. It is acquired by the exchange of infected blood and saliva.
HIV:	AIDS is caused by the HIV virus, which attacks the body's immune system, destroying your defenses against infection. It is spread when there is an exchange of infected blood and saliva.
Blood:	The term human blood components include plasma, platelets, and serosanguineous fluids. An example would be drainage from wounds.
Exposure:	The act or condition of coming in contact with but not necessarily being infected by a disease causing agent.
Exposure Control Plan:	The control plan is the key to the entire standard. It defines which employees are covered by the standard and includes a description of how each requirement of the standard will be accomplished. Coverage under the standard extends to all employees at potential risk of occupational exposure to blood or other infectious material.
Universal Precautions:	Concept of infection control which requires that all human blood and other potentially infectious material be treated as if known to be infectious for bloodborne pathogens, regardless of perceived "low risk" of a patient or patient population.
Engineering Controls:	Mechanical means of eliminating or minimizing employee exposure.
Work Practice Controls:	Methods of reducing exposure by changing the way a task is performed. A significant work practice control with respect to reducing exposure is hand washing.
Personal Protective Equipment:	The third means of eliminating exposure (after work practice controls). It must be chosen based on anticipated exposure.
Body Substance Isolation:	Defines all body and substances as infectious. It incorporates not only the fluids and materials covered by OSHA but expands coverage to include all body fluids and substances.

Exposure Determinations

Under the OSHA Bloodborne Pathogens standard, "Good Samaritan" acts such as an employee assisting a fellow employee or other individual with an injury (e.g. nose bleed) are not covered. In addition, those employees who receive first aid training but are not required to provide first aid as part of their job tasks, are not covered.

The following list represents some activities where employees may have occupational exposure.

- Working in sanitary sewer systems
- Rendering first aid cleanup
- Working in medical facilities
- Landfill activities with bio-hazardous waste
- Laboratory analysis of pathogenic materials

Note: Each field supervisor shall identify additional job classifications relative to their specific organizational structure and operations.

Methods of Compliance

The following practices and procedures will be implemented at Belair to minimize or eliminate occupational exposures to job classifications listed above.

Universal Precautions

The concept of universal precautions requires Belair to require its employees to assume all human blood and specified human body fluids are potentially infectious for HIV, HBV and other bloodborne pathogens. Consequently, employees should avoid any unnecessary exposure to blood or other specified bodily fluids at all times.

Engineering and Work Practice Controls

Engineering controls reduce or eliminate employees' exposures by either removing or isolating the hazard or worker from exposure. Belair shall implement and enforce the following engineering and work practice controls.

- Employees with lesions, dermatitis or other compromising conditions shall take extra precaution to avoid direct contact with blood or other infectious materials.
- Eating, drinking, smoking or handling contact lenses are prohibited in areas where there is a reasonable likelihood of occupational exposure.
- Employees will wash their hands and skin with soap and water immediately or as soon as possible following contact with blood or other potentially infectious materials. Where hand washing facilities are not available, antiseptic hand cleansers or towelettes along with a clean cloth or paper towel, should be available. Employees should proceed to wash hands or skin with soap and water once available.

- Employees will flush mucous membranes (eyes, nose, mouth) with water immediately or as soon as possible following contact with blood or other potentially infectious materials.
- All first aid or other procedures involving blood or other potentially infectious materials will be performed in a manner which minimizes splashing or splattering of these substances.
- Contaminated needles or other contaminated sharps will not be bent, recapped or removed. All contaminated sharps will be placed in specified containers.
- All broken glass will be deposited in a specified puncture resistant container to avoid accidents (cuts) during storage and disposal. Mechanical means (i.e., broom and dust pan) should be used to clean up all broken glassware.
- Equipment or surfaces which have been contaminated with blood or other potentially infectious materials should be decontaminated as soon as possible.

Personal Protective Equipment

Personal protective equipment is used if occupational exposure remains after implementation of engineering and work practice controls, or if these controls are not feasible. PPE is considered appropriate only if it does not permit blood or other potentially infectious materials to pass through the employees clothes or come in contact with their skin, eyes, mouth, or other mucous membranes under normal working conditions. PPE should be provided at no cost to the employee in appropriate sizes and be readily available. The following PPE and practices shall be implemented at Belair:

- Gloves will be worn by the employee when contact with blood or other potentially infectious materials is likely. Disposable gloves will be replaced as soon as practical when visibly contaminated, torn, or punctured. Disposable gloves will not be rewashed or decontaminated for re-use. Utility gloves may be decontaminated for re-use if the integrity of the gloves are not compromised (torn, cracked, deteriorated). Hands should be washed with soap and water upon removal of gloves.
- Masks or protective eyewear (prescription glasses required side shields) will be worn when performing procedures that are likely to spray or splash blood or other potentially infectious materials.
- Protective body clothing (gown, overalls) will be worn by employees when performing procedures likely to generate splashes of blood or bodily fluids. All employees with occupational exposures should replace blood-contaminated or soiled clothing with clean clothing as soon as possible. Skin which has come in contact with blood or other potentially infectious materials should be washed with soap and water as soon as possible.
- Resuscitation bags or masks shall be made available to those responsible for providing cardiopulmonary resuscitation (CPR).
- Personal protective equipment should be removed prior to leaving the work area.
- Cleaning, repair, replacement or disposal of personal protective equipment will be provided at no cost to employee.

Note: The employee may temporarily decline the use of personal protective equipment when they use their judgment that its use would have prevented delivery of health care or it would have posed a greater safety hazard to the employee.

Housekeeping Practices

Belair is responsible for maintaining a clean and sanitary environment. Actual types of cleaning and cleaning schedules vary relative to location, site activities and types of surfaces. The following are general housekeeping practices to be implemented when applicable.

- All equipment and environmental/working surfaces shall be cleaned and decontaminated after contact with blood or other potentially infectious materials as soon as possible. Special cleaning procedures can be provided by the corporate health and safety officer. Sodium hypochlorinate (household bleach) solution in water (1:10 dilution) can also be used on most surfaces excluding metal and cloth.
- Reusable items which become contaminated during the cleaning process shall be properly decontaminated before putting them back into service.
- Protective coverings which become contaminated shall be properly disposed of and replaced with a new, clean cover.
- Any receptacles intended for re-use will be decontaminated on a regular basis or if visibly contaminated.
- Broken glassware shall be cleaned up using mechanical means (i.e. brush and dust pan).
- Contaminated sharps or needles shall be stored in a closeable, puncture resistant container. Employees shall never reach their hands directly into the container.

Hepatitis B Vaccination

The OSHA Bloodborne Pathogens standard offers Belair employees the hepatitis B vaccine and vaccination series, on an as requested bases. This includes initial vaccination post exposure evaluations and the potential need for a routine booster dose(s) if required. The standard does not require Belair to offer the vaccination to other employees who are required to provide first aid as a collateral duty (those employees where first aid is not a primary job task assigned) relative to their overall job tasks. If an employee is subject to a job site which would require that the hepatitis shot be administered, it shall be provided to the employee at no cost. The following procedures will be implemented at Belair.

- Specified employees who have occupational exposure will be provided, at no cost, the hepatitis B vaccine and vaccination series, as well as post-exposure evaluation and follow-up procedures. Actual vaccination and follow up procedures shall be performed under the supervision of a licensed physician or other licensed health care professional and provided in accordance with the recommendations of the

U.S. Public Health Service. The health care professional will be provided with a copy of the Bloodborne Pathogens standard (29CFR 1910.1030)

Note: The hepatitis B vaccination is not required if the employee has previously received the complete hepatitis B vaccination series and antibody testing reveals the employee is immune or the vaccine is inadvisable for medical reasons. A hepatitis B pre-screening program will not be a prerequisite for receiving the vaccination.

The hepatitis B vaccination will be available to specified employees within ten working days of initial assignment. Each employee receiving the vaccination must be informed on the following:

1. efficacy of the vaccine
2. safety of the vaccine
3. method of administration
4. benefits associated with the vaccine
5. acknowledgement of free vaccine and vaccination

An employee who initially declined the hepatitis B vaccination will be allowed to receive the vaccination at a later time. All employees who decline the hepatitis B vaccination made available, will be required to sign the Employee Hepatitis B Vaccine Declination form.

The company will offer the hepatitis B vaccination to all unvaccinated employees required to provide first aid as a collateral duty who have rendered first aid in any situation involving the presence of blood or other potentially infectious materials (regardless of whether an actual exposure incident occurred). The vaccination should be made available as soon as possible, but in no event later than 24 hours.

Regulated Waste Management

The following procedures will be implemented at Belair to comply with federal and state requirements for regulated infectious wastes.

Containment

- All regulated waste (blood or contaminated items) will be placed in containers which prevent any leakage during the collection, handling, processing, storage, transport or shipping
- A secondary container will be used if outside contamination of the primary container occurs. If waste items can puncture the primary container, the primary container will be placed within a secondary container, which is puncture resistant.
- Contaminated sharps and needles will be immediately discarded in a closable, puncture-resistant, leak-proof container. The sharps container will be readily accessible to personnel and located as close as possible to the area of use preferably located centrally.
- The sharps' containers will be maintained upright, replaced routinely and not be overfilled at any time. The containers will be closed prior to removal to

avoid any spillage. Reusable containers will not be emptied or cleaned manually to avoid any "stick" exposures to the skin.

- When applicable, Belair will store all regulated (contaminated) waste in a secure area

Note: OSHA does not consider typical bandaids or feminine hygiene products to be regulated waste. Cleaners are recommended to apply Universal Precautions when disposing of feminine hygiene products to avoid any unnecessary direct skin contact. In addition, decontamination of any visible blood contamination in the receptacle may be required.

Labeling

- Containers of regulated waste will be labeled with the Biohazard symbol and the wording "Biohazard." The biohazard label will be a florescent orange or orange red in color with the lettering in contrasting colors. The labels will be affixed so as to avoid their loss or unintentional removal.
- Red bags or red containers may be substituted for the Biohazard label. If Universal Precautions are utilized, the labeling/color-coded system is not necessary provided the containers are recognizable and treated as containing regulated waste. However, all regulated waste leaving the facility must be properly labeled or color-coded.

Disposal

- Disposal of regulated waste must be done at a Minnesota Pollution Control Agency (MPCA) or other state approved landfill or medical incinerator. Disposal of regulated waste at a sanitary landfill is not permissible unless the waste is first deemed "noninfectious". Employees should not mix regulated (hazardous) waste with other waste.
- All regulated waste shall be transported per Minnesota Department of Health, Department of Transportation, MPCA requirements or other state specific requirements. All shipments will be manifested accordingly.

Exposure Evaluation and Follow-Up

Belair will immediately provide a post-exposure evaluation and follow-up for employees who have had an occupational exposure to blood or other potentially infectious materials. The following protocol will be followed by Belair for providing post-exposure evaluations and follow-up:

- All employees shall immediately report an occupational exposure to Belair's Corporate Health and Safety Director. In addition, all employees who render first aid where blood or other potentially infectious materials were evident (regardless of whether an exposure incident occurred) shall immediately report the incident to the Belair Corporate Health and Safety Director. The company will make available a confidential medical evaluation and follow-up of the incident with a licensed health care professional.

Note: The Belair Health and Safety Department will record the event on the OSHA 300 Log of Occupational Injuries and Illnesses and OSHA 101 Supplementary

Record of Occupational Injuries and Illnesses (or equivalent: First Report of Injury), if applicable.

- The Corporate Health and Safety Officer will document the circumstances under which the exposure occurred (or potential exposure in cases where first aid was provided), including the routes of exposure, the HBV or HIV status of the source patient(s), if known, and the employee's hepatitis B vaccine status. A copy of the OSHA Bloodborne pathogens standard and the above information collected upon review of the incident will be provided to the health care professional.
- The Corporate Health and Safety Officer will notify the source patients of the incident and attempt to obtain written consent to collect and test the source's blood to determine the presence of HBV and/or HIV infectivity. If the source individual is known to be infected with HBV or HIV, testing of the source individual is not required.
- Results of the source individual's testing will be made available to the exposed employee. All applicable laws and regulations concerning disclosure of the identity and infectious status of the source individual will be available.
- The exposed worker's blood will be collected as soon as feasible and tested upon written consent being obtained for determination of HBV and HIV status. In addition, the company may be required to provide repeat HIV testing to the exposed employee on a periodic basis thereafter depending on the health care professional's opinion.
- Follow up of the exposed worker will include counseling, medical evaluation of any acute illness that occurs, post exposure prophylaxis and other post exposure methods according to recommendations for standard medical practices.
- The health care professional will submit a written opinion to Belair's Corporate Health and Safety Director documenting that the employee was informed of the evaluation results and the need for any further follow-up and whether the hepatitis B vaccine was received.
- The Corporate Health and Safety Director will provide a copy of the health care professional's written opinion within 15 days of completed evaluation.

Training

Belair will provide training to all identified employees with potential occupational exposures to blood or other potentially infectious materials. This training will be conducted during normal work hours by a trainer knowledgeable on the subject matter. The training requirements include the following:

- Training will be provided before an initial assignment to a task involving a potential occupational exposure, and annually thereafter.
- Additional training will be provided by the company when any new tasks or modifications of procedures affect the employee's occupational exposure.
- The training program shall include the following components:
 - Copy of the OSHA Bloodborne Pathogen's standard
 - Routes of exposure and symptoms of bloodborne pathogens

- Methods for identifying tasks, which may involve exposure to blood or other potential infectious materials
- Overview of engineering controls, work practices and personal protective equipment
- Information on hepatitis B vaccine
- Emergency procedures and notification requirements
- Incident reporting
- Post exposure evaluation and follow-up
- Explanation of labels and color-coding system requirements

Record Keeping

Belair is required to document and maintain training records for three years subsequent to the initial training date. Training records shall be maintained at each respective employee's facility, and a copy sent to the Corporate Health and Safety Department for retention, which should include the following:

- Date of the training session(s)
- Summary of the training topics discussed
- Name and qualifications of trainer
- Names and titles of all employees who attended the training session

Medical Records

Belair is required to maintain an accurate record for each employee with occupational exposure as specified in 29 CFR 1910.20 – Access to Employee Exposure and Medical Records. Medical records are to remain confidential, sent directly to the Health and Safety Department for retention and shall be maintained for the duration of employment plus 30 years. The medical records relative to the bloodborne pathogen's standard shall include the following:

- Employee name and social security number
- Hepatitis B and vaccination status and dates
- Results of evaluations and follow up procedures
- The copy of Belair's health care professional's written opinion
- Copy of the information provided to the health care professional by Belair

Competent Person

Certain activities or safety procedures at a construction site require design, inspection or supervision by a competent person. The OSHA Construction Standard defines a competent person as someone who is:

- capable of identifying existing and predictable hazards in the surroundings, or
- working conditions which are unsanitary, hazardous, or dangerous to employees, and
- who has authorization to take prompt corrective measures to eliminate them.

Trenching and excavation work is dependent on these specialized employees because its highly technical nature, as well as its inherent hazards, require a greater level of training and experience than a normal worker would possess. The items below specify the trenching and excavation activities where a competent person is necessary.

Protective Systems or Equipment

- Monitoring water removal equipment and operations [29 CFR 1926.651(h)(2)].
- Inspecting excavations subject to runoff from heavy rains to determine need for diversion ditches, dikes, or other suitable protection [29 CFR 1926.651(h)(3)].
- Determining cave-in potential to assess need for shoring or other protective system [29 CFR 1926.652(a)(1)].
- Examining damaged material or equipment used for protective systems to determine its suitability for continued use [29 CFR 1926.652(d)(3)].
- Classifying soil and rock deposits, by both visual analysis and by testing, to determine appropriate protection; re-classifying, if necessary, based on changing conditions [29 CFR 1926 Subpart P Appendix A].
- Determining the appropriate slope of an excavation to prevent collapse due to surcharge loads from stored material or equipment, operating equipment, adjacent structures, or traffic, and assuring that such slope is achieved [29 CFR 1926 Subpart P Appendix B (c)(3)(iii)].

Inspecting Trench and Protective Systems

- Authorizing immediate removal of employees from the hazardous area where evidence of possible cave-in, failure of protective systems, hazardous atmospheres, or other hazardous conditions exists [29 CFR 1926.651(k)(2)].

Unsafe Access/Egress

- Designing structural ramps that are used solely by employees as a means of access or egress. Structural ramps used for access or egress of

equipment must be designed by a competent person qualified in structural design [29 CFR 1926.651(c)(1)(i)].

OSHA Competent Person

Per 1926.652 OSHA

Primitive Test		Angle of Repose			
Thumb	Mould	Pitch	Angle In Deg.	Soil	Remark
* Too Stiff	* Not Poss.			Rock	* Must be "solid" bedrock
* Print of Thumb * Hard Pressure	* Moulds into a ball well, stays molded * Can ribbon with hands			Clay to Sandy Clay	* Non-fill soil * Natural soil * Use "very little" * 3,000 PSF soil
* 1st Knuckle of Thumb * Moderate Pressure	* Moulds into a ball, but breaks * Does not ribbon, breaks apart			Clayey Sand & Silty Sand	* Non-fill soil * Use most of time * 1,000 to 3,000 PSF Soil
* Entire Thumb * Fairly Easy	* No Ribbon at All * Does Not Stick in Ball * Falls off Hand			Clean Crushed Concrete Sand & Gravel	* When in doubt, use this one * 1,000 PSF or less soil * Disturbed soil

Subpart P, Appen. A

Note:

- * 20' Maximum Height w/o a Reg. Engineer (PE)
- * Layered Soils; Worst condition prevails.
- * Look for shear cracks at bank top and face of excavation
- * Call Project Manager with any questions
- * Daily inspections necessary at start of work, after rainstorms, and daily
- * Safety meetings are required for all new earthwork starts.
- * Call Pete S. (Safety Director) for advice at any time. (651-717-3391)

CONFINED SPACE ENTRY AND WORK

BELAIR's company policy is that all individuals entering a confined space shall comply with the Confined Space Entry Procedure below. Various state and federal regulatory agencies mandate specific procedures for confined space entry. These procedures are necessary for the prevention of injury or death due to the presence of a potentially hazardous atmosphere (oxygen deficiency, toxic gases or vapors, or flammable/explosive conditions), limited means of entry or exit, or the entry into areas not intended for continuous occupancy. Due to the many types of confined spaces, it is not possible to describe each entry method in detail. Therefore, these requirements should be considered as a minimum procedure to be followed. Special situations may require additional precautions which should be evaluated at the time of entry by the site superintendent in charge. Any problems or concerns with a confined space entry should be reported to the BELAIR Safety Director or State Safety Coordinator.

According to Minnesota OSHA, a confined space is defined as a special configuration that could result in any of the following:

- A. A condition in which dangerous air contamination, oxygen deficiency, or oxygen enrichment may exist or develop, or
- B. A condition where the emergency removal of a suddenly disabled person is difficult due to the location or size of the access opening, or
- C. A condition where the risk of engulfment exists or could develop.

The potential hazards in a confined space are:

Lack of oxygen
Enriched levels of oxygen (over 21.5% is explosive)
The presence of gases or vapors that are toxic, explosive, or both.

It may be necessary to enter a confined space for purposes of inspection, cleaning or maintenance. Any individual who must do so shall be instructed on the procedure of confined space entry before entering. The following are examples of confined spaces:

- Storage tanks, vats
- Pipelines
- Bins and tubs
- Silos
- Process vessels
- Open top pits, trenches, and vessels
- Boilers
- Ducts, Ventilation or Exhaust
- Wastewater bar screens

- Wastewater wet wells
- Underground stations
- Spaces adjacent to the above which are separated by a bulkhead and have no mechanical ventilation.
- Manholes
- Tunnels
- Sewer lines
- Water or other liquid reservoirs
- Holding tanks
- Wastewater grit chambers
- Utility tunnels, conduits, vaults, and shafts without ventilation.
- Voids or crawl spaces beneath false flooring.
- Septic tanks

Natural ventilation is typically minimal in a confined space.

Definitions:

Confined Space Entry means any action resulting in or requiring any part of the worker's body to break the plane of any opening of the confined space. Confined space entry also includes any ensuing work activities within the confined space.

Confined Space Entry Permit (CSEP): A document initiated by the supervisor of personnel required to enter or work within a confined space. The CSEP will be valid only for the performance of the work identified and for the location and time specified. The beginning of a new shift with change of personnel will require the issuance of a new CSEP.

General Provisions:

- When possible, confined spaces should be identified with a posted sign that reads: "CAUTION - CONFINED SPACE."
- Only personnel trained and knowledgeable of the requirements of Confined Space Entry Procedures will be authorized to enter a confined space.
- A Confined Space Entry Permit must be issued prior to the performance of any work within a confined space. The CSEP will become a part of the site record.
- Natural ventilation must be provided for the confined space prior to initial entry and for the duration of the CSEP. Positive/forced mechanical ventilation may be required. However, care should be taken not to spread contamination outside of the enclosed area.
- If flammable liquids, gases, or vapors may be contained within the confined space, explosion proof equipment will be used, and continuous hazard

monitoring performed. All equipment shall be positively grounded.

- The contents of any confined space shall, where necessary, be removed prior to entry. All sources of ignition must be removed prior to entry.
- Feed lines to confined spaces must be broken and blanked-out, and sources of electrical or mechanical energy that could activate any area of the confined space must be identified and must be tagged and locked out prior to confined space entry.
- If a confined space requires respiratory equipment, or where rescue may be difficult, safety belts, body harnesses and a lifeline will be used.
- A ladder is required in all confined spaces deeper than an employee's shoulders. The ladder must be secured and not removed until all employees have exited the space.
- Only a self-contained breathing apparatus or NIOSH approved airline respirator equipped with a 5-minute emergency air supply (egress bottle) must be used in untested confined spaces or in any confined space with conditions determined immediately dangerous to life and health.
- Vehicles shall not be left running near confined space work or near air-moving equipment being used for confined space ventilation.
- Smoking in confined spaces is prohibited.
- Deviations from these Confined Space Entry Procedures require prior written permission from the BELAIR Safety Director.

Procedures: Each confined area is subject to these entry procedures. Training on confined space entry is required annually or before entry. If there are any questions pertaining to these procedures, please contact your immediate supervisor or one of Belair's Safety staff. Before entering any space which may be considered confined, the employee must contact his/her supervisor to decide if the confined area entry procedures apply to the situation.

1. A pre-entry crew meeting must be held to discuss the entry procedures. No entry shall be made into a confined atmosphere until the atmosphere has been tested with a detector to determine oxygen levels, the presence of toxic or combustible vapors, or the presence of toxic gases, if applicable.

2. If possible, ensure removal of any materials that may produce toxic or air displacing gases, vapors or dust.

3. If it is known or suspected that dangerous materials can flow into the confined area (gases, steam, caustics, etc.), block off their entry. Ensure that any hot work (for example

welding) that is to be performed in the confined space has been approved by the Safety Director.

4. All employees must wear the necessary personal protective equipment (harness with lifeline, eye protection, chemical suit, gloves, etc) as appropriate.

5. If a confined space has been ventilated for a reasonable amount of time and it has not been possible to bring the inside atmosphere conditions to within acceptable limits for safe entry, the space must be upgraded to a permit entry hazardous space. No further entry attempts should be made until the permit entry procedures have been initiated and complied with. Permitted entry requires the use of the BELAIR Confined Space Entry form. Ventilate the confined space until the atmosphere is in the acceptable range before any employees enter. If positive ventilation is necessary, it must be used for the duration of time that the work is performed in the space. Atmospheric monitoring must be conducted, and the employee(s) entering the confined space must wear a self-contained breathing apparatus and safety harness with lifeline.

Training:

Each employee required to enter a designated confined space must have the following training prior to entry:

- The potential hazards associated with the confined space.
- Safety precautions, emergency procedures, and hazard exposure treatment.
- Personal protective equipment , clothing, and devices.
- Inspection, use, selection, and fitting of safety harness and lifelines.
- Fitting, use, and limitations of self-contained breathing apparatus.
- Traffic control and job site protection.
- Cardiopulmonary Resuscitation (CPR) and first aid.
- Proper testing and monitoring of confined spaces.
- Decontamination of hazardous spaces.
- Proper ventilation procedures.

Confined Space Emergency Rescue Procedures:

1. When an emergency rescue is necessary from any confined space, the rescue must be accomplished immediately. Sufficient/appropriate emergency rescue equipment must be positioned and available prior to confined space entry. Notify 911 immediately and make the effort to remove the affected individual(s) ***without endangering other personnel.***

Note: Do not attempt an entry if the rescue and personal protective equipment on-site is inadequate, non-functioning, or of the incorrect type. Do not enter the confined space until the atmosphere is safe, or until you obtain the proper equipment for rescue.

2. When the atmosphere is questionable, proceed as though it is contaminated. Remove

the victim prior to administering aid in questionable atmospheres.

3. Upon entry, immediately assess the injury or problem. Determine the general nature of the injury and the condition of the victim. You do not have time to conduct an extensive physical examination. Check for serious conditions starting with breathing, heartbeat, bleeding, fractures, and other injuries.

4. When it is certain the atmosphere is safe, provide the victim with immediate treatment, such as CPR, and then remove him or her from the confined space.

CONFINED SPACE ENTRY PERMIT

Part A (Complete for each confined space entry.)

Date _____ Site Location/Description _____

Point of Entry

Supervisor and Name(s) of Crew
Issued: _____

Time _____

Expiration _____

Date: _____

Description of Known Hazards Present in the Confined Space:

Necessary Requirements Completed:

1. Atmospheric testing prior to entry	Required		Permissible Entry Level
	Yes	No	
• Time of testing	_____	_____	am - pm
• Percent of oxygen	_____	_____	19.5% - 23.5 %
• Lower flammable limit	_____	_____	under 10%
• Carbon monoxide	_____	_____	<35ppm/twa
• Hydrogen sulfide gas	_____	_____	<10ppm
• Toxic material limit (PEL)	_____	_____	<½ permissible exposure

2. Are the above monitoring results within permissible entry levels? Yes _____ No _____

3. Designated person performing testing _____

4. Is natural ventilation adequate? _____

Space Location _____ Date _____
Time _____

1. What work is to be accomplished?

2. Supervisor In-Charge (On-Site):

3. Crew member names, training, and physical condition:

A. Name

B. Certified in CPR (Y/N)

C. Certified in First-Aid (Y/N)

D. Trained in confined space entry and emergencies

E. Physical condition

F. Known medical problems

A. Name

B. Certified in CPR (Y/N)

C. Certified in First-Aid (Y/N)

D. Trained in confined space entry and emergencies

E. Physical condition

F. Known medical problems

A. Name

B. Certified in CPR (Y/N)

C. Certified in First-Aid (Y/N)

D. Trained in confined space entry and emergencies

E. Physical condition

F. Known medical problems

4. Safety Observer:

A. Name

B. Certified in CPR (Y/N)

C. Certified in First-Aid (Y/N)

D. Trained in confined space entry and emergencies

E. Physical condition

F. Known medical problems

5. List appropriate access, traffic control, and pedestrian safety protection required:

6. List possible hazards present:

7. Are the required protection and detection devices on-site? List devices, model and dates of calibration, as applicable:

8. Atmospheric Conditions:

Oxygen concentration: _____

Temperature: _____

Weather Conditions: _____

9. Other conditions and comments:

10. Are lockouts required (Y/N)? _____

If yes, what must be locked out?

11. Is isolation required (Y/N)? _____

If yes, what is to be isolated?

12. Personal protective equipment necessary:

13. Personal protective equipment on-site and ready to use (Y/N) _____

14. Is ventilation on site in place and operational (Y/N)? _____

This is to certify that all of the provisions for safe entry into a confined space have been completed and all persons in the work crew are trained, equipped, and physically capable of performing the required work, as assigned.

Supervisor (On-site)

Signature _____ Date _____

Time _____

Safety Director

Signature _____ Date _____

Time _____

Special Instructions/Precautions to be employed:

CRISIS MANAGEMENT PROGRAM

Day 1

"O" to One Half Hour

(Time of Incident _____:_____ AM PM)

1. Front desk passes call on to and directs detailed information to State Coordinator (SC) Pete Sargent for help. (Questions shall not be fielded from the front desk). Front Desk will compile comprehensive notes and timely pass on to the SC. Front Desk can say if challenged.....
"I cannot answer any questions at this time, but I will be more than happy to pass this call on to our State Incident Coordinator and he will call you back." "Thank you." (State Coordinator is first call for help)
2. SC notifies Corporate Coordinator (CC) for situation review and assistance.
3. CC notifies insurance carrier, Dwight Jordan @ 612-349-2423 and furnishes them with detail and reviews Belair direction. OSHA is contacted if two serious injuries or one (1) fatality.
4. A reminder that all information that comes in to the Belair office will be directed to the SC and/or their delegate in a timely fashion.
5. SC will contact the general field superintendent who will help choose the best site person to give the "site buy time talk".
6. SC will fill out and practice the pre-prepared speech sheet with the site buy time person.

One Half (1/2) to One (1) Hour Later

(Projected Time: _____:_____ AM PM)

7. Chauffer arranges for the following:
 - A. A Belair marked car or truck at the front door
 - B. Two (2) cell phones and their numbers
 - C. Two (2) writing utensils
 - D. Two (2) Safety Plans
 - E. Two (2) MSDS Packets
 - F. Two (2) Job Hazard Analysis Sheets
 - G. PPE; hard hats, vests, boots, and safety glasses
 - H. Map to site/hospital
8. Company spokesperson is taken to the site by chauffer.

9. All verified information will be passed on to the spokesperson enroute by the CC via cell phone.

10. Constant contact and communication with the SC for help is a necessity for all.

Approximately One (1) Hour Later

11. Chauffer takes the company spokesperson onto the site right up to the scene.

12. Company spokesperson gives his pre-prepared talk to the site.

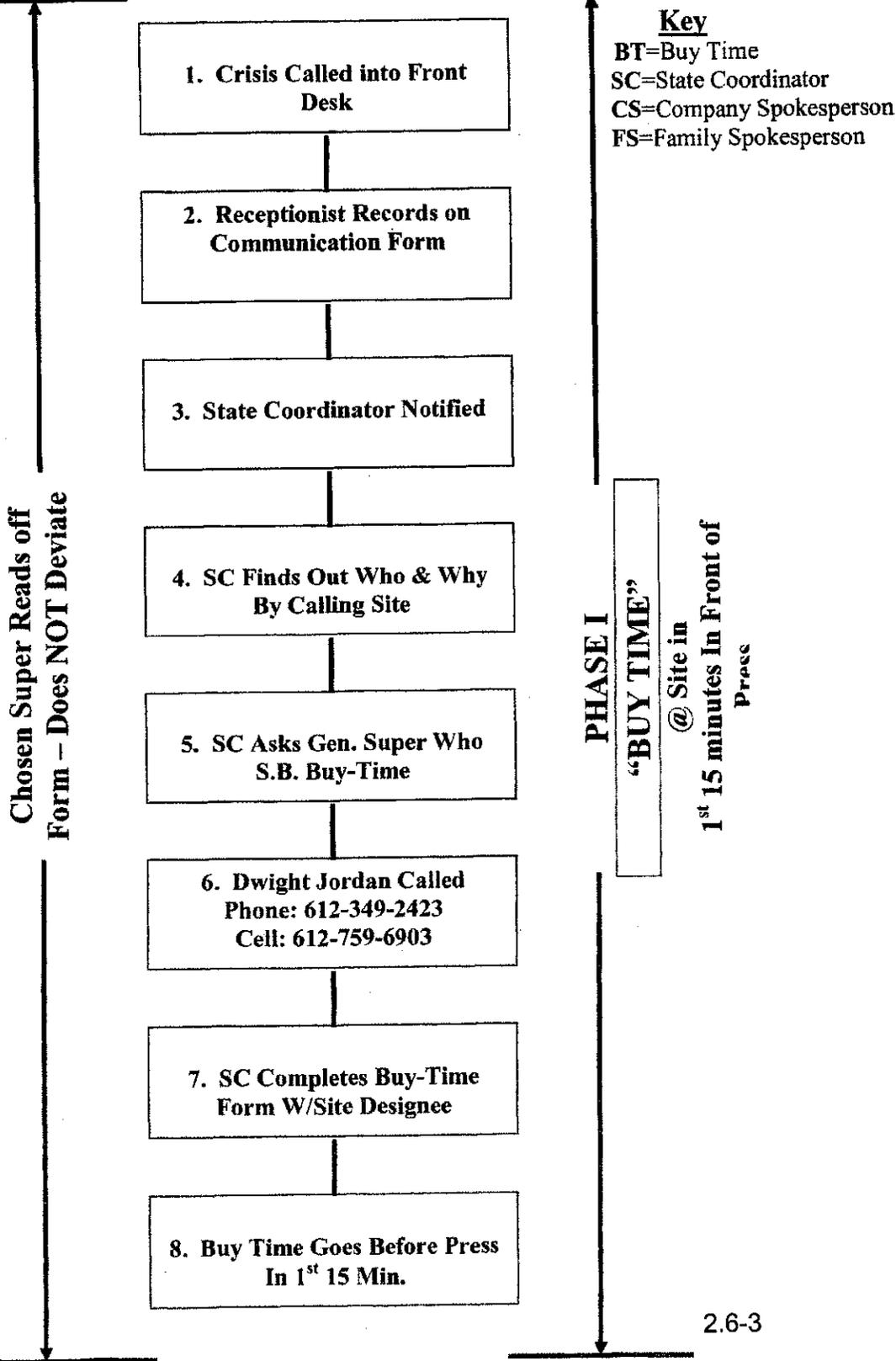
13. Spokesperson passes his up to date information to the Corporate Company Spokesperson.

Several Hours Later (possibly up to one day)

14. Chauffer checks with Corporate Company spokesperson and makes ready same as item no. 7 plus:

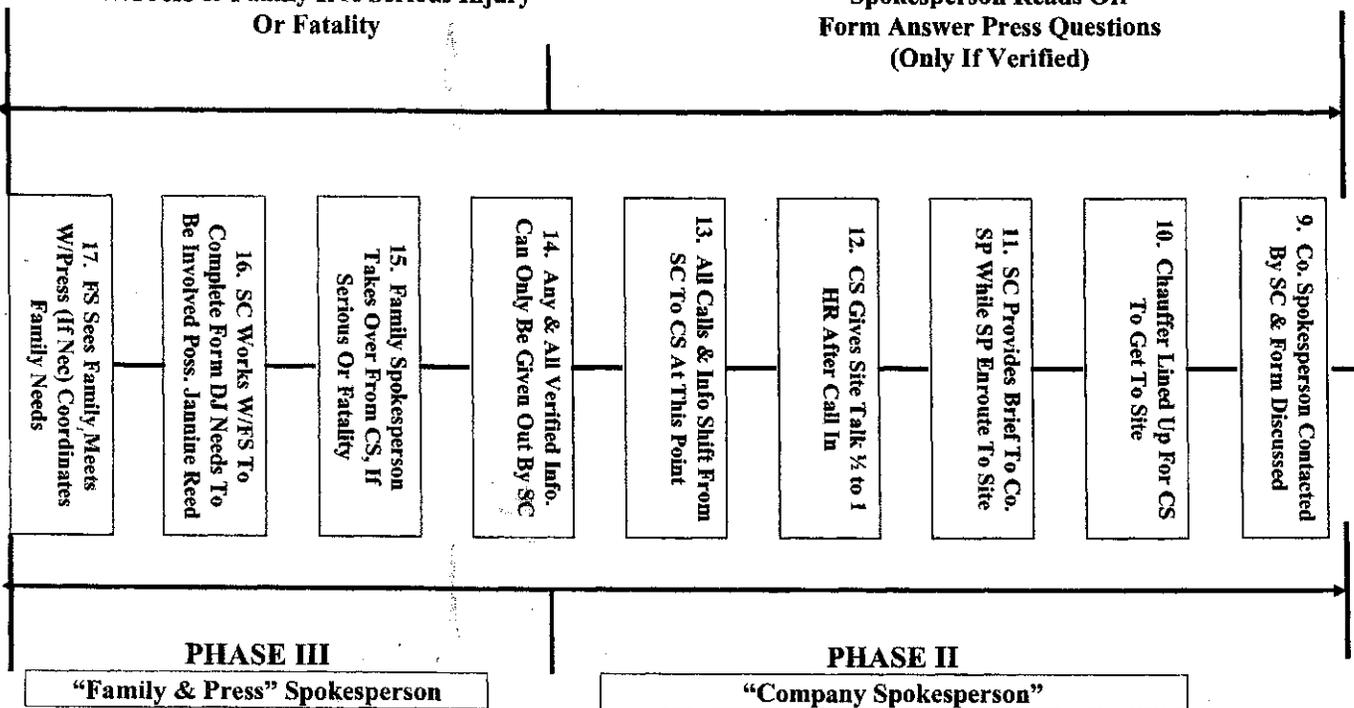
- a. directions to hospital
- b. site location
- c. affected peoples homes

STEPS TO HANDLING A CRISIS



**A Manager or OPNS Manager Meets
W/Press & Family If A Serious Injury
Or Fatality**

**Designated Company
Spokesperson Reads Off
Form Answer Press Questions
(Only If Verified)**



PHASE III

**"Family & Press" Spokesperson
2 HRS to 2 Days Later**

PHASE II

**"Company Spokesperson"
On Site In
1/2 HR to 1 HR in Front of Press**

Resource Sheet for a Serious Injury or Fatality

Phase I				
Corporate 1st Call for Help (Stays in office as overall incident coordinator. All states report to this one corporate contact)		CO	FL	MN
		Tim Burkhart 303-887-8611 303-286-4321	Rebecca English 239-513-1300 239-438-0488	Mike Murlowski 651-786-1300 612-840-4754
Alternate		Bryan Cook 720-936-0130	Gary Silbernagel 239-438-5942	Jason Norman 651-717-3398
State 1st Call for Help (State Coordinator)				
(Immediate. Coordinator stays in office as local incident location reports to him/her who in turn reports to Corporate 1st Call)		CO	FL	MN
		Bryan Cook 720-936-0130 303-286-4333	Rebecca English 239-513-1300 239-438-0488	Tom Ludwig 651-717-3394 612-840-2436
Alternate		Will White 720-939-0364	Gary Silbernagel 239-438-5942	Jason Norman 651-717-3398
Buy Time Person				
(Buys time on site until the State Spokesperson arrives)		CO	FL	MN
		Onsite Personnel Selected by General Superintendent i.e. field supt		
Phase II				
State Spokesperson (Visits site to speak to reporters <i>within the first hour.</i>)		CO	FL	MN
		Bryan Cook 720-936-0130 303-286-4333	Rebecca English 239-438-0488 239-513-1300	Tom Ludwig 651-717-3394 612-840-2436
Alternate		Tim Burkhart 303-887-8611	Mark Murlowski 239-513-1300	Mike Murlowski 612-840-4754
Chaffeur (Brings Spokesperson to site and assist them in getting cell phone, info, etc)		CO	FL	MN
		Marty Ward 720-939-6634 303-286-4340	Tim Fash 239-513-1300 239-438-0425	Pat Jordan 651-786-1300 651-248-9137
Alternate		Jon Kentner 720-939-0872	Maria Villegas 239-513-1300	Derek Schmid 612-616-7025
Phase III				
Post Media Coverage (Visits, reports and assists the family members <i>from two hours to two days.</i>)		CO	FL	MN
		Tim Burkhart 303-887-8611 303-286-4321	Rebecca English 239-438-0488 239-513-1300	Jeff Saucier 651-786-1300 651-248-1691
Alternate		Bryan Cook 720-936-0130	Mark Murlowski 239-513-1300	Russ Thole 651-717-3384

ELECTRICAL GROUND FAULT PROTECTION

INTRODUCTION

Most electric shock injuries result from ground faults. The most common ground fault exists when insulation on wires within a tool becomes damaged, frayed or wet permitting current to leak out and energize the tool housing or frame. Normally, electric current flows into a tool through an energized wire and returns to the ground through a neutral wire. When the tool is touched, some current is diverted from the normal hot-to-ground path and passes through our body to earth.

Incidents involving temporary power on construction sites can be prevented by using ground fault circuit interrupters (GFCI).

The heart of the GFCI system is a sensor that monitors the amount of current passing through the energized wire and the amount returning via the neutral wire. If less current is returning than went out, a ground fault occurs. This causes the sensor to trip the switch, cutting off the power. GFCI's can sense a current leak of 5 milliamps.

Specific requirements for Ground Fault Protection are found in OSHA part 1926 subpart K, 1926.400 (h) (1) to (3). In review, the standard requires that all 120 volt, single phase 15 and 30 ampere circuits are not part of the permanent wiring shall be protected by 1 or 2 methods. Belair Excavating provides protection through the use of the GFCI system.

BELAIR EXCAVATING PROGRAM

Each applicable Belair Excavating employee will be provided a Ground Fault Circuit Interrupter device. This device measures the current going out in a circuit against the current returning. If a short develops, then the imbalance triggers a cut off of electrical power. GFCI's can be circuit breaker type, receptacle type, or portable personal models. The GFCI offers protection for every employee using cord and plug connected equipment.

EQUIPMENT INSPECTION AND MAINTENANCE CHECKLIST

1. Power, portable and/or cord plug connected equipment properly grounded or double insulated type.
2. Damaged tools or cord sets tagged and/or removed.
3. Extension cords, three-wire type, in good condition (no worn or frayed parts or missing pins).
4. Switches, circuit breakers, and disconnecting means legibly marked in circuit panel or temporary service.

EMPLOYEE ACCESS TO MEDICAL RECORDS

INTRODUCTION

The purpose of this program is to provide employees with basic information regarding the types of medical records maintained by the Company and their right access those records.

RECORDS KEPT BY THE EMPLOYER

Belair Excavating keeps, on occasion, medical records on employees. These records may include physical exams, pulmonary function test results, hearing test results and accident records. Law allows employees to have access to their own records or to reports which include information from their records. Employees may be required to make their request in writing for access to some of the records.

WHO TO CONTACT FOR ACCESS

The company's insurance carrier typically maintains medical records. Requests for access to your records should be made to your supervisor. Be as specific as possible about the information you are requesting. If you are not sure what information is available, contact the Belair Excavating Safety Director or State Safety Coordinator.

Remember that access to your records is your right.

EMPLOYEE EMERGENCY PROCEDURES

CALL AMBULANCE

- Give clear, accurate directions. Assign a competent person to meet the ambulance at the entrance.
- Emergency Service: Phone **911** or as posted at the job site.

CALL POLICE (if necessary)

- Phone **911** or other local phone number as posted at the job site.

CALL FIRE DEPARTMENT (if necessary)

- Phone **911** or other local phone number as posted at the job site.

CALL UTILITIES (When applicable)

- Electric Phone Number - As posted at the job site.
- Water Phone Number - As posted at the job site.
- Gas Phone Number - As posted at the job site.

NOTIFY APPROPRIATE MANAGEMENT

RESTRICT THE IMMEDIATE AREA OF THE ACCIDENT SCENE TO AUTHORIZED PERSONNEL ONLY.

IF FURTHER DANGER EXISTS, CLEAR THE AREA.

- *The site supervisor is responsible for accounting for each assigned employee following a site evacuation.*

FALL PROTECTION

Falls are the second principle cause of commensurable work injuries. Eighty to eighty-five percent (80-85%) of falls are from heights of less than 10 feet. We can reduce falls by the immediate correction of existing hazards, the use of preventive maintenance, improved work methods, analysis of the potential fall hazards associated with seasonal and unusual jobs, and following safe fall protection practices. Fall protection devices should be used 100% when working at unprotected heights of 6 feet or greater. Unprotected refers to the absence of appropriate handrails and/or other safeguards to prevent falls. Lifelines and safety harnesses shall also be used during confined space entry. For additional guidance, contact the Safety Director or Safety Associate.

The following are preventive measures to avoid falls:

- Walk, don't run.
- Use the 3-point contact principle (1 hand and 2 feet or 2 hands and 1 foot) when mounting or dismounting from equipment, etc.
- Watch where you step. Avoid sudden motions and quick changes in direction.
- Be extra careful in dark areas.
- Carry bulky objects so that you can see over them.
- Hold onto the handrail on stairways.
- Brace yourself securely before pulling on anything.
- Watch for slipping and tripping hazards.
- Use suitable ladders and step stools, never makeshifts. Be sure the ladder is sound and correctly placed before you start to climb.
- Avoid unprotected floor openings.
- Keep up good housekeeping habits.
- Do not attempt to get on or off of a moving vehicle. Do not ride on hoisting equipment.

Plan herein references and adopts OSHA 1926.500, Subpart M, which shall be used in its entirety, as applicable. See Archives and Director for copies of applicable parts needed for your specific project.

FLEET POLICY

Management State of Fleet Loss Control Policy

Motor vehicle crashes can be prevented. Through such prevention, injury can be avoided and costs can be reduced with a resulting increase in the well being of Belair Companies.

It is the policy of Belair Companies that every effort be made to prevent motor vehicle crashes. It is the responsibility of all personnel – managers, supervisors and drivers, to comply with this policy.

The fleet loss control program consists of:

- Driver selection procedures
- Ongoing defensive driving training
- Vehicle selection, inspection and maintenance procedures
- Crash investigation and analysis procedures
- Branch/State Safety Committee
- Evaluation of individual and company safety performance

The effectiveness integration of fleet loss control into the daily conduct of business will contribute significantly to the continued success and prosperity of Belair Companies and its employees.

Company Owned Vehicles and Personal Use

Employees are only authorized to use Company Owned Vehicles (COV's) by acting within the scope employment. Personal use of COVs is only authorized by written permission from Belair Companies. Individuals authorized to use COVs per personal use must provide proof of personal auto insurance.

Driver Selection

When employees are allowed to drive Belair Companies vehicles, or to drive any vehicle for the Belair Companies, they are entrusted not only with the operation and care of the vehicle but also, Belair Companies' reputation.

Employees shall be evaluated and selected according to their driving ability if they are to drive vehicles within the scope of employment for Belair Companies.

To evaluate employees as drivers, management shall:

- Qualify all drivers of Commercial Motor Vehicles (CMVs) in accordance with the standards regulated by the Federal Motor Carrier Safety Regulations (FMCSR);

- Ascertain that the employee has a valid driver's license, including a Commercial Driver License (CDL) where warranted;
- Review the employee's Motor Vehicle Record (MVR) annually (more frequently if reasons warrant) to evaluate the individual's driving experience and observance of traffic laws;
- Obtain various documentation from the driver as listed below.

Driver Qualification

The establishment of effective driver qualification controls is important to the successful operation of the fleet. The opportunity to select the right employee for the driving task depends largely on management's ability to develop standards, which reflect the prerequisites and skills necessary for satisfactory job performances while considering applicable federal and state regulations with which Belair Companies must comply.

Belair Companies has implemented two levels of driver qualification criteria. Use of any or all of these criteria is dependent upon the nature and scope of the operation.

1. All drivers shall comply with DOT Commercial Driver License (CDL) regulations as regulated by the FMCSR.
2. Drivers of Belair Companies' company owned vehicles, non-CMV(COVs), and personally owned vehicles (POV) will be qualified according to Belair Companies policy.

The driver selection process includes the development of a driver qualification file. Components of this file comply with federal and state record keeping regulations as well as Belair Companies policy, and generally include copies of the following:

- All documents required by the Federal Regulations for CMV and courier drivers
- Motor vehicle record(s) for each year employed (all drivers)
- A legible photocopy (front and back) of the driver's valid license (all drivers)
- Accident reports for any accident occurring while on-duty with Belair Companies (all drivers)
- Training records for any vehicle specific training regarding driver safety (all drivers)
- A negative pre-employment controlled substance test must be received prior to hiring

Driver Performance

A review of the driver's performance is a critical component of Belair Companies fleet loss control program. Performance shall be monitored during the selection/screening

process as well as at periodic intervals throughout the driver's career using information obtained from motor vehicle records and accident file data.

A formal review of the driver's motor vehicle record (MVR) shall be conducted on an annual basis, more frequently where warranted. The purpose of this review is to determine whether remedial driver training is warranted. The review is conducted with the driver and becomes part of their file, as referenced above.

Performance Criteria

The following criteria is used to measure driver performance based on accident/violation information obtained from MVRs and accident files:

First and foremost, all drivers must wear safety belts at all times while in any vehicle conducting business for Belair Companies.

1. A driver is unacceptable and may be terminated, if the driver's accident/violation history in the past 3 years includes one or more of the following violation convictions:

- a. driving under the influence of alcohol or drugs
- b. hit and run
- c. failure to report an accident
- d. negligent homicide arising out of the use of a motor vehicle
- e. operating during a period of suspension or revocation
- f. using a motor vehicle for the commission of a felony
- g. operating a motor vehicle without the owner's authority
- h. permitting an unlicensed person to drive
- i. reckless driving
- j. speed contest
- k. not reporting a motor vehicle accident immediately

2. Any two preventable motor vehicle crashes during your 90 day probationary period, results in up to termination. The driver will be suspended until the safety committee meets to determine preventability.

3. Any preventable motor vehicle accident or incident results in 1 point per occurrence. Example: you rear-end another vehicle and it is determined to be preventable, this equals 1 point.

Discipline

First point = written warning placed in personnel file; mandatory attendance at a 4 hour National Safety Council Defensive Driving Class

Second point = termination

Management Responsibility

Management is responsible for obtaining the accident data from Belair's consultant, Motor Carrier Services. It is important for management to determine the extent of the crash, especially if it involves injury or death to the driver, passengers, or other parties.

Management should proceed with a formal investigation as soon as possible to determine the underlying causes as well as what can be done to prevent a similar occurrence in the future. Belair's designated insurance liaison should forward the resulting crash report to the insurance claims office along with any additional support data (e.g., witness statements, photographs, police reports, etc.), and a copy sent to the Department of Transportation where warranted.

A management information tool that will be helpful to develop crash trend and casual factor information is the crash log, provided by the DOT and/or Motor Carrier Services. The log provides information pertaining to:

- Date of crash
- Name of driver
- Vehicle Identification Number(s)
- Location of crash
- Description of crash
- Injuries / fatalities
- Property damage

Preventable vs. Non-preventable Accidents

1. A motor vehicle accident is defined as "any occurrence involving a motor vehicle which results in death, injury or property damage, unless such vehicle is properly parked*. Who was injured, what property was damaged and to what extent, where the crash occurred, or who was responsible, are not relative factors.

2. A preventable accident is defined as "any accident involving the vehicle, unless properly parked, which results in property damage or personal injury and in which the driver failed to do everything he/she reasonable could have done to prevent or avoid the crash."

* A properly parked motor vehicle is one that is completely stopped and parked where it is legal and prudent to park such a vehicle.

Parking on private property shall be governed by the same regulations as apply on public streets and highways. A vehicle stopped in traffic in response to a sign, traffic signal or the police is not considered parked. The determination of preventability of a crash is the function of the local safety committee and/or Motor Carrier Services.

Notification Requirement for Traffic Violations, Revocations, Suspensions or Cancellations

- No driver may possess more than one license
- A driver convicted of a traffic violation (other than parking) must notify Belair Companies of such conviction within 30 days
- If your driver's license is suspended, revoked, or canceled, you must notify your supervisor no later than the end of the next working day following notification of driver's license suspension, revocation, or cancellation (see Notification Reporting Form in forms section of this policy). Failure to do this may result in termination. You must never drive a company vehicle without a valid driver's license. If you do so, you will be terminated.

Accident Record keeping, Reporting and Analysis

Belair Companies considers the elimination of all motor vehicle accidents as a major goal. To accomplish this task, it is paramount that all accidents be recorded and investigated. The investigation is used to identify needs for:

- more intensive driver training and/or refresher training
- improved driver selection procedures
- improved vehicle inspection and/or maintenance activities; and
- changes in traffic routes

Motor vehicle accident record keeping procedures consist of the following components:

- documentation of causes and corrective action
- management review to expedite corrective action
- analysis of crashes to determine trends, recurring problems and the need for further control measures; and
- compliance with DOT requirements where necessary

Implementation of these procedures remains the responsibility of both the driver and manager

Driver Responsibility

The driver is the first person at the accident scene, it is important that he/she initiate the information gathering process as quickly and thoroughly as is feasible and document it.

Accident Review Board

The purpose of the Safety Committee reviewing an accident is to:

- Evaluate the circumstances surrounding an accident and the action to be taken by the driver
- Determine if the accident was "preventable" or "non-preventable" in accordance with the standard criteria outlined above; and
- Provide a means for enforcing management and driver responsibilities

Alcohol / Drug Testing

Belair Companies employees must refrain from the use of alcohol and controlled substances while driving company owned vehicles and/or privately owned vehicles for company business use.

Belair Companies alcohol and drug testing procedures have been developed and implemented in compliance with Federal Highway Administration (FHWA) regulations promulgated through the DOT in accordance with CFR 49, Part 382. Please refer to complete policy for more detailed information. The alcohol/drug testing program is composed of the following elements:

Testing:

Pre-employment (all drivers), Reasonable Suspicion, Post-accident, Random, Return to Duty, and Follow-up.

Record Retention (all drivers)
Medical Review Officer

Vehicle Inspection

A documented program of pre-trip and post-trip vehicle inspection is a critical component of the vehicle maintenance and loss control process. Detection and correction of a vehicle defect or deficiency reduces the risk of mechanical condition contributing to an accident or vehicle breakdown which can result in death, injury and property damage, as well as missed deliveries, bad publicity, customer dissatisfaction, or on-the-road repair problems.

Documentation of the inspection process is maintained using Belair's standard Accident/Incident reporting form. (See forms section) The report is for post-trip inspection purposes, and can also be used for periodic inspections while in transit. By keeping a copy of the vehicle condition report on the vehicle, the driver, mechanic, or other interested parties can ascertain at a glance the know mechanical condition of the vehicle.

The Federal Motor Carrier Safety Regulations (FMCSR) requires that drivers complete a post-trip vehicle condition report and have a copy of the report in the vehicle. Before driving a vehicle, the driver must be satisfied that the vehicle is in safe operating condition, review the last vehicle inspection report and the power unit and, if defects or deficiencies had been identified on the report, sign the report to acknowledge that it was

reviewed and that is a certification that the required repairs have been completed. The FMCSR also require an annual inspection by Belair mechanics of all vehicles covered by these regulations. Each piece of equipment is verified through the vehicle condition report that the inspection was performed.

This company adopts the vehicle inspection requirements of the FMCSR for its entire fleet.

Vehicle Maintenance

Vehicle maintenance can take the form of three distinct programs: maintenance, demand maintenance and crisis maintenance. While all three types have their role in the fleet loss control program, the most cost effective control is maintenance.

The groundwork for a good preventive maintenance program starts with management. A review of manufacturer's specifications and recommendations for periodic preventive maintenance should be integrated with the actual experience of the fleet. The fleet manager must be careful not to void the manufacturer's warranty when approving periodic repairs.

Preventive maintenance is performed on a mileage or time basis. Typical maintenance include oil/filter changes, lubrication, tightening of belts and components, engine tune-ups, brake work, tire rotation, hose inspection/replacement and radiator maintenance.

Demand maintenance is performed only when the need arises. Some vehicle parts are replaced only when they actually fail. These include light bulbs, window glass, gauges, wiring, air lines, etc. Other "demand maintenance" items involve vehicle components that are worn based on information from the vehicle condition report. These include tires, engines, transmissions, universal joints, bushings, batteries, etc. Since these situations are identified via periodic inspection, they can actually be classified within the maintenance program.

Crisis maintenance involves a vehicle breakdown while on the road. While situations of this type may happen regardless of the quality of the maintenance program, it is an expensive alternative to not having an effective preventive maintenance program at all. Crisis maintenance situations should be minimized through proper maintenance procedures.

This company's vehicle selection, inspection and maintenance program is only as good as its record keeping procedures. The key document for the driver is the "Driver's Vehicle Condition Report," (see forms section) which gives a detailed account of vehicle defects and deficiencies for necessary follow-up. A preventive maintenance log of repairs, parts replacement, fluids inspections/changes, etc., provides additional data designed to keep the vehicles on the road and operating safely and efficiently.

Transportation of Hazardous Materials

Interstate transportation of hazardous materials is governed through the Federal Regulations. Thorough and ongoing training of our employees involved with the transportation and handling of hazardous materials is an important part of this fleet loss control program.

Belair's hazardous materials transportation program consists of the following:

- Classification of hazardous materials
- Shipping paper and manifest requirements
- Marking, labeling and placarding
- Handling, loading, unloading and dispensing; and
- Accident reporting and emergency response procedures

Belair Companies requires a HAZMAT endorsement for all drivers who transport HAZMAT. The following information outlines Belair Companies training requirement for all personnel involved in the transportation of HAZMAT.

Introduction

Overview
License Requirements
Registration

Classification

Hazardous Materials
Hazard Classes & Division
Packing Groups
Hazardous Materials Table
List of Hazardous Substances
List of Marine Pollutants

Emergency Response

On-Scene Guidelines
Emergency Response Guidelines
Damaged & Leaking Containers
Incident Reporting

Driver Training and Motivation

The drivers hired by this company to operate a motor vehicle will have the basic skills and credentials necessary to perform this function as confirmed through the driver selection process. The purpose of the driver training and motivation program is to increase these skills and orient the drivers to this company's fleet safety policy, equipment and procedures.

Driver training and motivation includes:

Packaging and Hazard Identification

Key Definitions
Performance-Oriented Packaging
Non-Bulk Markings
Hazard Warning Labels
Bulk Markings
Placards

Handling & Transport

Segregation
Loading & Unloading
Transporting Placarded Loads
Parking & Vehicle Attendance

Documentation

Shipping Papers
Emergency Response Information
Location During Transport

- Indoctrination into the company safety policy and programs
- Annual training on defensive, incident-free driving

Driver Training

This company's driver training program is divided into several levels:

- Initial training
- Ongoing training; and
- Remedial training

Initial Training

Our key to success is the initial training of our drivers. We must set clear expectations for safety, discipline, and respect. The following summarizes the procedures for training new drivers.

- A pre-employment road test will be satisfactorily completed prior to hiring
- A negative pre-employment controlled substance test must be received prior to hiring

All drivers will receive training on the following topics during the initial training phase

- Controlled Substance and Alcohol use and Testing Training (382.601 CDL & General Awareness Training for all drivers regarding Belair Companies' policy)
- Load Securement Training
- Vehicle Inspection and Maintenance
- Hazardous Materials Transportation (applicable drivers only)
- Parking procedures at customers, on-site and at Belair Companies
- Discipline Procedures for Safety Violations as outlined in the performance criteria section of this policy (see page 6 of this policy for details)
- Belair Companies paperwork

Ongoing Training

Ongoing training at Belair Companies consists of annual driver safety meetings for CMV operators by Motor Carrier Services.

Remedial Training

Remedial training covers problems of substandard performance, which can be alleviated through corrective training. The need for remedial training is identified

through customer complaints, accident involvement, Accident Review Board, MVR reviews, and/or evidence of vehicle abuse.

This company uses several approaches to driver training:

- Classroom training
- In-vehicle training
- Driver safety meetings

Topic-specific programs, usually supported by videos, are presented on a quarterly basis.

In-vehicle training is most effective for equipment familiarization, cargo handling, pre-trip inspection training, etc., and is recommended for conditions and situations that warrant closely controlled supervision.

Belair Companies

I acknowledge the receipt of a copy of Belair Companies Fleet Safety Policy. I understand that I am subject to this policy and failure to follow this policy may result in disciplinary action up to and including termination. I also understand that a copy of this policy is available and it is my responsibility to read and comply with this policy.

Printed Name: _____

Signature: _____

Date: _____

FORKLIFT TRAINING

This section sets forth the OSHA 1910.178 Forklift Regulations for all Industrial and All terrain Forklift Equipment used in Belair Excavating Operations.

GENERAL

1. Only trained personnel shall be allowed to operate forklifts.
2. Prior to employees operating a forklift, verification of Forklift Certification and a supervisor's evaluation shall be conducted. (Attachment A)
3. Refresher training, including evaluation shall be provided when:
 - Operator has been observed operating forklift in an unsafe manner
 - Operator has been involved in an accident or near miss
 - Operator is assigned to drive a different type of forklift
 - Condition of workplace has changed.
4. Approved forklifts shall bear a label or other identifying mark indicating approval by the testing laboratory.
5. Modifications and additions, which affect capacity and safe operation, shall not be performed.
6. All nameplates and marking shall be in place and maintained in a legible condition.
7. In areas where flammable gases, vapors, or ignitable fibers are present in the atmosphere, forklifts shall be "approved" for fire safety purposes.
8. Forklifts with internal combustible engines operated in buildings or enclosed areas, shall be monitored to prevent harmful concentrations of dangerous fumes or gases.
9. No person shall be allowed to stand or pass under the elevated portion of any forklift, whether loaded or empty.
10. Unauthorized personnel shall not be permitted to ride on forklifts.
11. When a forklift is left unattended, load engaging means shall be fully lowered, controls shall be neutralized, power shall be shut-off and brakes set. Wheels shall be blocked if the truck is parked on an incline.
12. All traffic regulations shall be observed, including authorized speed limits.
13. Only loads within the rated capacity of the forklift shall be handled.
14. Forklifts in need of repair, defective or in any way unsafe shall be taken out of service until it has been restored to safe operating conditions.
15. Forklift inspections shall be conducted prior to the work shift or its use.

Belair Excavating

FAX TO: Belair Excavating
651-786-0769

**FORKLIFT PROOF OF CERTIFICATION
& EVALUATION FORM**

Attention: Safety Director
No. of Pages Sent _____

Name: _____

Date:

Job #: _____

Supervisor:

Equipment Make: _____

Model #:

1. Has operator been trained on this type of forklift? Yes No

- If yes, note length of experience with this type of forklift: _____ Years
Months

- If no, contact Belair Safety Director and/or your Field Coordinator.

2. Proof of Certification (provided by the operator)

Trainer Name: _____

Date of Training:

I, as an employee of Belair Companies have received training by the above trainer and have been certified to meet the OSHA 1910.178 Forklift Certification Standard. I also understand that re-certification and evaluation shall take place if involved in a jobsite accident or has been observed operating in an unsafe manner. I understand that failure to comply with the 1910.178 forklift standard may result in a disciplinary and/or immediate dismissal from the site.

Signature: _____

Date:

3. Evaluation

All forklift operators certified shall be evaluated in the following areas:

Place an (☐) next to that operator has demonstrated ability to do.

- 1. Shows knowledge in equipment controls and instruments
- 2. Steering and maneuvering
- 3. Fork and attachment adaptation, operation and use limitations
- 4. Vehicle capacity - how much can it lift
- 5. Any vehicle inspection and maintenance that the operator will be required to perform prior to vehicle operation.
- 6. Refueling and/or charging and recharging of batteries
- 7. Surface conditions where the vehicle will operate
- 8. Composition of loads to be carried and load stability
- 9. Stacking and unstacking
- 10. Other workplace related topics

List:

4. Evaluator Information

I hereby acknowledge that the operator has demonstrated the ability to operate the forklift equipment.

Signature: _____

Date:

Date Evaluated:

**HAZARD COMMUNICATION AND
EMPLOYEE RIGHT-TO-KNOW
PROGRAM**

References: Federal Regulation 29 CFR 1910.1200

Policy:

The policy of this company is to perform work in the safest manner possible. BELAIR will provide the safest possible working conditions for its' employees and other individuals who visit company premises and job-sites. It is a condition of employment for all personnel of this company to acknowledge receipt of this program in writing and to follow all directions, written and verbal, pertaining to this program. Overall responsibility for the implementation and management of this program is that of the Safety Director.

Purpose:

To ensure employees are aware of the dangers involved with the use of hazardous substances, harmful physical agents, and infectious agents that they may be routinely exposed to at their worksite.

Application:

This program applies to chemicals known to be present in the workplace in such a manner that employees may be exposed under normal conditions of use, during the performance of non-routine tasks, or in foreseeable emergencies.

Definitions:

- **Harmful Physical Agent** means a physical agent that presents a significant risk to worker health or safety or imminent danger of or serious physical harm to an employee. These include temperature extremes, and ionizing and non-ionizing radiation.
- **Hazardous Substance** means a substance or mixture which is toxic, irritating, combustible or flammable, reactive, carcinogenic, a mutagen, a reproductive toxic agent, or that in some other way may cause injury or illness to an employee.
- **Immediate-Use Container** is a container in which a substance is transferred into, and will be under the control of and only used by, the employee transferring the substance. In addition, all of the transferred substance will be used within the work shift.
- **Infectious Agent** means a communicable bacterial, viral, fungal, or other microbiological agent that may cause illness to an exposed employee. This

includes infectious agents that are present in human blood (blood borne pathogens).

- **Material Safety Data Sheet** is a document prepared by a manufacturer of a hazardous product or substance which describes the characteristics of the substance, its health effects, safe-handling procedures, and first-aid procedures in the case of overexposure.
- **Routinely Exposed** means the reasonable potential for employee exposure exists during the normal course of work. It does not include an employee walking through an area where a hazardous substance container exists and no exposure is likely unless a spill should occur.

Program Summary:

The following are the major elements of this program:

- Hazards Inventory.
- Hazard Assessment
- Employee Training
- Labeling.
- Labeling of Infectious Agents.
- Non-Routine Hazards.
- Outside or Contractor Personnel - Methods for Informing of On-Site Hazards.
- Program Review.

Hazards Inventory:

The hazards inventory will be maintained by the BELAIR Safety Department and is located in the Employee Right to Know Station located in the BELAIR training area. This inventory will be a current list of all hazardous materials used on BELAIR job sites. A material safety data sheet (MSDS) will be maintained for each hazardous substance listed on the inventory. The Safety Director and state safety coordinator is responsible for maintaining the MSDS's in a complete and up-to-date manner.

In addition to the above, an inventory of applicable harmful physical and infectious agents will be maintained, including temperature extremes and noise sources.

Hazard Assessment:

This program relies on the hazard determination of the manufacturer or supplier of the hazardous substance, as expressed in their Material Safety Data Sheets (MSDSs).

Employee Training:

Employees shall be trained in the hazards associated with chemicals used in their workplace. The training includes an overview of the federal Hazard Communication standard and the Minnesota Employee Right-to-Know Act. All employees will be given a copy of the written plan. Copies of the written plan can be obtained from the Safety

Director. Employees will also receive training on the specific hazards associated with the hazardous substances, harmful physical agents, and infectious agents that they use on the job. This training will take place prior to starting work; when new hazardous substances, harmful physical agents, or infectious agents are introduced to the workplace; and at least annually thereafter.

- The training for hazardous substances will cover the following:
 - The names of hazardous substances(s) including common name(s).
 - Hazardous levels of exposure.
 - Symptoms of exposure (such as dizziness and nausea, chemical burns, rashes, etc.), including both short-term and long-term exposure.
 - The potential for flammability, explosion, and reactivity.
 - Primary routes of entry (such as inhalation, skin absorption, ingestion, etc.)
 - Proper conditions and controls for use and exposure (for example, ventilated hood, personal protective equipment, etc.)
 - Appropriate emergency treatment (for example, first aid in case of overexposure).
 - Procedures in case of leaks and spills.
 - Name, phone number and address of Manufacturer.
 - Availability of a written copy of all of this information in the hazardous area (MSDS).

- Similarly, the training for harmful physical agents has or will include the following:
 - The name(s) of the physical agent(s).
 - The source(s) of each agent.
 - Hazardous levels of exposure (if known).
 - Symptoms of exposure.
 - The known short-term or long-term effects of exposure.
 - Appropriate emergency treatment (for example, first aid in case of overexposure).
 - Proper conditions and controls for use and exposure (such as, protective ear plugs during loud operations).
 - If appropriate, the name, phone number, and manufacturer address for the equipment which generates the harmful physical agent.

- Training documentation will be maintained by the Safety Officers.

- Training shall extend to non-routine tasks, as necessary, and to foreseeable emergencies.

- Contractor employees will be advised of the provisions of our company's hazard communication program. Contractor employees shall be provided ready access to the MSDSs and list of hazardous materials.

Labeling:

- Each container of hazardous chemical shall be labeled, tagged, or otherwise marked with the identity of the hazardous chemical (or chemicals), the appropriate hazard warning, and the name and address of the manufacturer.
- Upon delivery to BELAIR, all original containers of hazardous substances need to be checked to ensure the above criteria are met by the container label.
- All breakdown/secondary containers to which the substance(s) will be transferred need to have the required label information. Labels are not required for immediate use containers from which the employee dispenses a product that is used up in a task performed by that same individual during a single work shift. Labeling requirements do not include piping systems under this standard.
- Labels and other forms of warning will be legible and in English, and will be prominently displayed or readily available in the work area during each shift.
- All equipment or work areas that generate harmful physical agents at a level that may be expected to approximate or exceed OSHA or other applicable standards are labeled with the identification of the harmful physical agent, an appropriate hazard warning, and required personal protective equipment.

Labeling of Infectious Agents:

- If applicable, infectious agents will be labeled in accordance with a Blood Borne Pathogens Exposure Control Plan.

Non-Routine Hazards:

If employees are required to perform tasks involving hazardous materials or harmful physical agents that have not been covered in their training, they will receive instruction about the hazards involved with the task prior to starting work on the project. The training will include:

- The specific chemical and/or physical hazard.
- Required protective equipment or safety measures.
- Precautions or procedures to follow to reduce or avoid exposure.

Contractor or Other Outside Personnel:

Project Manager is responsible to see that contracts signed by BELAIR will be reviewed by the Safety Officers as needed, to determine Hazard Communication/Right to Know requirements. Contracts with subcontractors should include language which requires the subcontractor(s) to take the necessary steps for compliance with this program.

Subcontractors must:

- Provide necessary program training to their employees.
- Submit current MSDSs and a list of people on the site, as well as those individuals who are trained.
- Submit a letter to the BELAIR stating that he or she has complied with the provisions of this program.

All Job-site contractors must:

- Ensure employees or employees of other contractors are appropriately trained in accordance with the requirements of this plan. For example, if BELAIR is using a hazardous material which affects the employees of subcontractor #1, BELAIR will be responsible for the training of their own employees and the employees of subcontractor #1.
- Alternatively, if subcontractor #1 is using a hazardous material which affects the employees of subcontractor #2, subcontractor #1 shall be responsible for the training of their own employees as well as those of subcontractor #2.

Program Review:

This program will be reviewed annually and amended as changes in work operations, new materials or processes, or new information dictate. Necessary changes will be made under the direction of the Safety Director and the BELAIR National Safety Committee.

Responsibilities and Rights of the Employee:

The employee is responsible to learn and implement Employee Right-To-Know training into their daily work routine. The employee has the right to request information about work place hazards covered under the law and have that information regularly available.

Employees are expected to use the safety equipment supplied to them by the employer when procedures require their use. It is the employee's responsibility to see that the equipment is in good repair prior to using it. If the provided safety equipment is damaged, it should be brought to their immediate supervisor's attention to be repaired or replaced.

It is the employee's responsibility to ask BELAIR Safety personnel or management questions about the employer's Employee Right-To-Know program or about the safe use of hazardous substances or exposure to harmful physical agents. Only by working together in a cooperative manner will we achieve a safe work environment.

LEAD AWARENESS PROGRAM

INTRODUCTION

Removal of lead based paint, where required as a part of demolition or renovation projects, is to be completed by a licensed abatement contractor as a subcontractor to Belair Excavating. The intent of Belair Excavating's Lead Awareness Program is to inform employees of activities that may result in exposure to lead and to provide an overview of the precautions that must be taken when performing lead abatement work. The activities may result in exposure to lead include the following:

- Painting
- Grinding, chipping, or cutting on painted surfaces
- Heat producing work (welding/torching)

CHECKLIST FOR LEAD ABATEMENT WORK BY OTHERS

Federal OSHA has published standards to protect Construction Workers exposed to lead on the job. The action level, or where you have to do something, is employee exposure (when not using respirators) of 30 micrograms per cubic meter, calculated as an eight-hour time weighted average.

Periodic monitoring and certain employee training requirements are triggered when employees are exposed at or above the action level. The employer is required to determine if any worker is exposed to lead at or above the action level. Using objective data or historical data can make this determination.

Some tasks are presumed to expose employees to levels greater than 50 micrograms per cubic meter unless testing proves otherwise. These tasks include the following:

- Welding, oxy-fuel cutting, or abrasive blasting on structures coated with lead base paint (Presumed exposure >2,500 micrograms per cubic meter).
- Manual demolition of dry wall partitions coated with lead based paint (Presumed Exposure >500 micrograms per cubic meter).
- Painting with lead based paint (Presumed Exposure >500 micrograms per cubic meter).
- Scraping walls with lead based paint (Presumed Exposure >500 micrograms per cubic meter).

Contractors must institute engineering and work practice controls to reduce exposure to below 50 micrograms per cubic meter. When these controls are not feasible or practical, workers must use respiratory protection. Employers must develop and implement a written compliance plan prior to working in areas where employee exposure to lead will be over 50 micrograms per cubic meter. See State Coordinator for assistance. Examples of engineering controls include utilizing cutting torches, mechanical shears and the use of exhaust systems.

The types of respirators that can be used in levels over 50 micrograms per cubic meter include the following:

- Up to 500 micrograms per cubic meter:
Half face air-efficiency filters or half face air-supplied in the demand mode.
- Up to 1250 micrograms per cubic meter:
Hood or helmet powered air purifying with high-efficiency filters or helmet air-supplied operated respirators.

Employers utilizing this equipment must have a written respiratory program, which conforms to 29 CFR 1910.134. All workers expected to be exposed above the action level must be trained in the hazards of lead before starting work.

LOCKOUT/TAGOUT PROGRAM

This program establishes the minimum requirements for the lockout or tagout of energy isolating devices. The purpose of a lockout/tagout procedure is to prevent injury or damage from the unexpected energization, startup, or release of stored energy. Many accidents occur from the use of machinery. These accidents often involve electrical shock, burns, moving machinery, or exposure to hazardous material. However, they all share one thing in common: the uncontrolled release of energy. Consequently, all equipment shall be locked out or tagged out to protect from any accidental or inadvertent operation which could cause injury to personnel.

A **lockout** is simply a locking device, such as a padlock, placed on a power source to prevent the release of hazardous energy that could set a machine in motion, or otherwise endanger an employee working on the machine. Locks may be used with a lockout device that holds an energy control point, such as a switch, lever or valve, in the off position, thereby making it impossible to operate.

A **tagout** is a written warning telling others not to operate a switch or valve that could release hazardous energy or set a machine in motion. The tagout is placed prominently on the switch or lever so as not to be missed. Tags must be used when locks cannot be physically installed to isolate devices. The tagging must be as effective as a lock.

Controlling the release of hazardous energy by locking and tagging key points is an effective way of safeguarding workers who operate or repair this equipment. Energy, left uncontrolled, can be extremely dangerous. The term "energy source" as used in this plan includes electricity, gravity, compressed air (pneumatic systems), hydraulic systems, and corrosive or toxic substances. The energy can be from the force caused by a moving object, such as a spinning flywheel, or from an unseen force, such as a spring under tension.

RESPONSIBILITY

Authorized personnel (the Safety Director, the Project Manager, the Foreman, or other personnel designated by the company) shall determine potential sources of energy for equipment or building services prior to starting work. They will be instructed in the safety significance and use of the lockout or tagout procedure.

LOCKOUT - TAGOUT PROCEDURES

WHEN TO LOCKOUT OR TAGOUT

1. Major repair or overhaul.
2. When working alone, out of visual contact of the controlling switch.
3. Any time there is danger of injury from an unexpected release of energy.
4. Any situation that threatens an employee's safety.

SEQUENCE OF LOCKOUT OR TAGOUT PROCEDURES

1. When lockout/tagout procedures are required, the procedures of the owner of the facility or property shall be followed. The following procedure is to be followed in the absence of an owner's procedure.
2. In preparation for lockout or tagout, make a survey to locate and identify all isolating devices in order to be certain which switch, valve, or other energy isolating device(s) apply to the equipment to be locked or tagged out. The Project Manager or Foreman must contact the owner's authorized representative to locate all valves, switches, controls, etc., which affect the systems to be worked on. More than one energy source (electrical, mechanical, or other) may be involved. Caution should be given to multiple energy sources, residual energy, and equipment requiring remote start-up.
3. Notify all affected employees that a lockout or tagout system is going to be utilized and the reason for it. The authorized employee must know the type and magnitude of energy that the machine or equipment utilizes, and must understand the associated hazards.
4. If the machine or equipment is operating, shut it down by the normal stopping procedure. Coordinate the shut down with the owner's representative.
5. Operate the switch, valve, or other energy isolating devices so that the equipment is isolated from its energy source. Stored energy (springs, elevated machine members, rotating flywheels, hydraulic systems, and air, gas, steam, or water pressure) must be dissipated or restrained by a method such as repositioning, blocking, bleeding down, etc.
6. The Project Manager or Foreman will issue the locks to authorized employees and maintain a log containing the number of the lock, the name of the employee requesting it, the equipment to be locked, and the date(s) of the lockout and removal.
7. Position the switches or valves to OFF position and attach the lockout device

and lock. Attach a "Danger, Do Not Operate", tag with your signature and the current date in a conspicuous location.

8. Check to make sure equipment cannot be started, piping systems are drained and/or pressure released, mechanical energy is dissipated or restrained, etc. After ensuring no personnel are exposed, and as a check on having disconnected the energy sources, operate the push button or other normal operating controls to make certain the equipment will not operate. CAUTION: Return operating controls to the neutral or off position after the test. The equipment is now locked out or tagged out.
9. When more than one crew performs work on the system, each crew foreman shall affix a lock or tag on the disconnect or physical isolating device. Multiple lock devices are to be used on systems requiring more than one lock.

RESTORING MACHINES OR EQUIPMENT TO NORMAL PRODUCTION

The following steps are to be taken when restoring locked equipment:

1. Notify the owner's representative.
2. Notify personnel in the start up area. Ensure no personnel are exposed.
3. Clear all tools and repair equipment
4. After all tools have been removed from the machine or equipment, guards have been reinstalled, and employees are in the clear, remove all lockout/tagout devices to restore energy to the machine or equipment.
5. Locks and tags shall only be removed by authorized personnel. No employee may remove the lock of another employee, except by the following procedure.
 - a. Attempt to reach the person who installed the lock to determine equipment status.
 - b. Notify the BELAIR Safety Director.
 - c. The BELAIR Safety Director, the Owner's representative, and the supervisor of the employee whose lock is to be removed will make a decision about lock removal. They will inspect the equipment to see if a work order has been completed when required, if necessary guards have been replaced, and if tools are cleared from the machinery.
 - d. Notify personnel in the area of startup and follow the unlocking procedures outlined earlier in this plan.

RESPIRATORY PROTECTION PROGRAM

PURPOSE:

The purpose of the BELAIR Respiratory Protection Program is to ensure employees are protected from respiratory hazards through the proper use of respirators. Respirators will be used only where engineering control of respiratory hazards is not feasible, while engineering controls are being installed, or in emergency situations.

RESPONSIBILITIES:

- The Respiratory Protection Program is administered by the BELAIR Safety Director. The Safety Director is responsible for all facets of this program and has full authority to make the decisions necessary to ensure the success of the program. This authority includes the hiring of personnel and the equipment purchases that are necessary to implement and operate the program. The Safety Director is the sole person authorized to amend this plan. BELAIR has expressly authorized the Safety Director to halt any operation of the company where there is danger of serious personal injury. This policy includes respiratory hazards.
- Employees and their supervisors are responsible for complying with the elements of this program.

PROCEDURES:

- Employees will not be assigned to tasks requiring the use of respirators unless it has been determined that they are physically able to perform the work and use the equipment. A physician will determine what health and physical conditions are pertinent. The respirator user's medical status will be reviewed annually by the state designee, or before and after working on environmental sites, whichever is applicable.
- Respirators and their appropriate accessories (for example filter canisters) will be selected on the basis of the hazard(s) to which the worker is exposed. All selections will be made by the Safety Director. Only MSHA/NIOSH certified respirators will be selected and used. Single strap respiratory protection devices are not to be used for any purpose.
- Respirators will not be worn under conditions preventing a good face seal. Such conditions may be a growth of beard, sideburns, interference from eyeglasses or safety glasses, or the absence of dentures. Employees of the company who are required to wear respirators cannot have facial hair that interferes with the face seal of the respirator.
- A record detailing the issuance of respirators, as well as the physician determination of physical fitness, will be maintained by the Safety Director.

- To ensure adequate protection, the face piece fit must be checked by the wearer each time he or she puts on the respirator. This must be done in accordance with the manufacturer's face piece-fitting instructions. The respirator user must also be qualitatively fit tested before wearing the respirator. If the respirator is being used to protect the worker from a substance for which OSHA has a specific expanded health standard, i.e. lead or asbestos, the fit-testing instructions in that standard will be followed.
- Respirators must be regularly cleaned and disinfected. Those issued for the exclusive use of one worker will be cleaned after each day's use, or more often if necessary. Those used by more than one worker will be thoroughly cleaned and disinfected after each use. Respirators and their accessories must be stored in a clean and safe location. Filters must be replaced according to the manufacturer's instructions.
- Respirators that are used routinely must be inspected during cleaning. Worn or deteriorated parts must be replaced. Respirator component parts cannot be interchanged between different manufacturers. Respirators for emergency use, such as a self-contained breathing apparatus (SCBA), must be thoroughly inspected at least once each month and after each use by the state designee. Inspection for SCBA breathing gas pressure will be performed weekly.
- An inventory of all respirators and filters used by BELAIR will be maintained by the State Designee.
- Contact lenses cannot be worn while using a respirator.
- Periodic surveillance of work area conditions, and the degree of employee exposure, will be conducted by the Safety Director or other qualified individual. This is to ensure respirators are properly selected, used, cleaned, and maintained.

RESPIRATOR TRAINING:

- Both supervisors and workers will be taught the proper selection, use, and maintenance of respirators.
- The user will be instructed and trained in the proper use of respirators, as well as their limitations. This training must provide the employee an with an opportunity to handle the respirator, have it fitted properly, test its face piece-to-face seal, and wear it in a test atmosphere. Every respirator wearer will receive fitting instructions, including demonstrations and practice in how the respirator should be worn, how to adjust it, and how to determine if it fits properly.
- Training will include an explanation of the following:

- The nature of the respiratory hazard and what may happen if the respirator is not used properly.
- Engineering and administrative controls being used and the need for the respirator as added protection.
- Reason(s) for selection of a particular type of respirator.
- Limitations of the selected respirator.
- Methods of donning the respirator and checking its fit and operation
- Proper wear of the respirator.
- Respirator maintenance and storage.
- Proper methods for the handling of emergency situations.

RESPIRATOR FIT TESTING:

- Qualitative fit tests are performed by the Safety Director or State Safety Coordinator. In addition, since employees may work on environmental site projects sporadically, respirators are usually not issued to the individual. Consequently, fit tests are re-administered each time a respirator is assigned to an employee.
- As noted earlier in this plan, the respirator wearer must perform a fit check each time he/she dons the respirator.
- The BELAIR fit test record (2.16-11) is used for each qualitative fit test that is performed.

It is important to realize that improper respirator use or maintenance may result in overexposure to the hazard(s) the respirator is designed to provide protection for. This could result in illness, chronic disease, or even death depending on the hazards involved. It is imperative that a respirator be used correctly if it is to provide the protection it is designed for.

Conversely, respirators need to be cleaned and properly stored after every use. A respirator cannot be used by another person without permission and inspection by a Belair environmental supervisor, or safety official. Any and all acute or chronic diseases or illnesses must be reported to your supervisor or safety official immediately upon knowledge and confirmation of same. Failure to do so may include up to termination. The health and safety of every individual at Belair is a top priority and must be protected.

OSHA RESPIRATOR MEDICAL EVALUATION QUESTIONNAIRE
MANDATORY

To the Employer: Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination.

To the employee:

Can you read? (circle one): Yes / No

Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

Part A. Section 1. (Mandatory) The following information must be provided by every employee who has been selected to use any type of respirator (please print).

1. Today's Date: _____
2. Your Name: _____
3. Your age (to nearest year): _____
4. Sex (circle one): Male / Female
5. Your height: _____ ft. _____ in.
6. Your weight: _____ lbs.
7. Your job title: _____
8. A phone number where you can be reached by the health care professional who reviews this questionnaire (include Area Code): _____
9. The best time to phone you at this number: _____
10. Has your employer told you how to contact the health care professional who will review this questionnaire? (circle one) Yes / No
11. Check the type of respirator you will use (you can check more than one category)
 - a. _____ N, R, or P disposable respirator (filter-mask, non-cartridge type only)

- b. _____ Other type (for example, half or full-face piece type, powered-air purifying, supplied-air, self-contained breathing apparatus).

12. Have you worn a respirator? (circle one) Yes / No

If "yes", what type(s)

Part A. Section 2. (Mandatory) Questions 1 through 9 must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month:
Yes / No
2. Have you ever had any of the following conditions?
 - a. Seizures (fits): Yes / No
 - b. Diabetes (sugar disease): Yes / No
 - c. Allergic reactions that interfere with your breathing: Yes / No
 - d. Claustrophobia (fear of closed-in places): Yes / No
 - e. Trouble smelling odors: Yes / No
3. Have you ever had any of the following pulmonary or lung problems?
 - a. Asbestosis: Yes / No
 - b. Asthma: Yes / No
 - c. Chronic bronchitis: Yes / No
 - d. Emphysema: Yes / No
 - e. Pneumonia: Yes / No
 - f. Tuberculosis: Yes / No
 - g. Silicosis: Yes / No
 - h. Pneumothorax (collapsed lung): Yes / No
 - i. Lung Cancer: Yes / No
 - j. Broken ribs: Yes / No
 - k. Any chest injuries or surgeries? Yes / No
 - l. Any other lung problem that you've been told about: Yes / No
4. Do you currently have any of the following symptoms of pulmonary or lung illness?
 - a. Shortness of breath? Yes / No
 - b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes / No
 - c. Shortness of breath when walking with other people at an ordinary pace on level ground: Yes / No
 - d. Have to stop for breath when walking with other people at any ordinary pace on level ground: Yes / No
 - e. Shortness of breath when washing or dressing yourself: Yes / No
 - f. Shortness of breath that interferes with your job: Yes / No

- g. Coughing that produces phlegm (thick sputum): Yes / No
 - h. Coughing that wakes you early in the morning: Yes / No
 - i. Coughing that occurs mostly when you are lying down: Yes / No
 - j. Coughing up blood in the last month: Yes / No
 - k. Wheezing: Yes / No
 - l. Wheezing that interferes with your job: Yes / No
 - m. Chest pain when you breathe deeply: Yes / No
 - n. any symptoms that you think may be related to lung problems: Yes / No
5. Have you ever had any of the following cardiovascular or heart problems?
- a. Heart attack: Yes / No
 - b. Stroke: Yes / No
 - c. Angina: Yes / No
 - d. Heart failure: Yes / No
 - e. Swelling in your legs or feet (not caused by walking): Yes / No
 - f. Heart arrhythmia (heart beating irregularly): Yes / No
 - g. High blood pressure: Yes / No
 - h. Any other heart problem that you've been told about: Yes / No
6. Have you ever had any of the following cardiovascular or heart symptoms?
- a. Frequent pain or tightness in your chest: Yes / No
 - b. Pain or tightness in your chest during physical activity: Yes / No
 - c. Pain or tightness in your chest that interferes with your job: Yes / No
 - d. In the past two years, have you noticed your heart skipping or missing a beat: Yes / No
 - e. Heartburn or indigestion that is not related to eating: Yes / No
 - f. Any other symptoms that you think may be related to heart or circulation problems: Yes / No.
7. Do you currently take medication for any of the following problems?
- a. Breathing or lung problems: Yes / No
 - b. Heart trouble: Yes / No
 - c. Blood pressure: Yes / No
 - d. Seizures (fits): Yes / No
8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator, check the following space and go to question 9)
- a. Eye irritation: Yes / No
 - b. Skin allergies or rashes: Yes / No
 - c. Anxiety: Yes / No
 - d. General weakness or fatigue: Yes / No
 - e. Any other problem that interferes with your use of a respirator: Yes / No
9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire: Yes / No

Questions 10 to 15 below must be answered by every employee who has been selected to use either a full-face piece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

10. Have you ever lost vision in either eye (temporarily or permanently): Yes / No
11. Do you currently have any of the following vision problems?
 - a. Wear contact lenses: Yes / No
 - b. Wear glasses: Yes / No
 - c. Color blind: Yes / No
 - d. Any other eye or vision problem: Yes / No
12. Have you ever had any injury to your ears, including a broken ear drum: Yes / No
13. Do you currently have any of the following hearing problems?
 - a. Difficulty hearing: Yes / No
 - b. Wearing a hearing aid: Yes / No
 - c. Any other hearing or ear problem: Yes / No
14. Have you ever had a back injury: Yes / No
15. Do you currently have any of the following musculoskeletal problems?
 - a. Weakness in any of your arms, hands, legs, or feet: Yes / No
 - b. Back pain: Yes / No
 - c. Difficulty fully moving your arms and legs: Yes / No
 - d. Pain or stiffness when you lean forward or backward at the waist: Yes / No
 - e. Difficulty moving your head up or down: Yes / No
 - f. Difficulty fully moving your head side to side: Yes / No
 - g. Difficulty bending at your knees: Yes / No
 - h. Difficulty squatting to the ground: Yes / No
 - i. Climbing a flight of stairs or a ladder carrying more than 25 lbs: Yes / No
 - j. Any other muscle or skeletal problem that interferes with using a respirator: Yes / No

Part B. Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen: Yes / No

If "yes", do you have feelings of dizziness, shortness or breath, pounding in your chest, or other symptoms when you're working under these conditions: Yes / No

2. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals: Yes / No

If "yes", name the chemicals if you know them:

3. Have you ever worked with any of the materials, or under any of the conditions, listed below:

- a. Asbestos: Yes / No
- b. Silica (e.g., in sandblasting): Yes / No
- c. Tungsten/cobalt (e.g., grinding or welding this material): Yes / No
- d. Beryllium: Yes / No
- e. Aluminum: Yes / No
- f. Coal (for example, mining): Yes / No
- g. Iron: Yes / No
- h. Tin: Yes / No
- i. Dusty environments: Yes / No
- j. Any other hazardous exposures: Yes / No

If "yes", describe these exposures:

4. List any second jobs or side businesses you have:

5. List your previous occupations:

6. List your current and previous hobbies:

7. Have you been in the military service? Yes / No

If "yes", were exposed to biological or chemical agents (either in training or combat): Yes / No

8. Have you ever worked on a HAZMAT team? Yes / No

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the counter medications): Yes / No

If "yes", name the medications if you know them:

10. Will you be using any of the following items with your respirator(s)?

- a. HEPA Filters: Yes / No
- b. Canisters (for example, gas masks): Yes / No
- c. Cartridges: Yes / No

11. How often are you expected to use the respirator(s) (circle "yes" or "no" for all answers that apply to you:

- a. Escape only (no rescue): Yes / No
- b. Emergency rescue only: Yes / No
- c. Less than 5 hours per week: Yes / No
- d. Less than 2 hours per day: Yes / No
- e. 2 to 4 hours per day: Yes / No
- f. Over 4 hours per day: Yes / No

12. During the period you are using the respirator(s), is your work effort:

- a. Light (less than 200 kcal per hour): Yes / No

If "yes", how long does this period last during the average shift:
_____ hrs. _____ min.

Examples of a light work effort are sitting while writing, typing, drafting, or performing light assembly work; or standing while operating a drill press (1-3 lbs.) or controlling machines.

- b. Moderate (200 to 350 kcal per hour): Yes / No

If "yes", how long does this period last during the average shift:
_____ hrs _____ min.

Examples of moderate work effort are sitting while nailing or filing; driving a truck or bus in urban traffic; standing while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; walking on a level surface about 2 mph or down a 5-degree grade about 3 mph; or pushing a wheelbarrow with a heavy load (about 100 lbs.) on a level surface.

c. Heavy (above 350 kcal per hour): Yes / No

If "yes", how long does this period last during the average shift:
_____ hr _____ min

Examples of heavy work are lifting a heavy load (about 50 lbs.) from the floor to your waist or shoulder, working on a loading dock; shoveling; sanding while bricklaying or chipping castings; walking up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).

13. Will you be wearing protective clothing and/or equipment (other than the respirator) when you're using your respirator: Yes / No If "yes", describe this protective clothing and/or equipment

14. Will you be working under hot conditions (temperature exceeding 77 deg. F): Yes / No

15. Will you be working under humid conditions: Yes / No

16. Describe the work you'll be doing while you're using your respirator(s)

17. Describe any hazardous conditions you might encounter when you're using your respirator(s) (for example, confined spaces, life-threatening gases):

18. Provide the following information, if you know it, for each toxic substance that you'll be exposed to when you're using your respirator(s):

Name of first toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

Name of the second toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

Name of the third toxic substance: _____

Estimated maximum exposure level per shift: _____

Duration of exposure per shift: _____

The name of any other toxic substances that you'll be exposed to while using your respirator:

19. Describe any special responsibilities you'll have while using your respirator(s) that may affect the safety and well-being of others (for example, rescue, security):

Respirator Fit Test Record

A. Employee: _____ Date: _____
Employee No.: _____
Employee Job Title / Description: _____

B. Employer: _____
Location / Address: _____

C. Respirator Selected: _____
Manufacturer: _____

D. Conditions which could affect respirator fit:
Clean Shaven Facial Scar
1 - 2 Day Beard Growth Dentures Absent
2 + Days Beard Growth Glasses
Moustache None
Comments: _____

E. Fit Checks:
Negative Pressure Pass Fail Not Done
Positive Pressure Pass Fail Note Done

F. Fit Testing
Quantitative Fit Factor _____
Qualitative Isoamyl Acetate Bitrex
Pass Fail Pass Fail

Comments: _____

G. Employee acknowledgment of test results:
Employee Signature: _____ Date: _____
Test Conducted By: _____ Date: _____

DISCLAIMER

The above respirator fit test was performed on and by the persons listed. The results indicate the performance of the listed respiratory protective device, as fitted on the employee named on this record under controlled conditions. Fit testing as performed measures the ability of the respiratory protective device to provide protection to the individual tested. The test conductor expresses or implies no guarantee that this or an identical respiratory protective device will provide adequate protection under conditions other than those present when this test was performed. Improper use, maintenance, or application of this or any other respiratory protective device will reduce or eliminated protection.

SILICA AWARENESS PROGRAM

INTRODUCTION

Exposure to respirable crystalline silica dust during construction activities can cause silicosis, a serious and potentially fatal respiratory disease. Employers and workers can take steps to reduce risks.

BACKGROUND INFORMATION

Silicosis is a scarring and hardening of lung tissue, can result when particles of crystalline silica are inhaled and become embedded in the lung. The disease can be progressively debilitating and fatal. In construction, workers can be easily exposed to silica when using rock containing silica or concrete and masonry products that contain silica sand.

OVERVIEW FOR REDUCING SILICA EXPOSURE

Even materials containing small amounts of crystalline silica may be hazardous if they are used in ways that produce high dust concentrations.

Specific tasks that may release silica on construction sites include:

- Sandblasting
- Rock drilling
- jack hammering
- Tunneling
- Drywall sanding
- *Demolition of concrete or masonry structures*
- Crushing, loading, hauling, dumping rock or concrete
- Chipping, grinding, sawing concrete, masonry or rock
- Dry sweeping concrete, sand, or rock dust

OSHA looks primarily at worker exposure to silica. However, they have publicly stated they will not limit inspections strictly to silica exposure. Other things related to silica that they will review include:

- Respirator usage (written program, medical evaluations, fit testing, training).
- Hearing protection (exposure measurements, use of hearing protectors, establishment of a hear conservation program).
- Hazard communication program (hazard of silica, MSDS for silica).
- Personal protective equipment (eye, face, head and foot protection).
- Ventilation, accident prevention signs, access to medical records, washing facilities, safety nets, safety and health program, training.

CHECKLIST FOR REDUCING SILICA EXPOSURE

The following measures are recommended to reduce exposure to respirable crystalline silica in the workplace and to prevent silicosis and deaths in construction workers:

- Recognize when silica dust may be generated and plan ahead to eliminate or control the dust at the source. Awareness and planning are keys to prevention of silicosis.
- Do not use silica sand or other substances containing more than 1% crystalline silica as abrasive blasting materials. Substitute less hazardous materials.
- Use engineering controls and containment methods such as blast cleaning machines and cabinets, wet drilling, or wet sawing of silica-containing materials to control the hazard and protect adjacent workers from exposure.
- Routinely maintain dust control systems to keep them in good working order.
- Practice good personal hygiene to avoid unnecessary exposure to other work site contaminants such as lead.
- Wear disposable or washable protective clothes at the work site.
- Shower (if possible) and change into clean clothes before leaving the work site to prevent contamination of cars, homes and other work areas.
- Conduct air monitoring to measure worker exposure and ensure that controls are providing adequate protection for workers.
- Use adequate respiratory protection when source controls cannot keep silica exposures below acceptable levels.
- Provide periodic medical examinations for all workers who may be exposed to respirable crystalline silica.
- Post warning signs to mark boundaries of work area contaminated with respirable crystalline silica.
- Provide workers with training that includes information about health effects, work practices, and protective equipment for respirable crystalline silica.

Employee exposure to silica must be controlled. Implementation of a successful exposure control program includes the following parts:

- I. **Pre-planning, identify exposures.**
- II. **Engineering Controls** – determine feasible controls to reduce exposure to silica (i.e. wet sawing and drilling).
- III. **Administrative Controls** – coordination of job activities to minimize silica exposure to workers.
- IV. **Personal Protective Equipment** – evaluate the effectiveness of engineering and administrative controls and incorporate appropriate PPE use into program to reduce exposures (i.e. respirators).
- V. **Respirator Selection** – selection based on air monitoring results.
- VI. **Personal Hygiene** – personal responsibility for clean eating areas, personal contamination and proper PPE.
- VII. **Employee Training** – all workers should be trained to a minimum level of at least a Hazard Communication awareness of silica.
- VIII. **Air Monitoring** – should be done to ensure appropriate user level for respirators.
- IX. **Medical Monitoring** – if required or needed, the exam should be done by a qualified medical provider.

Rough Draft
Days without a Lost Work Day Accident

Program Guidelines

Dated: 2 27 07

By: PAS

Sub-Mission statement:

A desire by Belair to decrease the amount of accidents/incidents, through awareness that we need to increase the numbers of days between our lost work day accidents as much as possible. This awareness should also improve our odds for the success and implementation of Belair's zero injury program culture.

Premise:

Because safety is typically dry and uninteresting, it only takes a few uninformed employees to counter productive energy, rather than placing their efforts as a team member towards solving a problem.

Having a program like this is designed pull everyone together, lighten things up a bit, and make safety more enjoyable.....and successful.

Guidelines:

1. The committee will meet on the 5th of each month at 2:30 to 3:PM
2. Monthly postings will be done at that time, if they have not been kept up to date by the State education coordinator.
3. The State with the least days without a lost day accidents will have to suffer giving their report to the rest of the group.
4. At the end of the year, the winning State will take home a trophy to keep for one year.
5. The losing States will fund a meal for all the employees of the successful State.
6. Any appeals can go through the Director or the National Safety Committee.

End