

APPENDIX 4 – ATTACHMENT 1

DESCRIPTORS OF SELECT SAFETY & HEALTH MANAGEMENT SYSTEM COMPONENTS

I. HAZARD ANTICIPATION & DETECTION

- 1. A comprehensive, baseline hazard survey has been conducted within the past five (5) years.**

We conduct baseline hazard surveys in a number of areas, including industrial job hazard analyses (JHAs), lockout/tagout standard operating procedures, site-specific confined space inventory with space hazard identification, comprehensive lead-based paint/lead-based materials management program, drinking water quality, and office area safety inspections. Hazards identified during the survey are corrected onsite or scheduled for correction through the issuance of a tracking sheet. Hazards are scheduled for remediation through either administrative and/or engineering controls and proper PPE identified using JSA.

- 2. Effective safety and health self-inspections are performed regularly.**

We exceeded the annual inspection requirements of all workspace, as required by Title 29 of the Code of Federal Regulations (CFR), Part 1960.25(c). We inspect most offices semi-annually for compliance with all Occupational Safety and Health Administration (OSHA) regulations using Form SSA-5510-BK, Office Safety Inspection Worksheet. We inspect larger facilities annually using Form SSA-5510-BK and conduct follow-up inspections within 90 days. Inspections of facilities with high hazard operations also include Form SSA-3510-BK, High Hazard Safety Inspection Worksheet. As required by 29 CFR 1960.25(c), we conduct a sufficient number of unannounced inspections and unannounced follow-up inspections to ensure we identify and abate the hazardous conditions. The component or facility manager corrects identified hazards immediately or within 30 days. In accordance with 29 CFR 1960.30(c), they also prepare an abatement plan for any hazards requiring more than 30 days for correction.

- 3. Effective surveillance of established hazard controls is conducted.**

We conduct surveillance of established hazard controls in addition to regularly scheduled occupational health and safety inspections. We query the Form SSA-516 (Occupational Injury and Illness Report) database, investigate injuries/illnesses, and initiate corrective action for any hazard controls not in place, such as engineering controls, personal protective equipment, safety rules and safe work practices, and safe and healthful working conditions. In addition, we monitor our Automated Incident Reporting System daily for any incidents that have any degree of an unsafe or unhealthful working practice or condition. Our Employee Health Units also provide immediate feedback when an employee reports for treatment related to these practices or conditions. New supervisors attend a Personnel Management Workshop that includes an orientation of the agency's environmental health and safety (EHS) program with an emphasis on their role in monitoring employees' health and safety in the workplace. Online training is also required for supervisors and collateral duty health and safety representatives.

4. Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs.

When a change in facilities, equipment, materials, or processes occurs, those responsible for buildings management, operations, EHS, protective security, emergency preparedness, etc., review all aspects of the project. Where EHS issues arise, those responsible address the issues during the design phase of the project. EHS personnel routinely observe project implementation sites for worker adherence to EHS regulations and requirements to assure SSA employee and contractors' health and safety.

5. Safety Data Sheets (SDSs, aka MSDSs) are used to reveal potential hazards associated with chemical products in the workplace.

We use the proprietary software SDSpro, which is a SDS and chemical inventory management software. The software makes SDSs and inventories available to all agency locations via the SSA intranet and allows for electronic management of the approval process. As new products are proposed for use, purchased, or otherwise brought onto SSA property, the onsite supervisor/team leader submits an SDS to the Office of Environmental Health and Occupational Safety (OEHOS) for processing. If a shop will store the product, OEHOS updates its inventory and uploads a current SDS to the intranet for ease of access.

Typically, SSA field office and regional office employees do not use chemicals in their employment. In the rare occasion when an employee's position does require occupational use of chemicals, the Regional Hazard Communication (HazCom) Coordinators send an SDS to OEHOS. An OEHOS Industrial Hygienist reviews the SDS and analyzes the product(s) for potential hazards. OEHOS uploads the SDS and related information about use, location, etc., into SDSpro for ease of access and recordkeeping. OEHOS provides the results of its review to the Regional HazCom Coordinators so they can update their records and disseminate the information to Local HazCom Coordinators. If a product is approved for use as proposed, OEHOS adds it to the list of chemicals and the SDS book for the field office. When applicable, local HazCom Coordinators maintain a list of chemicals employed in their operations and ensures that SDSs are available for employee use; all hazardous chemicals in the facility are properly labeled; and the information on the label is consistent with information on the SDS. The SDS are reviewed for all chemicals in our field offices. Field office employees and Regional Center for Material Resources have access through SDS software maintained by headquarters staff via regional contacts.

II. HAZARD PREVENTION & CONTROL

6. Feasible engineering controls are in place.

We use qualified experts to assess processes, equipment, and facilities for hazards and design work environments and jobs with engineering controls to eliminate hazards or reduce exposure to hazards. We design the facility, equipment, or process to remove any hazard or substitute something that is not hazardous. If removal of the hazard is not possible, we enclose the hazard, establish barriers, or use local ventilation to prevent employee exposure. The agency has Standard Operating Procedures in place as administrative controls to prevent and control hazards in the workplace.

7. Effective safety and health rules and work practices are in place.

We have established workplace rules that support our EHS program. Management and employee unions agreed to ban smoking on SSA premises nationwide. We installed signs in high-hazard work areas that support safety regulations for the applicable work operation. Examples include personal protective equipment reminders (e.g., “Hearing protection required,” “Hard hat required,” etc.) and “Not an exit” where a passage could be mistaken for an exit. Supervisors conduct periodic safety meetings with employees to emphasize safety rules and proper work procedures to minimize hazards. We also established an appliance and space heater policy that prohibits employees from having personal space heaters and appliances with heating elements in their workstations to eliminate potential fire hazards within the work areas. Employees have access to appliances, such as microwaves and refrigerators, in approved appliance centers.

In addition, safety and work practices are communicated through the agency’s administrative policies, union notifications, Job Safety Analysis, onsite binders, Building Modification Requests and project review teams.

8. Applicable OSHA-mandated programs are effectively in place.

All programs applicable to SSA and mandated by OSHA are effectively in place at SSA. These include, but are not limited to, accident/illness reporting, recordkeeping, and investigation; workplace inspections; asbestos management; bloodborne pathogens; confined space management; agency self-evaluations; equipment maintenance and safety; personal protective equipment; hazard communication; indoor air quality; lead management; employee training; waste management; water intrusion/flooding; and drinking water quality.

EHS programs have been fully and effectively implemented via our website and annual safety inspections, high hazard inspections, project review teams and comprehensive assessments.

9. An effective procedure for tracking hazard correction is in place.

We document identified hazards in writing and establish and monitor due dates for corrective action. Building managers or components responsible for correcting hazards must submit an abatement plan if they cannot correct the hazard within 30 calendar days. The abatement plan must provide a brief description of the hazard and its location, a brief explanation of why the hazard cannot be resolved within 30 days, interim measures taken to protect employees, and the projected completion date for the corrective action. The abatement plan is not complete until the building manager or responsible component provides the date when they finalized the abatement. Industrial hygienists, safety and occupational health specialists, and collateral duty personnel follow up on the implementation of abatement plans to assure the correction of hazards. All findings are documented in a database to track remediation of the hazard until completion.

III. PLANNING & EVALUATION

10. Hazard incidence data are effectively analyzed.

We query the Form SSA-516 (Occupational Injury and Illness Report) database, investigate injuries/illnesses, and initiate corrective action for any hazard controls not in place, such as engineering controls, personal protective equipment, safety rules and safe work practices, and safe and healthful working conditions. In addition, we monitor our Automated Incident Reporting System daily for any incidents that have any degree of unsafe or unhealthful working practices or conditions. Our Employee Health Units also provide immediate feedback when an employee reports for treatment related to the practices or conditions. We analyze data from these sources to determine trends and identify program areas to focus our preventive efforts.

11. An action plan designed to accomplish the organizations safety and health objectives is in place.

We have established an extensive action plan to accomplish our safety and health objectives. It includes the following actions:

- Periodic conference calls with regional and field offices;
- Reviewing and investigating SSA-516 occupational injury/illness data base cases, Automated Incident Reporting System reports, and Medical Office reports to determine if a hazard exists, and if so, to initiate corrective action;
- Developing a Job Safety Analysis protocol and Personal Protective Equipment Certification Program;
- Annual reviews of our written EHS programs including our Respiratory Protection Program, Hearing Conservation Program, Self-Contained Breathing Apparatus

usage, Confined Space Entry, Blood Borne Pathogens, HazCom, and Lockout/Tagout;

- Developing a Contractor Safety Management Program, including a contractor review protocol;
- Maintaining a comprehensive organizational Environmental Management System (EMS);
- Maintaining a SharePoint electronic filing system;
- Enforcing our employee appliances with heating elements policy;
- Establishing metrics for the performance management system; and
- Developing an SSA Americans with Disabilities Act/Architectural Barriers Act program.

Utilizing our assignment tracking system, EHS staff are assigned to complete actions associated with EHS objectives to completion.

12. A review of the overall safety and health management system is conducted at least annually.

We conduct annual comprehensive assessment audits of our EHS management system nationwide. These assessments evaluate the extent to which EHS programs in the field comply with regulatory standards, union/management agreements, and internal policies and procedures. EHS professionals visit field facilities and assess compliance in areas such as fire protection, electrical safety, egress, HazCom, injury/illness reporting, training, and asbestos awareness. A review of compliance trends in these areas show a pattern of improving compliance during each assessment period. As a follow-up to these assessments, we conduct teleconferences with regional and field office personnel to discuss EHS issues. We developed an organizational EMS that documents our commitment to environmental conservation and provides a tracking and reporting mechanism to monitor programs with significant environmental impacts. In addition, we conduct an annual review of EHS programs.

IV. ADMINISTRATION & SUPERVISION

13. Safety and health program tasks are each specifically assigned to a person or position for performance or coordination.

We assign EHS program tasks to specific individuals and positions. The EHS professional staff is responsible for specific program areas and Regions. Supervisors are responsible for investigating all accidents involving their employees and ensuring their work processes and employees follow OSHA regulations and agency standards that are more stringent than OSHA regulations. Building managers and field services personnel are responsible for ensuring the physical building environment meets these standards as well. All these assignment are formalized via the assignment tracking system.

14. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.

As required by 29 CFR 1960.55 through 1960.59, our employees, managers, supervisors, health and safety representatives, committee members, safety and occupational health specialists, industrial hygienists, collateral duty personnel and contractors under our supervision receive training in recognizing EHS hazards and implementing corrective action. EHS professional staff members have educational backgrounds and training in EHS and related fields. EHS national program managers attend biweekly meetings to share timely information related to the programs and initiate action plans where necessary. They also coordinate and participate in teleconferences with regional and field office personnel who have EHS duties.

15. Individuals with assigned safety and health responsibilities have authority to perform their duties.

Our Administrative Instructions Manual System (AIMS), General Administration Manual Chapter 13.04: Safety, Health and Fire Standards, establishes formal policies, including specific responsibilities and authorities for the Commissioner, Regional Commissioners, managers and component heads, supervisors, employees, and health and safety representatives related to the EHS program.

During renovation/demolition activities, EHS staff have the authority to decide whether the construction document complies with applicable health and safety standards. SSA has a dedicated budget for supplies, equipment and services. EHS staff have the authority to enforce regulatory standards related to tasks involved with each project.

16. Individual with assigned safety and health responsibilities have the resources to perform their duties.

The DASHO has delegated the Director for OEHOS to oversee the EHS program and advise all levels of management and employees in fulfilling the program requirements. The agency provides OEHOS and all others with EHS responsibilities with adequate equipment and funding to perform all of these program responsibilities.

17. Organizational policies promote the performance of safety and health responsibilities.

We require complete performance of employee safety and health responsibilities and reward this performance. Our AIMS establishes formal EHS policies and three AIMS chapters address EHS requirements and performance: 1) Organization, Staffing, and Program Elements; 2) Safety, Health, and Fire Standards; and 3) Occupational Injury and Illness Reporting Requirements. Employee performance plans include elements emphasizing conformance with general and specific EHS regulations related to the specific job.

Inter-component collaboration (project review teams, safety round table and health and safety committees) promote an environment that supports EHS awareness.

V. SAFETY & HEALTH TRAINING

18. Employees receive appropriate safety and health training (including those assigned overseas).

We provide a wide range of regulatory and policy-driven safety and health training for employees via classroom, videos on demand, and online including:

- Workstation ergonomics;
- Office safety;
- Preventing slips, trips, and falls;
- HazCom;
- Preventing back injuries;
- Managing stress;
- Distracted driving;
- Lockout/tagout;
- Confined space;
- Asbestos management planner;
- Asbestos inspector;
- Asbestos Project designer;
- HAZWOPER;
- Asbestos supervisor;
- Hazardous waste management (Resource Conservation and Recovery Act and Department of Transportation);
- Asbestos and Lead Awareness
- First aid, cardiopulmonary resuscitation, and automated external defibrillator;
- Respiratory protection and fit testing;
- Underground storage tanks;
- Bloodborne pathogens;
- SDS Pro;
- Forklift, crane, and hoist safety;
- Electrical safety;
- Machine guarding;
- Walking/working surfaces;
- Welding, cutting, and brazing;
- Job hazard analysis;
- Incident investigation;
- Environmental Protection Agency Method 9;
- Water intrusion awareness for managers;

SSA did not have any civilian employees that worked overseas during this reporting period.

19. New employees' orientation includes applicable safety and health information.

We provide new employee orientation that includes training on adherence to health and safety regulations. One example is that new shop employees (carpenters, plumbers, etc.) receive a health and safety binder with job-specific JSA and required PPE. We also provide new employees with training specific to their occupations (see previous item above). The DASHO of Budget Finance Quality and Management provides new employee orientation. The orientation focuses on several EHS topics.

20. Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.

Supervisors and managers attend regional EHS training that includes an orientation of the agency's EHS program that focuses on their role in monitoring EHS in the workplace. EHS professionals provide the orientation, which includes an overview of Federal EHS regulations, agency-specific regulations, supervisory EHS responsibilities, injury/illness reporting, safety inspections, hazard recognition, indoor air quality, asbestos management, water quality, and initiation of corrective action for unsafe conditions. Online training is also required for supervisors and collateral duty health and safety representatives.

VI. MANAGEMENT LEADERSHIP

21. Top management policy establishes clear priority for safety and health.

Formal SSA policy is established through the SSA AIMS. Three AIMS chapters address EHS requirements and performance: 1) Organization, Staffing, and Program Elements; 2) Safety, Health, and Fire Standards; and 3) Occupational Injury and Illness Reporting Requirements. Top-level management reinforces these policies and establishes a clear priority for occupational health and safety through policy statements, addressing specific employee EHS concerns (e.g., communicable disease prevention, emergency preparedness, shelter in place, office security, etc.), and meeting with union representatives to discuss agency actions that address EHS concerns of high employee interest.

22. Top management provides competent safety and health staff support to line managers and supervisors.

Top management provides a professional staff to manage our national EHS program. This staff consists of an Office Director, subordinate supervisors, industrial hygienists, safety and occupational health specialists, and support personnel. They support our headquarters and regional facilities by providing EHS training and assisting regional staffs in addressing EHS issues. Each office nationwide has a collateral duty health and safety representative to perform health and safety inspections, assist employees who have EHS concerns, ensure compliance with OSHA recordkeeping requirements, and work with supervisors, landlords, and facilities staffs to abate EHS hazards.

23. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.

Managers delegate appropriate authorities that enable our EHS personnel to perform their duties effectively. Position descriptions for EHS personnel accentuate employee initiative and performance of duties with minimal need for technical direction and oversight. EHS personnel communicate directly with agency personnel as part of EHS inspections, injury/illness investigations, and in response to employee reports of unsafe/unhealthful working conditions.

24. Managers allocate the resources needed to properly support the organization's SHMS.

The operating budget for our EHS program provides appropriate resources to properly support the health and safety management system and respond to EHS concerns nationwide. The agency provides funding for numerous training courses, equipment rental and maintenance, transportation for program audits and EHS response to environmental hazards, supplies, hazardous waste management, water sampling, personal protective equipment, development of the organizational Environmental Management System, Inter-Agency Agreements (IAA) to perform environmental studies at SSA delegated and other field facilities, and asbestos management. Specifically, many of the above listed programs are supported through an Inter-Agency Agreement with the FOH/PHS.

25. Managers assure that appropriate safety and health training is provided.

As discussed in items 18-20, the agency provides a wide range of appropriate EHS training for employees, supervisors, and managers. Managers are responsible for ensuring that employees receive required training, and compliance with this requirement is confirmed during semi-annual EHS inspections and evaluation of program requirements during our comprehensive assessments program as dictated by agency policies.

26. Top management is involved in the planning and evaluation of safety and health performance.

Top management is actively involved in EHS planning and in the evaluation of EHS performance. The Deputy Commissioner for Budget, Finance, Quality, and Management regularly holds All Hands Meetings to discuss component accomplishments, goals, and concerns with all component employees. The Deputy Commissioner has met with our Associate Commissioner, who is also the DASHO, to discuss EHS issues, such as injury/illness case management and employee appliance safety, and evaluates the DASHO's performance. The Deputy Commissioner issues nationwide correspondence alerting employees to EHS issues, such as our policy on prohibiting the use of personal space heaters, which are a fire safety concern. OFLM also has held numerous employee town halls designed to educate the workforce with regard to specific EHS issues, including integrated pest management, housekeeping, and workplace hygiene.

VII. EMPLOYEE PARTICIPATION

27. There is an effective process to involve employees in safety and health issues.

We encourage employees to participate in the EHS program. OEHOS established a national Environmental Hotline that employees can use to report EHS concerns or request information on EHS issues. OEHOS maintains a website with extensive information on our EHS programs, training availability, and forms. We encourage employees to join Field Federal Safety and Health Councils, and several union and management representatives are members or hold executive positions in these councils. We send annual reminders emphasizing EHS program responsibilities and requirements for employee health and safety to regional offices for dissemination to offices nationwide. We also send copies of the reminders to employee representatives. Employee representatives meet with management three times per year at the national level to discuss EHS issues. We participate in annual OSHA-recommended safety stand-downs and safety awareness campaigns.

28. Employees are involved in organizational decision-making in regard to the allocation of safety and health resources.

Employee and employee representative concerns expressed to management have resulted in an increase in many EHS resources, including staffing and expenditures. An example is a concern expressed by employees regarding the design of nationwide field office workstations that compromised ergonomic safety. This concern led to the evaluation of the workstations by an ergonomist and resulted in mandatory ergonomic training for employees, and funding for the redesign of those workstations to improve ergonomic safety. Employee representatives attend meetings with management three times per year to discuss national SSA EHS issues. OEHOS has also satisfied an employee's representative request to create a VOD on office safety inspections and integrated pest management.

29. Employees are involved in organizational decision making in regard to safety and health training.

Article 9 of the SSA/AFGE Agreement provides detailed EHS program requirements for involvement of employee representatives, employees, and management in the SSA EHS program. Employee representatives attend meetings with management three times per year to discuss national SSA EHS issues, including planning and implementation of training, including annual training of collateral duty EHS representatives at all SSA facilities nationwide. Employee representatives and management discuss and decide on appropriate topics for training at these meetings, and both parties work together to develop training on topics of widespread interest and importance to employees. They also agree on appropriate content for the training before its distribution to SSA offices nationwide.

30. Employees participate in the evaluation of safety and health performance.

Employees and employee representatives are actively engaged in the evaluation of EHS performance. All facilities prominently display the poster, “Occupational Safety and Health Protection for Federal Employees,” which reinforces employees’ rights to express opinions without discrimination, restraint, interference, coercion, or reprisal. Article 9 of the SSA/AFGE Agreement specifies that all workplace inspections will include the participation and input of employee representatives. Employees are also notified of any unsafe/unhealthful working conditions and any actions that management takes to protect employees when building renovations or repairs occur. Employee representatives are also provided detailed listings of OSHA-recordable injury/illness data for a clear picture of what kinds of injuries/illnesses have occurred nationwide. These representatives canvass employees to learn their concerns, and they notify management of their satisfaction or dissatisfaction with the level of corrective action taken by to alleviate any EHS issues. Employees and employee representatives regularly call the Environmental Hotline to express opinions concerning our EHS program performance and suggest changes. The meetings, which take place three times a year between union and management representatives, provide a forum for employees to express EHS concerns and an opportunity for employees to evaluate the agency’s EHS performance.