

A decorative graphic consisting of three overlapping rectangular boxes in shades of blue and grey, creating a layered effect behind the central text.

*Health
And
Safety
Policy Manual*

*Document: Health and Safety Policy Manual
Effective Date: January 1, 2011
Revised and Reissued: 5th Revision - January 2014*

CONFIDENTIAL DOCUMENT

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INTRODUCTION

The AmTote International, Inc. Health and Safety Policy Manual (the “Manual”) is intended to provide employees with a general understanding of the health and safety policies and procedures of AmTote International, Inc. (hereinafter referred to as the “Company” or “AmTote”). The Manual became effective on January 1, 2011.

This Manual supersedes in all respects any and all prior handbooks, policy manuals, benefits or practices of the Company. Changes may be made without notification with publication following.

If there is any discrepancy or conflict between this Manual and the AmTote Security Policy Manual, this Manual shall control.

If there is ever a discrepancy or if a conflict arises between the information contained in this Manual and the legal documents and contracts governing the Company's benefits programs, the formal documents will control.

Any oral statements or promises made to an employee which conflict with this Manual are not binding on the Company. Should such a statement be made, please confirm it in writing to the President or General Counsel. Any oral statements or promises made to an employee or any actions of any manager or employee which are inconsistent with the provisions contained in this manual are not binding on the Company unless authorized or approved in writing by the President.

The Company reserves the sole right: (i) to establish and administer all policies, procedures, and practices, including those relating to the discipline or discharge of its employees; (ii) to amend, supplement, or terminate these policies, procedures, and practices and benefits whenever it deems necessary; and (iii) to take whatever action it deems necessary in its sole judgment to operate the Company and to increase the efficiency of its workforce, in accordance with the laws of the states in which it does business.

Employee Acknowledgment Form

**AMTOTE INTERNATIONAL, INC.
HEALTH AND SAFETY POLICY MANUAL**

Property of AmTote International, Inc.

I, _____ (employee), acknowledge receipt of this Manual and that I am responsible for knowing its content and keeping it updated. I also understand this Manual is Company Property that must be returned to the Human Resources Department when I leave this organization.

Issued To: _____
(Print Name)

Signed: _____

Date: _____

Chapter 1: Health & Safety in General
Policy No.: 1.01
Title: Worksite Health and Safety Program
Effective Date: January 1, 2011

1.0 OBJECTIVE

The worksite health and safety objective is to continuously improve the health and safety performance in all AmTote facilities. This objective is evaluated on a continuous basis by management and compared against prior performance. The goal is to establish continual improvement as time progresses.

The Joint Health & Safety Committee (JHSC) is responsible for the administration of the worksite health and safety program, part of which requires that safety objectives for the calendar year be established at the first meeting of the New Year, as well as maintaining a Training Matrix. Various tasks will be assigned to both internal and external training and assessment resources. All employees, regardless of function or capacity are required to participate in the program in a positive, progressive manner.

The entire worksite health and safety program will be reviewed annually or sooner if new standards become available. After JHSC's annual review, any changes will be posted for all employees.

2.0 STANDARDS AND PROCEDURES

Copies of all standards and procedures will be distributed to managers and supervisors in a binder format. Changes to those procedures will be prepared by the JHSC and once approved, will be distributed by the JHSC.

All standards must be clearly documented and provided to managers and supervisors.

3.0 ASSIGNED RESPONSIBILITY

Managers are responsible for reviewing standards and procedures and enforcement of those standards. Responsibilities also include support for the implementation of the standards throughout the Company, job safety observations, and providing recommendations for the improvement of workplace health and safety.

The JHSC's responsibilities include staying current with occupational safety and health legislative standards and including the Occupational Safety and Health Act, National Fire Protection Codes and all applicable regulations. The HR Manager is responsible for the coordination of safety training programs, record keeping, health and safety committee activities, and workers' compensation claims management. The JHSC is responsible for communicating safety trends to the other supervisors and possible corrective action(s).

All supervisors are responsible for the implementation and enforcement of the workplace health and safety program. Implementation includes supporting the JHSC in their training efforts by providing employees appropriate for the training and scheduling replacement employees for production needs.

All employees are required to understand their assigned responsibilities as outlined in the occupational health and safety program. Each employee is required to work in a manner that reflects the corporate health and safety policy. This includes, and is not limited to the use of personal protective equipment, machine guarding, safety operation of tools and equipment, and conducting themselves in a manner that will not endanger the safety of either themselves or any other workers while on AmTote and/or AmTote customer property.

4.0 TRAINING

The safety training needs for each job have been determined and the employees who are to receive the training have been identified in a training matrix.

When a new substance, process, procedure or equipment is introduced to the workplace, affected employee(s) shall be notified of the new change or previously unrecognized hazard and training will be conducted if necessary.

All employee training shall be documented as follows: the name and signature of the employee, the name, date and description of the course and the instructor's name.

All employees will be required to participate in training programs. Since each task has specific requirements, work-specific training is required.

Hazard Communication training will continue as prescribed by law.

There may be periodic specific training required. This will depend on changes in the processes or recommendations from the JHSC. Any suggested training sessions should be forwarded to the JHSC.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

The JHSC will review the entire Health and Safety Program annually in accordance with legislative requirements. Any changes shall be communicated by the JHSC. Employees will be notified of changes electronically. Other methods of communication may include, but is not limited to, one or more of the following: staff meetings, postings, newsletters, and/or payroll check attachments.

The program shall be reviewed annually with the members of the JHSC. The month of review is January. Revision of certain elements on a more frequent basis may be required if critical changes are necessary to reflect changes within AmTote, application is inappropriate or ineffective based on observations by the Management team, Supervisors or the JHSC. All changes will be prepared by the JHSC. The revised version will be communicated to employees using the previously mentioned methods.

REVISION HISTORY

February 2013: Subsection 5.0 (Periodic Review/Revision/Communication) – first paragraph, second sentence change from Any changes shall be communicated to the Human Resources Manager for review and then to the General Counsel for approval to now read: “Any changes shall be communicated by the JHSC.” Deleted the following sentences: “Revisions will be included in the Health and Safety Binders that are available for all employees to review. Safety binders are available for review from all managers and supervisors.” Second paragraph: changed review month from December to January. Deleted the following sentences: “All changes will be prepared by the JHSC and provided to the Human Resources Manager for discussion with the management team. A copy of the proposed changes will be provided to the JHSC for review and comment.” to now read: “All changes will be prepared by the JHSC.”

January 2014: Subsection 4.0 (Training) – removed the following statements: The frequency of the refresher training is identified on the training matrix. Retraining schedule must be arranged before the expiry date of the last training. The schedule must be checked to ensure the training is conducted.

All management personnel must attend health and safety management training.

Chapter 1: Health & Safety in General
Policy No.: 1.02
Title: Hazard Communication Program
Effective Date: August 1, 2012

1.0 OBJECTIVE

AmTote will provide a written Hazard Communication (Right to Know) policy and procedure following OSHA Regulation 1910.1200.

2.0 STANDARDS AND PROCEDURES

This program is applicable to all employees and all contractors who may be exposed to hazardous chemicals in the course of their job duties or providing services at AmTote.

3.0 ASSIGNED RESPONSIBILITIES

3.1 Joint Health and Safety Committee (JHSC)

- Identify all hazardous chemicals (hazard evaluation). AmTote's Chemical List is maintained by Purchasing in hardcopy and an electronic copy maintained on AmTote's internal intranet. Employees may request to see a copy of the Chemical List via the JHSC.
- Ensure that the written program (covering labeling, Safety Data Sheets (SDS), other recordkeeping and employee training) is maintained by the JHSC.
- Reassess the chemicals on a periodic basis.
- Ensure the SDS are available to all employees 24 hours/day via AmTote's Intranet.
- Ensure the SDS are clean, neat, easy to read and easy to find.
- If a SDS book is used, ensure that the book is indexed so that a sheet is easy to find.
- Ensure that all containers are labeled (shared responsibility with all department supervisors).
- Ensure the department supervisors enforce use of correct containers and inappropriate containers (i.e., pop bottle) are not used for chemical storage.
- Communicate the Hazard Communication program to all employees including methods and observations to use to detect the presence of a hazardous chemical in the work area, physical and health hazards of

chemicals, protective measure available and all elements of the hazard communication standard. Training media to be used.

- Ensure department supervisors train employees before they are assigned work with any chemicals.

3.2 Employee

- Follow all safety information given for a chemical by reading the SDS for the chemical.
- If purchasing over the counter chemicals (i.e., WD 40) be sure to obtain a SDS and provide to Purchasing Department.
- Request a copy of the SDS if needed. Request must be submitted to Purchaser for most currently published SDS.
- Request further training or more information if needed.
- Follow all safe work practices for a chemical.
- Wear the appropriate personal protective equipment.
- Report any unusual physical symptoms when using a chemical.
- Report any physical difference in the chemical (color, smell, consistency).
- Ensure that any container in use is labeled with the correct contents.

3.3 Purchaser

- Ensure the SDS are available for each chemical purchased within 30 days of purchase for use at AmTote.
- Ensure the hazard chemical list is current with any new chemical purchase within 30 days of purchase for use at AmTote.
- Provide to the JHSC all new SDS and updated hazard chemical list as necessary within 30 days of any update/addition.
- Ensure that the SDS are available to all employees 24 hours/day.
- Ensure the SDS are clean, neat, easy to read and easy to find, indexed, and up to date. The Master SDS binder will be located in the Purchasing Department and a centrally located copy will be available for all employees. Also, an electronic version of the Master SDS will be available via the AmTote Intranet site.
- Ensure that if a chemical is received without proper SDS, that SDS must be obtained immediately (i.e., Internet search, vendor website, etc.) prior to that chemical's usage.
- Do not allow the purchase of over the counter chemicals (i.e., WD 40) without obtaining a SDS.
- Provide currently published SDS for any employee request within 5 days of request.
- Provide current chemical list for resubmission to Maryland Department of Environment every two years, beginning date – June 2012.

3.4 Department Supervisor

- Department supervisors are responsible for notifying and training employees or other supervisors affected by the introduction of a new chemical.
- Department supervisors must provide instruction for proper usage of any new chemical.
- Must ensure all containers within their department are properly labeled with a printed adhesive label attached to the container.
- Print and apply appropriate printed label to portable containers.

3.5 Contractors

- Have the right to request a review of AmTote's SDS book as well as our hazardous chemical list.
- Contractor must provide to AmTote any SDS for chemicals brought onsite by them.
- Contractors must abide by the Contractor's Policy in AmTote's Health and Safety Manual, Policy 14.

3.6 Receiving Department

- All receiving personnel are instructed to check for identifying labels and reject any and all unlabeled chemical containers delivered to AmTote and to notify Purchasing and JHSC.

4.0 TRAINING

There may be periodic specific training required. This will depend on changes in the processes or recommendations from the JHSC. Any suggested training sessions should be forwarded to the JHSC.

Training will be via basic visual media.

All employees receive specific departmental training as required per their defined job duties upon starting employment with AmTote and updated as needed or specified.

Any hazardous non-routine tasks substance would be investigated, SDS consulted, and training details developed and then provided as required.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

The program shall be reviewed annually with the members of the JHSC. The month of review is January. Revision of certain elements on a more frequent basis may be required if critical changes are necessary to reflect changes within AmTote, application is inappropriate or ineffective based on observations by the Management team, Supervisors or the JHSC. All changes will be prepared by the JHSC. The revised version will be communicated to employees using the previously mentioned methods.

REVISION HISTORY

February 2013: Subsection 5.0 (Periodic Review/Revision/Communication) – changed review month from December to January. Delete "...and provided to the Human Resources Manager for discussion with the management team. A copy of the proposed changes will be provided to the JHSC for review and comment."

January 2014: Subsection 3.1 – Replaced SDS to read SDS, replaced Safety Data Sheets to read Safety Data Sheets*

Subsection 3.3 (Purchaser) – deleted the following bullet:

- Ensure that Safety Data Sheets are dated three years or less from current date.

* this edit was performed globally throughout this policy manual in all places and will only be so noted here, the first instance.

Chapter 2: Motor Vehicle Safety
Policy No.: 2.01
Title: Motor Vehicle Safety
Effective Date: January 1, 2011

1.0 OBJECTIVE

Describe the policies, procedures, and safety guidelines for the operation of motor vehicles within the division through hazard analysis, motor vehicle selection criteria, pre-use inspections, operational rules, training requirements and maintenance.

This policy applies to all employees, contractors and sub-contractors working for AmTote International, Inc and the following vehicles that are owned by AmTote International, Inc: two straight trucks, two tractors, two trailers, and one van.

2.0 STANDARDS AND PROCEDURES

2.1 Vehicle Operation

- 2.1.1 Driver must be in possession of a valid United States driver's license at all times when operating a company vehicle and must have up-to-date information on file with the Logistics Manager.
- 2.1.2 Driver shall observe all rules and regulations for safe driving as defined by the Maryland Motor Vehicle Administration or by the department in whose state the vehicle is operated.
- 2.1.3 No unauthorized passengers may enter a company vehicle.
- 2.1.4 Driver shall observe all rules and regulations regarding cell phone use while driving according to the state the vehicle is operated in.
- 2.1.5 Safety belts shall be used by all occupants traveling in the company vehicle.
- 2.1.6 Report all unsafe vehicle conditions or concerns promptly to the Logistics Manager.
- 2.1.7 Avoid conditions that could lead to a loss of control of the motor vehicle – inclement weather, driving too fast for conditions, driving while sleepy or inattentive, etc.
- 2.1.8 Consuming, intoxication, and/or possession any alcohol, drugs, or other intoxicants while in or operating the vehicle is prohibited.
- 2.1.9 Employees are responsible for reporting all accidents to their supervisor and Human Resources Manager.
- 2.1.10 For a detailed list of procedures, please see Appendix 3 for the Accident Report Form.

3.0 ASSIGNED RESPONSIBILITIES

3.1 Managers and Supervisors

- 3.1.1 Ensure only authorized employees with CDL endorsement operate motor vehicles over 26,000 lbs. GVWR
- 3.1.2 Ensure employees receive training, in compliance with this policy, prior to operating any motor vehicle
- 3.1.3 Ensure employees maintain CDL requirements and re-training requirements, as required by this policy
- 3.1.4 Ensure pre-use inspections are conducted prior to each trip (Appendices 1 and 4)
- 3.1.5 Ensure a schedule of regular maintenance of motor vehicles and their tires

3.2 Maintenance

- 3.2.1 Ensure all motor vehicles are adequately maintained and all maintenance records are retained, for the entire service life of the motor vehicle at the facility
- 3.2.2 Ensure all preventative maintenance schedules are maintained by the Logistics Manager
- 3.2.3 Ensure all motor vehicles contain insurance forms, accident report (Appendix 3) and AmTote contact phone numbers

3.3 Operators/Drivers

- 3.3.1 Comply with the provisions, standards, and procedures of this policy and the Occupational Safety and Health Act
- 3.3.2 Attend DOT medical exams, as required by this policy
- 3.3.3 Vehicles should have a clean and orderly interior; operators should check vehicle for any trash or mess left behind after use.
- 3.3.4 Turn in all inspection and maintenance records upon return to Headquarters
- 3.3.5 Fuel and other necessities purchased while traveling must be bought with the Company-provided fuel charge card administered to driver.
- 3.3.6 Must complete accident and insurance forms in the event of any and all accidents and turn in to their supervisor.

4.0 TRAINING

Training shall be conducted on a departmental basis and as a group for existing employees. Training will be provided to new employees as part of their orientation.

This training will be in the form of, but not limited to, DVD, video, audio, posters, handouts, etc. Some training may be in the form of actual demonstration of proper tools, devices, and or techniques. Training will be refreshed on a bi-annual basis or as required.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

The program shall be reviewed annually with the members of the JHSC.

6.0 APPENDICIES

1. Driver Vehicle Inspection Report
2. Truck Maintenance Repair Request
3. Accident Report
4. Pre-use Inspection Checklist

REVISION HISTORY

April 2012: Section 4.0, Training – changed last sentence to read: Training will be refreshed on a bi-annual basis or as required.

February 2013: Section 1.0 (Objective) – second paragraph, last sentence, added “one van” to end of sentence.

Subsection 2.1.1: changed Human Resources Department to read Transportation Manager.

Subsection 2.1.3: changed from: “Any non-authorized passengers must be approved by management prior to entering vehicle.” To now read: No unauthorized passengers may enter a company vehicle.

Subsection 2.1.9: added “and Human Resources Manager” to end of sentence.

Subsection 3.1.1: added “with CDL endorsement” after “employees.”

Subsections 3.1.3 and 3.1.6: Deleted in their entirety and renumbered remaining.

New Subsection 3.1.3: changed “training mid-term evaluations” to read: “CDL requirements”

New Subsection 3.1.4: changed from: “Ensure pre-use inspections are conducted each shift” to now read: “Ensure pre-use inspections are conducted prior to each trip.”

Subsections 3.2 (Human Resources Manager) and 3.3 (Purchasing Department) – deleted in their entirety and remaining subsections renumbered.

New Subsection 3.2 (Maintenance): added new 3.2.3 to read: Ensure all motor vehicles contain insurance forms, accident report (Appendix 3) and AmTote contact phone numbers.

New Subsection 3.3 (Operators): changed to now read: Operators/Drivers. Added new subsections 3.3.4 and 3.3.6 as follows: 3.3.4 Turn in all inspection and maintenance records upon return to Headquarters; 3.3.6 Must complete accident and insurance forms in the event of any and all accidents and turn in to their supervisor.

January 2014: Subsection 2.1.1 changed "Transportation Manager" to read "Logistics Manager." Subsection 2.1.6 changed "manger" to read "Logistics Manager."

Subsection 3.1.1, added "over 26,000 lbs. GVWR" to end of sentence.

Subsection 3.1.4, added "(Appendices 1 and 4)" to end of sentence.

Subsection 3.2.2, added "by the Logistics Manager" to end of sentence.

Appendices 1-4 added Appendix title after each to now read:

"Appendix 1 – Driver's Vehicle Inspection Report"

"Appendix 2 – Truck Maintenance Repair Request"

"Appendix 3 – Accident Report"

"Appendix 4 – Pre-Use Inspection Checklist"

APPENDIX 1 – Driver's Vehicle Inspection Report



DRIVER'S VEHICLE INSPECTION REPORT

Completion of this report required by Federal Law 49 CFR 396.11 & 396.13

Location _____ Date _____

Truck/Tractor _____ Trailer #1 _____

Dolly _____ Trailer #2 _____

Odometer Mileage _____

Check ☒	Explain Any Defects
	Engine
	Transmission
	Clutch
	Steering Mechanism
	Rear Vision Mirrors
	Lighting Devices and Reflectors
	Parking and Service Brakes
	Water Levels
	Air lines/Light Lines
	Coupling Devices
	Tires and Rims
	Oil Leaks
	Emergency and Safety Equipment
	Exhaust
	Other
	Vehicle condition OK (This must be checked if there are no defects)

 Reporting Driver's Signature

APPENDIX 2 – Truck Maintenance Repair Request



Truck Maintenance Repair Request

Truck No. _____

Trailer No. _____

Date _____

Returned From _____

Reported Problem _____

Verified Approval by: _____

Verified Approved date: _____

Action Taken _____

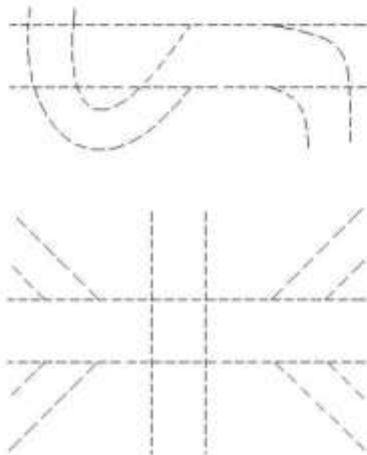
Repairs made by: _____

Repairs made date: _____

Signature of Mechanic

Date

APPENDIX 3 – Accident Report

ACCIDENT REPORT TO BE COMPLETED AT ACCIDENT SCENE		ACCIDENT SCENE Instructions for Accident Diagram		OTHER VEHICLES	
Driver's Name _____ Home Terminal _____ Equipment _____ Truck Number _____ Trailer(s) _____ GENERAL INSTRUCTIONS - Stop vehicle and investigate. - Use 4 way flashers and set up warning devices. Turn off all engines. No smoking. Guard against fire. - Check for fuel or cargo leaks and advise emergency responders if any are found. - Assist the injured – DO NOT move the injured – call for medical assistance - Notify police and supervisor. Give location and nature of accident accurately. - BE COURTEOUS. Make no statement about accident except to police, company, or insurance company representative. - Supply name, address, company name and address, vehicle registration number, operator's license, and insurance information to police and other party. - Comply with U.S. D.O.T.'s and your company's post accident alcohol and drug testing requirements. - Complete this form before you leave the accident scene.		Fill in dotted lines to correspond with road at accident site. Show position of all vehicles, pedestrians, etc. as follows: Your vehicle  Other vehicle(s) numbered successively  Pedestrian  Traffic Signal  Traffic sign (indicate type)   Direction of Travel: Your vehicle (#1) _____ Other _____		VEHICLE #2: Driver _____ Address _____ Driver's License No. _____ State _____ OTHER OCCUPANTS: Name _____ Address _____ Name _____ Address _____	
DATE, TIME, PLACE Date: _____ Time: _____ Location: _____ Street Address or Intersection _____ Street or Highway City/Town _____ County _____ State _____ Distance and Direction from Accident ☐ Open Country ☐ Business Shopping ☐ Residential ☐ Manufacturing/Industrial ☐ Other _____		VEHICLE #2: Driver _____ Address _____ Driver's License No. _____ State _____ OTHER OCCUPANTS: Name _____ Address _____ Name _____ Address _____		INJURIES: Name _____ Injury _____ Where Taken _____ Insurance Co. _____ Policy No. _____	

Appendix 4 – Pre-Use Inspection Checklist

Driver Name:	
Vehicle #:	
Date:	Mileage:

- Before you enter the vehicle:**
 - ☐ You are authorized
 - ☐ You are licensed to operate this type of vehicle
 - ☐ Your license is valid and that you have your license with you
 - ☐ You have read, understand the manufacturer's operating manual
 - ☐ You know how to operate the vehicle and use any related equipment or attachments safely
 - ☐ You are familiar with the location and function of all the controls

If any of these are not checked, immediately inform your supervisor and do not enter the vehicle.



- Before starting, check:**
 - ☐ Oil level (above “add line”, not above “full line”)
 - ☐ Coolant level by looking at the coolant level in the over-flow bottle (DUE TO SEVERE RISK OF INJURY AND BURNS: NEVER ATTEMPT TO OPEN THE RADIATOR OR COOLANT OVERFLOW CAPS)
 - ☐ Windshield wiper fluid level (sufficient for conditions)
 - ☐ No visible leaks (look underneath vehicle)
 - ☐ Wiper condition (damage, worn)
 - ☐ Tire condition, including spare tire (no obvious tread wear or tire damage)

- ☐ Tire inflation, including spare tire (within operating specifications for current temperature and loads – ref. owners' manual)
- ☐ Wheel fasteners (lugs) are all in place and not loose
- ☐ Loads are within the vehicle specifications (ref. owners' manual)
- ☐ Lights functional and lenses in place
- ☐ License plates are in place, valid and visible
- ☐ No obvious damage to vehicle
- ☐ Windows and mirrors are not damaged and are clean

IF YOU DISCOVER ANY PROBLEMS, REPORT TO YOUR SUPERVISOR IMMEDIATELY AND DO NOT USE THE VEHICLE!

3. Upon entry into the vehicle, check:

- ☐ Condition of seat belt (functional and not excessively worn or frayed)
- ☐ First aid kit is available and contents have been checked
- ☐ Appropriate fire extinguisher is in place, is fully charged, in good repair and has been inspected
- ☐ Any other applicable emergency equipment is in place
- ☐ Parking brake is on
- ☐ Seat belt is on

4. After starting, check:

- ☐ All warning lights are off (e.g., oil, air bag, anti-lock brakes, seat belt, etc.)
- ☐ Horn operational
- ☐ No unusual noises
- ☐ Steering normal (no excessive play, no excessive or unusual noise from power steering pump)
- ☐ Foot brake functional (does not touch floor boards, not soft)
- ☐ Wipers functional
- ☐ Vehicle back-up alarm functional (if equipped)

IF YOU DISCOVER ANY PROBLEMS, IMMEDIATELY TURN-OFF THE ENGINE AND REPORT TO YOUR SUPERVISOR IMMEDIATELY. DO NOT USE THE VEHICLE

Supervisor Signature:	
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Chapter 3: Emergency Preparedness and Response
Policy No.: 3.01
Title: Emergency Preparedness and Response
Effective Date: January 1, 2011

1.0 OBJECTIVE

The Emergency Preparedness Procedure is provided to ensure that all employees understand the importance of emergency preparedness, know the types of emergencies that may occur at their workplace, understand the appropriate precautions and protective measures to take in an emergency and what to do after an emergency.

2.0 STANDARDS AND PROCEDURES

This procedure is applicable to all employees, temporary employees, visitors and contractors who are working at AmTote.

There are two major organizations/regulations that control fire safety; the Occupational Safety and Health Act (OSHA) and the National Fire Protection Association (NFPA). In many cases, both organizations have the same requirements but in other instances, each organization has different requirements each opposing the other.

Please also note that our Fire Marshal or local Authority Having Jurisdiction (AHJ) has control over his/her jurisdiction and may make rules that differ from those listed because of that authority. The Fire Marshal's decisions override any information in this Plan and the AmTote Plan may need to be changed accordingly.

Types of Emergencies addressed by this Policy but not limited to:

Severe weather-related, including winter storm, tornado, hurricane, etc.	Medical emergencies
Loss of Power	Fire, Smoke and no fire
Violence in the workplace incident	Natural gas leaks

2.1 Equipment at AmTote

This facility has been reviewed for equipment resources that may be needed to respond to the emergencies identified. These include:

- Sprinkler system
- Alarm system
- Fire extinguishers
- Public address system
- Flashlights
- Cell phones
- Battery/hand crank operated radio
- Generator
- Shovel
- Work Gloves
- Extra batteries
- Supplies of sand and snow melting chemicals on site
- First aid kits

2.2 Outside Response Coordination

AmTote respects the role of police, fire, ambulance, spill response and others who may intervene during an emergency and understands that in some cases their role of authority may supersede the Company. The Company will work with this intervention and cooperate fully with them but with the best interest of the Company in mind.

2.3 Housekeeping

- 2.3.1 All places of employment including passageways, storerooms and service rooms shall be kept clean and orderly and in a sanitary condition.
- 2.3.2 The floor of every workroom shall be maintained in a clean and as far as possible, a dry condition.
- 2.3.3 Every floor, working place and passageway will be kept free from protruding nails, splinters, and holes or loose boards to facilitate cleaning.
- 2.3.4 Accumulation of flammable and combustible waste materials and residues which may contribute to a fire emergency will be eliminated or kept to a minimum.
- 2.3.5 Flammable material such as cardboard, paper, material and plastic must be kept away from heat sources such as open flames, sparks, welding areas, furnaces and heaters.
- 2.3.6 Paper, trash, machine parts, sawdust, rags, nails, screws, tools and other items will not be left to accumulate on the floor, on machines or anywhere in the facility.
- 2.3.7 All items used should be placed back in their proper storage area.
- 2.3.8 The exterior of the facility should be kept neat with trash bins and containers picked up regularly, the area swept and other debris and storage such as cardboard, wood, old equipment and trash kept to a minimum.

2.4 Natural Gas Leak

Natural Gas, also known as [methane](#), is a colorless, odorless, fuel that burns cleaner than many other traditional fossil fuels. It is one of the most popular forms of energy today. It is used for heating, cooling, production of electricity and it finds many uses in industry.

For your protection, mercaptan, a distinctive-smelling chemical, is added to natural gas so you'll be able to detect even the slightest amount in the air. If you detect natural gas, please notify the Facilities or HR Manager immediately.

IF THERE IS A GAS LEAK:

- Get everyone out of the building immediately
- DO NOT use your phone, including a cell phone as an electrical discharge may cause an explosion.
- Inform Gas Company at 9-1-1 after evacuation of the building.
- Do not turn any electrical switches (lights, computers, appliances) either on or off.
- Don't use lighters or matches and don't smoke.

In case of a gas fire, DO NOT ATTEMPT TO FIGHT THE FIRE YOURSELF. LEAVE IMMEDIATELY.

2.5 General Fire Safety Precautions

- 2.5.1 Never use octopus (multiple) plugs to allow a single outlet to serve more than one electrical appliance.
- 2.5.2 The use of extension cords is not allowed. If required, a multi-outlet power strip can be used. If an extension cord absolutely must be used, it should be a heavy duty, UL listed cord which is heavily insulated.
- 2.5.3 Report all worn electrical wires to building manager.
- 2.5.4 Do not allow rubbish or unnecessary combustibles to pile up.
- 2.5.5 Keep halls and access areas to exits clear.
- 2.5.6 Doorstop wedges are not permitted to hold open doors that are normally designed to remain closed.
- 2.5.7 Smoking anywhere inside or at an AmTote-operated facility is strictly prohibited, this includes any site where AmTote employees work, and this policy should never be violated, even after normal business hours.
- 2.5.8 It is strongly suggested space heaters should never be used in the office facility. However, if management agrees to provide, units

must be approved, UL listed, have a tip-over shut-off switch and be inspected daily for clearance from any combustible materials.

NOTE: It is impossible to anticipate every fire situation. However, the procedures listed within this manual have been thought to cover most fire situations.

The Building Manager is responsible for maintaining equipment to prevent or control sources of ignition or fires, responsible for remaining in AmTote and shutting down critical operations will use the following procedure:

FIRE NOTIFICATION AND WARNING

The Signal to evacuate the building is: Emergency Announcement

The first person spotting a fire should notify the Building Manager for guidance or activate the alarm system, and call 911.

Alarms are activated by pulling a fire alarm manual pull station and will activate the fire alarm throughout the entire building.

Even if the FIRE spotter is trained in the use of a fire extinguisher and is able to put out the fire, the BUILDING MANAGER AND/OR Fire Department SHOULD always be called.

2.6 Building Evacuation Procedures

If the need to evacuate the building or areas arises due to any emergency, the following steps and procedures should be followed:

- 2.6.1 In the event of an emergency, whether it is fire, flood, spill, or any other hazard, natural or manmade, employees should immediately remove themselves to a safe distance and notify their supervisor or any immediate manager or call 911 if they feel the situation warrants. That manager will then notify the appropriate person or persons in the building and they will decide if an evacuation process is necessary.
- 2.6.2 If an employee feels that an emergency has risen, (fire, flood, accident, etc.), they should notify their supervisor or call 911 if they feel the situation requires professional attention. They should then report to their supervisor, and if the situation requires, proceed with an evacuation process.
- 2.6.3 If an evacuation is called for, please follow the mapped out routes for the area of the building that you are currently in. These routes are posted in various areas in the building and illustrate the exits

that are closest to the map detail. If the detailed exit way is not usable for any reason, please leave the building by the nearest safe exit and report to your departments assigned outside meeting area. Be sure to notify your supervisor or their replacement that you are out of the building.

- 2.6.4 If at all possible, without risking personal safety or the safety of others, assigned personnel will proceed with emergency shutdown operations of company utilities such as gas, electricity, water, to try to minimize hazards and damages.
- 2.6.5 In the event of an actual evacuation of AmTote, all employees are requested to: (a) leave the building in a quick but orderly fashion via the designated route posted in the area provided the route is clear and safe, (b) proceed immediately to the designated meeting area outside the building agreed upon for your department, (c) immediately notify your supervisor so you can be accounted for. If anyone is not accounted for, the department supervisor or their substitute will report the individuals' absence to the evacuation co-coordinator.
- 2.6.6 When the department supervisor or their substitute is satisfied that all of his/her people are accounted for, the group is to remain together and proceed to the large parking lot on the west side of the building adjacent to McCormick Road and remain there in their groups until further instructions are available.

The All Clear Signal is: Verbal Announcement via Supervisors

2.7 Severe Weather-Related

Winter Storms

AmTote offices are always open.

Tornado Procedures

The Signal to seek shelter is: Announcement

In the event a tornado is sighted in the vicinity of Hunt Valley, employees should proceed immediately to the designated safe area (i.e., Software Programming area) when the announcement is made.

A weather radio shall be located on or near the Operations Center. This radio shall automatically provide a tornado watch or warning if conditions warrant. The radio (or other battery-powered radio) should be taken to the meeting area to monitor storm progression and the all clear signal.

- When a tornado watch/warning is issued, management will inform employees via overhead page. Supervisors should check their work areas to make sure employees have evacuated to the meeting area.
- Supervisors should account for personnel at the meeting area and report this information to the Building Manager.
- If overhead page is not useable, employees will be informed using runners and/or the telephone.

Employees are strongly discouraged from leaving the building during bad weather.

Remember tornadoes are very unpredictable! One of the greatest dangers to AmTote personnel is injury from flying glass or furniture tossed around.

In the event of a “Tornado Warning,” Supervisors will take charge of all personnel, including visitors. Persons will be instructed to a safe area.

For this building, the safest area is the Software/Programming area. These are fire rated, glass free, masonry enclosures that will offer the best protection from a tornado.

The All Clear Signal is: Announcement

Some basic precautions:

- Stay away from any glass.
- Watch for doors, including interior doors, they may swing open violently.
- Don’t attempt to leave the building. You are much safer in an interior area of the building, than on the street or in an automobile.
- Remain calm and quiet. Listen to the instructions of your Supervisor.

3.0 ASSIGNED RESPONSIBILITY

Building Manager

- Reviews this procedure on an annual basis in conjunction with the JHSC and management team for required changes or modifications.
- Will determine the correct emergency number (911) and instruct employees on how to contact emergency services (use of outside line, which phones can be used, phones that can be used during a power outage).

- Reviews this procedure whenever an emergency has taken place to identify appropriate changes.
- During normal business hours, immediately calls the local fire department upon activation of the fire alarm system or if verbally instructed to do so.
- During non-normal business hours, determines methods for reporting fires to the local fire department.
- Ensures other employees are properly trained to ensure compliance and effective performance.
- Determine post evacuation meeting area (at least 25 yards from the building).
- Will plan, coordinate, direct, conduct and evaluate fire/evacuate drills at least annually.
- Will plan, coordinate, direct, conduct, and evaluate tornado/remain inside drills at least annually.
- Prepares a plan for visitor safety including sign in and responsible employee for the visitor.
- Will be the connecting link between the local fire department, police department, emergency and regulatory agencies and other employees.
- Obtains head count from Supervisor and reports any missing personnel to local Fire Marshal, Fire Chief or their representatives.
- Maintains all building emergency exits, stairways, doors, lights and passageways in a manner to provide a safe means of egress at all times.
- Maintains all fire routes outside of the building.
- Determines the control procedures for the accumulations of flammable and combustible waste materials and residues so that they do not contribute to a fire emergency.
- Determines and controls potential sources of ignition such as welding or smoking.
- Prepares and submits all required reports to the appropriate governmental agencies.
- Assists to determine the early release of employees or closure of the facility.

Human Resources Manager

- Has current phone/address list for all employees.
- Sets up the contact list for management staff.

Department Supervisors and Managers

- During normal business hours, shall immediately call the local fire department upon activation of the fire alarm system or if verbally instructed to do so.
- Review this information with your employees so they are familiar with emergency procedures.
- Be familiar with evacuation routes and meeting location.
- Be familiar with employees, contractors and other employees in your area who may evacuate with you.

- Take roll after evacuation/seek meeting.

Medical/First Aid Employees

- Follow assignments as needed.

Building Manager and Designees

- During normal business hours, shall immediately call the local fire department upon activation of the fire alarm system or if verbally instructed to do so.
- Know what facility utilities or equipment must be shut down in the case of an emergency and determine the procedure.
- Maintain an updated list of all contacts for emergencies.
- AmTote has adopted a “Red Tag” notification program for the sprinkler system. If there is service being performed on the sprinkler system, the service contractor or persons performing the service, or the Building Manager will place a tag, provided by AmTote, on the sprinkler valve riser. This tag will be completed with the appropriate information including time of shut-down, type of work performed, area affected, etc.
- When the work is complete, servicing party is to notify the Building Manager of system status and any issues discovered relative to the system. The Building Manager will remove the “Red Tag” notification and retain for records along with any documentation from the contractor/service person(s).

Employees who shift locations

- Understand the evacuation routes, safe places of refuge and site security plan at the location where you are assigned.
- Be familiar with the nearest exit to your work location.
- Shift Supervisor must notify Building Manager who will then notify the HR Manager.

All Employees

- Know and understand the emergency plan and respond accordingly.
- Know and understand fire prevention.
- Know the location of all exits in your area, portable fire extinguishers and manual pull stations.
- Prepare yourself in advance; know where to go and how to get there.
- Remain calm and quiet so you can hear and respond to instructions from your Supervisor or Management staff.

4.0 TRAINING

Emergency Assistants

- 1) Employees will be trained at the time of their initial job assignment in those parts of the fire prevention plan that the employee must know to protect the employee in an emergency.
- 2) Employees will be trained when the plan is changed.
- 3) Employees who will assist in the orderly evacuation of the building or to the meeting area will be trained in this procedure.
- 4) Review the designated roles and responsibilities.
- 5) Review the equipment that is available in emergencies.
- 6) Employees will be instructed on the use of a fire extinguisher if AmTote determines they will allow this use unless it proves to be an unacceptable risk.
- 7) The employee should never talk to the media.

General Staff

- 1) Participate in all training exercises
- 2) The written plan shall be kept in the workplace and made available for employee review.
- 3) Review the evacuation, stay in, and all clear signals.
- 4) Review the types of emergencies that may occur at AmTote.
- 5) Review the types of emergencies that may require an evacuation or tornado meeting.
- 6) Employees will be shown their nearest exit route and exit door.
- 7) Employees will be shown the location where they are to meet after exiting and the procedure to report their safe evacuation.
- 8) Employees will be instructed they are not to interfere with any emergency responders such as police, fire, ambulance or spill response.
- 9) The employee should never talk to the media.

5.0 PERIODIC REVIEW / REVISION / COMMUNICATION

- 5.1 Planned workplace inspections conducted by members of the JHSC and the management team will include a review of compliance to this procedure after emergencies have occurred.
- 5.2 This procedure will be reviewed on an annual basis by the JHSC for any required changes. Circumstances requiring a change to this procedure may include but not be limited to: legislative amendments, corporate amendments, changes in types of emergencies, incident/accident history, and recommendation of the JHSC or the AHJ.

6.0 RECORD RETENTION

At the time of the emergency, records will be kept detailing the procedures used and problems encountered.

Decisions of the AHJ should also be documented.

Any costs associated with the emergency should be completely documented from the time of the start of the emergency. These charges might include overtime, additional staff, mileage, contractors used, materials or supplies purchased food, water, etc. Details of these charges will be necessary for the property insurance claim.

7.0 TERMINOLOGY

AHJ	Authority having jurisdiction (i.e., fire marshal, fire chief)
JHSC	Joint Health and Safety Committee
Tornado Watch	The conditions are right for a tornado, but none have been sighted.
Tornado Warning	A tornado has been sighted in the vicinity.
Winter Storm Watch	Severe winter weather is possible
Winter Storm Warning	Severe winter weather is expected
Blizzard Warning	Severe winter weather with sustained winds of at least 35 mph is expected
Traveler's Advisory	Severe winter conditions may make driving difficult or dangerous

REVISION HISTORY

March 2011: Subsection 3.0 (Assigned Responsibilities) – added Red Tag Sprinkler Notification language.

September 2011: Subsection 2.4 (Building Evacuation Procedures), item 2.4.9 – added the following sentence: “The Building Manager will, upon evacuation, ensure that all sprinkler system riser valves are open.”

January 2012: Emergency Contact List – removal of Levi Tracey and Ronnie Robinson from list.

February 2013: moved and renumbered following subsections: 2.4 (Building Evacuation Procedures) moved and renumbered to 2.6 and text replaced with “AmTote Evacuation Plan language”;

2.5 (Severe Weather-Related) moved and renumbered to 2.7; Winter Storms – changed to read: AmTote offices are always open.

2.6 (General Fire Safety Precautions) moved and renumbered to 2.5; subsection 2.5.2 changed from “Keep the use of extension cords to a minimum” to now read: “The use of extension cords is not allowed. If required, a multi-outlet power strip can be used.”

2.7 (Natural Gas Leak) moved and renumbered to 2.4

Subsection 3.0 (Assigned Responsibility) deleted 3rd bullet under Human Resources Manager: “Is alert to the activation of the weather radio and informs the Director and/or Building Manager of the activation and as weather conditions change.”

Subsection 3.0 (Assigned Responsibility) Combined Red Tag Sprinkler Notification to Building Manager and Designees.

Emergency Contact List updated to reflect training taken in December 2012

January 2014: Subsection 2.1 (Equipment at AmTote) added bullet for “Generator”

Subsection 2.5.7 now reads “Smoking anywhere inside or at an AmTote-operated facility is strictly prohibited, this includes any site where AmTote employees work, and this policy should never be violated, even after normal business hours.”

Subsection 2.7 (Severe Weather-Related) first line under Tornado Procedures, deleted “meeting” and inserted “shelter”

Subsection 3.0 (Assigned Responsibility) under Building Manager, 8th and 9th bullet changed “semi-annually” to “annually”

Subsection 4.0 (Training) divided into 2 groups (Emergency Assistants and General Staff) and then divided up numbered bullets to match group; completely deleted bullets 2 and 14.

Subsection 5.1 – deleted in its entirety and renumbered remaining subsections

Appendix 1 – added title to now read: “Appendix 1 – Internal Emergency Contact List”

Appendix 1, changed Micki Tracey phone extension from “5082” to “5084”

Deleted the “Management Statement of Policy on Emergencies” page

Exterior Emergency Contact List – changed to read “Appendix 2 – Exterior Emergency Contact List”

Appendix 1 – Internal Emergency Contact List

EMERGENCY NUMBERS

AREA CODE – (410)

INTERNAL EMERGENCY CONTACT LIST

DATE: _____ as of 18 December 2012

FIRST AID AND CPR TRAINED ASSOCIATES (Internal):

<u>Name</u>	<u>Number or Ext.</u>
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Tom Kaiser	ext 5143
Heidi Kasun	ext 5140
Wib Kinneman	ext 5228
Deb Page	ext 5215
Melissa Price	ext 5082
Brad Sappington	ext 5137
Micki Tracey	ext 5084
Cindy Wiles	ext 5157

MANAGEMENT ISSUES:

Bill Cabana	W: 410-785-5017 H: 410-683-4360 C: 410-446-5925
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Steve Keech	W: 410-785-5020 C: 443-834-0550
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Cindy Wiles	W: 410-785-5157 H: 717-993-2923 C: 717-968-9850
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ENVIRONMENTAL ISSUES:

Tom Kaiser	W: 410-785-5143 H: 717-382-1105 C: 443-695-4307
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FIRE PROTECTION SYSTEMS AND CONTROL OF FUEL SOURCE HAZARDS:

Tom Kaiser W: 410-785-5143
 H: 717-382-1105
 C: 443-695-4307

PERSONS RESPONSIBLE FOR THE MAINTENANCE OF EQUIPMENT AND SYSTEMS INSTALLED TO PREVENT OR CONTROL FIRES OR THE SOURCES OF IGNITION:

Tom Kaiser W: 410-785-5143
 H: 717-382-1105
 C: 443-695-4307

Deb Page W: 410-785-5215
 H: 717-993-3651
 C: 717-578-9487

Appendix 2 - Exterior Emergency Contact List

ADDRESS: AmTote, 11200 Pepper Road, Hunt Valley, MD 21031

PHONE: (410) 771-8700

LOCAL DIRECTORY ASSISTANCE: 1-555-1212

LONG DISTANCE DIRECTORY ASSISTANCE: 1-Area Code-555-1212

CITY/LOCAL SERVICES

CONTACT	EMERGENCY #	PHONE #	SERVICE
POLICE – State Police	911	800-525-5555	Assistance
POLICE – Baltimore County	911	410-887-2222	Assistance
FIRE – Cockeysville	911	410-527-1634	Fire assistance
AMBULANCE	911		Transport injured
HOSPITAL St. Josephs GBMC		410-337-1000 443-849-2000	Healthcare Services
ELECTRICAL & GAS: Baltimore Gas & Electric		410-685-0123 877-778-2222	Gas leak & Electrical emergency
WATER: B.C. Dept. Public Works		410-887-3300	Water leak outside
TELEPHONE: Verizon/ATT	800-201-1452	800-499-7298 ATT	Repair
"MISS UTILITY"	McKenzie Properties	410-494-4889	Call before digging for buried cable
BLDG SECURITY	McKenzie Properties Bob Casper	410-494-4889	
WASTE WATER TREATMT:	410-887-5492	410-887-7415	Questions regarding wastewater from facility
SNOW/ICE CLEARANCE	McKenzie Properties	410-494-4889	
DEBRIS CLEARANCE	McKenzie Properties	410-494-4889	
PLATE GLASS REPAIR	McKenzie Properties	410-494-4889	

REGIONAL/COUNTY SERVICES

CONTACT	EMERGENCY #	PHONE #	SERVICE
CTY SHERIFF	911	410-887-4070	Assistance
MD COUNTY HEALTH DEPT		410-767-6500	Health Issue, vaccines
POISON CONTROL	1-800-POISON1 1-800-764-7661		Exposure/Ingestion to poison
COUNTY ENVIRONMENTAL HEALTH		410-767-6742	Questions regarding environmental issues
RED CROSS		410-624-2000	First aid/CPR training/disaster relief

FEDERAL/NATIONAL SERVICES

CONTACT	EMERGENCY #	PHONE #	SERVICE
NATIONAL HAZMAT RESPONSE CENTER	800-424-8802 215-566-3255 202-426-2675	800-467-4922 410-633-1147	Questions regarding hazardous material response
CHEMTREC	800-424-9300	410-633-1147	Questions regarding hazardous material
NATIONAL WEATHER SERV		703-260-0107	Weather forecast
FEDERAL EMERGENCY MANAGEMENT AGENCY	202-646-4600	800-621-3362	
OSHA FATALITY	1-800-858-0397 <u>CALL REQUIRED WITHIN 8 HOURS OF INCIDENT</u>		When fatality or 3 or more employee's injured from same incident occurs at facility
FEDERAL BUREAU OF INVESTIGATION	734-995-1310	410-265-8080 443-965-2000 ATF	When reporting is required

Chapter 4: Accident Investigations
Policy No.: 4.01
Title: Accident Investigation Procedures
Effective Date: January 1, 2011

1.0 OBJECTIVE

To provide a procedure where all work-related accidents, injuries and incidents, resulting in injury, occupational illness and/or property damage, can be investigated to prevent re-occurrence.

2.0 STANDARDS AND PROCEDURES

All critical, fatal and occupational injuries; disability and lost time injuries; non-disability medical treatment; non-disability first aid situations not of a minor nature; acute-chronic occupational illnesses; non-injury property damage incidents; near accidents with potential for serious injury loss; fire or explosion; and chemical spills/releases will be investigated in accordance to this procedure.

INTERVIEWING WITNESSES:

Witnesses are to be interviewed and their statements taken as immediately as possible following the incident/accident to determine who they are, what they saw, their view as to what happened and why it happened. Witnesses should be kept separate from each other to prevent them from discussing the incident/accident with other witnesses.

ON SITE ASSESSMENT OF THE SCENE:

An inspection/assessment of the incident/accident scene and equipment involved will be done for all incident/accident investigations. This may include photographs or diagrams of the scene and a map diagram of the area, showing the sizes, distances and weights of objects, as appropriate. For serious incident/accidents, the area may need to be closed off to foot traffic or other disturbance to prevent contamination of the scene or removal of evidence.

IDENTIFYING HAZARDOUS CONDITIONS:

The incident/accident investigation will determine and document the immediate hazardous condition resulting in the incident/accident, as well as the underlying reason(s) for the hazardous condition to exist. The investigator(s) will interview supervisors, managers, workers, JHSC members, or any other pertinent

individuals to ensure this information is uncovered and included in the accident report.

IDENTIFYING UNSAFE ACTIONS:

The incident/accident investigation will determine and document any immediate unsafe action that resulted in the incident/accident, as well as the underlying reason(s) for the unsafe actions to exist. The investigator(s) will interview supervisors, managers, workers, JHSC members, or any other pertinent individuals to ensure that this information is uncovered and included in the Incident/Accident Investigation Reporting Form.

IDENTIFYING INCIDENT/ACCIDENT CAUSES:

The incident/accident investigation will determine and document any immediate hazardous causes that resulted in the incident/accident, as well as the underlying reasons for the hazardous causes to exist. The investigator(s) will assess the situation and causes during their investigation and interview supervisors, managers, workers, JHSC members and any other pertinent individuals to ensure this information is uncovered and included in the incident/accident report.

INCIDENT/ACCIDENT INVESTIGATION REPORTING FORM:

The Incident/Accident Investigation Reporting Form will be utilized for all investigations.

RECOMMENDED PREVENTION / REMEDIATION ACTIONS:

The incident/accident investigator(s) will make recommendations, based on their findings, focusing on the immediate causes and conditions, as well as the basic or primary reasons for the incident/accident. The recommendations will focus on corrective actions to be made to management in order to prevent or eliminate the possibility of future recurrence, and on the corrective action needed to ensure this.

RECOMMENDATIONS ACTED UPON:

Each incident/accident investigation report will be reviewed at the next JHSC meeting subsequent to the incident/accident and recommend follow up to ensure the corrective action is finalized accordingly.

RECOMMENDATIONS TO WORKERS:

The outcome of the incident/accident and the corrective action needed to eliminate or prevent further illness/injury will be communicated to employees via posting on the bulletin boards and review with relevant employees during safety talks.

DISABILITY/LOST TIME INJURY:**Reporting requirements for the Occupational Safety and Health Administration (OSHA):**

OSHA must be informed of any incident/accident that causes a death or the hospitalization of three or more employees with a 30 day window. The employer will verbally report such incidents within 8 hours after the employer learns of it. If another employee has informed OSHA of the death or the hospitalization of three or more employees, the report must still be made to OSHA by a manager or HR. Whether or not an incident is immediately reportable, if it results in the death of an employee or the in-patient hospitalization of 3 or more employees within 30 days of the incident, OSHA requires that the employer report the fatality/multiple hospitalization within 8 hours after learning of it.

OSHA requires the following information. However, if all of the information is not available, the call must still be made within 8 hours.

- (a) the name, address and type of business of the employer
- (b) the nature and the circumstances of the occurrence and the bodily injury sustained by the person
- (c) a description of the machinery, equipment or procedure involved
- (d) the time and place of the occurrence
- (e) the name and address of the person who was killed or critically injured
- (f) the names and addresses of all witnesses to the occurrence
- (g) the name and address of the physician or surgeon, if any, by whom the person was or is being attended for the injury;
- (h) the steps taken to prevent a recurrence

Reporting requirements for a point of operation injury for the Occupational Safety and Health Administration (OSHA):

OSHA must be informed of any point of operation injuries to operators or other employees within 30 days of knowledge of the occurrence and the employer will verbally report such incidents. If another employee has informed OSHA of the point of operation injury, the report must still be made to OSHA by a manager or HR.

OSHA requires the following information. However, if all of the information is not available, the call must still be made within 8 hours.

- (a) Employer's name, address and location of the workplace (establishment).
- (b) Employee's name, injury sustained, and the task being performed.

NON-DISABILITY PROFESSIONAL MEDICAL TREATMENT:

Any incident/accidents of this nature will be investigated. The Incident/Accident Investigation Reporting Form will be forwarded to HR and will be reviewed by the JHSC at their next meeting to ensure any corrective action necessary has been taken to prevent or eliminate recurrence. Further internal reporting will continue upwards through the pertinent members of the management team to the General Counsel. A record of an incident/accident, explosion or fire causing injury requiring medical attention but not disabling a worker from performing his or her usual work may need to be recorded on the OSHA 300 Log, and should be looked at individually for possible inclusion in the Log.

NON-DISABILITY FIRST AID TREATMENT:

Typically, these incidents are reported to HR. The HR Manager will determine if an investigation is necessary and will ensure any corrective action necessary has been taken to prevent or eliminate recurrence. Further internal reporting will continue upwards through the pertinent members of the management team to the President. The Incident/Accident Investigation Reporting Form will be kept in the permanent records of the employer. First aid treatments are not usually recordable on the OSHA 300 Log, but should be looked at individually for possible inclusion in the Log.

ACUTE-CHRONIC OCCUPATIONAL ILLNESS:

Any illnesses of this nature will be investigated. The Incident/Accident Reporting Form will be forwarded to HR and will be reviewed by the JHSC at their next meeting to ensure any corrective action necessary has been taken to prevent or eliminate recurrence. Further internal reporting will continue upwards through the pertinent members of the management team to the General Counsel. Illnesses will be properly recorded on the OSHA 300 Log.

NON-INJURY PROPERTY DAMAGE INCIDENTS:

The Incident/Accident Reporting Form will be forwarded to HR and will be reviewed by the JHSC at their next meeting to ensure any corrective action

necessary has been taken to prevent or eliminate recurrence. Further internal reporting will continue upwards through the pertinent members of the management team to the General Counsel. The Incident/Accident Investigation Reporting Form will be kept in the permanent records of the employer. These property damage incidents are not recorded on the OSHA 300 Log.

FIRE/EXPLOSION:

Any incident/accidents of this nature which may have but did not result in a serious lost time injury will be investigated. (Incidents/Accidents of this nature that did result in a critical/fatal or lost time injury will be investigated and reported under those categories.) The Incident/Accident Reporting Form will be forwarded to HR and will be reviewed by the JHSC at their next meeting to ensure any corrective action necessary has been taken to prevent or eliminate recurrence. Further internal reporting will continue upwards through the pertinent members of the management team to the General Counsel. The Incident/Accident Investigation Reporting Form will be kept in the permanent records of the employer. Fire and explosions are not recorded on the OSHA 300 Log.

CHEMICAL SPILL:

Any incidents/accidents of this nature, which may have but did not result in a serious lost time injury, will be investigated. Incidents/Accidents of this nature that did result in a critical/fatal or lost time injury will be investigated and reported under those categories. The completed Incident/Accident Investigation Reporting Form will be forwarded to HR and will be reviewed by the JHSC at their next meeting to ensure any corrective action necessary has been taken to prevent or eliminate recurrence. Further internal reporting will be conducted in accordance to the Environmental Management System. The Incident/Accident Investigation Reporting Form will be kept in the permanent records of the employer. Chemical spills are not recorded on the OSHA 300 Log.

3.0 ASSIGNED RESPONSIBILITIES

Managers

- Report incidents/accidents immediately to Human Resources.
- Take appropriate actions necessary for the prevention of workplace injuries and illnesses in the workplace.

Human Resources

- Responsible for the maintenance of this program.
- Maintain injury/illness Records (OSHA 300 Log and investigations).

- Report this information to the Management Team and the JHSC.
- Assist Supervisors and JHSC in the investigation process.
- Complete and send any Workers' Compensation forms.
- Ensure workers are provided with the appropriate medical treatment.

Supervisors

- Report any injuries/illnesses to the Human Resources Department, immediately after they become aware of the incident/accident.
- Ensure the JHSC participates in the investigation or has knowledge of the incident/accident, etc.
- Complete the Incident/Accident Reporting Form. (Supervisor staff to which the employee reports is to be the lead investigator of the incident/accident. The incident/accident investigation is to begin immediately upon the Supervisor being notified of the incident/accident and completed within 24 hours.)
- In the case of a critical injury, investigate the injury in consultation with the JHSC member for the area.
- Submit the completed Incident/Accident Investigation Reporting Form and any other supporting documentation promptly to Human Resources.
- Make the necessary recommendations and subsequent follow-up to the injury/illness corrective actions.

Joint Health and Safety Committee Members

- Participate with the supervisor in conducting the incident/accident investigation.
- Be aware of the incidents/accidents in their area, report to the whole JHSC and follow up with resolutions to safety issues.
- Review all incident/accident reports on a regular basis, monthly and yearly.
- Make recommendations to management in order to prevent similar incidents/accidents from re-occurring.

All Employees

- Report incidents/accidents immediately after they have received treatment for their injury or illness, to their supervisor.
- Assist in making recommendations for corrective actions to prevent similar incidents/accidents from re-occurring.
- Cooperate with the incident/accident investigation.

Qualified First-Aid Providers

- Treat the injured employee within their qualifications, or send that person out for treatment, by taxi, or, if necessary, by ambulance. (DO NOT ALLOW EMPLOYEE TO DRIVE THEMSELVES TO THE HEALTH CARE FACILITY.)
- File an Incident/Accident Investigation Reporting Form with the JHSC
- Cooperate with the incident/accident investigation

4.0 TRAINING

Employee training will include:

- The importance of reporting all incidents/accidents
- Overview of incident/accident investigation
- Incident/accident prevention

Supervisor training will include:

- Incident/accident investigation
- Identifying unsafe actions and causes
- Incident/accident reporting procedures
- Interviewing skills

JHSC training will include:

- All elements listed for the worker
- All elements listed for the Managers

HR training will include:

- Completing the OSHA 300 Log
- Posting the OSHA 300 Log summary
- Completing Workers' Compensation forms

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

This policy will be reviewed annually and modified if necessary.

6.0 DEFINITIONS

Critical Injury: An injury of a serious nature that,

- a) Places life in jeopardy;
- b) Produces unconsciousness;
- c) Results in substantial loss of blood;
- d) Involves the fracture of a leg or arm but not a finger or a toe;
- e) Involves the amputation of a leg, arm or foot but not a finger or toe
- f) Consists of burns to a major portion of the body; or

g) Causes the loss of sight in an eye(s)

Disability, lost time injury: An incident/accident, explosion or fire, which disables a worker from performing his or her usual work.

Near incidents/accidents with potential for loss or injury: Any incident, which may have resulted in an injury or loss.

Non-disability first aid treatment: First aid is the one-time treatment or care and any follow-up visit(s) for observation purposes only.

First aid includes, but is not limited to

- cleaning minor cuts, scrapes, or scratches
- treating a minor burn
- applying bandages and/or dressings
- applying a cold compress, cold pack, or ice bag
- applying a splint
- changing a bandage or a dressing after a follow-up observation visit.

Non-disability professional medical treatment:

- services requiring the professional skills of a health care practitioner (e.g., doctor, nurse, chiropractor, or physiotherapist)
- services provided at hospitals and health facilities
- prescription drugs.

Non-injury property damage incidents: Any incident/accident that results in property damage and have not resulted in an injury.

Occupational Illness: Means a condition that results from exposure in a workplace to a physical, chemical or biological agent to the extent that normal physiological mechanisms are affected and the health of the worker is impaired.

Occupational Injury: Any injury such as a cut, fracture, sprain, amputation, etc. which results from a work incident/accident or from an over exposure involving a single incident in the work environment.

Spills: Spills are defined as releases of pollutants into the natural environment originating from a structure, vehicle, or other container, and that are abnormal in light of all circumstances. Spills must be reported immediately to the proper local authority and to the Legal Department if they cause or are likely to cause any of the following:

- impairment to the quality of the natural environment - air, water, or land;

- injury or damage to property or animal life;
- adverse health effects;
- safety risk;
- making property, plant, or animal life unfit for use;
- loss of enjoyment of normal use of property; or
- interference with the normal conduct of business.

7.0 APPENDICES

- 1 Incident/Accident Investigation Reporting Form**
- 2 Incident/Accident Declaration of Treatment Form**
- 3 OSHA 300 Log (blank sample)**
- 4 OSHA 300 Log Summary (blank sample)**
- 5 OSHA Job Safety and Health Poster**

REVISION HISTORY

January 2012: removal of employee's Social Security Number from Incident/Accident Investigation Reporting Form (Appendix 1). Added as Appendix 5, the OSHA poster – Job Safety and Health It's the law! – to be available for printing if needed at off-site locations.

February 2013: Subsection 2.0 (Standards and Procedures) Non-Disability Professional Medical Treatment and Acute-Chronic Occupational Illness paragraphs: deleted the following sentence: "Managers will review the statistics weekly in their meeting."

Subsection 3.0 (Assigned Responsibilities)

Managers – removed second bullet: Review incident/accident summary on a weekly basis.

Human Resources – removed third bullet: Maintain injury/illness Statistics.

January 2014: Subsection 2.0 (Standards and Procedures) under heading "Recommendations to Workers" changed "safety boards" to read "bulletin boards"

Under heading Disability/Lost Time Injury, subheading Reporting requirements for the Occupational Safety and Health Administration (OSHA), add "within a 30 day window" at end of first sentence.

Subsection 3.0 (Assigned Responsibility), subheading Qualified First-Aid Providers, 2nd bullet – changed "Safety, Health and Environmental Coordinator" to read "JHSC"

Subsection 4.0 (Training) changed "Safety, Health and Environmental Coordinator" to read "HR"

APPENDIX 1

Incident/Accident Investigation Reporting Form

INCIDENT/ACCIDENT INVESTIGATION REPORTING FORM			
CLAIM INFORMATION			
Date/Time of Incident/Accident: _____ : _____ am pm		After the call, write the Claim number here: WC _____	
Is this claim work related? Yes ☐ No ☐		Will the employee miss time from work? Yes ☐ No ☐	
Employer Name: _____			
EMPLOYEE INFORMATION			
Employee's Name: _____			
Home Address: (street) _____		(city) _____ (state) _____ (zip) _____	
Home Phone Number: () _____ - _____		Male ☐ Female ☐	
Date of Birth: _____		Marital Status: (circle one) Single Married Widowed Divorced	
Hire Date: _____		Number of Dependents: _____ Dependents Under 18: _____	
Occupation: _____		Department Name: _____	
State Hired: _____		Supervisor Name & Phone: _____	
Current Weekly Wage: _____		Hourly Wage: _____ Hours Worked Per Week _____	
Days Worked Per Week: _____		Hours Worked Per Day: _____ Employment Status _____	
Employer Report No: _____		Employee ID No: _____ Was Salary Continued: _____	
Was Employee Paid in Full for Date of Incident/Accident: _____		How often is employee paid: _____	
Education Level: _____		Any Prior WC Injuries: _____ OSHA Reference No: _____	
EMPLOYER INFORMATION			
Contact Name, Telephone Number, and Title: _____			
Work Location: (Street) _____		(City) _____ (State) _____ (Zip) _____	
Mailing Addr: (Street) _____		(City) _____ (State) _____ (Zip) _____	
Employer Location Code: _____		Employer SIC.: _____	
Employer FED ID.: _____		Employer Code: _____	
Nature of Business: _____			
Policy Number: _____			

INCIDENT/ACCIDENT INFORMATION	
Did the Incident/Accident Occur at the Work Location? Yes ☐ No ☐ If no, where did the incident/accident occur?	
Incident/Accident Address: (Street) (City) (State) (Zip)	
Nature of Incident/Accident:	
Give a Full Description of the Incident/Accident: (Be as Complete as Possible)	
Are Other WC Claims Involved? Yes ☐ No ☐	Date and Time Reported to Employer: AM PM
Person Reported To:	
IF INJURY WAS INVOLVED	
Injury Description:	
Date of Death (If applicable) :	Is Employee Hospitalized? Yes ☐ No ☐
Lost Time? Yes ☐ No ☐	If yes, What was the First Full Day Out: / /
Date Last Worked: / /	Date Disability Began: / /
Date Returned to Work: / /	OR Estimated Return to Work Date: / /
Time Workday Began: AM PM	
Which Part of the Body Was Injured? (e.g. Head, Neck, Arm, Leg)	Nature of Injury: (e.g. Laceration, Bruise, Fracture)
Part of Body Location: (e.g. Left, Right, Upper, Lower)	Source of Injury
MEDICAL INFORMATION	
Safeguards Provided? Yes ☐ No ☐	Safeguards Utilized? Yes ☐ No ☐
Initial Medical Treatment: Circle One ER Treated and Released Hospitalized Physician/Clinic Minor/Onsite No Treatment	
Hospital- Name, Address, Phone, Fax, Specialty:	
Clinic/Doctor- Name, Address, Phone, Fax, Specialty	
WITNESS INFORMATION	
Were There Any Witnesses? Yes ☐ No ☐	
If Yes, List Names and How to Contact Them:	

ADDITIONAL COMMENTS & INFORMATION

REPORT PREPARED BY	
Name:	Title:
Signature:	Phone:

APPENDIX 2

INCIDENT/ACCIDENT DECLINATION OF TREATMENT FORM

When the waiver is signed, no words may be added or deleted to the exemption. It must be exactly as worded below. Copy the below, print, sign and turn in to your employee.

The following statement of declination of treatment must be signed by an employee who chooses not to accept the recommended treatment. The statement can only be signed by the employee following being informed of procedures that should be undertaken.

This statement is a waiver of available treatment at the time of incident/accident. Employees may contact their primary care physician or other medical provider if existing conditions persist or if they remain occupationally at risk. If the employee chooses to contact future medical treatment, they must notify HR immediately and inform the provider that it may be a workman's compensation claim. If claim is found to be work related, claimant must notify provider that all billing must be submitted through the Company's HR Dept. to our Workman's Compensation Insurance Carrier.

Incident/Accident Declination Statement

I understand that due to my occupational incident/accident that I may require further and/or more intense medical treatment. I have been given the opportunity to receive that treatment, at no charge to me; however, at this time I decline to accept this available treatment. I understand that by declining this treatment I may continue to be at risk of further injury and/or symptoms. If, in the future, I continue to have symptoms believed to be related to this incident/accident and I feel it necessary for further treatment, I can elect to contact my primary care physician or other medical personnel.

Employee Signature: _____ Date: _____

APPENDIX 4

OSHA 300 Log Summary

OSHA Form 300A**Summary of Work-Related Injuries and Illnesses****Year 20**
 Department of Consumer & Business Services
 Oregon Occupational Safety & Health Division (OR-OSHA)

Form approved OSHA no. 1318-0176

All establishments covered by OAR 437-001-0700 must complete this Summary, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category, write the totals below, make sure you've added the entries from every page of the Log. If you haven't had any cases, write "0".

Employees, former employees, and their representatives, have the right to review the OSHA Form 300 in its entirety. They also have limited access to the DCBS Form 801 or its equivalent. See OAR 437-001-0700(20).

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
(G) _____	(H) _____	(I) _____	(J) _____

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
(K) _____	(L) _____

Injury and Illness Types

Total number of...	(M)	(4) Poisonings	_____
(1) Injuries	_____	(5) Hearing Loss	_____
(2) Skin disorders	_____	(6) All other illnesses	_____
(3) Respiratory conditions	_____		

Keep this Summary posted from February 1 to April 30 of the year following the year covered by this form.

440-3353B (11-01)

(OR-OSHA/COM)

Establishment Information

Your establishment name _____

Street _____

City _____ State _____ ZIP _____

Industry description (e.g., Manufacturer of motor truck trailers) _____

Standard Industrial Classification (NAICS), if known (e.g., 336212) _____

Employment Information (If you don't have these figures, see the worksheet on the back of this page to estimate.)

Annual average number of employees _____

Total hours worked by all employees last year _____

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that, to the best of my knowledge, the entries are true, accurate, and complete.

Company Executive _____ Title _____

Phone: (____) _____ Date: ____/____/____

APPENDIX 5

OSHA Job Safety and Health Poster

Job Safety and Health

It's the law!

EMPLOYEES:

- You have the right to notify your employer or OSHA about workplace hazards. You may ask OSHA to keep your name confidential.
- You have the right to request an OSHA inspection if you believe that there are unsafe and unhealthful conditions in your workplace. You or your representative may participate in that inspection.
- You can file a complaint with OSHA within 30 days of retaliation or discrimination by your employer for making safety and health complaints or for exercising your rights under the *OSH Act*.
- You have the right to see OSHA citations issued to your employer. Your employer must post the citations at or near the place of the alleged violations.
- Your employer must correct workplace hazards by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.
- You have the right to copies of your medical records and records of your exposures to toxic and harmful substances or conditions.
- Your employer must post this notice in your workplace.
- You must comply with all occupational safety and health standards issued under the *OSH Act* that apply to your own actions and conduct on the job.

EMPLOYERS:

- You must furnish your employees a place of employment free from recognized hazards.
- You must comply with the occupational safety and health standards issued under the *OSH Act*.

**This free poster available from OSHA –
The Best Resource for Safety and Health**



Occupational Safety and Health Administration
U.S. Department of Labor







Free assistance in identifying and correcting hazards or complying with standards is available to employers, without citation or penalty, through OSHA-supported consultation programs in each state.

1-800-321-OSHA
www.osha.gov

OSHA 3090 12-001

Chapter 5: Record Keeping
Policy No.: 5.01
Title: Record Keeping and Workers' Compensation
Injury/Illness Reporting Procedure
Effective Date: January 1, 2011

1.0 OBJECTIVE

The Injury/Illness reporting procedure is intended to provide AmTote employees, supervisors, managers, Joint Health and Safety Committee members, Health and Safety and Human Resources Department with a comprehensive method to report an accident.

AmTote has implemented reporting the injury/illness policy in order for the Company to operate efficiently, contain costs and to be able to treat each employee fairly and equitably.

It is the policy of AmTote, that all injuries and illnesses are reported in a timely manner to allow for proper investigation and the implementation of corrective actions.

2.0 STANDARDS AND PROCEDURES

2.1 Injuries/Illnesses to be Reported

- Injury where first aid is rendered in the facility and documented on a Accident Injury Form that could result in medical aid or lost time injury or illness.
- Injury or illness where it is treated under the direction of or by a doctor.
- Injury or illness where time is lost from work.
- Significant injury.
- Any exposure to blood or body fluids.

2.2 Reporting of Accidents

The employee must report any event described in Policy 4.01, Accident Investigation Procedures, to their immediate supervisor, only after they have received treatment for their injury or illness. If that supervisor is not available they can report to the individuals as follows:

- Team Leader
- Human Resources

- Manager

The employee is to ensure that they report the accident, injury or illness prior to returning to work.

2.3 General

- a) After any one of the reportable situations has occurred, the employee, if required, is to seek medical attention from a first aid responder.
- b) After treatment they are to report the accident, illness, injury to one of the people mentioned in Policy 4.01, Accident Investigation Procedures.
- c) The supervisor will conduct an accident investigation if one of the reportable conditions has occurred.
 - The supervisor will submit copies of the investigation report to the Building Manager/HR Manager and retain a copy for their record.
 - The supervisor will have the employee and any witnesses to the injury/illness fill out a statement of injury/illness, which is also to be signed and submitted to the above with the accident investigation report form.
 - The investigation is to be conducted immediately with the report submitted by the end of the shift.
- d) The Building Manager/HR Manager, upon receiving the incident/accident report will follow up with the area supervisor to aid in the investigation, where required, and will ensure that reporting is done and follow-up with any corrective actions in conjunction with the supervisor.
- e) The Building Manager/HR Manager is responsible to report to the JHSC any accident statistics, causation and problem resolution.
- f) A Significant Injury as defined in the Occupational Safety and Health Act (death or hospitalization of 3 or more employees from the same event) is to be reported to the Federal or State OSHA by phone (within 8 hours). The President is to be contacted immediately and a copy of the report forwarded to him. See Appendix 1, Notification of Significant Injury Form.

2.4 Specific

- a) When an injury has occurred, obtain first aid immediately.
- b) If medical attention is required, the first aid responder, in conjunction with the Supervisor will:

Arrange transportation to get the employee to medical attention by cab, or if necessary, by ambulance.
- c) Supervisor is to ensure that the employee's wages are paid for the day of injury.
- d) The Supervisor is to report injuries to Human Resources who reports to the Workers' Compensation Claims Administrator if it involves:
 - External Medical Treatment
 - Time away from work or
 - Lost wages

3.0 **ASSIGNED RESPONSIBILITY**

Affected Supervisor with assistance from JHSC and/or HR Manager.

4.0 **TRAINING**

Training shall be conducted on a departmental basis and as a group for existing employees. Training will be provided to new employees as part of their orientation.

This training will be in the form of, but not limited to, DVD, video, audio, posters, handouts, etc. Some training may be in the form of actual demonstration of proper tools, devices, and or techniques. Training will be refreshed on a bi-annual basis or as required.

REVISION HISTORY

April 2012: Section 4.0, Training, changed last sentence to read: Training will be refreshed on a bi-annual basis or as required.

February 2013: Subsection 2.2 (Reporting of Accidents) removed reference to Health and Safety Coordinator.

Subsection 2.3 (General) items c), d), and e) – changed Building Manager to read: Building Manager/HR Manager.

Subsection 2.4 d) (Specific) changed Health and Safety Coordinator to Supervisor and inserted “Human Resources who reports to” after “injuries to.”

January 2014: Subsection 2.3 (General) item f) – changed “See Notification report form” to read “See Appendix 1 – Notification of Significant Injury Form”
Appendix 1 – changed HR fax number from “5299” to now read “5086”

Appendix 1 - Notification of Significant Injury

Injury Type (Check One):

- ☐ Loss Of Consciousness ☐ Substantial Loss Of Blood ☐ Places Life In Jeopardy
☐ Fracture Of Arm Or Leg ☐ Burn To Major Portion Of Body ☐ Loss Of Sight In An Eye
☐ Stay 1 Or More Nights In Hospital As Result Of Injury

Mandatory OSHA Reporting:

Within 8 Hours

- ☐ Fatality
☐ Three Or More Hospitalized
☐ Amputation Within 30 Days Or Other Point Of Operation Injury (mechanical power presses)
☐ Federal/State OSHA Notified

Loss Information (please complete in full):

Employee Name: _____ Hire Date: _____
 Loss Date: _____ Work Location: _____
 Description: _____

Extent Of Injury & Body Area: _____

Hospitalized?	☐ Yes	☐ No	If Yes, Identify Hospital
Surgery?	☐ Yes	☐ No	If Yes, Identify Procedure
Outpatient Clinic or General Doctor?	☐ Yes	☐ No	If Yes, Identify Procedure
Workers Comp Insurer Notified?	☐ Yes	☐ No	Notification Date:
Accident Investigation Completed?	☐ Yes	☐ No	If Yes, Identify Causes Below:

Other details: _____

Completed By: _____ Title: _____

Work Site/Dept. & Phone: _____

Please attach additional pages if there is insufficient space in the lines above. If the Accident Investigation is complete, please attach the Report.

This form should be completed within 24 hours of the accident and faxed to: Human Resources at (410) 785-5086

Chapter 5: Record Keeping
Policy No.: 5.02
Title: Significant Injury Procedure
Effective Date: January 1, 2011

1.0 OBJECTIVE

To ensure that Departmental personnel are prepared to respond to a critical injury or fatality of an employee due to a workplace accident. A workplace accident is an accident that occurs on the company's premises, or while the employee is working for the company while off the premises.

A CRITICAL INJURY is described as an injury that:

- (a) Places life in jeopardy
- (b) Produces unconsciousness
- (c) Results in substantial loss of blood
- (d) Involves the fracture of a leg or arm but not a finger or toe
- (e) Involves the amputation of a leg, arm or foot but not a finger or a toe
- (f) Consists of burns to a major portion of the body
- (g) Causes the loss of sight in an eye(s)

The below requirement applies to each CRITICAL INJURY or FATALITY. A workplace accident is an accident that occurs on the company's premises, or while the employee is working for the company while off the premises.

2.0 STANDARDS AND PROCEDURE

2.1 The following steps shall be carried out immediately following a **CRITICAL INJURY** or a **FATALITY**:

- 2.1.1 Stop any machinery, process, etc., that may pose further hazard from its operation and lock out.
- 2.1.2 Assess the area first to confirm it is safe to enter and assist the injured person(s).
- 2.1.3 Stabilize injured employee(s) and immediately arrange for transportation to medical services (i.e., 911 or alternate transportation to hospital).

2.1.4 If an ambulance has been requested, post an individual outside to direct the ambulance to the area of the plant where the injured employee(s) is located.

- The supervisor, Building Manager or designated employee shall notify the individuals listed below:

Name	Title	Contact Numbers
Michael Fuchek	Vice President & General Counsel	410-785-5155
Cindy Wiles	Human Resources Manager	410-785-5157
Tom Kaiser	Environmental, Health and Safety	410-785-5143
Steve Keech	President	410-785-5020
Angela Hartman	Workers Compensation Administrator	410-785-5229

- The injury scene shall be SECURED and NOT DISTURBED except for the purposes of preventing further injury / relieving human suffering.
- Machinery shall be locked out and tagged out until released by a State OSHA or other inspector.
- Once all previous steps have been carried out, **Departmental Management** shall notify OSHA or State OSHA at (800) 321-6742. THIS NOTIFICATION WILL BE WITHIN EIGHT HOURS AFTER THE DEPARTMENT HAS KNOWLEDGE OF THE ACCIDENT. NOTIFICATION IS NECESSARY WHEN A DEATH (FOR ANY REASON INCLUDING HEART ATTACK) OR THREE OR MORE EMPLOYEES HAVE BEEN HOSPITALIZED FROM THE SAME INCIDENT.
- OSHA/STATE OSHA WILL BE NOTIFIED WHEN A POINT OF OPERATION INCIDENT HAS OCCURRED. THIS NOTIFICATION WILL BE WITHIN 30 DAYS AFTER THE DEPARTMENT HAS KNOWLEDGE OF THE ACCIDENT.
- Complete the Notification of Significant Injury/Fatality Form and forward it by FAX to the individuals noted on the Form. See Appendix 1.

- The Notification of Significant Injury/Fatality Form shall not be submitted to any outside party unless approved by AmTote Legal Counsel.
- Within 48 hours following a CRITICAL INJURY or FATALITY, a copy of the report shall be forwarded to:

AmTote Health & Safety by FAX: 410-785-5086

The personnel below shall complete the accident investigation:

- A management team member along with a Member of the JHSC shall complete an accident investigation.
- The Department shall not release any reports to OSHA or State OSHA or any other person until authorization has been given by the following individuals:
 - AmTote Health & Safety
 - Department Manager
 - Vice President / Legal Counsel

3.0 ASSIGNED RESPONSIBILITIES

Managers

- Report Accidents immediately to the Human Resources.
- Take appropriate actions necessary for the prevention of workplace injuries and illnesses in the workplace.

Human Resources

- Responsible for the maintenance of this program.
- Maintain injury/illness Records.
- Report this information to the Management Team and the JHSC.
- Assist Supervisors and JHSC Members in the investigation process.
- Complete and maintain required Logs, i.e., OSHA 300.

Supervisors

- Report any injuries/illnesses to the Human Resources Department, immediately.
- Investigate the injury/illness.

- Complete the accident/injury investigation form.
- In the case of a significant injury, investigate the injury in consultation with the JHSC member for the area.
- Submit the completed accident/injury form and any other supporting documentation to the HR Manager.
- Make the necessary recommendations and subsequent follow-up to the injury/illness corrective actions.

Joint Health and Safety Committee Members

- Help supervisor in conducting the accident investigation when there has been a critical injury, or when requested to help.
- Be aware of the accidents in their area, report to the whole JHSC and follow up with resolutions to safety issues.
- Review all accident/injury reports during monthly meeting.
- Make recommendations to management in order to prevent similar accidents from recurring.

Employees

- Report accidents/incidents immediately to their supervisor.
- Complete the accident/injury investigation form.
- Assist in making recommendations for corrective actions to prevent similar accidents from recurring.
- Co-operate with the accident investigation.

Qualified First-Aider First Aid Responder

- Treat the injured employee within their qualifications or send that person out for treatment, by taxi or, if necessary, by ambulance.
- Assist in the accident/injury report.
- Cooperate with the accident investigation.

4.0 TRAINING

Training shall be conducted on a departmental basis and as a group for existing employees. Training will be provided to new employees as part of their orientation.

This training will be in the form of, but not limited to, DVD, video, audio, posters, handouts, etc. Some training may be in the form of actual demonstration of proper tools, devices, and or techniques. Training will be refreshed on a bi-annual basis or as required.

5.0 REFERENCES

Occupational Safety and Health Act

6.0 DEFINITIONS

Occupational Illness: Means a condition that results from exposure in a workplace to a physical, chemical or biological agent to the extent that normal physiological mechanisms are affected and the health of the worker is impaired.

Occupational Injury: Any injury such as a cut, fracture, sprain, amputation, etc., which results from a work accident or from an over exposure involving a single incident in the work environment.

Significant Injury: An injury of a serious nature that,

- Places life in jeopardy;
- Produces unconsciousness;
- Results in substantial loss of blood;
- Involves the fracture of a leg or arm but not a finger or a toe;
- Consists of burns to a major portion of the body; or
- Causes the loss of sight in an eye

REVISION HISTORY

April 2012: Section 4.0, Training – changed last sentence to read: Training will be refreshed on a bi-annual basis or as required.

January 2012: Section 2.1.4 – Removed Joan Grudinsky from chart and replaced with Angela Hartman as Workers' Compensation Administration; changed contact phone number to 410-785-5229; changed AmTote's Health and Safety Fax number to now be 410-785-5086.

February 2013: Subsection 2.1.4; first bullet – changed EHS Coordinator to read: Building Manager;

Sixth bullet – changed "Critical Injury" to read: "Significant Injury Form"

Subsection 3.0 (Assigned Responsibilities) – Managers, deleted second bullet "Review accident summary on a weekly basis."

Human Resources, deleted third bullet "Maintain injury/illness Statistics"

Joint Health and Safety Committee Members, changed third bullet from: "Review all accident/injury reports on a regular basis, monthly and yearly" to now read: "Review all accident/injury reports during monthly meeting"

Subsection 5.0 (References): deleted notation – “Section Requires Review to Ensure Compliance with OSHA Requirements (Federal/State).”

January 2014: Subsection 2.0 (Standards and Procedures) subheading 2.1.4, 6th bullet, changed from “Complete the Notification of Significant Injury Form and forward it by FAX to the individuals noted on the Form.” to now read: “Complete the Notification of Significant Injury/Fatality Form and forward it by FAX to the individuals noted on the Form. See Appendix 1.”

Changed the Significant Injury/Fatality Form to read: Appendix 1 – Notification of Significant Injury/Fatality Form; added the line “Fax to AmTote Human Resources at: 410-785-5086”

Section B – Incident Details, changed “Identified by First Reported to” to read: “Identified/First reported by”

Appendix 1 – Notification of Significant Injury/Fatality Form

***TO BE COMPLETED BY SENIOR EMPLOYEE PRESENT AT THE TIME OF
OCCURRENCE***

Fax to AmTote Human Resources at: 410-785-5086

SECTION A – Facility Information

Work Location: _____

Address : _____

Telephone/Fax #: _____

SECTION B – Incident Details

Date of Occurrence _____ Time of Occurrence _____

Identified/First reported by (at facility): _____

Personnel Involved or Exposed: _____

Location of Incident: _____

Chapter 6: Ergonomics
Policy No.: 6.01
Title: Ergonomics Plan
Effective Date: January 1, 2011

1.0 OBJECTIVE

Although there is no Federal regulation or Act that requires or states that an Ergonomics program is required, OSHA strongly suggests that companies have a plan in place to help reduce work related injuries and lower insurance costs. In an effort to help keep employees safe and lessen the risk of “work related musculoskeletal injury,” (WMSD) AmTote is continuing to develop an Ergonomics program. The training of employees on proper work procedures and lifting techniques will help the employee to better understand safe work habits.

2.0 STANDARDS AND PROCEDURES

The JHSC has developed a program which identifies Ergonomic risks and issues on a departmental basis. The program will consist of a physical and periodic walk through the different departments and assessing the individual work areas for the availability of devices that can help control or eliminate the risk of WMSD's. Some samples of these risks may be: exerting excessive force, awkward postures, static positions that must be held for long periods of time, increased body speed or twisting when lifting, excessive repetition, etc.

Learn to identify the symptoms that may have been created by an Ergonomic issue so that they may be addressed before the injury occurs. Some of these symptoms include: painful joints, tingling or numbness in the hands or feet, shooting or stabbing pains in the arms or legs when performing duties, swelling or inflammation, stiffness or cramping of the wrists or forearms, and back or neck pain.

Identify the tasks in the Stockroom and Shipping area such as but not limited to lifting boxes or terminals, loading or unloading delivery vehicles, packing and unpacking items, filling requisitions; in the Assembly area tasks such as but not limited to relocating a part or assembly, putting together an assembly or quantity of assemblies, lifting terminals onto tables for testing, performing the actual test on the terminal, re-stacking the terminals back on the floor; in the Field Support area tasks such as but not limited to continual repair of parts or components while seated at a static workbench, moving, lifting, and locating these repaired items on shelves for future use; in the Software Development, Accounting, Engineering, and Administrative areas tasks such as but not limited to performing

data entry tasks for extended periods without a relief break, reading a computer screen for extended periods of time etc.

3.0 ASSIGNED RESPONSIBILITIES

The JHSC will put controls in place that will assist in reducing the amount and frequency of WMSDs. They may consist of one or more of the following: changes to the immediate work environment, proper training in the performance of tasks such as lifting and bending, or administrative shared or reassignment of repetitive duties. There are also some tangible items that can help reduce the impact of performing these tasks such as wrist rests, monitor stands, keyboard desk trays, and proper furniture for computer-type tasks. There are also gloves, lifting/back support belts, hand trucks, pallet jacks and other devices for moving heavier objects. Managers will be trained to help identify problem issues where injury could occur and will be responsible for informing the employee of the correct procedures to complete the task safely.

4.0 TRAINING

Training shall be conducted on a departmental basis and as a group for existing employees. Training will be provided to new employees as part of their orientation.

This training will be in the form of, but not limited to, DVD, video, audio, posters, handouts, etc. Some training may be in the form of actual demonstration of proper tools, devices, and or techniques. Training will be refreshed on a bi-annual basis or as required.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

AmTote will keep documented records of training schedules, type or form of training, the name of the trainer if an outside source, the dates of training and the names of the employees who received training.

6.0 DEFINITIONS

Ergonomics: science of designing work stations and tools and instituting work practices to help reduce WMSDs.

Some acronyms for Ergonomic work related injuries are:

- **CTD:** cumulative trauma disorder
- **CTS:** carpal tunnel syndrome
- **MSD:** musculoskeletal disorder

- **RMI:** repetitive motion injury
- **WMSD:** work related musculoskeletal disorders

REVISION HISTORY

April 2012: Section 4.0, Training – changed last sentence to read: Training will be refreshed on a bi-annual basis or as required.

January 2014: Section 1.0, Objective – changed “beginning to develop” to read: “continuing to develop”

Section 6.0, Definitions – changed “synonyms” to read “acronyms” and sorted the acronyms into alphabetical order

Chapter 7: Fall Protection
Policy No.: 7.01
Title: Ladder Safety
Effective Date: January 1, 2011

1.0 OBJECTIVE

To establish guidelines for safe use of ladders in order to avoid accident and/or injury and property damage.

All employees are urged to make suggestions which will assist in the safe performance of work. Employees should bring any unsafe conditions found in the plant to the attention of a member of your safety committee or supervisor at once.

2.0 STANDARDS AND PROCEDURES

In all instances, the use of fiberglass, factory-made ladders suitable for the height requirement of the task is required.

- The rungs must be >16 inches wide and equal to or less than 12 inches apart.
- Long ladders that are part of a building structure must have a rest platform every thirty feet.
- Side rails must extend 3.5 feet above the landing or top of the building
- Must be able to handle a minimum 250 lb load.

The following general requirements apply to all ladders:

- Ladder rungs, cleats, and steps must be parallel, level, and uniformly spaced when the ladder is in position for use.
- Rungs, cleats, and steps of portable and fixed ladders (except as provided below) must not be spaced less than 10 inches (25 cm) apart, nor more than 14 inches (36 cm) apart, along the ladder's side rails.
- Rungs, cleats, and steps of step stools must not be less than 8 inches (20 cm) apart, nor more than 12 inches (31 cm) apart, between center lines of the rungs, cleats, and steps.
- Rungs, cleats, and steps at the base section of extension trestle ladders must not be less than 8 inches (20 cm) nor more than 18 inches (46 cm) apart, between center lines of the rungs, cleats, and steps. The rung spacing on the extension section must not be less than 6 inches (15 cm) nor more than 12 inches (31 cm).

- Ladders must not be tied or fastened together to create longer sections unless they are specifically designed for such use.
- A metal spreader or locking device must be provided on each stepladder to hold the front and back sections in an open position when the ladder is being used.
- Two or more separate ladders used to reach an elevated work area must be offset with a platform or landing between the ladders, except when portable ladders are used to gain access to fixed ladders.
- Ladder components must be surfaced to prevent injury from punctures or lacerations, and prevent snagging of clothing.

Fixed Ladders

- A fixed ladder must be able to support at least two loads of 250 pounds (114 kg) each, concentrated between any two consecutive attachments. Fixed ladders also must support added anticipated loads caused by ice buildup, winds, rigging, and impact loads resulting from using ladder safety devices.
- Individual rung/step ladders must extend at least 42 inches (1.1 m) above an access level or landing platform either by the continuation of the rung spacing as horizontal grab bars or by providing vertical grab bars that must have the same lateral spacing as the vertical legs of the ladder rails.
- Each step or rung of a fixed ladder must be able to support a load of at least 250 pounds (114 kg) applied in the middle of the step or rung.
- The minimum clear distance between the sides of individual rung/step ladders and between the side rails of other fixed ladders must be 16 inches (41 cm).
- The rungs of individual rung/step ladders must be shaped to prevent slipping off the end of the rungs.
- The rungs and steps of fixed metal ladders manufactured after March 15, 1991, must be corrugated, knurled, dimpled, coated with skid-resistant material, or treated to minimize slipping.
- The minimum perpendicular clearance between fixed ladder rungs, cleats, and steps and any obstruction behind the ladder must be 7 inches (18 cm), except that the clearance for an elevator pit ladder must be 4.5 inches (11 cm).
- The minimum perpendicular clearance between the centerline of fixed ladder rungs, cleats, and steps, and any obstruction on the climbing side of the ladder must be 30 inches (76 cm). If obstructions are unavoidable, clearance may be reduced to 24 inches (61 cm), provided a deflection device is installed to guide workers around the obstruction.
- The step-across distance between the center of the steps or rungs of fixed ladders and the nearest edge of a landing area must be no less than 7 inches (18 cm) and no more than 12 inches (30 cm). A landing platform must be provided if the step-across distance exceeds 12 inches (30 cm).

- Fixed ladders without cages or wells must have at least a 15-inch (38 cm) clear width to the nearest permanent object on each side of the centerline of the ladder.
- Fixed ladders must be provided with cages, wells, ladder safety devices, or self-retracting lifelines where the length of climb is less than 24 feet (7.3 m) but the top of the ladder is at a distance greater than 24 feet (7.3 m) above lower levels.
- If the total length of the climb on a fixed ladder equals or exceeds 24 feet (7.3 m), the following requirements must be met: fixed ladders must be equipped with either (a) ladder safety devices; (b) self-retracting lifelines and rest platforms at intervals not to exceed 150 feet (45.7 m); or (c) a cage or well, and multiple ladder sections, each ladder section not to exceed 50 feet (15.2 m) in length. These ladder sections must be offset from adjacent sections, and landing platforms must be provided at maximum intervals of 50 feet (15.2 m).
- The side rails of through or side-step fixed ladders must extend 42 inches (1.1 m) above the top level or landing platform served by the ladder. Parapet ladders must have an access level at the roof if the parapet is cut to permit passage through it; if the parapet is continuous, the access level is the top of the parapet.
- Steps or rungs for through-fixed-ladder extensions must be omitted from the extension; and the extension of side rails must be flared to provide between 24 inches (61 cm) and 30 inches (76 cm) clearance between side rails.
- When safety devices are provided, the maximum clearance distance between side rails extensions must not exceed 36 inches (91 cm).

Ladder Safety Devices and Related Support Systems for Fixed Ladders

- All safety devices must be able to withstand, without failure, a drop test consisting of a 500-pound weight (226 kg) dropping 18 inches (41 cm).
- All safety devices must permit the worker to ascend or descend without continually having to hold, push, or pull any part of the device, leaving both hands free for climbing.
- All safety devices must be activated within 2 feet (.61 m) after a fall occurs, and limit the descending velocity of an employee to 7 feet/second (2.1 m/sec) or less.
- The connection between the carrier or lifeline and the point of attachment to the body belt or harness must not exceed 9 inches (23 cm) in length. See Appendix 1, Fall Harness Instruction and Inspection Form for further information.

Mounting Ladder Safety Devices for Fixed Ladders

- Mountings for rigid carriers must be attached at each end of the carrier, with intermediate mountings, spaced along the entire length of the carrier, to provide the necessary strength to stop workers' falls.
- Mountings for flexible carriers must be attached at each end of the carrier. Cable guides for flexible carriers must be installed with spacing between 25 feet (7.6 m) and 40 feet (12.2 m) along the entire length of the carrier, to prevent wind damage to the system.
- The design and installation of mountings and cable guides must not reduce the strength of the ladder.
- Side rails and steps or rungs for side-step fixed ladders must be continuous in extension.

Portable Ladders

- Non-self-supporting and self-supporting portable ladders must support at least four times the maximum intended load; extra heavy-duty type 1A metal or plastic ladders must sustain 3.3 times the maximum intended load. The ability of a self-supporting ladder to sustain loads must be determined by applying the load to the ladder in a downward vertical direction. The ability of a non-self-supporting ladder to sustain loads must be determined by applying the load in a downward vertical direction when the ladder is placed at a horizontal angle of 75.5 degrees.
- The minimum clear distance between side rails for all portable ladders must be 11.5 inches (29 cm).
- The rungs and steps of portable metal ladders must be corrugated, knurled, dimpled, coated with skid-resistant material, or treated to minimize slipping.

Use of All Ladders

- When portable ladders are used for access to an upper landing surface, the side rails must extend at least 3 feet (.9 m) above the upper landing surface. When such an extension is not possible, the ladder must be secured, and a grasping device such as a grab rail must be provided to assist workers in mounting and dismounting the ladder. A ladder extension must not deflect under a load that would cause the ladder to slip off its supports.
- Ladders must be maintained free of oil, grease, and other slipping hazards.
- Ladders must not be loaded beyond the maximum intended load for which they were built or beyond their manufacturer's rated capacity.
- Ladders must be used only for the purpose for which they were designed.

- Non-self-supporting ladders must be used at an angle where the horizontal distance from the top support to the foot of the ladder is approximately one-quarter of the working length of the ladder.
- Fixed ladders must be used at a pitch no greater than 90 degrees from the horizontal, measured from the back side of the ladder.
- Ladders must be used only on stable and level surfaces unless secured to prevent accidental movement.
- Ladders must not be used on slippery surfaces unless secured or provided with slip resistant feet to prevent accidental movement. Slip-resistant feet must not be used as a substitute for the care in placing, lashing, or holding a ladder upon slippery surfaces.
- Ladders placed in areas such as passageways, doorways, or driveways, or where they can be displaced by workplace activities or traffic must be secured to prevent accidental movement or a barricade must be used to keep traffic or activities away from the ladder.
- The area around the top and bottom of the ladders must be kept clear.
- The top of a non-self-supporting ladder must be placed with two rails supported equally unless it is equipped with a single support attachment.
- Ladders must not be moved, shifted, or extended while in use.
- Ladders must have nonconductive side rails if they are used where the worker or the ladder could contact exposed energized electrical equipment.
- The top or top step of a stepladder must not be used as a step.
- Cross bracing on the rear section of stepladders must not be used for climbing unless the ladders are designed and provided with steps for climbing on both front and rear sections.
- Ladders must be inspected by a competent person for visible defects on a periodic basis and after any incident that could affect their safe use.
- Single-rail ladders must not be used.
- When ascending or descending a ladder, the worker must face the ladder.
- Each worker must use at least one hand to grasp the ladder when climbing.
- A worker on a ladder must not carry any object or load that could cause him/her to lose balance and fall.

Structural Defects

- Portable ladders with structural defects--such as broken or missing rungs, cleats, or steps, broken or split rails, corroded components or other faulty or defective components—must immediately be marked defective, or tagged with “Do Not Use” or similar language and withdrawn from service until repaired.
- Fixed ladders with structural defects--such as broken or missing rungs, cleats, or steps, broken or split rails, or corroded components--must be withdrawn from service until repaired.

- Defective fixed ladders are considered withdrawn from use when they are (a) immediately tagged with “Do Not Use” or similar language; (b) marked in a manner that identifies them as defective; or (c) blocked-such as with a plywood attachment that spans several rungs.
- Ladder repairs must restore the ladder to a condition meeting its original design criteria before the ladder is returned to use.

3.0 ASSIGNED RESPONSIBILITIES

AmTote will provide a training program for each employee using ladders and stairways. The program must enable each employee to recognize hazards related to ladders and stairways and to use proper procedures to minimize these hazards.

For example, employers must ensure that each employee is trained by a competent person in the following areas, as applicable:

- Harness usage (see Appendix 1, Fall Harness Instruction and Inspection Form);
- The nature of fall hazards in the work area;
- The correct procedures for erecting, maintaining, and disassembling the fall protection systems to be used;
- The proper construction, use, placement, and care in handling of all stairways and ladders; and
- The maximum intended load-carrying capacities of ladders used.
- In addition, employers must retrain each employee as necessary to maintain the understanding and knowledge acquired.

4.0 TRAINING

All new hire employees who require Ladder training shall complete this training soon after their hire date.

These safety rules will be reviewed on an annual basis by the JHSC for any required changes. Circumstances requiring a change of this procedure may include legislative amendments, corporate amendments, incident history, and recommendation of the JHSC.

Training will be in the form of, but not limited to, viewing a safety DVD or other means.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

This safety program will be reviewed annually by the JHSC and revisions, if required, will be made at that time. This program may also be subject to emergency revision if deemed necessary.

6.0 TERMINOLOGY

Cleat: A ladder crosspiece of rectangular cross section placed on edge upon which a person may step while ascending or descending a ladder.

Double-Cleat Ladder: A ladder with a center rail to allow simultaneous two way traffic for employees ascending or descending.

Failure: Load refusal, breakage, or separation of components.

Fixed Ladder: A ladder that cannot be readily moved or carried because it is an integral part of a building or structure.

Handrail: A rail used to provide employees with a handhold for support.

Load Refusal: The point where the structural members lose their ability to carry the load.

Point of Access: All areas used by employees for work-related passage from one area or level to another.

Portable Ladder: A ladder that can be readily moved or carried.

Riser Height: The vertical distance from the top of a tread or platform/landing to the top of the next higher tread or platform/landing.

Side-Step Fixed Ladder: A fixed ladder that requires a person to get off at the top to step to the side of the ladder side rails to reach the landing.

Single-Cleat Ladder: A ladder consisting of a pair of side rails connected together by cleats, rungs, or steps.

Stair Rail System: A vertical barrier erected along the unprotected sides and edges of a stairway to prevent employees from falling to lower levels.

Temporary Service Stairway: A stairway where permanent treads and/or landings are to be filled in at a later date.

Through Fixed Ladder: A fixed ladder that requires a person getting off at the top to step between the side rails of the ladder to reach the landing.

Tread Depth: The horizontal distance from front to back of a tread, excluding nosing, if any.

REVISION HISTORY

March 2011: Added Appendix – Fall Harness Instruction and Inspection Form.

February 2013: Subsection 2.0 (Standards and Procedures) second paragraph, deleted: “including job-made ladders”

Subsection 6.0 (Terminology) deleted “Job-made Ladder” definition

January 2014: Subsection 4.0 (Training) deleted first paragraph “All safety rules shall be communicated to all employees at time of employment regularly.” Moved the 3rd paragraph to become the 1st paragraph: “All new hire employees who require Ladder training shall complete this training soon after their hire date.”

Appendix 1

Fall Harness Instruction and Inspection Form

First, inspect all parts of the harness and its additional components:

1. Check harness for tears, chaffing, bent or broken buckles, worn or torn threads, cracks or dry rot.
2. Check safety rope for frayed, cut, torn, or in any way damaged strands.
3. Check carabineer for bent, cracked, distorted, worn, malfunctioning parts, loose parts, sharp edges or missing parts.
4. Check all “D” rings, snap hooks, and all metal components for cracks, distress areas, breaks, rough or sharp edges.
5. Check “Pack-Type” shock absorber for cuts or tears to the pack, holes, tears in stitching or any loose thread or webbing or abnormality.

Next, put on the harness:

1. Lift and hold the harness by the main “D” ring in the back and gently shake loose the chest and leg webbing.
2. Un-buckle the chest and leg buckles by sliding the adjustment buckle through the locking buckle.
3. Slip straps over shoulders so that main “D” ring is located between shoulder blades.
4. Reach down, buckle and adjust leg straps so that they are snug but not impeding circulation.
5. Buckle and position chest strap at center of chest above sternum, about 6” below throat.
6. Snug all straps so as to secure harness but still allow full range of motion.

KEEP THIS AND ALL MANUFACTURER INFORMATION IN THE STORAGE BUCKET WITH THE HARNESS KIT AT ALL TIMES! INSPECT ALL COMPONENTS BEFORE EACH USE.

Chapter 8: Personal Protective Equipment
Policy No.: 8.01
Title: PPE
Effective Date: January 1, 2011

1.0 OBJECTIVE

To provide employees with proper types of Personal Protective Equipment (PPE) and the instruction on its use and maintenance. PPE provides a barrier between the user and such harmful things as chemical, radiological, and mechanical processes that can be absorbed, inhaled, or physically contacted.

2.0 STANDARDS AN PROCEDURES

This policy is applicable to all employees at AmTote performing tasks that have been decided by the JHSC to require use of PPE. PPE includes but is not limited to, eye protection, i.e., safety glasses, face shields, for protection from flying debris, metal or wood chips and similar hazards.

Foot protection, meaning, steel toe shoes, and shoes with metatarsal guards and/or correct footwear for the environment in which the employee is stationed.

Gloves of various varieties to perform tasks such as protection from abrasion, cuts, flying debris, fluid contact, etc.

Head gear for protection from overhead work or falling object hazard.

Body protection including but not limited to, long sleeves, electrically specific arm covers, jackets, vests, aprons, etc.

3.0 ASSIGNED RESPONSIBILITY

The JHSC will review the policy and the committee will adjust when and where applicable.

The committee will assess the workplace and determine where hazards exist. The JHSC will ensure PPE is available and emphasize its use when performing duties in noted hazard areas. The committee will review sub-contractor PPE policy.

4.0 TRAINING

PPE should provide adequate protection for the given task, be reasonably comfortable, and easily cleaned and disinfected.

Employees shall be instructed on the types of PPE and how to use it correctly.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

Plant evaluation and policy adjustment to be reviewed annually.

REVISION HISTORY

February 2013: Subsection 2.0 (Standards and Procedures) – corrected typo in title (changed an to and); deleted fifth paragraph “Respiratory devices for protection from but not limited to, chemical, heated, particulate, radiological inhalants”

January 2014: Subsection 5.0 (Periodic Review/Revision/Communication) removed: “Written records of PPE placement and availability to be kept on file.

Written record of types of work performed requiring PPE, and individuals or departments who may be assigned the task to be kept on file.”

Chapter 9: Hot Work
Policy No.: 9.01
Title: Hot Work
Effective Date: January 1, 2011

1.0 OBJECTIVE

The Hot Work Procedure is provided to ensure the appropriate precautions and protective measures are in place prior to, during and after hot work operations to prevent inadvertent ignitions and and/or personal harm. Adherence to this procedure will help to ensure compliance to the requirements of the Occupational Safety and Health Act, National Fire Protection Code and the requirements of the property insurer.

2.0 STANDARDS AND PROCEDURES

This procedure is applicable to all employees and contractors performing hot work at AmTote. Hot work activities include welding, cutting, grinding, brazing, soldering, torch applied roofing or any other spark-generating process where there is a likelihood of injury or fire.

If any areas have been identified as exempt, they are still required to comply with the general fire prevention principles (e.g., absence of combustible material, guards to confine sparks) and safety requirements (e.g., personal protective equipment, ventilation) contained in this procedures.

3.0 ASSIGNED RESPONSIBILITIES

3.1 Building Manager

- Review this procedure on an annual basis in conjunction with the JHSC and management team for required changes or modifications.
- Determine the areas of AmTote where hot work will take place.
- Review permits for completion, then post in designated hot work area.
- Confirm that all useable fire extinguishers are in good working order.
- Be aware of contractors who may use hot work either internal or external to AmTote.
- Use the hot work permit form appropriately (see Appendix 1).
- Know how to use a fire extinguisher.
- Be aware of all pipe contents and flow before cutting, etc.

- Insist that cutters or welders and their supervisors are suitably trained in the safe operation of their equipment and the safe use of the process.
- While performing Fire Watch duties, Fire Watch shall continue in cycles of 1 visit every 30 minutes for duration of 2 hours after Hot Work is completed. After this interval, Fire Watch shall continue in cycles of 1 visit every 1 hour for an additional 2 hours or until a total of 4 hours have elapsed after the completion of Hot Work project.
- Designate an individual responsible for authorizing cutting and welding operations in areas not specifically designed for such processes. This individual shall receive safety training on the hot work process and:
 - Shall be responsible for the safe handling of the cutting or welding equipment and the safe use of the cutting or welding process.
 - Shall determine the combustible materials and hazardous areas present or likely to be present in the work location.
 - Shall protect combustibles from ignition by the following:
 - Have the work moved to a location free from dangerous combustibles.
 - If the work cannot be moved, have the combustibles moved to a safe distance from the work or have the combustibles properly shielded against ignition.
 - See that cutting and welding are so scheduled that plant operations that might expose combustibles to ignition are not started during cutting or welding.
 - Shall secure authorization for the cutting or welding operations from the designated management representative.
 - Shall determine that the cutter or welder secures his approval that conditions are safe before going ahead.
 - Shall determine that fire protection and extinguishing equipment are properly located at the site.
 - Shall see that when fire watches are required they are available and regularly recheck the area of hot work (normally every ½ hour for one hour) to check on any sparks, ignition or smoke that may have started.
- Fire prevention precautions. Cutting or welding shall be permitted only in areas that are or have been made fire safe. When work cannot be moved practically, as in most construction work, the area shall be made safe by removing combustibles or protecting combustibles from ignition sources.
- Permits will be kept by the Building Manager.

3.2 Department Supervisors and Managers

- Keep departments clean and free of flammable materials particularly in areas where hot work may be performed.

3.3 All Employees

- Keep your areas free from trash, plastic, paper, rags, and other flammable material.

3.4 Contractors

- Advise all contractors about flammable materials or hazardous conditions of which they may not be aware.
- Contractors will utilize their own hot work permit system with approval of AmTote.
- Contractors may use AmTote fire extinguishers when arranged with AmTote.
- Copies of their hot work permits should be provided to the Building Manager when requested.
- Contractors should be aware of all pipe contents and flow before cutting, etc.
- Fire Watch shall be maintained continuously for the duration of the Hot Work procedure.
- If contractor is still on site after completion of Hot Work, they shall maintain Fire Watch in cycles of 1 visit every 30 minutes for duration of 2 hours after Hot Work is complete.

4.0 TRAINING

AmTote does not perform hot work. All hot work is performed by an approved outside contractor.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION & INTERNAL AUDITS

5.1 This procedure will be reviewed on an annual basis by the JHSC for any required changes. Circumstances requiring a change to this procedure may include but not be limited to: legislative amendments, production process addition or change, incident/accident history, recommendation of the JHSC.

5.2 Completed hot work permits will be controlled by the JHSC and retained/filed by the Building Manager for a period of time not less than 6 months and long enough to ensure that the two most **recent records** are on file.

REVISION HISTORY

March 2011: Subsection 3.3 (Maintenance Employees or Designate) and 3.5 (Contractors) – added fire watch duties language

February 2013: Subsection 3.1 (Assigned Responsibilities) changed Health and Safety Coordinator to now read Building Manager.

Subsection 3.3 (Maintenance Employees) combined with subsection 3.1; deleted third bullet – “Know when to seek assistance if a fire should break out” and reworded beginning of last bullet from read: “If asked to perform” to now read: “While performing” Renumbered 3.4 (All Employees) and 3.5 (Contractors) to be 3.3 and 3.4

Subsection 4.0 (Training) – last bullet: changed from “Permits will be kept either by the maintenance manager” to now read: “Permits will be kept by the Building Manager”

Subsection 5.0 (Periodic Review/Revision/Communication & Internal Audits) – deleted 5.1 “Planned workplace inspections conducted by members of the JHSC and the management team will include a review of compliance to this procedure when hot work activities are encountered during the inspection” and renumbered remaining sections

January 2014: Subsection 3.0 (Assigned Responsibility) removed 3rd bullet “Determine the hot work permit system that will be used.” 6th bullet: changed “system” to read: “form”

Subsection 4.0 (Training) moved all bullets to fall under the responsibility of Building Manager (subsection 3.0) and added the following sentence: “AmTote does not perform hot work. All hot work performed by an approved outside contractor.”

Appendix 1 - HOT WORK PERMIT

Date _____

Time _____

Name of Person(s) Performing Work _____

Specific Location of Work _____

Yes	No	
_____	_____	Cutting or welding permitted in an area that has been made fire safe.
_____	_____	All movable fire hazards in the vicinity have been taken to a safe place.
_____	_____	Guards used to contain the heat, spark and slag if fire hazards cannot be removed. Floor or wall openings or cracks, open doorways and windows protected or closed.
_____	_____	Fire extinguisher available for instant use.
_____	_____	Fire watch in areas where other than a minor fire might develop such as around combustible material.
_____	_____	Floors swept clean of combustible material for a radius of 35'.
_____	_____	Combustible floors have been kept wet, covered with damp sand or protected by fire resistant shields.
_____	_____	Welding/cutting done only in areas authorized by management. No welding/cutting in sprinkled building when sprinkler system is impaired or in presence of explosive atmosphere, or in area of storage of readily ignitable material.
_____	_____	Dusts and conveyor systems that might carry sparks to distant combustibles protected or shutdown.
_____	_____	Cutter/welder is trained in safe operation of equipment and the safe use of the process.
_____	_____	Any on-site contractors advised about flammable material or hazardous conditions of which they may not be aware.
_____	_____	Welding or cutting containers:

		Container thoroughly cleaned and ventilated;
		Any pipe lines or connections to containers disconnected or blanked.
		PPE used as needed—e.g., eye protection, helmet, protective clothing, respirator, gloves. Warning sign posted to warn other workers of hot metal.
		Appropriate ventilation provided.

Authorized Signature – Supervisor

Chapter 10: Lock Out/Tag-Out
Policy No.: 10.01
Title: Lock Out/Tag-Out
Effective Date: January 1, 2011

1.0 OBJECTIVE

- 1.1** To ensure that all hazardous energy is removed from machines to protect employees during machine and equipment servicing and maintenance. To protect workers from unexpected energization, start-up, or release of stored energy, which can cause injury or critical injury.
- 1.2** This policy and procedure is to protect personnel performing maintenance, repair and set-up tasks, against the hazard of unintended motion or start-up during the servicing and maintenance of machines.
- 1.3** To comply with the following relevant sections of the Occupational Health and Safety Act:

OSHA 1910.147 The control of hazardous energy (lockout/tagout).
OSHA 1910.331 Safety-related work practices.
OSHA 1910.333 Selection and use of work practices.

2.0 STANDARDS AND PROCEDURES

2.1 Procedure for General Instruction for Lockout/Tagout

Lockout/tagout must be performed in accordance with this procedure whenever specific written procedures are not required.

- 2.1.1** Notify appropriate affected employees that servicing or maintenance is required on a machine or equipment and that the machine or equipment must be shut down and locked out to perform the servicing or maintenance.
- 2.1.2** If the machine or equipment is operating, shut it down by the normal stopping procedure (depress the stop button, open switch, close valve, etc.).
- 2.1.3** De-activate the energy isolating device(s) so that the machine or equipment is isolated from the energy source(s).

Lock or tagout the energy isolating device(s) with assigned individual lockout/tag out device(s).

2.1.4 Dissipate or restrain stored or residual energy by methods such as grounding, repositioning, blocking, bleeding down, etc.

2.1.5 Ensure that the equipment is disconnected from the energy source(s) by first checking that no personnel are exposed, then verify the isolation of the equipment by operating the push button or normal operating control(s) or by testing with a power detecting device or meter to make certain the equipment is not energized. The Authorized Employee must complete Lockout Procedure Performance Checklist Form (Appendix 1).

Caution: Return operating control(s) to neutral or "off" position after verifying the isolation of the equipment.

2.1.6 Perform the repair/maintenance on the equipment.

2.2 General Guidelines for Authorized Employees to Lockout and Tagout Equipment with One or More Energy Sources

Shutdown Sequence for Machines and Equipment

2.2.1 Determine which energy Isolation Device(s) apply to the equipment being shut down for adjustments, re-tooling or maintenance. Be aware that more than one Energy Isolation Device for mechanical, electrical, pneumatic, fluid or other energy sources may be involved. Before proceeding, consult the Lockout Procedure located at each production work cell or nearby facility support equipment.

2.2.2 Inform all affected personnel including machine operators, supervisors and others in the immediate area that a lockout is required. Communicate the reason for the lockout and which part(s) of the machine will be shut down and locked out.

2.2.3 If the equipment is operating, shut it down by the normal stopping procedure(s) using the equipment operating controls.

2.2.4 Operate the safety switch(s), valve(s) and any other energy isolation device(s) so that the energy sources(s) are disconnected or isolated from the equipment. As in the case where the

equipment Energy Isolation Devices(s) are a cord and plug, use of an appropriate cord and plug lockout device designed to restrain the plug as required.

- 2.2.5** Lockout the energy isolation device using the appropriate lockout device/mechanism with the individual assigned, keyed padlock(s) and tag(s) issued to each authorized employee. When more than one authorized employee is required to perform work, this is considered a group lockout and is a special situation wherein each person on the crew shall place his own individual assigned padlock(s) and tag(s) on each energy isolation device. If necessary, refer to guidelines covered in group lockouts.
- 2.2.6** Attach a lockout tag containing the date of the lockout and the authorized employee's name that applied the lockout device and padlock.
- 2.2.7** When applicable, release all stored energy such as compressed air and water pressure, etc., by dissipating, bleeding or draining. Release, restrain, remove or block any stored mechanical or hydraulic energy in cylinders or gravity feed devices.
- 2.2.8** Perform a test to verify that the correct energy isolation device were locked out by following these steps:
 - a. Inform all affected personnel a test will be conducted. Make sure personnel are not exposed to unexpected equipment motion or other energy sources.
 - b. Perform the test by using the normal operating controls(s) of the equipment or by testing using a meter and or energy detecting device.
 - c. After the test, return the normal operating control(s) to their normal neutral state.
- 2.2.9** The equipment is now locked out and available for maintenance or repairs.

2.3 Device Removal and/or Restoring Equipment to Normal Operations

Only the authorized employee who applied the Lockout/tagout devices shall remove the devices. However, when that employee is not available and the device must be removed, communication with the performing employee must verify removal by an authorized employee.

- 2.3.1** Check the machine or equipment and the immediate area around the machine to ensure that nonessential items (i.e., hand tools, nuts, bolts, power tools, etc.) have been removed and that the machine or equipment components are operationally intact.
- 2.3.2** Check the work area to ensure that all employees have been safely positioned or removed from the area.
- 2.3.3** Verify that the controls are in neutral.
- 2.3.4** Remove the lockout/tagout devices and reenergize the machine or equipment.
- 2.3.5** Notify Supervision that the servicing or maintenance is completed and the machine or equipment is ready for use. The Authorized Employee must complete Lock Removal Report Form (Appendix 2).

2.4 General Guidelines for Authorized Employees to Remove Lockout Devices and Tags from Equipment with One or More Energy Sources

When adjustments, re-tooling or maintenance operations are completed and the equipment is ready for testing or operation, padlock(s) can be removed and normal service can be restored. Padlock(s) shall not be removed by anyone except by the authorized employee(s) that applied the lock(s).

- 2.4.1** Inform all affected personnel, including supervisors and others in the immediate area that locks will be removed and normal equipment/machine operation will take place.
- 2.4.2** Inspect the area around the equipment/machine for tools and other items that may have been inadvertently misplaced. Replace guards, safety gates and close access doors. Be sure personnel will not be exposed to unexpected equipment/machine motion or other hazardous energy sources when energy is restored.
- 2.4.3** Close all bleed or drain valves. Remove any devices that were put in place to restrain mechanical or hydraulic energy stored in cylinders.
- 2.4.4** After the affected employee(s) have been notified and the worksite has been deemed safe, authorized employee(s) shall remove padlock(s) lockout devices(s) and tag(s) according to the guidelines presented in this policy. Only the authorized employee(s) who

applied their own individual padlock(s) and tag(s) to Energy Isolation Devices(s) shall remove them.

2.4.5 The authorized employee(s) or a primary authorized employee shall operate the safety switch, valve and any other Energy Isolation Device so that the equipment/machine is restored to normal service. It may be required, as in production machinery to test the equipment for proper operation before releasing it to affected personnel and machine operator(s) for normal operation. In the case of a group lockout, refer to this section.

2.4.6 Authorized employees shall notify affected personnel, machine operators, supervisors and others in the immediate area that energy has been restored and normal machine/equipment operations can begin.

2.4.7 The equipment is now ready for testing or normal operation.

2.5 Working On or Near Exposed De-energized Parts

2.5.1 Application This paragraph applies to work on exposed de-energized parts or near enough to them to expose the employee to any electrical hazard they present. Conductors and parts of electric equipment that have been de-energized but have not been locked out or tagged shall be treated as energized parts whenever you work on or near them.

2.5.2 Lockout and Tagging While any employee is exposed to contact with parts of fixed electric equipment or circuits which have been de-energized, the circuits energizing the parts shall be locked out or tagged or both in accordance with the requirements of this paragraph.

2.5.3 Procedures The employer shall maintain a written copy of the procedures and shall make it available for inspection by employees and by the Assistant Secretary of Labor and his or her authorized representatives.

2.5.4 De-energizing Equipment The circuits and equipment to be worked on shall be disconnected from all electric energy sources. Control circuit devices, such as push buttons, selector switches, and interlocks, may not be used as the sole means for de-energizing circuits or equipment. Interlocks for electric equipment

may not be used as a substitute for lockout and tagging procedures.

- 2.5.5** Stored electric energy which might endanger personnel shall be released. Capacitors shall be discharged and high capacitance elements shall be short-circuited and grounded, if the stored electric energy might endanger personnel.

Note: If the capacitors or associated equipment are handled in meeting this requirement, they shall be treated as energized.

- 2.5.6** Stored non-electrical energy in devices that could reenergize electric circuit parts shall be blocked or relieved to the extent that the circuit parts could not be accidentally energized by the device.

2.6 Application of Locks and Tags

- 2.6.1** A lock and a tag shall be placed on each disconnecting means used to de-energize circuits and equipment on which work is to be performed. The lock shall be attached so as to prevent persons from operating the disconnecting means unless they resort to undue force or the use of tools.
- 2.6.2** Each tag shall contain a statement prohibiting unauthorized operation of the disconnecting means and removal of the tag.
- 2.6.3** If a lock cannot be applied, or if the employer can demonstrate that tagging procedures will provide a level of safety equivalent to that obtained by the use of a lock, a tag may be used without a lock.
- 2.6.4** A tag used without a lock shall be supplemented by at least one additional safety measure that provides a level of safety equivalent to that obtained by use of a lock. Examples of additional safety measures include the removal of an isolating circuit element, blocking of a controlling switch, or opening of an extra disconnecting device.
- 2.6.5** A lock may be placed without a tag only under the following conditions:
Only one circuit or piece of equipment is de-energized, and
The lockout period does not extend beyond the work shift, and
Employees exposed to the hazards associated with reenergizing the circuit or equipment are familiar with this procedure.

2.7 Verification of De-Energized Condition

The requirements of this paragraph shall be met before any circuits or equipment can be considered and worked as de-energized.

2.7.1 A qualified person shall operate the equipment operating controls or otherwise verify that the equipment cannot be restarted.

2.7.2 A qualified person shall use test equipment to test the circuit elements and electrical parts of equipment to which employees will be exposed and shall verify that the circuit elements and equipment parts are de-energized. The test shall also determine if any energized condition exists as a result of inadvertently induced voltage or unrelated voltage back feed even though specific parts of the circuit have been de-energized and presumed to be safe. If the circuit to be tested is over 600 volts, nominal, the test equipment shall be checked for proper operation immediately after this test.

2.8 Re-Energizing Equipment

These requirements shall be met, in the order given, before circuits or equipment are reenergized, even temporarily.

2.8.1 A qualified person shall conduct tests and visual inspections, as necessary, to verify that all tools, electrical jumpers, shorts, grounds, and other such devices have been removed, so that the circuits and equipment can be safely energized.

2.8.2 Employees exposed to the hazards associated with reenergizing the circuit or equipment shall be warned to stay clear of circuits and equipment.

2.8.3 Each lock and tag shall be removed by the employee who applied it or under his or her direct supervision. However, if this employee is absent from the workplace, then the lock or tag may be removed by a qualified person designated to perform this task provided that:

The employer ensures that the employee who applied the lock or tag is not available at the workplace, and

The employer ensures that the employee is aware that the lock or tag has been removed before he or she resumes work at that workplace.

There shall be a visual determination that all employees are clear of the circuits and equipment.

2.9 Working on or Near Exposed Energized Parts

2.9.1 Work on Energized Equipment

Only qualified persons may work on electric circuit parts or equipment that has not been de-energized. Such persons shall be capable of working safely on energized circuits and shall be familiar with the proper use of special precautionary techniques, personal protective equipment, insulating and shielding materials, and insulated tools.

2.9.2 The person is insulated from all conductive objects at a potential different from that of the energized part.

2.9.3 Electrical Shock Approach Boundaries

The following boundary limits are for informational purposes only. These are the flash boundaries within which a person will receive a second degree burn if an electrical arc flash were to occur. AmTote employees should not be working on or near live electric panels or circuits.

Nominal Voltage	Limited Approach	Restricted Approach	Prohibited Approach
<50 volts	3 feet 6 inches	Not Specified	Not Specified
50 to 300 volts	3 feet 6 inches	Avoid Contact	Avoid Contact
301 to 750 volts	3 feet 6 inches	1 foot	1 inch

The greater the voltage, the farther the arc will travel, therefore, the farther away the boundary. AmTote employees should not be near or subject to any higher voltage than stated in the partial table above. If there is work being performed in the area and you are uncertain as to the strength of the voltage, leave the area and inform your supervisor.

2.10 Illumination

Employees may not enter spaces containing exposed energized parts, unless illumination is provided that enables the employees to perform the work safely.

2.10.1 Where lack of illumination or an obstruction precludes observation of the work to be performed, employees may not perform tasks near exposed energized parts. Employees may not reach blindly into areas which may contain energized parts.

2.11 Conductive Materials and Equipment

Conductive materials and equipment that are in contact with any part of an employee's body shall be handled in a manner that will prevent them from contacting exposed energized conductors or circuit parts. If an employee must handle long dimensional conductive objects (such as ducts and pipes) in areas with exposed live parts, the employer shall institute work practices (such as the use of insulation, guarding, and material handling techniques) which will minimize the hazard.

2.12 Portable Ladders

Portable ladders shall have nonconductive side rails if they are used where the employee or the ladder could contact exposed energized parts.

2.13 Conductive Apparel

Conductive articles of jewelry and clothing (such as watch bands, bracelets, rings, key chains, necklaces, metalized aprons, cloth with conductive thread, or metal headgear) may not be worn if they might contact exposed energized parts. However, such articles may be worn if they are rendered nonconductive by covering, wrapping, or other insulating means.

2.14 Interlocks

Only a qualified person may defeat an electrical safety interlock, and then only temporarily while he or she is working on the equipment. The interlock system shall be returned to its operable condition when this work is completed.

2.15 Items Not Covered by Lockout

2.15.1 Installations under the exclusive control of electric utilities for the purpose of power generation, transmission and distribution, including related equipment for communication or metering; and

2.15.2 Exposure to electrical hazards from work on, near, or with conductors or equipment in electric utilization installations

2.15.3 Work on cord and plug connected electric equipment for which exposure to the hazards of unexpected energization or start up of the equipment is controlled by the unplugging of the equipment from the energy source and by the plug being under the exclusive control of the employee performing the servicing or maintenance.

2.15.4 Shutdown of the system is impractical; or continuity of service is essential.

2.15.5 Documented procedures are followed, and special equipment is used which will provide proven effective protection for employees.

2.16 Items Covered by Lockout

Normal production operations are not covered by this standard [(OSHA 1910.147). The control of hazardous energy (lockout/tagout)] servicing and/or maintenance which takes place during normal production operations is covered by this standard only if:

2.16.1 An employee is required to remove or bypass a guard or other safety device; or

2.16.2 An employee is required to place any part of his or her body into an area on a machine or piece of equipment where work is actually performed upon the material being processed (point of operation) or where an associated danger zone exists during a machine operating cycle.

Note: Minor tool changes and adjustments, and other minor servicing activities, which take place during normal production operations, are not covered by Lockout if they are routine, repetitive, and integral to the use of the equipment for production, provided that the work is performed using alternative measures which provide effective protection.

Note: Lockout includes die change since an employee will most likely have to bypass a guard or other safety device or the operation means an employee is required to place any part of his or her body into an area where work is performed. Die change is not considered a normal production operation.

3.0 ASSIGNED RESPONSIBILITIES

3.1 The JHSC shall enforce the contents of this procedure to the fullest of its intent.

4.0 TRAINING

- 4.1** The JHSC shall certify that appropriate personnel have training and their training is being kept up to date. The certification shall contain each employee's name and dates of training.
- 4.2** The JHSC shall provide training to ensure that the purpose and function of the energy control program are understood by appropriate personnel and that the knowledge and skills required for the safe application, usage, and removal of the energy controls are acquired by those employees. The training shall include the following:
 - 4.2.1** Each authorized employee shall receive training in the recognition of applicable hazardous energy sources, the type and magnitude of the energy available in the workplace, and the methods and means necessary for energy isolation and control.
 - 4.2.2** Each affected employee shall be instructed in the purpose and use of the energy control procedure.
- 4.3** All other employees whose work operations are or may be in an area where energy control procedures may be utilized, shall be instructed about the procedure, and about the prohibition relating to attempts to restart or reenergize machines or equipment which are locked out or tagged out.
- 4.4 Retraining**
 - 4.4.1** Retraining shall be provided for all authorized and affected employees whenever there is a change in their job assignments, a change in machines, equipment or processes that presents a new hazard, or when there is a change in the energy control procedures.
 - 4.4.2** Additional retraining shall also be conducted whenever a periodic inspection requires, or whenever the employer has reason to believe there are deviations from or inadequacies in the employee's knowledge or use of the energy control procedures.
 - 4.4.3** The retraining shall reestablish employee proficiency and introduce new or revised control methods and procedures, as necessary.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

- 5.1** Inspections to measure compliance with this procedure against the Occupational Health and Safety Act will be performed annually by Supervision, authorized employee and/or the JHSC.
- 5.2** This procedure will be reviewed annually at a minimum for effectiveness and accuracy to ensure that the energy control procedures continue to be implemented properly, that the employees are familiar with their responsibilities, and that any deviations or procedural inadequacies that are observed are corrected.
- This inspection will take place at least annually.
 - It will be done by a trained and certified employee not involved in the energy control procedure being inspected.
 - JHSC will identify any deficiencies or deviations and correct them.
 - Where lockout is used, the inspector must review **each** authorized employee's responsibilities under the procedure with that employee (group meetings are acceptable).
 - The employer must certify that the periodic inspections have been performed including the machine on which the procedure was utilized, date of inspection, identity of the employees included in inspection and the identity of the person who performed the inspection.
- 5.3** These safety rules will be reviewed on an annual basis by the JHSC for any required changes. Circumstances requiring a change to this procedure may include legislative amendments, corporate amendments, incident history, and recommendation of the JHSC.
- 5.4 Record Retention**
- 5.4.1** Records for lockout tagout should be kept for a minimum of one year.
- 5.4.2** Employee certification should be kept in the employee's file for the duration of their employment.
- 5.4.3** Periodic inspections should be kept for 5 years.

6.0 DEFINITIONS

AFFECTED EMPLOYEE. An employee whose job requires him/her to operate/use a machine or equipment or work in an area in which servicing or

maintenance is being performed under lockout or whose job requires him/her to work in an area in which such servicing or maintenance is being performed. Affected employees shall receive General Lockout and Tagout awareness training.

AUTHORIZED EMPLOYEE. A person who locks out machines or equipment in order to perform servicing or maintenance on that machine or equipment. Affected employee becomes an authorized employee when that employee's duties include performing servicing or maintenance and requires the equipment/machine to be locked out. Authorized employees shall receive specific Lockout and Tagout training.

CAPABLE OF BEING LOCKED OUT. An energy isolating device is capable of being locked out if it has a hasp or other means of attachment to which, or through which, a lock can be affixed, or it has a locking mechanism built into it. Other energy isolating devices are capable of being locked out, if lockout can be achieved without the need to dismantle, rebuild, or replace the energy isolating device or permanently alter its energy control capability.

ENERGIZED. Connected to an energy source or containing residual or stored energy.

ENERGY ISOLATING DEVICE. A mechanical device that physically prevents the transmission or release of energy, including but not limited to the following: a manually operated electrical circuit breaker; a disconnect switch; a manually operated switch by which the conductors of a circuit can be disconnected from all ungrounded supply conductors, and, in addition, no pole can be operated independently; a line valve; a block; and any similar device used to block or isolate energy. Push buttons, selector switches and other control circuit type devices are not energy isolating devices.

ENERGY SOURCE. Any source of electrical, mechanical, hydraulic, pneumatic, chemical, thermal, or other energy i.e., spring, kinetic, gravity, etc.

LOCKOUT. The placement of a lockout device on an energy isolating device, in accordance with an established procedure, ensuring that the energy isolating device and the equipment being controlled cannot be operated until the lockout device is removed.

LOCKOUT DEVICE. A device that utilizes a positive means such as a lock, either key or combination type, to hold an energy isolating device in the safe position and prevent the energizing of a machine or equipment.

NORMAL OPERATIONS. The utilization of a machine or equipment to perform its intended function.

[http://www.osha.gov/pls/oshaweb/owalink.query_links?src_doc_type=STANDARD&src_unique_file=1910_0333&src_anchor_name=1910.333\(a\)\(1\)](http://www.osha.gov/pls/oshaweb/owalink.query_links?src_doc_type=STANDARD&src_unique_file=1910_0333&src_anchor_name=1910.333(a)(1))

QUALIFIED PERSONS A person who has training in avoiding the electrical hazards of working on or near exposed energized parts.

SERVICING AND/OR MAINTENANCE. Workplace activities such as constructing, installing, setting up, adjusting, inspecting, modifying, and maintaining and/or servicing machines or equipment. These activities include lubrication, cleaning or un-jamming of machines or equipment and making adjustments or tool changes, where the employee may be exposed to the unexpected energization or startup of the equipment or release of hazardous energy.

SETTING UP. Any work performed to prepare a machine or equipment to perform its normal operation.

TAGOUT. The placement of a tagout device on an energy isolating device, in accordance with an established procedure, to indicate that the energy isolating device and the equipment being controlled may not be operated until the tagout device is removed.

NOTE: Since January 1990, equipment designed and built after this date must be capable of lockout.

TAGOUT DEVICE. A prominent warning device, such as a tag and a means of attachment, which can be securely fastened to an energy isolating device in accordance with an established procedure, to indicate that the energy isolating device and the equipment being controlled may not be operated until the tagout device is removed.

UNQUALIFIED PERSONS A Person who has little or no such training working on, near, or with energized or de-energized parts.

7.0 APPENDICES

- 1 Lockout Procedure Performance Checklist
- 2 Lock Removal Report Form

Revision History

January 2014: subsection 5.0 (Periodic Review/Revision/Communication), deleted the bullets from subsection 5.2, all of subsections 5.3 and 5.4

- This inspection will take place at least annually.
- It will be done by a trained and certified employee not involved in the energy control procedure being inspected.
- JHSC will identify any deficiencies or deviations and correct them.
- Where lockout is used, the inspector must review **each** authorized employee's responsibilities under the procedure with that employee (group meetings are acceptable).
- The employer must certify that the periodic inspections have been performed including the machine on which the procedure was utilized, date of inspection, identity of the employees included in inspection and the identity of the person who performed the inspection.

5.3 These safety rules will be reviewed on an annual basis by the JHSC for any required changes. Circumstances requiring a change to this procedure may include legislative amendments, corporate amendments, incident history, and recommendation of the JHSC.

5.4 Record Retention

5.4.1 Records for lockout tagout should be kept for a minimum of one year.

5.4.2 Employee certification should be kept in the employee's file for the duration of their employment.

5.4.3 Periodic inspections should be kept for 5 years.

APPENDIX 1

LOCKOUT PROCEDURE PERFORMANCE CHECKLIST

(To be completed and signed by authorized employee and reviewed and signed by Supervisor)

Name: _____ Date: _____

Shift: _____ Dept: _____

Equipment Description: _____

Description of work to be performed: _____

Have you received Lockout/Tagout training? Yes No

Have you reviewed the Lockout/Tagout policy and procedure? Yes No

Have you completely and legibly filled out the Danger Tag? Yes No

Have you assessed all potential power sources and hazards to be locked out? Yes No

Electrical Yes No *Hydraulic* Yes No *Pneumatic* Yes No

Stored Yes No *Gravity* Yes No *Chemical* Yes No

Other: _____

If air, hydraulic, steam or gas powered equipment, was pressure properly released? Yes No

Is a group Lockout hasp required/necessary? Yes No

If Yes identify group personnel: _____

 Have you tested to ensure all power is shut off? Yes No

Is lockout/tagout complete? Yes No

 Signature of Authorized Employee

 Signature of Supervisor

APPENDIX 2**LOCK REMOVAL REPORT FORM**
(To be filled out by Authorized Employee)

Name: _____ Date: _____

Shift: _____ Dept: _____

Equipment Description: _____

Has the authorized employee been contacted? Yes No

Are they able to return to work for lock removal? Yes No

If contacted but unable to return to work for lock removal, describe status of job:

_____If unable to contact, review Lockout Procedure Performance Checklist and describe reason for
lockout: _____

Contact and interview employees who were involved in repair:

Name: _____ Comments: _____

Name: _____ Comments: _____

Name: _____ Comments: _____

Are additional repairs required? Yes No

If yes, describe repairs and take corrective actions: _____

If additional repairs are not required or once corrective actions are complete, supervisor or
manager, along with two employees inspect the equipment, sign off and remove lock._____
Signature of Supervisor/Manager_____
Signature of Authorized Employee 1_____
Signature of Authorized Employee 2

Chapter 11: Lift Trucks
Policy No.: 11.01
Title: Lift Trucks
Effective Date: January 1, 2011

1.0 OBJECTIVE

Describe the system for the safe operation of lift trucks within the division through hazard analysis, lift truck selection criteria, pre-use inspections, operational rules, training requirements and maintenance.

This policy applies to all employees, contractors and sub-contractors working for AmTote.

2.0 STANDARDS AND PROCEDURES

2.1 Operating Rules

- 2.1.1 Only trained and authorized employees are permitted to operate lift trucks.
- 2.1.2 Compressed gas fuel changes must be conducted outdoors.
- 2.1.3 Safety glasses and foot protection should be worn at all times.
- 2.1.4 Pre-use inspections must be completed at the start of every shift.
- 2.1.5 Report all deficiencies to your supervisor and stop using the vehicle.
- 2.1.6 Operate fork trucks only in designated areas with adequate ventilation.
- 2.1.7 Do not exceed the floor load rating.
- 2.1.8 Secure (tie down) unstable loads before starting the vehicle.
- 2.1.9 Keep arms and legs inside the fork truck running lines.
- 2.1.10 Do not jump from a fork truck.
- 2.1.11 Make sure that there is adequate clearance before passing under or between structures.
- 2.1.12 Only drive at safe speeds, consistent with the load and working conditions.
- 2.1.13 Yield to pedestrians.
- 2.1.14 Do not carry passengers.
- 2.1.15 Tilt the mast back before traveling
- 2.1.16 Maintain forks about 4 to 6 in. (10 to 15 cm) off the driving surface when traveling.
- 2.1.17 Do not attach slings, cables, or chains to the forks to lift materials or objects from underneath them.

- 2.1.18 When forward vision is obscured, drive in reverse.
- 2.1.19 Do not leave a fork truck parked with an elevated load.
- 2.1.20 Do not park a fork truck without turning off the power, placing all the controls in the neutral position, and setting the brake. A fork truck is considered unattended if the operator is out of sight of the truck or more than 25 ft. (8 m) away.
- 2.1.21 Never store material in an aisle, when regular storage is available.
- 2.1.22 Make starts and stops slow and gradual.
- 2.1.23 Ensure air is bled from trailer air bladders (trailers with air cushions).
- 2.1.24 Do not use a fork truck to tow or push other fork trucks, another vehicle, materials or other equipment.
- 2.1.25 Use pneumatic-wheel fork trucks for irregular terrain and when traveling on streets.
- 2.1.26 Use hard-wheel fork trucks indoors only.
- 2.1.27 Place forks as wide as possible for the load and lock them in place to prevent sideways movement.
- 2.1.28 Never add a counterweight.
- 2.1.29 Know the weight of all loads, prior to lifting them.
- 2.1.30 Do not exceed the fork truck's rated capacity.
- 2.1.31 Evaluate material or equipment with which you are unfamiliar prior to lifting.
- 2.1.32 Seat belts must be worn if equipped (must be up-graded if not provided on truck).
- 2.1.33 Trailer wheels must be chocked or dock locks engaged, prior to loading/unloading.
 - 2.1.33.1 Only the lift truck operator is permitted to remove wheel chocks or dock locks.
- 2.1.34 Trailer jacks must be used, when the cab is removed from a trailer.

2.2 Pedestrian Rules

- 2.2.1 Never assume a lift truck operator sees you
- 2.2.2 Never walk over the forks of a lift truck
- 2.2.3 Never walk behind a lift truck, unless you are in direct communication with the operator
- 2.2.4 Report all hazardous conditions to your supervisor (e.g., oil spots on floor, etc.)

2.3 Maintenance

- 2.3.1 Ensure all lift trucks (new, rented, borrowed, leased etc.) are inspected by a competent person, prior to each shift before use.
- 2.3.2 Establish new maximum loading capacities, when any modification is made or an attachment is added. This must be done in

accordance to the manufacturer's recommendations and completed by a qualified and competent person.

- 2.3.3 Remove all defective lift trucks from service by removing the ignition key and tagging the steering wheel with an approved lockout tag
- 2.3.4 The supervisor shall ensure all preventative maintenance is completed, on-time, for all lift trucks.
- 2.3.5 Record all maintenance and maintained records on file, for the entire time the lift truck is in service at the division.
- 2.3.6 Ensure an annual inspection of each lift truck, including its load-handling capacity, is performed by a competent person designated by the maintenance supervisor.
- 2.3.7 Complete all repairs prior to returning the lift truck for regular use.

2.4 Lift Truck Selection Criteria

2.4.1 Selection of lift trucks must be based on the following:

- Hazards identified in the operation area
- Fire and explosion risks
- Capacity of the lift truck (including load center), based on the size, weights and heights loads are expected to be raised.
- Atmospheric risks (e.g., carbon monoxide control for internal combustion engines)
- Layout of the workplace (clearances from equipment and people)
- Internal combustion engines are prohibited from area that may have explosive concentrations of dusts, gases or vapors or, where exhaust gases might accumulate and cause a hazard.

2.4.2 Selection of lift trucks must be made in consultation with the Building Manager.

2.5 Pre-Use Inspections

2.5.1 Lift truck operators must conduct a pre-use inspection, at the beginning of every shift (i.e. before using the vehicle).

2.5.2 Pre-use inspections are to be recorded on the Pre-Use Inspection form (Appendix 1).

2.5.3 If any fault is discovered that may affect the safe operation of the vehicle

2.5.3.1 The operator must place an approved lock out tag on the steering wheel,

2.5.3.2 Record the deficiency on the Pre-use Inspection form,

2.5.3.3 Report the deficiency to their immediate supervisor and provide them the key.

- 2.5.3.4 The supervisor must report the deficiency to the maintenance department, providing them the key.
- 2.5.4 All weekly inspections are to be turned in to the supervisor, who will counter-sign the inspection.

3.0 ASSIGNED RESPONSIBILITY

3.1 Managers and Supervisors

- 3.1.1 Ensure only authorized employees operate lift trucks
- 3.1.2 Ensure employees receive training, in compliance with this policy, prior to operating any lift truck
- 3.1.3 Remove defective equipment from service (using proper lock out procedures) and report all deficiencies to the appropriate supervisor
- 3.1.4 Ensure employees maintain training, as required by this policy
- 3.1.5 Ensure weekly inspections are conducted
- 3.1.6 File all weekly inspections

3.2 Human Resources Manager

- 3.2.1 Maintain up-to-date lists of employees by job description

3.3 Purchasing Department

- 3.3.1 Select lift truck equipment, in accordance to the selection criteria of this policy

3.4 Trained Operators

- 3.4.1 Ensure all lift trucks are adequately maintained and all maintenance records are retained, for the entire service life of the lift truck at the facility
- 3.4.2 Ensure all preventative maintenance schedules are maintained

4.0 TRAINING

All lift truck operators must be trained in accordance to Federal or State OSHA Regulations.

All lift truck operators will be re-trained, every 36 months or as required.

Training shall be conducted on a departmental basis and as a group for existing employees. Training will be provided to new employees as part of their orientation.

This training will be in the form of, but not limited to, DVD, video, audio, posters, handouts, etc. Some training may be in the form of actual demonstration of proper tools, devices, and or techniques.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

This safety program will be reviewed annually by the JHSC and revisions, if required, will be made at that time. This program may also be subject to emergency revision if deemed necessary.

6.0 RECORD RETENTION

The Warehouse Manager will maintain records for five years.

7.0 APPENDICES

- 1 Fork Lift Inspection

REVISION HISTORY

January 2012: Section 2.5.2 – correction made so it now reads: Every 18 months (from...) instead of Every 18 months (form...).

February 2013: Subsection 2.1.3 – changed “must be worn” to “should be worn”

Deleted the following subsections and renumbers remaining subsections:

2.1.8 Comply with pre-determined routes (reference plant layout).

2.1.11 Maintain at least a 10-ft separation from overhead power lines.

2.1.13 Lift trucks are prohibited from operating within pedestrian walkways.

2.1.14 Use at least two short horn blasts when:

2.1.14.1 Changing direction,

2.1.14.2 At blind intersections,

2.1.14.3 When near pedestrians,

2.1.14.4 Starting to reverse,

2.1.14.6 Entranceways etc.

2.1.20 Stay at least three vehicle lengths back when following another fork truck.

2.1.29 Observe all traffic signals and signs.

2.1.38 Use extreme caution when driving on wet surfaces.

2.1.42 Lift trucks are prohibited from crossing gradients, laterally.

2.1.43 Loads must always face uphill.

Change renumbered section 2.1.31 (original 2.1.37) from “Do not lift material or equipment you are unfamiliar with” to now read: “Evaluate material or equipment with which you are unfamiliar prior to lifting”

Subsection 2.2 (Pedestrian Rules): delete 2.2.2 and 2.2.3 and renumber remaining sections.

Subsection 2.5 (Training) delete 2.5.2 and 2.5.2.1 and move 2.5.1 and 2.5.3 to Subsection 4.0 (Training) and renumber remaining section

Subsection 2.7 (Medical Exams) - delete

Subsection 2.5.4 – change “pre-use” to “weekly”

Subsection 3.1.4 – remove “mid-term evaluations and re-training requirements”

Subsection 3.1.5 – change “pre-use” to “weekly” and delete “are conducted each shift”

Subsection 3.1.6 – change “Counter-sign” to “File” and “pre-use” to “weekly”

Subsection 3.2.2 – delete “Identify re-training requirements, in accordance to this policy and the Safety & Health Training Matrix”

Subsection 4.0 (Training) delete last sentence “Training will be refreshed on a three year basis or as required”

Subsection 6.0 (Record Retention): change “HR Department” to “Warehouse Manager”

APPENDIX 1 FORK LIFT INSPECTION



Fork Lift ID: _____

FORKLIFT PRE-SHIFT INSPECTION CHECKLIST

	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday		Sunday	
Date:														
Inspector's Initials:														
ITEM INSPECTED	OK	FIX	OK	FIX	OK	FIX	OK	FIX	OK	FIX	OK	FIX	OK	FIX
Forks, Backrest, Carriage														
Mast, Chain, Hydraulic Lines														
Tires, Axels														
Safety Cages														
Battery														
Engine Oil Level														
Radiator Water Level														
Leaks Under Fork Lift														
Seat and Seat Belts														
Horn and/or Backup Alarm														
Lights														
Gauges and Instruments														
All Brakes														
Hydraulic Controls and Lift														
Steering														

Chapter 12: Machine Guarding
Policy No.: 12.01
Title: Machine Guarding
Effective Date: January 1, 2011

1.0 OBJECTIVE

This program is designed to inform AmTote employees of the requirements of machine guards in order to protect the health and safety of the employees who use power machinery at AmTote.

2.0 STANDARDS AND PROCEDURES

- 2.1 Before using any piece of power equipment, be sure all guards, shields, stops, and safety devices are in place.
- 2.2 Check the equipment for broken guards, or any broken areas of the equipment.
- 2.3 If any device is broken or non-functional, please notify your immediate supervisor.
- 2.4 Supervisors will immediately notify the Building Manager of any devices in need of repair or replacement before use is continued.
- 2.5 Any equipment that has been found to be in need of repair or has missing parts shall not be used until the item or items have been corrected. All corrections or repairs will be noted on the "Machine Usage Log."
- 2.6 Only once the equipment has been reported to have all of the safety devices in place shall work progress or be continued on the equipment.

3.0 ASSIGNED RESPONSIBILITIES

This section identifies the person or persons who have responsibility should a machine device not be in correct and safe working order.

- 3.1 For equipment in the machine shop, please notify the Building Manager of any discrepancy in operational or safety order.
- 3.2 For equipment in the Engineering model shop, please notify the Engineering Department Manager.

- 3.3 All equipment reports will ultimately go to the Building Manager and will be assigned corrective actions and materials will be repaired or replaced upon determination.

4.0 TRAINING

Training shall be conducted on a departmental basis and as a group for existing employees. Training will be provided to new employees as part of their orientation.

This training will be in the form of, but not limited to, DVD, video, audio, posters, handouts, etc. Some training may be in the form of actual demonstration of proper tools, devices, and or techniques. Training will be refreshed on a bi-annual basis or as required.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

This policy/program will be reviewed annually or as necessary and adjusted according to input and any information from appropriate operators or Incident Report, if any.

REVISION HISTORY

April 2012: Section 4.0, Training, changed last sentence to read: Training will be refreshed on a bi-annual basis or as required.

February 2013: Subsection 2.4 – changed “JHSC” to “Building Manager”
Subsection 3.2 – deleted “For equipment in the carpenter shop, please notify the Stockroom/Shipping Manager” and remaining sections renumbered
Subsection 5.0 (Periodic Review/Revision/Communication) changed “the Machine Usage Log” to read: “appropriate operators”

Chapter 13: Bloodborne Pathogens
Policy No.: 13.01
Title: Bloodborne Pathogens
Effective Date: January 1, 2011

1.0 OBJECTIVE

To reduce the risk to any employee who may be exposed to blood and certain body fluids containing bloodborne pathogens. The law recognizes that many facilities may not have regular exposure therefore the law provides for “Good Samaritan” exposures.

This procedure is applicable to all:

- Employees who are designated/assigned to render first aid
- Employees assigned to housekeeping, post injury clean up of blood or body fluids
- Employees designated as maintenance staff who may encounter blood or body fluids (i.e., toilet back-up)
- Employees who help another employee only as a Good Samaritan (these employees would be offered the Hepatitis B vaccine and counseling **only after** exposure to blood or body fluids)

This policy pertains to spills of blood or other body fluids. It is not a first aid/emergency response procedure. This policy is specific to *clean-up* of these fluids.

2.0 STANDARDS AND PROCEDURES

2.1 In the event of a serious injury resulting in release of blood or other body fluids which would contain pathogens (e.g., HIV or HBV), the first step is to treat the injured party. Personnel should familiarize themselves with AmTote’s First Response Team for this purpose.

2.2 Spilled body fluids should **not** be cleaned up without the appropriate protective equipment and materials specifically designated for such fluids. In the case where spilled body fluids need clean-up, this procedure **must be followed** by all personnel:

2.2.1 Advise the Supervisor on duty. The supervisor should be aware of the individual(s) doing the actual clean-up and the purpose of the cleanup.

2.2.2 Clean up the spilled fluids as follows:

- a. Put on protective gloves.
- b. Spread the absorbent material on the spilled body fluids, (e.g., paper towels) or use the Emergency First Responder Pack kit located in the medical supply cabinet.
- c. **Neutralize** the potential pathogens with a 10% bleach-with-water solution or use the solution provided in the Emergency First Responder Pack. Cover the spill for 15 minutes.
- d. Use paper towels to pick up material as best possible. Place all potentially contaminated materials in a *leak-proof* plastic bag.
- e. Sweep/mop-up any additional neutralized/absorbed fluids and place in the *leak-proof* bag.
- f. Clean sweep/mop the area with hot, soapy water. Lastly, remove gloves from inside-out and place in the bag.
- g. Secure the bag and discard properly.
- h. Wash hands thoroughly in hot, soapy water.

2.2.3 After all activity is completed and checked by the supervisor; the supervisor should complete the Exposure Incident Reporting Form (Appendix 1).

2.3 Method

2.3.1 Written Emergency Bloodborne Pathogen Exposure Control Plan (Appendix 2).

2.3.2 All facilities must have a written exposure control program. This will identify any routine jobs that may have exposure to blood and identify workers who may be exposed. Please see the Emergency Bloodborne Pathogen Exposure Control Plan (Appendix 2).

3.0 ASSIGNED RESPONSIBILITIES

Joint Health and Safety Committee

- Developed a Bloodborne Pathogen Exposure Control Plan (Appendix 2)
- Review this procedure on an annual basis for required changes or modifications.
- Ensure required training has been completed

- a. At the time of initial assignment where occupational exposure may take place.
- b. At least bi-annually thereafter.

Human Resources Department

- Ensure that Federal, State, and Local Laws and Regulations are adhered to for Confidentiality
- Provide for the appropriate blood tests for source and injured employee's and exposed employees to be performed.
- Completion of Hepatitis B vaccine series
- Completion of post exposure follow-up, counseling and prescriptions.

Department Supervisors and Managers

- Ensure that all accidents and exposures to blood and body fluids are reported immediately.

Building Manager and Designees

- Inform the JHSC of any blood or body fluid clean up.
- Ensure that all accidents and exposures to blood and body fluids are reported immediately.

All Employees

- Ensure that all accidents and exposures to blood and body fluids are reported immediately.

Contractors

- Ensure that all accidents and exposures to blood and body fluids are reported immediately.

4.0 **TRAINING**

4.1 Training should include an explanation of: the regulation, the symptoms of bloodborne diseases, modes of transmission, the written exposure control plan, how to recognize events that may involve exposure to blood, how to select any personal protective equipment such as gloves or mask, the use and limits of safety work practices and personal protective equipment, procedures to follow if exposure occurs, post exposure evaluation, warning signs and labels and information on Hepatitis B vaccinations.

4.2 Hepatitis B Vaccines

- 4.2.1 Hepatitis B vaccines must be offered to all employees who, as part of their duties are assigned to render first aid. If an employee refuses to have the vaccine he must sign the OSHA Declination Statement (Appendix 3).
- 4.2.2 Hepatitis B vaccines must be offered to all employees post exposure (such as a Good Samaritan) to blood or body fluids. **The vaccines must start within 8 hours of exposure, but sooner if possible.** If an employee refuses to have the vaccine he must sign the OSHA Declination Statement (Appendix 3).

4.3 Disposal

- 4.3.1 Sanitary products are not considered part of this regulation and their disposal may take place in a trash container that is appropriately lined so that the product is not in contact with the container. All blood and blood products may go down any sanitary sewer unless the trash contains pools of liquid blood. A medical waste hauler must take any waste containing pools of liquid blood or body fluids. AmTote is expected to know who takes this type of waste, where it is transported to and its final disposal location and form (ashes, sterilized, etc.).
- 4.3.2 Gauze, bandages, cloths, etc. may be disposed of in the regular trash unless the material will cause the trash to pool liquid blood or body fluids. A medical waste hauler must take any waste containing pools of liquid blood or body fluids. AmTote is expected to know who takes this type of waste, where it is transported to and its final disposal location and form (ashes, sterilized, etc.).
- 4.3.3 All cleanup materials from a blood or body fluid spill may be placed in general waste, unless the trash contains pools of liquid blood. A medical waste hauler must take any waste containing pools of liquid blood or body fluids. AmTote is expected to know who takes this type of waste, where it is transported to and its final disposal location and form (ashes, sterilized, etc.).
- 4.3.4 If cleanup materials from a blood or body fluid spill contain sharps (broken glass, needles, and knife blades) these should be placed in the sharps container that does not allow the sharp material to penetrate.

4.4 Soiled laundry

4.4.1 In a non-healthcare setting, soiled laundry would not be covered by the Bloodborne Pathogens Standard. However, if the laundry is soiled or contaminated with blood or other potentially infectious materials such as body fluids, the standard recommends that soiled linen should be handled as little as possible and with minimum agitation to prevent exposure to the handler (employee). Linen soiled with blood or body fluids must be placed and transported in bags which prevent leakage. Additionally, laundry must be washed in accordance with the decontamination practices recommended by the Centers for Disease Control.

4.4.2 The most important factor in laundering clothing contaminated with blood or body fluids is the elimination of potentially infectious agents by soap and water. Addition of bleach will further reduce the number of potentially infectious agents. Clothing soaked with body fluids should be washed separately from other items. Presoaking may be required for heavily soiled clothing. Otherwise, wash and dry as usual. If the material is bleachable, add ½ cup household bleach to the wash cycle. If material is not colorfast: add ½ cup non-chlorine bleach (e.g., Clorox II, Borateem) to the wash cycle.

TRANSMISSION CONCERNS BODY FLUID SOURCE OF INFECTIOUS AGENTS		
BODY FLUID – SOURCE	ORGANISM OF CONCERN	TRANSMISSION CONCERN
Blood - cuts/abrasions - nosebleeds - menses	Hepatitis B. virus AIDS Virus Cytomegalovirus	Enters blood stream through cuts and abrasions on hands
blood from a contaminated needle	Hepatitis B. virus AIDS Virus Cytomegalovirus	Enters blood stream directly
Feces* incontinence	Salmonella bacteria Shigella bacteria Rotavirus Hepatitis A virus	Enters mouth from contaminated hands
Urine* incontinence	Cytomegalovirus	Enters bloodstream or mouth from contaminated hands
Respiratory Secretions	Mononucleosis virus	Enters mouth, nose or eyes

TRANSMISSION CONCERNS BODY FLUID SOURCE OF INFECTIOUS AGENTS		
BODY FLUID – SOURCE	ORGANISM OF CONCERN	TRANSMISSION CONCERN
- saliva - nasal discharge	Common cold virus Influenza virus	from contaminated hands
Vomit*	Gastrointestinal viruses, e.g., (Norwalk agent Rotavirus)	Enters mouth from contaminated hands
Semen	Hepatitis B AID virus Gonorrhea	Sexual contact (intercourse)
* Possible transmission of AIDS and Hepatitis B is of little concern from these sources. There is no evidence at this time to suggest that the AIDS virus is present in these fluids unless contaminated by visible blood.		

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION & INTERNAL AUDITS

5.1 This procedure's adequacy and effectiveness will be periodically audited.

5.2 This procedure will be reviewed annually for any required changes. Circumstances requiring a change to this procedure may include but not be limited to: legislative amendments, new or modified tasks and procedures which affect occupational exposure and to reflect new or revised employee positions with occupational exposure, production process addition or change, incident/accident history, recommendation of the JHSC or technology that may reduce exposure.

6.0 RECORD RETENTION

6.1 All medical records relevant to the appropriate treatment of the employee including vaccination status are the employer's responsibility to maintain.

- All medical records shall be kept in accordance with OSHA 29 CFR 1910.1030 (h)(1)
- All medical records shall be made available to the subject employee, to anyone having written consent of the subject employee and to OSHA representatives
- All medical records will be kept confidential
- All training records shall be kept in accordance with OSHA 29 CFR 1910.1030 (h)(2)
- Training records shall be made available to employees, employee representatives and to OSHA representatives

7.0 TERMINOLOGY

JHSC	-Joint Health and Safety Committee
PPE	-Personal Protective Equipment

8.0 APPENDICES

- 1 Exposure Incident Reporting Form
- 2 Emergency Bloodborne Pathogen Exposure Control Plan
- 3 OSHA Hepatitis B Declination Statement (this Statement MAY NOT be altered in any way)
- 4 Consent and Authorization Form

REVISION HISTORY

January 2012: removed Social Security Number reference from Exposure Incident Reporting Form (Appendix 1). Removed Social Security Number reference from Consent and Authorization Form (Appendix 4).

February 2013: Subsection 5.2 – “Planned workplace inspections conducted by members of the JHSC will include a review of compliance to this procedure when exposures or clean up activities are encountered during the inspection” deleted and renumbered remaining section

Subsection 5.2 – change “periodically” to “annually”

Subsection 8.0 (Appendices and Appendix 2), changed title to read: Emergency Bloodborne Pathogen Exposure Control Plan.

Appendix 2: change “2. Comply with the OSHA Bloodborne Pathogens Standard” to now read: “Comply with basic universal bloodborne pathogen training.”

Appendix 2: Subsection Training will Cover: delete item 1. “A copy of the standard and an explanation of its contents” and renumber remaining sections.

January 2014: subsection 2.3 (Method) changed 2.3.1 to read “Written Emergency Bloodborne Pathogen Exposure Control Plan (Appendix 2).”

Subsection 2.3.2, last sentence, inserted the word “Emergency” before “Bloodborne.”

APPENDIX 1 EXPOSURE INCIDENT REPORTING FORM

EXPOSURE INCIDENT REPORTING FORM

Section One: Complete For All Bloodborne Pathogens Exposure Incidents				
Department:	Date of Accident:	Time Incident Occurred: _____ A.M. P.M.		
Location (Indicate By Building And Room, Or In Relation To Known Fixed Object)				
Potentially Infectious Materials Involved:				
Type:		Source:		
Description of Incident (Be Specific):				
Witness Name and Address:		Daytime Phone:		
Witness Name and Address:		Daytime Phone:		
Factors In Incident (Be Specific):		Corrective Action Taken:		
Unsafe Act _____ Unsafe Condition _____		_____		
Supervisor's Comments/Recommendations:				
Supervisor Signature		Telephone Number:	Date:	
		()		
Section Two: Complete for Personal Injuries				
Name of Injured Person:	Address:	City:	State:	Zip Code:
Daytime Telephone:	Home Telephone:	Gender:	Age:	
	()	Male Female		
Nature of Injury:		Body Part Affect (Indicate Left or Right):		
Status of Injured Person:		Severity of Injury:		
		Minor First-Aid Severe Non-Disabling Disabling Fatality		
Cause of Injury (Be Specific):		Protective Equipment		
Sharps Equipment/Tools Needlestick Other:		Was Required Was Available Was Used Was Not Sufficient to Prevent Injury		
Section Three: Complete				
	Employed:	Time in Present Position:		
	Yrs. Mos.	Yrs. Mos.		
Job Title:	Status:	Injured on the Job:		
	Full-Time Part-Time	Yes No		
Job Performing When Injury Occurred:	Stopped Work Immediately:	Est. Time Lost From Work:		
	Yes No			
Medical Treatment Provided By: _____		Date Supervisor Learned of Injury:		
Hepatitis B vaccine received date: _____		____ (Month) ____ (Day) ____ (Year)		

APPENDIX 2

EMERGENCY BLOODBORNE PATHOGEN EXPOSURE CONTROL PLAN

This exposure control plan is a key component of compliance with the bloodborne pathogens standard.

FACILITY NAME: AmTote International, Inc.

DATE PREPARED: February 1, 2010

The purpose of this plan is to:

1. Eliminate or minimize employee occupational exposure to blood or certain other body fluids.
2. Comply with basic universal bloodborne pathogen training.

Exposure Determination

This exposure determination is required to list all job classifications in which all employees may be expected to incur occupational exposure without regard to personal protective equipment. Such jobs may include: nurses, doctors, police, emergency response, etc.

List all Departments where employees will incur occupation exposure; this includes employees trained to respond to assist in First Aid and CPR.

Assembly
Engineering
Field Support
Installation
Network
Shipping & Stock Depts.

All job classifications in above departments may be expected to incur occupational exposure (without the use of personal protective equipment for protection).

Compliance Methods

Universal precautions will be observed at this facility in order to prevent contact with blood or other potentially infectious materials. Universal precautions mean that employees will treat all blood and body fluids as potentially harmful and dangerous. When practical, engineering and work practice controls will be used.

1. Although unlikely to contract Hepatitis B, Hepatitis A or HIV from urine, feces or vomit, it is the intent of AmTote to protect its employees from any exposure. Therefore, when cleaning up any of these body fluids, gloves will always be worn and goggles and face shield will be worn if the possibility of splash into the face is present.
2. Sharps (glass, razors, knife blades) that have been contaminated with blood or body fluids will be disposed of in the sharps container.
3. Gloves will be worn when exposure to blood or body fluids is imminent such as assisting with a wound or cleaning up a blood or body fluid spill.
4. Goggles or face shields should be worn when exposure to blood or body fluids is imminent or there is a potential for splash such as disposal of blood into a toilet or plunging a toilet that contains blood or body fluid.
5. Hand washing facilities must be available following any blood or body fluid exposure. Hands should be washed after removing gloves.

Handwashing Procedures

Proper hand washing requires the use of soap and water and vigorous washing under a stream of running water for approximately 10 –15 seconds. Soap suspends easily removable soil and microorganisms allowing them to be washed off. Running water is necessary to carry away dirt and debris. Rinse under running water. Warm water is not necessary to clean thoroughly, cold water will also work.

Wash around the fingers and thumb, wash the palms together and the tops of each hand. Use paper towels to thoroughly dry hands. Damp hands will pick up viruses and bacteria easily.

The use of alcohol wipes or solution on the hands to clean them is only for times when soap and water are not readily available. As soon as soap and water is available, proper hand washing should be done according to the techniques above.

Housekeeping

The facility will be cleaned and decontaminated according to the following methods:

This facility will mix fresh bleach and water using a 1:10 solution.

Some disinfectants that may be used include:

1. Ethyl or isopropyl alcohol (70%)
2. Phenolic germicidal detergent in a 1% aqueous solution (e.g., Lysol).
3. Sodium Hypochlorite with at least 100 ppm available chlorine (1/2 cup household bleach in 1 gallon water, needs to be freshly prepared each time it is used).
4. Quaternary ammonium germicidal detergent in 2% aqueous solution (e.g., Tri-quat*, Mytar* or Sage*).

Disinfection of Hard Surfaces and Care of Equipment

WITH NO BROKEN GLASS OR OTHER SHARPS:

The best method for cleanup of blood or body fluid is to drop paper towels or rags over the spill and after donning gloves and if needed, goggles and/or face shield, scoop up the cover and dispose of it in the proper container. At this time, while still wearing the correct personal protective equipment, use the appropriate germicide, bleach or other product to continue cleaning up the spill. All materials from cleanup are disposed of according to correct methods.

WITH BROKEN GLASS OR OTHER SHARPS:

Drop paper towels or rags over the spill and after donning gloves and if needed, goggles and/or face shield, scoop up the cover with a dustpan and broom and dispose of it in the proper container. Use the appropriate germicide, bleach or other product to continue cleaning up the spill. Continue to use the broom and dustpan until all broken material is picked up. At that time, the surface may be hand wiped.

Mops should be soaked in the disinfectant after use and rinsed thoroughly or washed in a hot water cycle before rinse. Disposable cleaning equipment and water should be placed in a toilet or plastic bag as appropriate. Non-disposable cleaning equipment (dust pans, buckets) should be thoroughly rinsed in the disinfectant. The disinfectant solution should be promptly disposed down a drain. Remove gloves and discard in appropriate receptacles. Goggles and facemasks should be cleaned immediately or, if soil cannot be removed, thrown away.

Disinfection of Rugs

Apply sanitary absorbent agent, let dry and vacuum. If necessary, mechanically remove with dustpan and broom, then apply rug shampoo (a germicidal detergent) with a brush and re-vacuum. Rinse dust pan and broom in disinfectant. If necessary, wash brush with soap and water. Dispose of non-reusable cleaning equipment as noted above.

Personal Protective Equipment (PPE)

All PPE will be provided to employees by the employer at no charge. PPE shall be readily accessible. Non-latex gloves will be available.

Gloves will be worn whenever it is reasonably anticipated that contact with blood or other infectious materials may take place, whenever contaminated items or surfaces will be touched and during all clean-up procedures.

Eye and Face protection will be worn whenever splashes may be generated into the eyes, nose or mouth such as plunging toilets where blood or body fluid is present.

All PPE will be cleaned, laundered or disposed of by the employer at no cost to the employees. Any garment penetrated with blood will be removed immediately and disposed of or laundered.

Disposal

All cleanup materials from blood or body fluid spills may be placed in general waste. If the waste contains pools of blood, a medical waste hauler must take this waste.

If cleanup materials from a blood or body fluid spill contain sharps (broken glass, needles, and knife blades) these should be placed in a sharps container that does not allow the sharp material to penetrate.

Sharps, such as needles, will be disposed of in the appropriate containers, either a sharps container or an empty bleach bottle (or other container that is closable, puncture resistant, and leak proof on side and bottom.) The container should be labeled with its contents.

Sharps containers shall be removed by a medical waste hauler. Waste disposal tracking records should be returned to the facility. AmTote is expected to know who takes this type of waste, where it is transported to and its final disposal location and form (ashes, sterilized, etc.).

Other medical waste such as bandages and gauze may be disposed of in leak proof closable containers. Unless the material is soaked with blood, or blood is pooling in the bottom of the container, these waste can be placed in a wastebasket in the normal waste stream. Blood-soaked material and bags will be taken off site by a medical waste hauler.

Hepatitis B Vaccine and Post-Exposure Evaluation and Follow-Up

AmTote will make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure. Employees who have an exposure incident will receive post exposure follow up.

AmTote will ensure that all medical evaluations and procedures are:

1. Made available at no cost to the employee.
2. Made available to the employee at a reasonable time and place.
3. Performed by or under the supervisor of a licensed physician or healthcare professional.
4. Provided according to the recommendations of the U.S. Public Health Service.
5. Laboratory tests will be provided at no cost to the employee.

Hepatitis B Vaccine will be made available to all employees no more than 10 days after initial assignment to their position when these employees will incur occupational exposure. Employees may decline the Hepatitis B vaccination, but may request the vaccine at a later date.

Hepatitis B vaccines will be made available to all employees post exposure (such as a Good Samaritan) to blood or body fluids. The vaccines must start within 8 hours of exposure, or sooner, if possible. Delaying treatment will diminish the effectiveness of the vaccine. If an employee refuses to have the vaccine, the employee must sign the OSHA Hepatitis B Declination Statement (Appendix 4).

Any employee may decline the Hepatitis B vaccination, but may request the vaccine at a later date. All employees who decline the Hepatitis B Vaccine offered shall sign the OSHA Hepatitis B Declination Statement (Appendix 4).

Post Exposure Evaluation and Follow-Up

All exposure incidents will be reported to Management.

Following a report of an exposure incident the exposed employee will immediately receive a confidential medical evaluation and follow-up that will include:

1. Documentation of the route of exposure and the circumstances of the exposure incident.
2. Identification and documentation of the source individual unless identification is infeasible or prohibited by state or local law.
3. The source individual's blood shall be tested as soon as feasible and after consent is obtained in order to determine HBV and HIV infectivity. If consent is not obtained, then management shall establish that legally required consent cannot be obtained.
4. If the source individual is known to be infected with HBV or HIV, testing does not need to be repeated.
5. Results of the source individual's testing shall be made available to the exposed employee.
 - The exposed employee's blood shall be collected as soon as feasible and tested after consent is obtained
 - The employee will be offered the option of having their blood collected for testing of the employee's HIV/HBV serological status. The blood sample will be preserved for up to 90 days to allow the employee to decide if the blood should be tested for HIV serological status.

Training will Cover

1. A discussion of the epidemiology and symptoms of bloodborne diseases and explanation of the modes of transmission of bloodborne pathogens.
2. An explanation of the AmTote Bloodborne Pathogen Exposure Control Plan (this program).
3. The recognition of tasks that may involve exposure.

An explanation of the use and limits of engineering controls, work practices (hand washing) and personal protective equipment.

Incident Reporting Procedure

There is a reporting procedure that ensures all first aid incidents involving the presence of blood or other potentially infected materials will be reported before the end of the work shift during which the first aid incident occurred. AmTote Exposure Incident Reporting Form (Appendix 1) will be used. This report will be made to the Human Resources Manager or Shift Supervisor and must include the names of all first aid providers who rendered assistance regardless of whether personal protective equipment was used and must describe the first aid incident, including time and date.

The description must include a determination of whether or not, in addition to the presence of blood or other potentially infected material, an exposure incident occurred as defined by the OSHA Standard. This determination is necessary in order to ensure that the proper post exposure evaluation, treatment and follow up procedures are made available immediately if there has been an exposure incident.

The full Hepatitis B vaccination series will be made available as soon as possible but, in no event, later than 24 hours to all unvaccinated employees who have rendered assistance in any situation involving the presence of blood or other potentially infected material.

All employees who incur an exposure incident will be offered post exposure evaluation and follow-up in accordance with the OSHA standard, which includes the following:

- Documentation of the route of exposure and the circumstances related to the incident.
- If possible, the identification of the source individual and, if possible, the status of the source individual. The blood of the source individual will be tested (after consent is obtained) for HIV/HBV infection.
- Results of testing of the source individual will be made available to the exposed employee with the exposed employee informed about the applicable laws and regulations concerning disclosure of the identity and infectivity of the source individual.
- The employee will be offered the option of having their own blood collected for testing of their HIV/HBV serological status. The blood sample will be preserved for at least 90 days to allow the employee to decide if the blood should be tested for HIV serological status. However, if the employee decides prior to that time that testing will be conducted then the appropriate action can be taken and the blood sample discarded.

- The employee will be offered post exposure treatment in accordance with the current recommendations of the U.S. Public Health Service in consultation with a licensed physician treating the exposed employee.
- The employee will be given appropriate, confidential counseling concerning precautions to take during the period after the exposure incident, on risk reduction and the risks and benefits of HIV testing in accordance with state law. The employee will also be given information on what potential illnesses to be alert for and to report any related experiences to appropriate personnel.

Interaction with Healthcare Professionals

A written opinion shall be obtained from the healthcare professional who evaluates employees from our facility in the following instances:

1. when employee is sent to obtain Hepatitis B vaccine
2. when employee is sent following exposure incident.

Healthcare professionals shall be instructed to limit their opinions to:

1. whether the Hepatitis B vaccine is indicated and if the employee has received the vaccine post exposure
2. the employee has been informed of the results of the post exposure evaluation
3. the employee has been told about any medical conditions resulting from exposure to blood or other potentially infectious materials which require further evaluation or therapy.

Reporting and Recordkeeping

Any records required by OSHA with regards to the Bloodborne Pathogens Program will be maintained by the JHSC. Occupationally contracted HBV or HIV will be recorded on a separate confidential OSHA 300 Log of Occupational Injuries and Illnesses as an illness. Exposures to bloodborne pathogens from contact with sharps will be recorded on a separate confidential OSHA 300 Log if treatment such as Gamma Globulin, Hepatitis B immune globulin or Hepatitis B vaccine is prescribed by a physician.

There are two types of employee related records required by the Bloodborne Pathogen Standard:

1. Medical Record– A confidential medical record for each employee with potential for exposure must be preserved and maintained for at least the duration of employment plus 30 years. This record must include the following information:
 - Employee' name and social security number.

- Employee's Hepatitis B vaccine status including dates of all Hepatitis B Vaccinations and any medical records related to the employee's ability to receive vaccinations.
 - Results of examinations, medical testing and post exposure evaluation and follow up procedures.
 - The employer's copy of the health care professional's written opinion.
 - A copy of information provided to the health care professional.
2. The Bloodborne Pathogens Program Standard requires training records to be maintained and kept for three years and to include the following:
- Training dates
 - Content or a summary of the training
 - Names and qualifications of trainers
 - Names and job titles of trainees

JHSC has been designated to assure that the policy outlined here is effectively carried out as well as to maintain records related to this policy.

APPENDIX 3

OSHA HEPATITIS B DECLINATION STATEMENT

When the waiver is signed, no words may be added or deleted to the exemption. It must be exactly as worded below. Copy the below, print, sign and turn in to your employee.

Hepatitis B Declination Statement

(<http://www.osha.gov/SLTC/etools/hospital/hazards/bbp/declination.html>)

The following statement of declination of hepatitis B vaccination must be signed by an employee who chooses not to accept the vaccine. The statement can only be signed by the employee following appropriate training regarding hepatitis B, hepatitis B vaccination, the efficacy, safety, method of administration, and benefits of vaccination, and that the vaccine and vaccination are provided free of charge to the employee. The statement is not a waiver; employees can request and receive the hepatitis B vaccination at a later date if they remain occupationally at risk for hepatitis B.

OSHA Hepatitis B Declination Statement

I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to me; however, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine I continue to be at risk of acquiring hepatitis B, a serious disease. If, in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

Employee Signature: _____ Date: _____

If the employee chooses to receive the Hepatitis B vaccine, they must sign an informed consent release. Some employers have tried to add language to the consent form that relieves them from responsibility in the event that an adverse reaction occurs that is related to the vaccine. OSHA regulations do permit a liability waiver to be added to these forms. OSHA states that its role in these matters is as follows:

"OSHA does not have the authority to determine liability for injuries or illnesses; such liability is a matter of state worker's compensation or tort law. We do, however, have the responsibility to ensure that employees who have occupational exposure to blood or other potentially infectious materials are offered the hepatitis B vaccine at no cost." [1]

If an employee refuses the vaccination because he has had previously received the Hepatitis B series, documentation should be included in the employee's medical file, if at all possible. Serum testing for Hepatitis B antibodies does not necessarily prove previous vaccination. Vaccine-induced antibodies to HBV decline gradually over approximately 7 years and nearly 60% of persons who initially respond will lose detectable antibodies within 12 years. [2] If obtaining the documentation it is not feasible, the employee can still sign the mandatory declination form.

The CDC recommends that testing for the anti-HBs is done approximately one to two months after the completion of the vaccination series, as anti-HB levels are most accurately detectable for the first 30-60 days. Antibody testing is not clinically recommended after a six-month period, as the reliability of the antigen as a true marker to differentiate between a recent HBV infection or the vaccination is not as accurately portrayed. [3]

1. OSHA Standard Interpretations 05/03/2000 - Application of 1910.1030 (HBV vaccination series) to police, firefighters, and accident investigators.

http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=INTERPRETATIONS&p_id=23780&p_text_version=FALSE

2. MMWR December 26, 1997, 46(RR-18);1-42

3. OSHA Regulations. Ibid.

APPENDIX 4

CONSENT & AUTHORIZATION FORM

I understand that in conjunction with my employment at AmTote International, Inc, and in accordance with the AmTote's Health and Safety program, the possibility may arise that may lead to the request of an Infectious Disease (HIV/HBV) blood test. This would be due to a Bloodborne incident that I was either directly or indirectly involved with.

I, as the source individual in a Bloodborne Incident, hereby give my consent and authorization for laboratory blood specimen testing for the above mentioned Infectious Diseases.

This test must be performed within 72 hours of exposure and the results must be submitted to AmTote's Human Resources department via a hard copy document from the performing laboratory within 24 hours, if possible. In addition, I have been informed of all applicable laws and HIPAA regulations concerning privacy and identity disclosure.

I have read and fully understand the foregoing and voluntarily consent to allow AmTote or their contracted medical/laboratory vendor to initiate the above such medical blood tests as deemed appropriate. Therefore, my signature bellow represents my full consent and authorization to these tests in accordance with AmTote's Health & Safety policies and procedures.

Signature: _____

Date: _____

Address: _____

Phone: _____

Chapter 14: Contractors
Policy No.: 14.01
Title: Contractors
Effective Date: January 1, 2011

1.0 OBJECTIVE

AmTote will provide information to contractors that work in the facilities to prevent injury to both the contractor and AmTote employees. Information on the policy requirements is to be provided to the contractor prior to commencing work on the company property.

AmTote will provide a consistent method of ensuring contractor activity on-site.

Applicable to all employees and all contractors performing work or providing services at AmTote.

2.0 STANDARDS AND PROCEDURES

2.1 Contractor Initial Assessment

- When the services of a contractor are required and the situation is not an emergency the department manager is responsible to notify the Building Manager.
- The Building Manager is responsible to ensure the forms are completed by the contractor under consideration and returned for review.
- The Building Manager coordinator shall review the assessment form and inform the department manager of his/her views of the safety program and record of the contractor. Where several contractors are bidding for the same work, the safety program and record of the contractor will be given equal consideration to such other factors as timing, costing, etc.

2.2 Contractor Orientation

- Each contractor, excluding emergency situations, will be made familiar with AmTote's safety policies as they relate to the task requested prior to commencing any work to become familiar with the site's applicable Safety and Health policies.

2.3 Contractor Selection (including emergency situations)

- Each contractor is required to submit a valid certificate of insurance for liability, auto and workers' compensation insurance to the Building Manager coordinator prior to commencing work. A contractor is not permitted to perform work without a valid certificate of insurance on file or attached to this form. In case of an emergency situation this can be supplied to the Building Manager within 24 hours.
- All contractors and associated employees and sub-contractors must sign in and out in the visitor's logbook and wear a visitor's badge while on the premises.

2.4 Contractor Monitoring

- The department manager and Safety and Health coordinator will monitor the activities of each contractor for compliance with AmTote specific safe work practices.
- The results of each safety inspection shall be communicated to the contractor supervisor or person in charge.

3.0 ASSIGNED RESPONSIBILITIES

3.1 Building Manager

- Ensure that the AmTote safety standards are attached to all AmTote contracts that are awarded.
- Maintain copies of AmTote Contractor Requirements in files for reference use.
- Ensure that the program is maintained with consultation from the JHSC.
- Maintain records of contractor compliance.
- Regularly review the work of the contractor to confirm it meets all AmTote regulations.
- Accompany any inspector from any organization who wishes to see the contractor's work area.
- Will be notified of any contractor injury.
- Will be notified of any contractor infractions of AmTote regulations.
- Will notify contractor that no AmTote equipment will be used by the contractor unless operated by a trained Division employee.
- Will be notified of any planned fire impairment.
- The contractor complies with this policy.
- Workers' Compensation, General Liability and Auto Insurance certificates of insurance requirements are obtained.

- Other information such as work log or modification rate for the contractor may also be obtained.
- Proof of contractors having taken or received training for lifting devices as well as certification of lifting devices is forwarded to Building Manager.
- Contractor compliance with this policy and the contractor's own safety requirements are adhered to.
- Use of employee facilities such as cafeteria, refrigerators, restrooms and parking are pre-approved.

3.2 Supervisor

- Any contravention of this policy is reported to the Building Manager.
- Stop any contractor from working in an inappropriate manner.

3.3 Contractor

- All SDS for all products that will be used during the work are provided to the Building Manager of AmTote.
- Contractor has a right to review SDS for any chemicals at AmTote.
- Any Contractor company safety procedures (Lockout, Hot Work, etc.) to be used at AmTote are forwarded to the Building Manager.
- All sub-contractors are aware of AmTote safety procedures.
- They are responsible for any sub-contractors they hire.
- A daily check-in will be made by any contractor or subcontractor with Building Manager or a designated contact.
- Appropriate PPE is worn at all times.
- All trash, leftover chemicals, materials, wires, ropes, etc., will be removed by the contractor.
- No eating or drinking will be allowed at AmTote except in designated areas.
- No drug or alcohol use will be tolerated at AmTote. Any use or influence of any type due to an intoxicating substance will be cause for immediate removal from AmTote.

3.4 Contractor Supervisor

- The contractor company safety requirements set forth are known and acted upon.
- All employees under his/her report follow AmTote safety policies and procedures as well as their own.
- The AmTote visitor pass is displayed while on company property.
- Sub-contractors are held to the same standards as the contractor.

- Workers' Compensation, General Liability and Auto Insurance certificates of insurance requirements are obtained for all sub-contractors.

4.0 TRAINING

AmTote will not be responsible for training contractors.

5.0 PERIODIC REVIEW/REVISION/COMMUNICATION

- 5.1 Planned workplace inspections and audits conducted by the JHSC will include a review of compliance to this procedure.
- 5.2 This procedure will be reviewed on an annual basis by the JHSC for any required changes. Circumstances requiring a change to this procedure may include but not be limited to: legislative amendments, production process addition or change, incident/accident history, recommendation of the JHSC.

6.0 RECORD RETENTION

- 6.1 Contractor forms should be kept in the event they are required for use during Corporate Safety Audit.

7.0 TERMINOLOGY

JHSC: Joint Safety and Health Committee

8.0 APPENDICES

- 1. Contractor Safety Rules

REVISION HISTORY

February 2013: Subsection 2.1 (Contractor Initial Assessment): delete from first bullet "The Building Manager shall forward to the department manager a copy of the Contractor Safety Commitment Form and Contractor Safety Orientation Review Form. Contractors who do work repeatedly will only be required to complete these documents once."

Subsection 2.1 (Contractor Initial Assessment): second bullet – change "department manager" to "Building Manager"

Subsection 2.1 (Contractor Initial Assessment): third bullet – change "Safety and Health coordinator" to "Building Manager"

Subsection 2.3 (Contractor Selection): first bullet – change “Safety and Health coordinator” to “Building Manager” (2 places)

Subsection 3.1 (Purchasing Agent): delete and move the 2 bullets to be under Building Manager (3.2)

Subsection 3.2 (Building Manager): renumber to be new 3.1; bullet 14 – change “Safety and Health Coordinator” to “Building Manager”

Subsection 3.3 (Engineer): delete in its entirety

Subsection 3.4 (Supervisor): renumber to 3.2 and delete “Safety and Health Representative of the”

Subsection 3.5 (Contractor): renumber to 3.3; third bullet – change “JHSC” to “Building Manager”

Subsection 6.1: reword to read: “Contractor forms should be kept in the event they are required for use during Corporate Safety Audit.”

Appendix 1 (Contractor Safety Rules): item 19 – reword to read: “There shall be no offensive clothing worn while performing duties in AmTote.”

January 2014: subsection 5.0 (Internal Audits and Feedback) correct to read: “Periodic Review/Revision/Communication”

APPENDIX 1

Contractor Safety Rules

1. Prior to performing any work, check in with the AmTote contact. A meeting shall be performed, which identifies the tasks to be completed, the associated hazards, and the control measures to eliminate the hazards. The contact will ensure that all emergency exits, washroom facilities, smoking and eating areas are located.
2. Contractors and their employees will not be allowed free access to our plant and departments unless accompanied by the contact.
3. Drug and alcohol abuse will not be tolerated at AmTote. Any contractor abusing any type of intoxicating substance will be removed from the property.
4. Contractors and their employees should wear ANSI approved safety glasses, and hearing protection, safety shoes, and possibly, a hard hat.
5. When there is a risk that any AmTote employee has access to the work site, a sign indicating the "repair work in process" or "authorized personnel only" is to be posted.
6. When working at AmTote, contractors are to ensure that aisles, passageways, doorways, fire extinguishers and electrical panels are kept clear at all times.
7. All material, tools, wiring etc., are to be stored in a neat and proper manner and place.
8. Any spillage of oil, grease, water, etc., is to be cleaned up immediately.
9. All waste materials or debris is the property of the contractor and will be taken off site with the contractor.
10. Only sound and safe tools are to be used.
11. Guards removed during maintenance must be replaced as soon as repairs are completed.
12. Compressed gases are to be secured in an upright position with protective caps in place and chained in place.
13. Prior to the start of any hot work, the contractor will inform the Building Manager. A hot work form will be completed and the policy on hot work will be followed.
14. Ensure that the AmTote lock-out/tag-out procedures are adhered to.
15. Contractors will not use any AmTote forklifts, man lifts or scissor lifts unless authorized and operated by the AmTote site representative.

16. The use of fall prevention/protection devices shall be used in accordance with the contractor's safety policy when required.
17. In the event of an evacuation, shut down all equipment, proceed to (meeting location) via the closest exit to be accounted.
18. There shall be no smoking within the AmTote facility and property with the exception of the designated smoking area.
19. There shall be no offensive clothing worn while performing duties in AmTote.
20. All accidents/incidents must be reported to AmTote Building Manager as soon as reasonably possible.