

Centennial Contractors Enterprises

#### **New Subcontractor Orientation**

# Subcontractor Management Crew



This presentation is intended for the management and field operations team of the new subcontracting company.



# **Topics Covered**



- Accident Prevention Plan
- Basic Safety Requirements
- Employee Training Requirements
- Activity Hazard Analysis (site specific)
- Subcontractor Safety Pre-Qualification / Safety Certification
- Sample Supplemental Plans (per work activity)



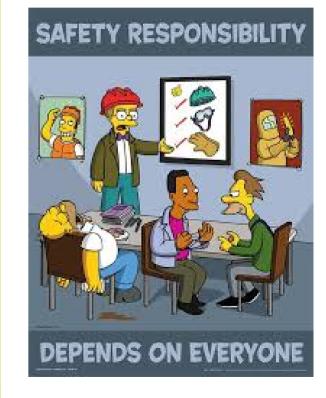
# Accident Prevention Plan



Should include relevant topics to work that your company performs, such as:



- HAZCOM (GHS)
- Hand / Power Tools
- Ladders / Fall Protection
- PPE
- Etc.





#### **Accident Prevention Plan**

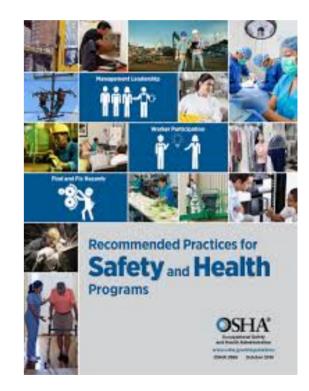


If your company does not currently have an updated APP (Company Safety Program), Centennial can assist you in developing one!

<u>Note</u>: A large percentage of OSHA citations are issued to subcontractors due to the company's lack of an APP. An APP can help reduce workplace injuries and allow your company to avert unnecessary OSHA citations.

#### Written Accident Prevention Plans

- Unlike OSHA requirements, EM 385 requires that company officials responsible for specific aspects of the plan be identified.
- For example, note that element 1, the signature sheet, requires the title, signature and phone number of the person who prepared the plan, the person who approved the plan and any individuals who concurred with the plan.
- Such information would allow DoD contracting officers, project managers or safety specialists to identify specific company personnel that could answer questions concerning the plan or, more importantly, discuss problems concerning its implementation.



#### **Basic Safety Requirements**



#### Please review the list of basic onsite safety requirements "Centennial Site Safety Rules", provided in your handbook.

<u>Note</u>: Your employees will be required to review and sign a copy of the Site Specific Safety Plan which includes the Site Safety Rules before beginning work on any Centennial project. Once they have signed the form, each employee will be issued a hardhat sticker that must be worn on while performing work onsite.







Name of Company | Title Presentation

#### **Clothing and Basic PPE**

#### Hardhats

- Life span of hardhats/suspension
- Brim facing forward
- Only authorized attachments on Hardhats

#### Safety Glasses (100% on all sites)

- ANSI Z87.1
- Prescription safety glasses and side shields
- Face shields When Added Protection is Required

#### Protective Footwear Only

 Steel or safety toed boots may be required by contract

### Hand Protection (100% on all sites

- ASTM Cut Level A2
- ASTM Abrasion Level 2



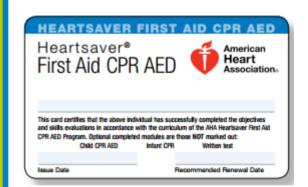




**CPR First Aid** 



Minimum of two people certified in **CPR/FA** (AHA / Medic FA / AHSI / Red Cross) One worker may be permissible is some scenarios • A first Aid kit must be maintained on every construction site





#### **Competent Person**

What is a competent person and when do I need one?

- Fall Protection
- Scaffolding
- Steel Erection
- Confined Space
- Excavation
- Cranes
- Electrical LOTO/ZVV/Energized Work







#### **GFCI/Cords/Tools**



Must use GFCI
Minimum 14 – 3 wire extension cords

Hard or Extra Hard Usage

 All Tools – Double Insulated or Grounded

#### Ladders

- Tie off top and bottom (extension ladders)
- Extension ladders must extend 36" above landing
- Step ladders fully open position
  Must be type IAA, IA, I
  - No Type II, III or IV





#### **Scaffolds and Work Platforms**



- Fully planked or decked w/Scaffold grade planking
- Guardrails or fall protection at 6'
- Proper Access/Egress
- Inspected by a competent person
- Tagging system





#### HAZCOM – Safety Data Sheets



SDS for all chemicals on site
Exact chemical
Chemical / Material List for all hazardous products
Training

- Training
- SDS easily found
- MSDS not allowed



#### **Respiratory Protection**



What do I need if I want/need to wear a respirator?

Medical Evaluation
Record of fit test
Appendix D (voluntary use)



#### **Fire Protection**



- Subcontractor responsibility
- Rated for hazards and work
- Must Be within 75' of work
- 50' of flammables
- Inspected both annually and monthly Must Be Tagged
- Existing facility extinguishers do not count
- No plastic gas containers. Must be metal with spark/flame arrestor

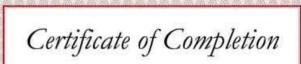






Please provide us the training your employees have received

- Training documentation required for Competent Person designation.
- Company letter designating the Competent Person



is hereby granted to

YOUR EMPLOYEE'S NAME for having completed

Hazard Communication 2012 SDS. Pictograms and Label Elements

8/4/2013

#### **Activity Hazard Analysis (AHA)**



- An AHA must be completed for each definable feature of work (job task).
- Every employee working on site will be required to review and sign each AHA for which he/she is involved in the job task.

<u>Note</u>: If you need assistance with developing AHAs, we can help!



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# **AHA-Description**

- Step by step breakdown of one specific job
- Focus on job tasks to identify hazards before they occur
- Focus on the relationship between the worker, task, tools, and work environment
- A way to identify uncontrolled hazards and then take steps to eliminate or reduce them





### **AHA- When to Perform**



Supervisors are required to conduct AHA's

Definable feature of work

New Process

Get Forman / Workers Involved!



### **How To Complete an AHA**



- Outline the steps or tasks
   Record enough information to describe each job action without getting overly detailed
- Consider getting input from other workers who have performed the same task



# **How To Complete an AHA**



- Review the job steps with the employee(s) to make sure you have not omitted something
- Include the worker in all phases of the analysis
  - Reviewing the task steps and procedures
  - Discussing uncontrolled hazards and recommended solutions



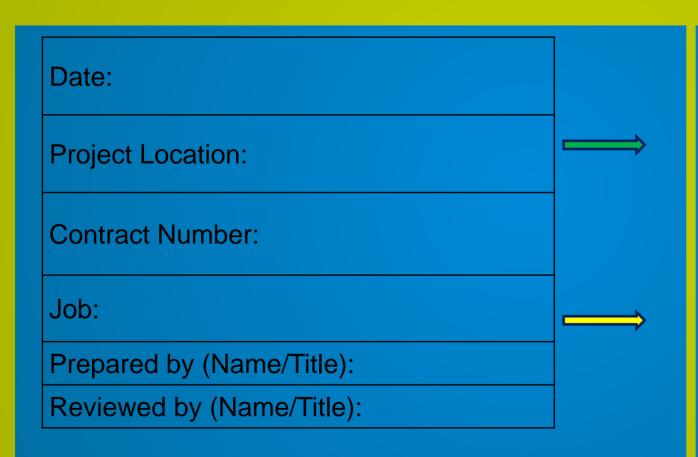
# **AHA- Documentation**

- What the job is
- Who is conducting the analysis
- Who reviewed the AHA
- What Personnel Protective Equipment (PPE) will be required
- What Equipment is required
- What Training is required
- What inspections are required
- Competent Person(s)









Specific location (i.e. Building Number) Note: The activity may take place at more than one location

Insert the title of the activity / definable feature of work.



Job Steps	Hazards	Actions to Eliminate (Controls)	RAC
l l			

- Break the Activity (i.e. Definable Feature of Work) down into successive steps.
- The job steps should be listed in chronological order.

### Install Underground Utilities

- Mobilize Equipment
- Saw Cut
- Concrete Removal
- Excavate Materials
- Install Protective Systems
- Install Utilities
- Backfill
- Etc.







- Identify the hazards and potential mishaps.
- Most job steps have multiple hazards to consider.





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### Hazards

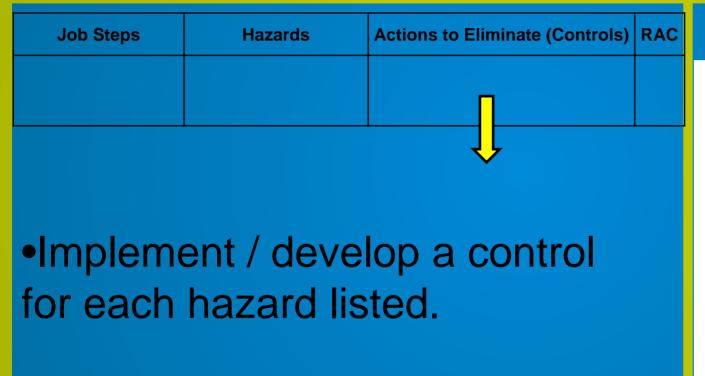


For example, the job step "saw cut concrete," may pose the following hazards;

- Cuts, abrasion
  Eye and face hazards from flying debris
- Hazardous noise
- Respiratory hazards

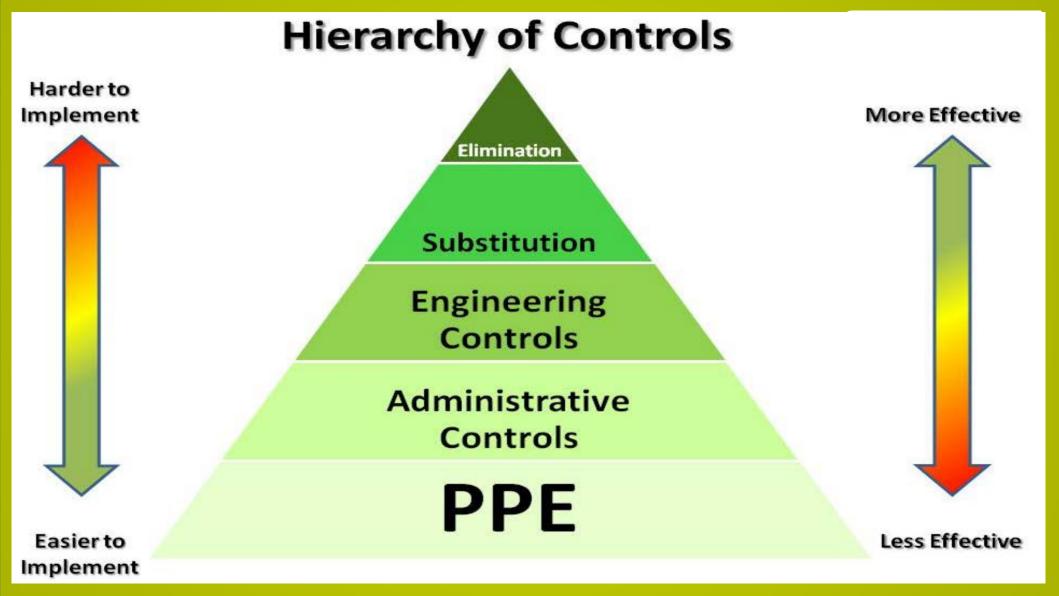






#### HIERARCHY OF CONTROLS







Job Steps	Hazards	Actions to Eliminate (Controls)	RAC

RISK ASSESSMENT CODE (RAC) - must be calculated for each job step.



Overall Risk Asse	ssment Code (	RAC) (Use h	igh <mark>e</mark> st code)	C		
Risk A	Assessment	Code (RA	C) <mark>Matrix</mark>			
<b>Coverity</b>	Probability					
Severity	Frequent	Likely	Occ <mark>a</mark> sional	Seldom	Unlikely	
Catastrophic	Е	E	Н	Н	М	
Critical	E	Н	н	M	L	
Marginal	н	М	M	L	L	
Negligible	М	L	L	L	L	
Step 1: Review each "Hazard" with identified sa	fety " <b>Controls"</b> and	determine RAC (S	ee ab <mark>o</mark> ve)			
•Probability" is the likelihood to cause an incider Likely, Occasional, Seldom or Unlikely.	nt, near miss, or accio	dent and identified	as: Frequent,	RAC	Chart	
"Severity" is the outcome/degree if an incident, Catastrophic, Critical, Marginal, or Negligible	near miss, or accide	nt did occur and ide	entified as:	<mark>E = Extremely High F</mark> H = High Risk	lisk	
Step 2: Identify the RAC (Probability/Severity) as overall highest RAC at the top of AHA.	s E, H, M, or L for ea	ch "Hazard" on AH	A. Annotate the	M = Moderate Risk L = Low Risk		

List all equipment to be used for the activity / definable feature of work.

**Training Requirements/Competent or** 

Qualified Personnel name(s)





**Equipment to be Used** 





**Inspection Requirements** 









 Equipment to be Used
 Training Requirements/Competent or Qualified Personnel name(s)
 Inspection Requirements

List the training requirements for the use of any machinery, equipment, and work activity. The Competent and or Qualified Personnel should also be











Equipment to be Used	Training Requirements/Competent or Qualified Personnel name(s)	Inspection Requirements

•List all inspection requirements for the activity / definable feature of work and equipment.

•The EM 385-1-1, OSHA and State or local standards must be reviewed to ensure that all equipment inspection and certification requirements are met.

# **Implementing / Maintaining**



 AHA's will be reviewed, by all employees, at a preparatory meeting or prior to starting work.

 Workers performing the work, and all personnel on site during such work, are required to sign and date the AHA.



# **Implementing / Maintaining**



 Field changes occur every day which cause new unforeseen hazards to arise.

• AHA's are a living document.



NVD Injuries and Fatalities in the Workplace WOOKDI ACTINI DIDA R.I.P. AND DUNESSES CALKE 13 99 MISTRY. ie everyd Working days are lost each year ion Transfe Injurie in the USA. due to self-reported incolated into FATALITIES workplace injuries. EACH YEAR

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### Implementation/ Maintenance

- As new hazards arise or work methods progress, so should the AHA.
- Once the AHA is updated, ensure that all employees have signed and dated the new changes









### Subcontractor Safety Certifications

- The DOA safety certification is used as a checklist to ensure all required forms and designations are made prior to work commencing.
- This form will be completed by our Project Staff. Once completed you will be notified that work can commence.

### CONSTRUCTION CONTRACT

STRUCTION AGREEMENT is made the	day of	_ 20
BETWEEN		
Contractor: [Name] (as an agent	representative of company)	
License #:		
And		
Subcontractor: [Name] (as an age	nt representative of company)	
License #:		

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### **Supplemental Plans**



We have included some example high risk plan templates that you may be required to submit before beginning work depending upon your anticipated activities.

Please submit these plans and all other documents electronically whenever possible. CONFINED SPACE ENTRY PERMIT Sample 1 (continued)

		AIR MONE	ORING		
Substance Monitored	Permissible Levels		Monitoring Results		
Time monitored (put time) Percent Oxygen	Record the time 19.5% to 23.5%				
LELU/L	Under 10%				
Tasic 1:	PEL	STEL			
Taxic 2:	PEL	STEL			
Taxia 3:	PEL	STEL			
Toxic 4	PEL	STEL		_	
REMARKS:					
		Instrument(s) Used (For example: oxygen meter, combusible gas indicator, etc.)		Model # or Type	Serial# or Unit
		ATTENDANTS A	D ENTRANTS		
Attendent(4) (Rogured for all confined space work except alternate entry)		04	Confined	Space Entrant(s)	104
REWARKS					
	ON - ALL CON	OFFICAS SATISF	E0		
SUPERVISOR AUTHORIZATI				1112 C	
	Construction of the local division of the lo				

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### **Centennial Focus**

#### SAFETY is our focus!

 There may be additional safety standards / requirements not covered in this orientation, to ensure your workers safety is maintained.

#### It is your responsibility to follow them.

• We look forward to partnering with you to increase worker safety on all of our sites!



