St. Paul Linoleum & Carpet Company

Administrative Health and Safety Manual

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St. Paul Linoleum & Carpet Company

Program Sign-Off and Revision Record Form

The Administrative Health and Safety Program in this manual has been implemented as a part of our efforts in assuring all employees are provided with a workplace free of recognized hazards.

Our Health and Safety Program is under the direction of the Safety Program Coordinator, who is responsible for the Health and Safety Program contents, including review and revisions. This page documents the review and revision of the program through time.

Please date, summarize the revision made and sign-off on the review and revision record form below whenever changes are made to the program.

Date	**Specific area revised** (i.e. "Employee Right-to-Know section")	**Specific change made**	**Initials**
7/27/11	Entire Program Review	No Changes	ILC

St. Paul Linoleum & Carpet Company

Administrative Health and Safety/ AWAIR Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The regulation applies to Minnesota employers in certain targeted industries or who meet certain criteria based on Workers' Compensation data.
- Similar regulations may exist in other jurisdictions.
- Recommended for all employers.
- The employer must establish clearly-stated goals and objectives and develop a program which describes the accountability of all levels of employees, especially management, establishes procedures for identifying and controlling workplace hazards, identifies safety rules and enforcement policy, describes how provides for training and communication of the program and describes how accidents will be investigated.
- A written program is required.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

It is the policy of St. Paul Linoleum & Carpet Company to provide our employees with a workplace free of recognized health and safety hazards in an effort to conserve our human, physical and financial resources. The health and well-being of all personnel is important.

The safety of our employees is our first consideration. Accidents and injuries are not only costly to the individual workers and us but often disastrous to the future of his or her family. It is our policy that everything within reason will be done to maintain a safe and healthy workplace for all employees. We support the concept of returning injured employees at the earliest, medically possible opportunity to a productive position here. Each employee has a place in our Accident Prevention Program and is expected to cooperate fully in all measures taken in loss prevention.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

This program is intended to serve as an overview of all Health and Safety programs. It outlines the philosophy by which we will develop, implement and maintain all other safety programs which concern more specific topics.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Administrative Health and Safety/ AWAIR Program

1. Goals/Objectives of the Health and Safety Program

1.1 General. The ultimate goal of the Health and Safety Program is to prevent and reduce employee injuries and illnesses through the administration of an effective Health and Safety Program. Elements of this program are:

- Maintenance of safe and healthful working conditions
- Ensuring employee adherence to proper operating practices and procedures designed to prevent injuries and illness.
- Observing and applying Federal, State and Local safety regulations.
- Each employee is properly trained and instructed on job procedures prior to job assignments.
- Providing safety training for all employees as a means of communicating policy and usable knowledge.
- Conducting periodic safety and fire inspections to identify potential hazards in the workplace.
- Conducting accident investigations to determine the cause of accidents and the actions necessary to prevent future reoccurrences.

1.2 Specific Goals and Objectives. Quantifiable goals and objectives are identified to measure our progress to the above state goals. As a rule, these goals and objectives are measurable, and attainable. They are provided in the Annual Health and Safety Workplan.

1.3 Responsibility for Goal and Objective Setting. Goals and objectives are established by the General Manager and the Safety Program Coordinator.

1.4 Time Frame. Our Health and Safety efforts will be an ongoing effort and will be updated and reviewed annually or as often as necessary.

2. Management, Supervisory and Employee Involvement

2.1 General. This section describes how Managers, Installation Coordinators, and employees are responsible for implementing the Health and Safety Program and how continued participation of management will be established measured and maintained.

2.2 The General Manager. The General Manager is the highest ranking member of our management who is directly responsible for safety. They have the following responsibilities:

- Authorize the Health and Safety Program and provide the Coordinators of specific programs with the authority to administer them.
- To the extent feasible, to ensure that funding for these programs is available.
- Hold all employees accountable for the responsibilities, as they relate to the Health and Safety Program.
- Provide visible, sincere support for all safety programs and safety program activities, and will lead by example in matters related to the Health and Safety Program.
- Works with, coaches, and supports the Safety Program Coordinator to ensure that person is aware of, and fulfilling their responsibilities (as described below). The General Manager also ensures that the Safety Program Coordinator is holding the Installation Coordinators accountable for their performance, as it relates to health and safety.

2.3 Program Coordinator. There exists a Safety Program Coordinator. Their responsibilities are:

- The development, implementation and day to day administration of the program throughout the entire company.
- Understand the content of each Health and Safety Program, and the regulations which apply.
- Carries out the duties and/or coordinates the delegation of contracting of duties outlined in this program.
- Provide visible, sincere support for all safety programs and Health and Safety Program activities, and will lead by example in matters related to the Health and Safety Program.
- Works with, coaches, and supports the Installation Coordinator to ensure they are aware of, and fulfilling their responsibilities (as described below). The Program Coordinator also ensures that the Installation Coordinators are holding the employees they supervise accountable for their performance, as it relates to health and safety.

2.4 The Installation Coordinator. The Installation Coordinators are responsible for the day to day administration of this program in the areas they supervise. They will work with the Program Coordinator to:

- Ensure that all employees are properly trained for the work to which they are assigned, and that all employees are made available for training.
- Ensure that each employee adheres to proper work procedures and rules at all times and to provide disciplinary action when necessary.
- Respond appropriately to all employee hazard reports, safety suggestions, accident reports, questions and concerns, as they relate to safety.

- Provide visible, sincere support for all safety programs and Health and Safety Program activities and will lead by example in matters related to the Health and Safety Program.
- Works with, coaches and supports the employees to ensure they are aware of and fulfilling their responsibilities (as described below).
- Ensures that the employees are knowledgeable about Health and Safety Program, as they relate to the employees' area.

2.5 Employees. Employees will follow the requirements of this program. This may include:

- Attending and when appropriate, participating in all required training or meetings.
- Being knowledgeable about the hazards presented by the work and proper, safe procedures for the work at hand.
- Using appropriate equipment and following established procedures.
- Reporting all work-related injuries and illnesses immediately.
- When employees have suggestions related to this program and/or safety in general, they will report them to the Installation Coordinator and/or the Safety Program Coordinator.
- Employees are required to report all Health and Safety hazards to the Installation Coordinator and/or the Safety Program Coordinator. Serious hazards must be reported immediately.

2.6 The Safety Committee. The responsibilities of the Safety Committee and its members are described in our Safety Committee Program and materials.

3. Hazard Identification and Control

3.1 General. This section describes the methods used to identify, analyze and control new or existing hazards, conditions and operations.

3.2 Safety Inspections. We will conduct safety surveys of work sites on a periodic basis to determine potential hazards which may be encountered in the normal course of duty. Inspections may be conducted by the Safety Program Coordinator, insurance representatives, outside consultants, or other appropriate, concerned parties.

Results of the inspections are to be provided to the Safety Program Coordinator who will forward the results and recommendations to the Installation Coordinator (for items pertaining to conditions and items pertaining to behaviors). The Safety Program Coordinator and the Installation Coordinator will be responsible for taking corrective action. The General Manager will be copied on all such reports. A Safety Inspection Form (awr-07) is provided.

3.3 Periodic Sampling. Periodic environmental sampling may be conducted when it is believed employees may be exposed to new hazards or hazardous materials in concentrations which may be above recognized OSHA standards. Results of the sampling will be available to employees within 15 days of the results of the monitoring.

3.4 Job Safety Analysis (JSA). Safe work practices will, when applicable, be developed through the use of the Job Safety Analysis (awr-05). Each major job element will be reviewed

for its potential to cause injury and recommendations for hazard controls will be developed. Implementation of safety procedures developed through the JSA will be communicated to employees through a variety of means, including training sessions, safety meetings or one-on-one communication.

3.5 Employee Hazard Reporting and Safety Suggestions. Any employee who feels that there is an unsafe condition existing in any part of the operation, or has a suggestion to enhance employee health and safety must immediately report it to the Safety Program Coordinator, or the Installation Coordinator. Hazard Report/Safety Suggestion Forms (awr-04) are available for employees from their Safety Program Coordinator. The master copy of this form is provided in the Forms & Supporting Documents.

It will be the responsibility of the Installation Coordinator, or the Safety Program Coordinator to follow up on the hazard report or suggestion at the earliest feasible opportunity. All submissions will receive an appropriate degree of evaluation, and in all cases, the findings will be communicated to the employee who made the report.

When appropriate, written documentation of the employee report of suggestion and the corrective action taken (if any) will be maintained in the designated section of this binder.

Employees who report hazards to our management will not be discriminated against in any manner.

3.6 Personal Protective Equipment. Personal protective equipment will be selected on the basis of the hazard in which the employee will be working and the effectiveness of the protective equipment to reduce or minimize employee exposures to the hazard. We will use a PPE Assessment Form (ppe-01) to aid in selection. Employees are issued specific equipment as necessary for their personal protection while on the job.

It is the responsibility of each employee to maintain their protective equipment in good condition.

3.7 Monitoring Workplace Injuries and Illness/OSHA 300 Records. All workplace injuries and illnesses will be monitored by the Safety Program Coordinator.

4. Training and Communication

4.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

4.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, tasks or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

4.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

4.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

An AWAIR Training Documentation Form (awr-02) is provided in the forms and supporting documents section.

A General Safety Training Documentation Form (awr-03) is also provided.

A Supervisor Roles and Responsibilities Training Documentation Form is also provided (awr-08).

4.5 Content of Training. The training session will consist of:

- A brief review of the AWAIR/Safety and Health program
- The employees' responsibilities under it
- Procedure for reporting hazards
- Procedure for reporting injuries and illnesses
- The recognition and control of applicable workplace safety hazards and relevant safety rules and disciplinary policy

4.6 Safety Postings. Safety messages such as work instructions, warnings, safety committee minutes, announcements, etc. will be posted conspicuously, as necessary.

5. Injury Reporting, Investigation and Return to Work

5.1 General. This section describes how workplace accidents will be investigated, how corrective actions will be implemented and the policies relating to returning injured employees to meaningful work at the earliest possible time.

5.2 Identification of Cause and Correction. Our philosophy of accident/incident analysis is that accidents never "just happen," rather they are caused by a series of actions, steps or failures. If these steps can be identified, they can be controlled or eliminated. The primary

purpose of accident/incident investigation is to determine the root causes of the accident, and eliminate the causative factors.

5.3 Process and Responsibilities. Accident/incident investigations will begin with prompt reporting of the accident by the employee to the Immediate Supervisor. It will be the responsibility of the Immediate Supervisor to coordinate any necessary emergency medical care. They will direct the employee to seek treatment at the designated medical facility whenever possible.

Basic information to be collected at the scene of the accident should be filled out by the Immediate Supervisor on the Accident/Incident Investigation Form (awr-01). These forms are available from the Immediate Supervisor, who will assist as needed and may conduct further investigations as necessary. The accident investigation is to be initiated as soon as feasible following the accident, but always within 24 hours of the initial report.

When applicable the Immediate Supervisor will provide results of the investigation and recommendations for corrective actions to the Safety Program Coordinator (for items pertaining to conditions) and/or the Installation Coordinator (for items pertaining to behaviors). They will be responsible for taking corrective action.

5.4 Return to Work. All work-related illnesses and injuries must be reported to the Immediate Supervisor prior to seeking medical treatment (except in cases of medical emergencies such as life-threatening cases). If any work is to be missed as a result of the injury, the employee must report this to the Immediate Supervisor as soon as possible (but always within 24 hours, or the beginning of the scheduled work shift, whichever is sooner).

If the employee seeks medical attention, he/she must provide a "workability report" or equivalent, from the medical provider, outlining the employee's restrictions, if any. Upon receipt of the workability report, the Immediate Supervisor and/or the Safety Program Coordinator will meet with the injured employee to attempt to identify potential work assignments which can be performed within the employee's restrictions. Providing these assignments will be based on operational needs and we cannot guarantee such assignments will be available.

To the extent feasible, the Installation Coordinator and/or the Immediate Supervisor will monitor the employee's work, but the employee will be ultimately responsible for ensuring he/she is working within his/her restrictions at all times. We reserve the right to require the employee to acknowledge in writing that he/she understands the contents of the workability report and his/her restrictions, and that it is the employee's responsibility to monitor his/her own work to ensure that all such restrictions are complied with.

6. Safety Rules and Enforcement

6.1 General. This section describes how safe work practices and rules will be enforced.

6.2 Disciplinary Policy. Although we support the theory of corrective discipline, management retains discretion to take disciplinary action appropriate to the particular circumstances.

Violations of safety rules or policies may result in disciplinary measures that may, depending upon the circumstances and at our discretion, include verbal or written warnings, suspension (with or without pay), or immediate discharge. These disciplinary measures do not constitute an exclusive list of possible actions and may be taken in any order. They merely serve as a guide to the employee and are not intended to create a contract or modify the "employment at will" relationship.

Our Safety Rules (awr-06) are communicated to employees through means such as the safety postings and signs, training, etc.

St. Paul Linoleum & Carpet Company

Bloodborne Pathogens Exposure Control Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The regulation applies to any employer whose employees are potentially exposed to human blood and/or certain other bodily fluids.
- It is our opinion that nearly all employers should have a bloodborne pathogens program.
- The employer must develop written exposure control program which identifies job classes and/or tasks which create exposure, engineering controls in place to prevent exposure, personal protective equipment, procedure for evaluating exposure incidents, procedure or providing medical management including hepatitis B vaccinations and training.
- A written program is required.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

St. Paul Linoleum & Carpet Company recognizes that bloodborne pathogens are a serious concern to employees who are exposed to blood and other potentially infections materials (OPIMs). We will identify employees who may be exposed to these materials and implement a program to reduce their risk of exposure to the lowest feasible level. We will also provide for appropriate post-exposure prophylaxis.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

This program applies to all of our employees who may have occupational exposure or potential occupational exposure to blood or other potentially infectious materials. A listing of specific job classes and assignments which present significant risk is provided in the Exposure Determination for Bloodborne Pathogens (bbp-01).

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no

difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

"Exposure Incident" means a specific eye, mouth, other mucus membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials which results from the performance of an employee's duties.

"Other Potentially Infectious Materials" means:

- The following body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, and any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; and
- Any unfixed tissue or organ (other than intact skin) from a human (living or dead).

The Bloodborne Pathogens Exposure Control Program

1. Methods of Compliance

1.1 General. This section describes the methods that will be implemented to protect the employees identified on page one from potential exposure. The purpose of these measures is to reduce or eliminate the potential for exposures.

1.2 Universal Precautions. All body fluids will be considered potentially infectious materials.

1.3 Engineering and Work Practice Controls. All tasks involving potential exposure to human blood or OPIM will be performed in a manner which reduces the potential for exposure to the lowest possible level.

Sinks with running water and germicidal soap are provided in the employee rest rooms.

1.4 Personal Protective Equipment. We will provide, at no cost to the employee:

- Utility gloves of vinyl, latex or nitrile.
- Splash-proof goggles will be provided to reduce the potential for eye contact.
- One way, transparent CPR masks will be provided to employees involved in emergency medical response.

These supplies will be provided in each First Aid Kit.

1.5 Housekeeping. All contaminated surfaces, receptacles, tools, and equipment, etc. will be sanitized at the earliest feasible time following the injury. Contaminated surfaces must be decontaminated with a virucidal disinfectant. Disinfectant and other clean up supplies will be maintained.

A written procedure for such clean up is provided in the Forms & Supporting Documents and is entitled, Procedure for Cleanup of Blood or Other Infectious Materials (emerg-01).

2. HBV Vaccination, Post Exposure Evaluation/Follow-Up

2.1 General. We will make available the Hepatitis B vaccination series to all employees who have occupational exposure, and post-exposure evaluation and follow-up to all employees who have had an exposure incident.

2.2 Hepatitis B Vaccination. The Hepatitis B vaccination will be made available after the employee has received the training required by the OSHA Bloodborne Pathogens Standard and within 10 working days of initial assignment to all employees who have occupational exposure, unless the employee declines the vaccination, has previously received the complete Hepatitis B vaccination serious or antibody testing has revealed that the employee is immune or the vaccine is contraindicated for medical reasons.

Any employee who many initially decline the Hepatitis B vaccination but at a later date while still covered under the Standard decides to accept the vaccination, we will make available the Hepatitis B vaccination at that time.

Note: We reserve the right to offer the vaccination following the first exposure incident in cases in which we would be able to offer the first vaccination within two hours of the exposure incident.

We will assure that employees who decline to accept Hepatitis B vaccination sign a statement of declination. This statement can be found in the Supporting Forms & Documents Hepatitis B Consent and Vaccination Record (bbp-02). Once signed, they are to be considered medical records and stored in accordance with section 4.2 of this program.

2.3 Procedure for Post-Exposure Evaluation and Follow-Up. Employees who have experienced an exposure incident will report the incident to the Safety Program Coordinator immediately.

Within two hours of the report of the exposure incident, we will make a confidential medical evaluation and follow-up available to the exposed employee. The medical evaluation and follow-up will be provided by the health care professional designated on the Who's Who Resource Directory. The Post Exposure Information and Medical Opinion Form (bbp-03) may be used for this purpose.

2.4 Information Provided to the Healthcare Professional. We will ensure that the healthcare professional at the medical clinic responsible for the employee's Hepatitis B vaccination is provided the following information:

- A copy of the OSHA 1910.1030 regulation.
- A description of the exposed employee's duties as they relate to the exposure incident.
- Documentation of the route(s) of exposure and circumstance under which exposure occurred.
- Results of the source individual's blood testing, if available.
- All medical records relevant to the appropriate treatment of the employee including vaccination status.

2.5 Healthcare Professional's Written Opinion. We will obtain and provide the employee with a copy of the evaluating healthcare professional's written opinion within 15 days of the completion of the evaluation.

2.6 Evaluating Exposure Incidents. Following an exposure incident, we will conduct an investigation into the facts surrounding the incident. The goal of the investigation is to identify the factors that allowed the potential for exposure to exist, and what control measures are to be taken to prevent future occurrences.

The investigation will be conducted by a team, consisting of at least the Safety Program Coordinator, the Installation Coordinator, and the exposed employee.

The written findings/results of the investigation will be considered a confidential medical record.

3. Training and Communication

3.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

3.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

3.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.
In all cases, training will be conducted by a suitably qualified person.

3.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).

- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Bloodborne Pathogens Training Outline/Recordkeeping Form (bbp-04) is provided in the training section.

In all cases, training will be conducted by a suitably qualified person.

3.5 Content of Training. The training session will consist of:

- An accessible copy of the regulatory text of the OSHA standard and an explanation of its contents.
- A general explanation of the epidemiology and symptoms of bloodborne diseases.
- An explanation of the modes of transmission of bloodborne pathogens.
- An explanation of our exposure control plan and the means by which the employee can obtain a copy of the written plan.
- An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to blood and OPIMs.
- An explanation of the use and limitations of methods that will prevent or reduce exposure including appropriate engineering controls, work practices and personal protective equipment.
- Information on the types, proper use, location removal, handling, decontamination, and disposal of personal protective equipment.
- An explanation of the basis for selection of personal protective equipment.
- Information on the Hepatitis B vaccine, including information on its effectiveness, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or OPIMs.
- An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident and the medical follow-up that will be made available.
- Information on the post-exposure evaluation and follow-up that we are required to provide for the employee following an exposure incident.
- An explanation of the labels, signs and/or color coding used here.

3.6 Labels and Signs. Infectious waste bags and containers must be marked with either a three inch or larger "biohazard symbol" or letters one inch or larger as "INFECTIOUS WASTE."

4. Recordkeeping

4.1 General. This section deals with the various recordkeeping requirements of program like medical records, training records, etc. and the responsibility for maintaining them.

4.2 Medical Records. We have established and maintain an accurate record for each employee with occupation exposure, in accordance with 29 CFR 1910.1020. These records are maintained by the Safety Program Coordinator. This record includes:

- The name and social security number of the employee.
- A copy of the employee's Hepatitis B vaccination status.
- A copy of all results of examinations, medical testing and follow-up procedures as required by this policy.
- Our copy of the healthcare professional's written opinion.
- A copy of the information provided to the healthcare professional.

We will ensure that employee medical records required by this policy are kept confidential by maintaining the records in locked files, and are not disclosed or reported without the employee's express consent.

All records required by the OSHA standard 1910.1030 are maintained for at least the duration of the employment plus 30 years in accordance with 29 CFR 1910.1020.

4.3 OSHA 300 Log Recordkeeping. For the purposes of OSHA 300 recordkeeping, an occupational exposure to bloodborne pathogens as a result of an exposure incident (laceration splash) will be classified as an injury since it is usually the result of an instantaneous event or exposure. The event will be recorded on the OSHA 300 record log if it meets on of the following:

- The incident is a work-related injury that involves loss of consciousness, transfer to another job, or restriction of work or motion.
- The incident results in the administration of medical treatment beyond First Aid (administration of gamma globulin, Hepatitis B immune globulin, Hepatitis B vaccination or zidovudine [AZT] regardless of the dosage.)

4.4 Sharps Injury Log. As required, we will establish and maintain a sharps injury log for the reporting of percutaneous injuries from contaminated sharps. The information shall be recorded and maintained in such a manner as to protect the confidentiality of the injured employee.

All work-related needle stick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (as defined by 29 CFR 1910.1030) must be recorded on the Sharps Injury Log. The injury must also be entered on the OSHA 300 Log as an injury. The records must be maintained for the same period as the OSHA 300 Injury/Illness records. The Sharps Injury Log is maintained within our OSHA 300 Injury/Illness Recordkeeping System.

St. Paul Linoleum & Carpet Company

Electrical Safe Work Practices Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The regulation applies to employees who work on or around exposed, energized electrical conductors.
- The regulation specifies when safe electrical work practices are required and what those practices are.
- A written program is not required, but it is recommended.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

It is the policy of St. Paul Linoleum & Carpet Company to ensure that all employees who may be exposed to energized, exposed electrical parts be protected from electric shock, electrocution, and other hazards of electricity.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Application & Definitions

This program outlines only the work practices and procedures used to ensure that employees are protected from the hazards of electricity. This program does not apply to the requirements for electrical equipment and installations.

The program applies to all employees whose work may involve contact with:

- Exposed, energized parts, or;
- Exposed, deenergized parts which are not locked and tagged out of service in accordance with our Lockout/Tagout Program. Employees who are exposed to deenergized parts which are locked and tagged out of service are covered by our Lockout/Tagout Program.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no

difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Installation Coordinator.

The Electrical Safe Work Practices Program

1. Deenergizing Parts Before Work

1.1 General. Safety-related work practices will be employed to prevent electric shock or other injuries resulting from either direct or indirect electrical contacts, when work is performed near or on equipment or circuits which are or may be energized. The specific safety-related work practices will be consistent with the nature and extent of the associated electrical hazards.

1.2 Deenergized Parts. Live parts to which an employee may be exposed will be deenergized before the employee works on or near them, unless we can demonstrate that deenergizing introduces additional or increased hazards or is infeasible due to equipment design or operational limitations. Live parts that operate at less than 50 volts to ground need not be deenergized if there will be no increased exposure to electrical burns or to explosion due to electrical arcs.

Examples of increased or additional hazards include interruption of life support equipment, deactivation of emergency alarm systems, shutdown of hazardous location ventilation equipment, or removal of illumination for an area.

Examples of work that may be performed on or near energized circuit parts because of infeasibility due to equipment design or operational limitations include testing of electrical circuits that can only be performed with the circuit energized an work on circuits that form an integral part of a continuous industrial process in a chemical plant that would otherwise need to be completely shut down in order to permit work on one circuit or piece of equipment.

1.3 Energized Parts. If the exposed live parts are not deenergized (i.e. for reasons of increased or additional hazards or infeasibility), other safety-related work practices will be used to protect employees who may be exposed to the electrical hazards involved. Such work practices will protect employees who may be exposed to the electrical hazards involved. Such work practices will protect employees against contact with energized circuit parts directly with any part of their body or indirectly through some other conductive object. The work practices that are used will be suitable for the conditions under which the work is to be performed and for the voltage level of the exposed electric conductors or circuit parts. Specific work practice requirements are detailed in section 4 of this program.

2. Working on or Near Deenergized Parts and Lockout

2.1 General. This section applies to work on exposed deenergized parts on or near enough to them to expose the employee to any electrical hazard they present. Conductors and parts of electric equipment that have been deenergized but have not been locked or tagged out in accordance with our Lockout/Tagout program will be treated as energized parts.

2.2 Lockout/Tagout. While any employee is exposed to contact with parts of fixed electric equipment or circuits which have been deenergized, the circuits energizing the parts will be locked out and tagged out in accordance with our Lockout/Tagout program.

3. Working on or Near Exposed Energized Parts

3.1 General. This section applies to work performed on exposed live parts (involving either direct contract or by means of tools or materials) or near enough to them for employees to be exposed to any hazard they present.

Our program will reference the current edition of the National Fire Protection Association (NFPA) 70E "Standard for Electrical Safety in the Workplace" as necessary, based on the task(s) performed.

3.2 Qualified Persons. Only qualified persons may work on electric circuit parts or equipment that has not been deenergized under the procedures of section 3 of this program. Such persons will be capable of working safely on energized circuits and will be familiar with the proper use of special precautionary techniques, personal protective equipment, insulating and shielding materials, and insulated tools.

3.3 Overhead Lines. If work is to be performed near overhead lines, the lines will be deenergized and ground or other protective measures will be provided before work is started. If the lines are to be deenergized, arrangements will be made with the person or organization that operates or controls the electric circuits involved to deenergize and ground them. If protective measures, such as guarding, isolating or insulating are provided, these precautions will prevent employees from contacting such lines directly with any part of their body or indirectly through conductive materials, tools or equipment.

Note: The work practices used by qualified persons installing insulating devices on overhead power transmission or distribution lines are enforced by OSHA under 29 CFR 1910.269.

Unqualified persons are prohibited from performing this type of work. When an unqualified person is working in an elevated position near overhead lines, the location will be such that the person and the longest conductive object he or she may contract cannot come any closer to any unguarded, energized overhead line than the following distances:

- For voltages to ground 50kV or below – 10 feet (305 cm);
- For voltages to ground over 50kV – 10 feet (305 cm) plus 4 inches (10 cm) for every 10kV over 50kV.

When an unqualified person is working on the ground in the vicinity of overhead lines, the person may not bring any conductive object closer to unguarded, energized overhead lines than the distances given above.

Note: For voltages normally encountered with overhead power line, objects which do not have an insulating rating for the voltage involved are considered to be conductive.

When a qualified person is working in the vicinity of overhead lines, whether in an elevated position or on the ground, the person may not approach or take any conductive object without an approved insulating handle closer to exposed energized parts than shown below, unless:

- The person is insulated from the energized part (gloves, with sleeves, if necessary, rated for the voltage involved are considered to be insulation of the person from the energized part on which work is performed), or
- The energized part is insulated both from all other conductive objects at a different potential and from the person, or
- The person is insulated from all conductive objects at a potential different from that of the energized part.

Voltage Range (Phase to Phase)	Minimum Approach Distance
300V and less	Avoid Contact
Over 300V, not over 750V	1 ft. 0 in. (30.5 cm)
Over 750V, not over 2kV	1 ft. 6 in. (46 cm)
Over 2kV, not over 15kV	2 ft. 0 in. (61 cm)
Over 15kV, not over 37kV	3 ft. 0 in. (91 cm)
Over 37kV, not over 87.5kV	3 ft. 6 in. (107 cm)
Over 87.5kV, not over 121kV	4 ft. 0 in. (122 cm)
Over 121kV, not over 140kV	4 ft. 6 in. (137 cm)

Any vehicle or mechanical equipment capable of having parts of its structure elevated near energized overhead lines will be operated so that a clearance of 10 ft. (305 cm) is maintained. If the voltage is higher than 50kV, the clearance will be increased 4 in. (10 cm) for every 10kV over that voltage. However, under any of the following conditions, the clearance may be reduced:

- If the vehicle is in transit with its structure lowered, the clearance may be reduced to 4 ft. (122 cm). If the voltage is higher than 50kV, the clearance will be increased 4 in. (10 cm) for every 10kV over that voltage.
- If insulating barriers are installed to prevent contact with the lines, and if the barriers are rated for the voltage of the line being guarded and are not a part of or an attachment to the vehicle or its raised structure, the clearance may be reduced to a distance within the designed working dimensions of the insulating barrier.
- If the equipment is an aerial life insulated for the voltage involved, and if the work is performed by a qualified person, the clearance (between the uninsulated portion of the aerial lift and the power line) may be reduced to the distance given in the table above.

Employees standing on the ground may not contact the vehicle or mechanical equipment or any of its attachments, unless:

- The employee is using protective equipment rated for the voltage; or
- The equipment is located so that no uninsulated part of its structure (that portion of the structure that provides a conductive path to employees on the ground) can come closer to the line than permitted above.

If any vehicle or mechanical equipment capable of having parts of its structure elevated near energized overhead lines is intentionally grounded, employees working on the ground near the point of grounding may not stand at the grounding location whenever there is a possibility of overhead line contact. Additional precautions, such as the use of barricades or insulation, will be taken to protect employees from hazardous ground potentials, depending on earth resistivity and fault currents, which can develop within the first few feet or more outward from the grounding point.

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

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.

3.5 Confined or Enclosed Work Spaces. When an employee works in a confined or enclosed space (such as a manhole or vault) that contains exposed energized parts, we will provide, and the employee will use, protective shields, protective barriers, or insulating materials as necessary to avoid inadvertent contact with these parts. Doors, hinged panels, and the like, will be secured to prevent their swinging into an employee and causing the employee to contact exposed energized parts.

We will develop a confined space entry program when required.

3.6 Conductive Materials and Equipment. Conductive materials and equipment that are in contact with any part of an employee's body will 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, we will institute work practices (such as the use of insulation, guarding, and material handling techniques) which will minimize the hazard.

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

3.8 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.

3.9 Housekeeping Duties. Where live parts present an electrical contact hazard, employees may not perform housekeeping duties at such close distance to the parts that there is a possibility of contact unless adequate safeguards (such as insulating equipment or barriers) are provided. Electrically conductive cleaning materials (including conductive solids such as steel wool, metalized cloth, and silicon carbide, as well as conductive liquid solutions) may not be used in proximity to energized parts unless procedures are followed which will prevent electrical contact.

3.10 Interlocks. Only a qualified person following the requirements of section 4 of this program may defeat an electrical safety interlock, and then only temporarily while he/she is working on the equipment. The interlock system will be returned to its operable condition when this work is completed.

4. Training and Communication

4.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

4.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

4.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

4.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Safe Electrical Work Practices Training Outline/Recordkeeping Form (elec-01) is provided in the training section.

4.5 Content of Training. The training session will consist of:

- The nature and level of hazards of the work, including arc flash and arc blast;
- The requirements of this section, especially as they relate to Lockout/Tagout;
- Any other requirements that apply to the protection of the employee against electrical hazards, including special tools or protective equipment.

St. Paul Linoleum & Carpet Company

Emergency Action/ Fire Prevention Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The regulation applies to any employer who is required by any OSHA standard to develop an emergency action program. For example, the fire extinguisher regulation or the process safety management rules.
- The program must include designated evacuation routes for all employees, procedure for accounting for employees following an evacuation, alarm system, fire-fighting/medical/rescue responsibilities, written procedures for shut-down of process equipment, procedures for the proper reporting of emergencies and employee training and drills.
- The program must be in writing.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit these OSHA websites to learn more. OSHA (1) or OSHA (2)

Policy

We have developed this program with two goals in mind:

- To minimize the potential for fires and explosions, and;
- To prepare for emergencies (including, but not limited, to fires and explosions) in an effort to minimize the negative consequences of these events.

Critical elements of this program include; identification of potential emergencies, communication of emergencies, development of procedures, and training.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

This program serves as an overview of steps we will take to prevent fires and explosions, as well as the steps that will be taken in response to emergencies such as fires, medical emergencies, severe weather, chemical spills and releases, bomb threats, violence, etc.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Emergency Action/ Fire Prevention Program

1. Evacuation Routes and Safe Areas

1.1 General. We will develop, and post throughout the facility, an emergency and evacuation map. A master copy will be maintained in the designated section of this manual. At a minimum, the map will identify:

- Designated evacuation routes and exits;
- Gathering points for various types of emergencies, including fires and severe weather.

At our discretion, the map may also include:

- The locations of all fire extinguishers;
- The locations of all First Aid kits and supplies;
- The locations of all emergency eyewashes and showers;
- The location of all Material Safety Data Sheet collections;
- The locations of any hazardous waste accumulation sites (if any);
- The locations of any spill clean-up kits and supplies (if any);
- All electrical load centers;
- Gas main cut of valve(s);
- The automatic sprinkler system controls;
- Water main valves.

2. Emergency Procedures

2.1 General. We have developed general, written procedures for emergencies such as:

- Blood Clean-up (emerg-01)
- Bomb/Terror Threats (emerg-02)
- Chemical Spills and Releases (emerg-03)
- Fire (emerg-04)
- Gas Leaks (emerg-05)
- Medical Emergencies (emerg-06)
- OSHA Inspections (emerg-07)
- Severe Weather (emerg-08)

- Violent Attacks (emerg-09)
- Suspicious Mail (emerg-10)
- Fatalities/Multiple Hospitalizations (emerg-11)
- Media Inquiries (emerg-12)

They are located in the forms and supporting documents section of the manual.

3. Employees Remaining at Their Workstations

3.1 General. In some circumstances, operations may require some employees to remain to either continue to operation critical process equipment, or to conduct special shutdown procedures on equipment before evacuating.

Currently, there are no such operations at our facility. In the event of an emergency, employees should shut down process equipment using normal procedures but only if it is safe to do so. At no time are employees permitted to jeopardize their own safety, or the safety of others, by remaining at or returning to their workstations during emergencies.

If, in the future, there are processes or equipment which requires special shut down, written procedures will be developed and communicated to all appropriate employees.

4. Accounting for Employees

4.1 General. After evacuation, the escape of all affected employees will be verified by a head count taken by Supervisors. This information will be conveyed to the responding fire department or other emergency service.

In the event of a violence-related emergency in which employees have left the building and gone home, employees will be contacted at home by telephone to ensure their successful escape.

5. Emergency Fire Fighting, Rescue and Medical Duties

5.1 General. We are serviced by the resource identified in the Who's Who Resource Directory. They have informed us that they have the ability to respond to medical and other emergencies within 4-6 minutes.

Therefore, we have opted not to designate employees with medical or rescue responsibilities. Any such service provided by an employee is done so on a voluntary, "Good Samaritan" basis.

5.2 First Aid Kits. Appropriately stocked First Aid kits are provided for employee's emergency use. Location(s) of the First Aid kit(s) are provided on the evacuation/safety map. The Safety Program Coordinator is responsible for ensuring these kits are adequately stocked at all times.

5.3 Medical Services. In the event that an injured or ill employee requires medical assistance, he/she will be transported to the clinic designated on the Who's Who Resource Directory.

5.4 Portable Fire Extinguishers and Hoses. Portable fire extinguishers and hoses are provided throughout our facility. While no employee is "designated," or required to fight fires using extinguishers or hoses, all employees are permitted to do so on a voluntary basis, if:

- The employee has successfully completed fire extinguisher training; and
- The employee believes that the fire can be extinguished with a single fire extinguisher.
- Attempting to fight the fire does not create an unacceptable risk (i.e. the fire is small and confined; the employee needs not place him/herself in an unsafe location or position, etc.)

6. Reporting Fires and Other Emergencies

6.1 General. All employees are responsible for immediately reporting all emergencies. The reporting of an emergency triggers the emergency action portion of this program.

This section differentiates between internal and external reporting. Internal reporting refers to notifying various company personnel of the emergency, while external reporting refers to notifying the fire department, police, etc.

6.2 Procedure. In general, emergencies should be reported internally to the Safety Program Coordinator, the Installation Coordinator, or the Receptionist by intercom or phone or in person before external notification is made. However, in cases where the Safety Program Coordinator, the Installation Coordinator, or the Receptionist are not immediately available, or the emergency warrants immediate external notification all employees are authorized to do so.

Emergency phone numbers (internal and external) will be conspicuously posted.

7. Alarm/Public Address System

7.1 General. The alarm/public address system is a critical means for employees to receive or provide emergency communications. No alarm is required for work areas with fewer than 11 employees.

All employees have access to the alarm/PA System.

The alarm/PAS can be heard over ambient noise levels, and/or seen over lighting levels. In cases where employees can not hear the alarm/PAS over ambient noise levels by virtue of their work or disability, tactile alarms or alternate means will be implemented.

Alarm systems will be reset as soon as feasible after testing. Alarms will not be reset before the emergency has been resolved.

7.2 Responsibility. The Safety Program Coordinator will be responsible for the alarm system and its periodic inspection.

8. Training and Communication

8.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

8.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

8.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

8.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

An Emergency Procedures Training Outline/Recordkeeping Form (emerg-13) is provided in the training section.

8.5 Content of Training. The training session will consist of:

- A review of this program and its requirements.
- Each employee's responsibilities under the program.
- The specific procedures to be followed in each of the emergencies covered by the plan.
- The operations of equipment discussed in the program (phones, fire extinguishers, etc.)
- The recognition and control of fire hazards, especially the fire hazards present in the facility (see section 8).
- The housekeeping rules in the employee handbook.

9. Fire Prevention

9.1 General. This section details the steps taken by St. Paul Linoleum & Carpet Company to prevent fires.

9.2 Fire Extinguishers. Appropriately rated portable fire extinguishers, and/or hoses will be provided where necessary. Travel paths to extinguishers are to remain unobstructed at all times. Employees authorized to use extinguishers will be trained in their use.

9.3 Housekeeping Rules. Written housekeeping rules and procedures have been developed to minimize the accumulations of combustible waste. They are incorporated into our General Safety Rules (awr-06) (see section 6 of our AWAIR program).

9.4 Proper Storage of Flammable Liquids. Flammable and combustible liquids will be stored and dispensed in compliance with 29 CFR 1910.106.

9.5 Spray Finishing with Combustible or Flammable Liquids. All such activities will be conducted in accordance with 29 CFR 1910.107.

9.6 Proper Storage of Combustible Materials. Combustible materials such as wood, paper, cardboard, etc. will not be stored, or allowed to accumulate where they may be exposed to open flame, intense heat, sparks or other ignition sources, or where it may tend to fuel and incipient level fire. For example, near spray booths, near chemical storage areas, flammable gas storage, etc.

Rags, paper, and other materials which may be contaminated with combustible liquids such as oil, must be stored in approved, self closing, metal fire cans, which are to be emptied on a daily basis.

9.7 Smoking. Smoking is permitted only is designated areas.

9.8 Hot-Work Permits. Welding, torch cutting, brazing, or any other "hot work" which takes place outside the designed area, will require a hot work permit. A Hot Work Permit Form (emerg-14) is provided in the Forms & Supporting Documents.

9.9 Inspections. All of our workplaces shall be inspected frequently to ensure all reasonable fire prevention controls are in place. General safety inspections will also include fire prevention considerations.

9.10 Responsibilities. The Gilbert Mechanical is responsible for the maintenance of equipment and systems installed to prevent or control ignition or fires or the control of fuel sources.

The Safety Program Coordinator is responsible for the control of fuel source hazards.

St. Paul Linoleum & Carpet Company

Ergonomics Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- There is currently no OSHA regulation pertaining to ergonomics.
- This program is recommended for any employer who is experiencing ergonomic injuries and/or whose employees are exposed to significant ergonomic hazards such as repetitive motion, manual lifting, working in awkward positions, etc.
- The program outlines recommendation for evaluating jobs, training employees and providing medical management.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
There is no applicable OSHA standard for this program.

Policy

The objective of the program is to reduce as far as feasible, exposures to ergonomic risk factors to prevent injuries, and provide effective medical management after injuries and illnesses have occurred.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Application & Definitions

This program will apply to any position which has been deemed to be a "problem job", through the steps outlined in section 1.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Ergonomics Program

1. Identifying Potential "Problem Jobs"

1.1 General. We will endeavor to identify jobs which should be evaluated to determine if they are "problem jobs". These jobs will be selected using the following methods.

1.2 Employee Reporting. Employees will be trained and encouraged to report all hazards of their work, including exposure to ergonomic hazards. Employees shall not, in any way, be discriminated against for reporting ergonomic or other workplace safety hazards.

1.3 OSHA Logs/First Reports of Injury. All such records will be reviewed periodically by the Safety Program Coordinator and/or other management representatives to attempt to identify trends in ergonomic injuries.

1.4 Worksite Inspections. Our worksites are evaluated by internal staff, insurance representatives, and other qualified experts. These inspections may yield observations regarding ergonomic hazards.

2. Ergonomic Evaluations

2.1 General. Once a job has been selected for evaluation, a formal evaluation will take place. The goal of this evaluation is to classify the job as a "problem job", or not a "problem job". This section outlines this evaluation.

2.2 The Evaluation Process. The job shall be evaluated using the one or more of the forms found in the forms and supporting documents section titled, Upper Extremity Evaluation (ergo-01), Back and Material Handling Evaluation (ergo-02). If this evaluation indicates that the job is a "problem job" (results in a score of greater than 5) then the job will be controlled by implementing steps outlined in the next section of this program. If the score is less than 5, the job is not considered a "problem job" and no further action need be taken.

The evaluation is to be based on a physical observation as it is being performed.

2.3 Responsibility. Jobs may be evaluated by internal staff, or external experts such as safety consultants, ergonomists or other qualified experts.

In all cases, employees will participate in the risk factor identification by providing input on the tasks performed and the time spent in each activity.

3. Controlling Problem Jobs

3.1 General. As described above, a problem job is any job which scores higher than 5 on the workplace risk factor checklist. Each problem job will be controlled by implementing engineering and/or administrative controls. The job is considered controlled when it scores 5 or less on a post-control checklist.

There are two methods of controlling problem jobs; the quick fix, and the job improvement process.

3.2 Quick Fix. Quick fixes may be implemented when the following conditions are met:

- The cause of the workplace risk factors can be readily identified; and,
- Measures which permanently control the job can be implemented within 60 days of the completion of the checklist.

3.3 Job Improvement Process. Job improvement process is the only alternative for controlling a job when conditions are not appropriate for quick fixes.

When engineering or administrative controls are implemented for any job, similar controls will be implemented for that job in other current or future locations, facilities, etc.

The following items will be included in each process:

- A job analysis of each problem job, including at least:
  - A description of the job including all tasks performed.
  - Identification and description of each workplace risk factor, and the tasks, actions or conditions which cause each to be present.
  - An analysis of manual handling tasks. For those jobs which require frequent or forceful manual handling, we will use the criteria for the design and evaluation in the most recent NIOSH lifting equation, or an equally effective criteria such as the manual handling evaluation from the risk factor checklist.
  - Employee input on any problems that they are or have been experiencing performing the job, possible causes of problems, and ideas for improving the job.
- Selection, implementation, and evaluation of control measures for each problem job, including at least one of the following:
  - Identification and evaluation of possible controls to reduce or prevent employee exposure to workplace factors.
  - Selection and implementation of interim controls to reduce exposure while more permanent controls are being developed or implemented.
  - Selection and implementation of permanent controls including a schedule for design and implementation.
  - Evaluation of the effectiveness of the permanent controls to ensure no new workplace risk factors has been introduced. This evaluation will be conducted within 60 days of the implementation of the control.
  - Obtaining and using input from affected employees in the identification, implementation and evaluation of control measures.

4. Ergonomic Design and Controls for New or Changed Jobs

4.1 General. Whenever feasible, we will use designers, manufacturers, and other suppliers, which provide assistance in identifying and applying ergonomic design principles to avoid new problem jobs from being created.

New or changed jobs will be evaluated as needed, using the processes described in sections 1 and 2.

5. Training and Communication

5.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

5.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, tasks or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

5.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

5.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

An Ergonomics Training Outline/Recordkeeping Form (ergo-03) is provided in the training section.

5.5 Training Outline for Employees Involved in Job Analysis. We will seek input from employees in identifying problem jobs. Employees participating in this activity will receive training in identification of workplace risk factors, job analysis methods and implementation and evaluation of control measures.

5.6 Training Outline for Employees in Problem Jobs and Their Supervisors. We will provide ergonomic awareness and job-specific training for each appropriate employee. At a minimum, each employee and Installation Coordinator will be trained to:

- Recognize workplace risk factors and the methods for controlling them;

- Identify the signs and symptoms and the health effects of exposure to workplace risk factors, the importance of early reporting, and medical management procedures;
- Know the procedures for reporting workplace risk factors and work-related musculoskeletal disorders, including the designated person(s) for receiving reports;
- Know the process to address and control workplace risk factors, each employee's role in the process, and how to actively participate in the process;
- Practice and demonstrate proper use of implemented control measures and safe work methods which pertain to the job.

6. Medical Management

6.1 General. This paragraph describes requirements for assessment and musculoskeletal disorder management plans for employees with work-related musculoskeletal disorders. Early assessment and treatment of work-related musculoskeletal disorders reduce their severity and prevent progression of the disorder.

6.2 Contact Person. The Safety Program Coordinator is the contact person for all communications between St. Paul Linoleum & Carpet Company and the health care provider. This person will work in conjunction with the Installation Coordinator. The Safety Program Coordinator has the authority to coordinate the appropriate placement of the affected employee in the workplace during the recovery period in accordance with the musculoskeletal disorder management plan prepared by the health care provider.

6.3 Access to Health Care Provider. We will make prompt assessment by a health care provider available at no cost to each employee who reports a musculoskeletal disorder that is work-related.

6.4 Observation/Inspection of the Worksite(s) by Health Care Providers. It is our policy to recommend that representatives from our medical provider conduct periodic walk-throughs of the workplace in order to become familiar with our jobs and the workplace risk factors present.

St. Paul Linoleum & Carpet Company

Fall Protection Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- OSHA's fall protection regulations are divided into two categories; employees who are engaged in construction activities (regardless of whether or not they work for construction employers) and employee who are engaged in non-construction activities.
- Regulations apply when employees engaged in construction activities are exposed to falls of 6 feet or more and when employees who are not engaged in construction activities are exposed to falls of 4 feet or more.
- OSHA regulations for both categories of employees are quite different. Construction employees are covered by several dozen pages of extensive rules, whereas non-construction employees are covered only by a single sentence in the regulations.
- Despite the minimal nature of the non-construction rule, employers are expected to provide adequate protection for employees exposed to falls, and application of the construction rule to non-construction settings is often advisable.
- A written program is not required, although portions of the rule require site-specific fall protection plans, in some cases.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit these OSHA websites to learn more.

Policy

We will develop a Fall Protection Program designed to prevent falls, through the use of employee training, site-specific fall prevention plans and other controls such as safety nets, guard rails, Personal Fall Arrest Systems, etc.

Employees performing work covered by this program are required to comply with our policies and wear / use appropriate equipment.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of the review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Application & Definitions

This program applies to:

- Employees who are not engaged in construction activities, when they are exposed to falls

of 4 feet or more; and

- Employees who are engaged in construction activities, when they are exposed to falls of 6 feet or more.

The following exceptions apply to construction activities:

- Employees working on scaffolds.
- Employees working on certain cranes and derricks covered by Subpart N of the OSHA construction regulations.
- Employees performing steel erection work in buildings.
- Employees working on certain types of equipment used in tunneling operations provided in subpart S of the OSHA construction regulations.
- Employees engaged in the construction of electric transmission and distribution lines and equipment.
- Employees working on stairways and ladders.

This program applies to temporary employees ("temps," seasonal help) and other such "non-employees" whose work is directed by our city. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

The Safety Program Coordinator is responsible for communicating all appropriate elements of our Health and Safety Programs with general contractors, other trades employers, construction managers, etc. while working on multi-employer work sites.

The Fall Protection Program

1. Activities / Conditions Which Require Fall Protection

1.1 General. This section outlines the activities that require fall protection, and the specific type of fall protection required. Criteria for fall protection systems are addressed in section two.

The Safety Program Coordinator and/or the Installation Coordinator are responsible for specifying the type of protection to be used where/when fall hazards exist.

1.2 Integrity of Walking/Working Surfaces. We will determine if the walking/working surfaces on which its employees are to work have the strength and structural integrity to support employees safely. Employees will be allowed to work on those surfaces only when the surfaces have the requisite strength and structural integrity.

1.3 Unprotected Sides and Edges. Each employee on a walking/working surface (horizontal and vertical surface) with an unprotected side or edge which is 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above a lower level will be protected from falling by the use of guardrail systems, safety net systems, or personal fall arrest systems.

1.4 Leading Edges. Each employee who is constructing a leading edge 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels will be protected from falling by guardrail systems, safety net systems, or personal fall arrest systems.

When we can demonstrate that it is infeasible or creates a greater hazard to use these systems, we may develop and implement a Fall Protection Plan which meets the requirements of section 2.11 of this program.

Each employee on a walking/working surface 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above a lower level where leading edges are under construction, but who is not engaged in the leading edge work, will be protected from falling by a guardrail system, safety net system, or personal fall arrest system. If a guardrail system is chosen to provide the fall protection, and a controlled access zone has already been established for leading edge work, the control line may be used in lieu of a guardrail along the edge that parallels the leading edge.

1.5 Hoist Areas. Each employee in a hoist area will be protected from falling 6 feet (for construction activities) or 4 feet (for non-construction activities) or more to lower levels by guardrail systems or personal fall arrest systems. If guardrail systems, (or chain, gate, or guardrail) or portions thereof, are removed to facilitate the hoisting operation (e.g., during landing of materials), and an employee must lean through the access opening or out over the edge of the access opening (to receive or guide equipment and materials, for example), that employee will be protected from fall hazards by a personal fall arrest system.

1.6 Holes. Each employee on walking/working surfaces will be protected from falling through holes (including skylights) more than 6 feet (for construction activities) or 4 feet (for non-construction activities) above lower levels, by personal fall arrest systems, covers, or guardrail systems erected around such holes.

Each employee on a walking/working surface will be protected from tripping in or stepping into or through holes (including skylights) by covers.

Each employee on a walking/working surface will be protected from objects falling through holes (including skylights) by covers.

1.7 Formwork and Reinforcing Steel. Each employee on the face of formwork or reinforcing steel will be protected from falling 6 feet (for construction activities) or 4 feet (for non-construction activities) or more to lower levels by personal fall arrest systems, safety net systems, or positioning device systems.

1.8 Ramps, Runways and Other Walkways. Each employee on ramps, runways and other walkways will be protected from falling 6 feet (for construction activities) or 4 feet (for non-construction activities) or more to lower levels by guardrail systems.

1.9 Excavations. Each employee at the edge of an excavation 6 feet (for construction activities) or 4 feet (for non-construction activities) or more in depth will be protected from falling by guardrail systems, fences, or barricades when the excavations are not readily seen because of plant growth or other visual barrier;

Each employee at the edge of a well, pit, shaft, and similar excavation 6 feet (for construction activities) or 4 feet (for non-construction activities) or more in depth will be protected from falling by guardrail systems, fences, barricades, or covers.

1.10 Dangerous Equipment. Each employee less than 6 feet (for construction activities) or 4 feet (for non-construction activities) above dangerous equipment will be protected from falling into or onto the dangerous equipment by guardrail systems or by equipment guards. Each employee 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above dangerous equipment will be protected from fall hazards by guardrail systems, personal fall arrest systems, or safety net systems.

1.11 Overhand Bricklaying and Related Work. Except as otherwise provided in section one of this program, each employee performing overhand bricklaying and related work 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels, will be protected from falling by guardrail systems, safety net systems, personal fall arrest systems, or will work in a controlled access zone.

Each employee reaching more than 10 inches below the level of the walking/working surface on which they are working will be protected from falling by a guardrail system, safety net system, or personal fall arrest system.

Bricklaying operations performed on scaffolds are exempt from this program.

1.12 Roofing Work on Low-Slope Roofs. Except as otherwise provided in section one of this program, each employee engaged in roofing activities on low-slope roofs, with unprotected sides and edges 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels will be protected from falling by guardrail systems, safety net systems, personal fall arrest systems, or a combination of warning line system and guardrail system, warning line system and safety net system, or warning line system and personal fall arrest system, or warning line system and safety monitoring system. Or, on roofs 50 feet or less in width, the use of a safety monitoring system alone (i.e. without the warning line system) is permitted.

1.13 Steep Roofs. Each employee on a steep roof with unprotected sides and edges 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels will be protected from falling by guardrail systems with toeboards, safety net systems, or personal fall arrest systems.

1.14 Precast Concrete Erection. Each employee engaged in the erection of precast concrete members (including, but not limited to the erection of wall panels, columns, beams, and floor and roof "tees") and related operations such as grouting of precast concrete members, who is 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels will be protected from falling by guardrail systems, safety net systems, or personal fall arrest systems, unless another provision in section one of this program provides for an alternative fall protection measure.

When we can demonstrate that it is infeasible or creates a greater hazard to use these systems, we will develop and implement a Fall Protection Plan which meets the requirements of section 2.11 of this program.

1.15 Residential Construction. Each employee engaged in residential construction activities 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels will be protected by guardrail systems, safety net system, or personal fall arrest system unless another provision of this program provides for an alternative fall protection measure.

When we can demonstrate that it is infeasible or creates a greater hazard to use these systems, we will develop and implement a Fall Protection Plan which meets the requirements of section 2.11 of this program.

1.16 Wall Openings. Each employee working on, at, above, or near wall openings (including those with chutes attached) where the outside bottom edge of the wall opening is 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels and the inside bottom edge of the wall opening is less than 39 inches above the walking/working surface, will be protected from falling by the use of a guardrail system, a safety net system, or a personal fall arrest system.

1.17 Walking/Working Surfaces Not Otherwise Addressed. Except as provided in section one of this program, each employee on a walking/working surface 6 feet (for construction activities) or 4 feet (for non-construction activities) or more above lower levels will be protected from falling by a guardrail system, safety net system, or personal fall arrest system.

1.18 Protection from Falling Objects. When an employee is exposed to falling objects, we will require each employee to wear a hard hat and will implement one of the following measures:

- Erect toeboards, screens, or guardrail systems to prevent objects from falling from higher levels; or,
- Erect a canopy structure and keep potential fall objects far enough from the edge of the higher level so that those objects would not go over the edge if they were accidentally displaced; or,
- Barricade the area to which objects could fall, prohibit employees from entering the barricaded area, and keep objects that may fall far enough away from the edge of a higher level so that those objects would not go over the edge if they were accidentally displaced.

2. Criteria for Fall Protection

2.1 General. Section two describes the requirements for fall protection systems required in section one. All fall protection used in our operations will meet the following requirements.

2.2 Guardrail Systems. Top edge height of top rails, or equivalent guardrail system members, will be 42 inches plus or minus 3 inches above the walking/working level. When conditions warrant, the height of the top edge may exceed the 45-inch height, provided the guardrail system meets all other criteria of this paragraph.

When employees are using stilts, the top edge height of the top rail, or equivalent member, will be increased an amount equal to the height of the stilts.

Midrails, screens, mesh, intermediate vertical members or equivalent intermediate structural members will be installed between the top edge of the guardrail system and the walking/working surface when there is no wall or parapet wall at least 21 inches high.

Midrails, when used, will be installed at a height midway between the top edge of the guardrail system and the walking/working level.

Screens and mesh, when used, will extend from the top rail to the walking/working level and along the entire opening between top rail supports.

Intermediate members (such as balusters), when used between posts, will be not more than 19 inches apart.

Other structural members (such as additional midrails and architectural panels) will be installed such that there are no openings in the guardrail system that are more than 19 inches wide.

Guardrail systems will be capable of withstanding, without failure, a force of at least 200 pounds applied within 2 inches of the top edge, in any outward or downward direction, at any point along the top edge. When the 200 pound test load is applied in a downward direction, the top edge of the guardrail will not deflect to a height less than 39 inches above the walking/working level.

Midrails, screens, mesh, intermediate vertical members, solid panels and equivalent structural members will be capable of withstanding, without failure, a force of at least 150 pounds applied in any downward or outward direction at any point along the midrail or other member.

Guardrail systems will be so surfaced as to prevent injury to an employee from punctures or lacerations, and to prevent snagging of clothing.

The ends of all top rails and midrails will not overhang the terminal posts, except where such overhang does not constitute a projection hazard.

Steel banding and plastic banding will not be used as top rails or midrails.

Top rails and midrails will be at least one-quarter inch nominal diameter or thickness to prevent cuts and lacerations. If wire rope is used for top rails, it will be flagged at not more than 6-foot intervals with high-visibility material.

When guardrail systems are used at hoisting areas, a chain, gate or removable guardrail section will be placed across the access opening between guardrail sections when hoisting operations are not taking place.

When guardrail systems are used at holes, they will be erected on all unprotected sides or edges of the hole.

When guardrail systems are used around holes used for the passage of materials, the hole will have not more than two sides provided with removable guardrail sections to allow the passage of materials. When the hole is not in use, it will be closed over with a cover, or a guardrail system will be provided along all unprotected sides or edges.

When guardrail systems are used around holes which are used as points of access (such as ladderways), they will be provided with a gate, or be so offset that a person cannot walk directly into the hole.

Guardrail systems used on ramps and runways will be erected along each unprotected side or edge.

Manila, plastic or synthetic rope being used for top rails or midrails will be inspected as frequently as necessary to ensure that it continues to meet the strength requirements of this program.

2.3 Safety Net Systems. Safety nets will be installed as close as practicable under the walking/working surface on which employees are working, but in no case more than 30 feet below such level. When nets are used on bridges, the potential fall area from the walking/working surface to the net will be unobstructed.

Safety nets will extend outward from the outermost projection of the work surface as follows:

Vertical distance from working level to horizontal plane of net	Minimum required horizontal distance of outer edge of net from the edge of the working surface
Up to 5 feet	8 feet
More than 5 feet up to 10 feet	10 feet
More than 10 feet	13 feet

Safety nets will be installed with sufficient clearance under them to prevent contact with the surface or structures below when subjected to an impact force equal to the drop test specified below.

Safety nets and their installations will be capable of absorbing an impact force equal to that produced by the drop test specified below.

- Except as provided below, safety nets and safety net installations will be drop-tested at the jobsite after initial installation and before being used as a fall protection system, whenever relocated, after major repair, and at 6-month intervals if left in one place. The drop-test will consist of a 400 pound bag of sand 30 inches plus or minus two inches in diameter dropped into the net from the highest walking/working surface at which employees are exposed to fall hazards, but not from less than 42 inches above that level.
- If it can be demonstrated that it is unreasonable to perform the drop-test as described above, the Safety Program Coordinator and/or the Installation Coordinator will certify that the net and net installation is in compliance with this program by preparing a certification record prior to the net being used as a fall protection system.

Defective nets will not be used. Safety nets will be inspected at least once a week for wear, damage, and other deterioration. Defective components will be removed from service. Safety nets will also be inspected after any occurrence which could affect the integrity of the safety net system.

Materials, scrap pieces, equipment, and tools which have fallen into the safety net will be removed as soon as possible from the net and at least before the next work shift.

The maximum size of each safety net mesh opening will not exceed 36 square inches nor be longer than 6 inches on any side, and the opening, measured center-to-center of mesh ropes or webbing, will not be longer than 6 inches. All mesh crossings will be secured to prevent enlargement of the mesh opening.

Each safety net (or section of it) will have a border rope for webbing with a minimum breaking strength of 5,000 pounds.

Connections between safety net panels will be as strong as integral net components and will be spaced not more than 6 inches apart.

2.4 Personal Fall Arrest Systems. Personal fall arrest systems and their use will comply with the provisions set forth below. Body belts are not acceptable as part of a personal fall arrest system; however, the use of a body belt in a positioning device system is acceptable and is regulated in section 2.5 of this program.

Connectors will be drop forged, pressed or formed steel, or made of equivalent materials.

Connectors will have a corrosion-resistant finish, and all surfaces and edges will be smooth to prevent damage to interfacing parts of the system.

Dee-rings and snaphooks will have a minimum tensile strength of 5,000 pounds.

Dee-rings and snaphooks will be proof-tested to a minimum tensile load of 3,600 pounds without cracking, breaking, or taking permanent deformation.

Snaphooks will be sized to be compatible with the member to which they are connected to prevent unintentional disengagement of the snaphook by depression of the snaphook keeper by the connected member, or will be a locking type snaphook designed and used to prevent disengagement of the snaphook by the contact of the snaphook keeper by the connected member. Effective January 1, 1998, only locking type snaphooks will be used.

Unless the snaphook is a locking type and designed for the following connections, snaphook will not be engaged:

- Directly to webbing, rope or wire rope;
- To each other;
- To a dee-ring to which another snaphook or other connector is attached;
- To a horizontal lifeline; or
- To any object which is incompatibly shaped or dimensioned in relation to the snaphook such that unintentional disengagement could occur by the connected object being able to depress the snaphook keeper and release itself.

On suspended scaffolds or similar work platforms with horizontal lifelines which may become vertical lifelines, the devices used to connect to a horizontal lifeline will be capable of locking in both directions on the lifeline.

Horizontal lifelines will be designed, installed and used, under the supervision of a qualified person, as part of a complete personal fall arrest system, which maintains a safety factor of at least two.

Lanyards and vertical lifelines will have a minimum breaking strength of 5,000 pounds.

When vertical lifelines are used, each employee will be attached to a separate lifeline. However, during the construction of elevator shafts, two employees may be attached to the same lifeline in the hoistway, provided both employees are working atop a false car that is equipped with guardrails; the strength of the lifeline is 10,000 pounds (5,000 pounds per employee attached); and all other criteria specified in this paragraph for lifelines have been met.

Lifelines will be protected against being cut or abraded.

Self-retracting lifelines and lanyards which automatically limit free fall distance to 2 feet or less will be capable of sustaining a minimum tensile load of 3,000 pounds applied to the device with the lifeline or lanyard in the fully extended position.

Self-retracting lifelines and lanyards which do not limit free fall distance to 2 feet or less, ripstitch lanyards, and tearing and deforming lanyards will be capable of sustaining a minimum tensile load of 5,000 pounds applied to the device with the lifeline or lanyard in the fully extended position.

Ropes and straps (webbing) used in lanyards, lifelines and strength components of body belts and body harnesses will be made from synthetic fibers.

Anchorages used for attachment of personal fall arrest equipment will be independent of any anchorage being used to support or suspend platforms and capable of supporting at least 5,000 pounds per employee attached, or will be designed, installed, and used as follows:

- As part of a complete personal fall arrest system which maintains a safety factor of at least two; and
- All anchorages will be under the supervision of the Safety Program Coordinator and/or the Installation Coordinator.

Personal fall arrest systems, when stopping a fall, will:

- Limit maximum arresting force on an employee to 900 pounds when used with a body belt;
- Limit maximum arresting force on an employee to 1,800 pounds when used with a body harness;
- Be rigged such that an employee can neither free fall more than 6 feet, nor contact any lower level;

- Bring an employee to a complete stop and limit maximum deceleration distance an employee travels to 3.5 feet; and,
- Have sufficient strength to withstand twice the potential impact energy of an employee freefalling a distance of 6 feet, or the freefall distance permitted by the system, whichever is less.

Note: If the personal fall arrest system meets the criteria and protocols contained in attachment C to subpart M of OSHA's fall protection standards, and if the system is being used by an employee having a combined person and tool weight of less than 310 pounds (140 kg), the system will be considered to be in compliance with the provisions of this program. If the system is used by an employee having a combined tool and body weight of 310 pounds or more, then we must appropriately modify the criteria and protocols of the attachment to provide proper protection for such heavier weights, or the system will not be deemed to be in compliance with the requirements of this program.

The attachment point of the body belt will be located in the center of the wearer's back. The attachment point of the body harness will be located in the center of the wearer's back near shoulder level, or above the wearer's head.

Body belts, harnesses and components will be used only for employee protection (as part of a personal fall arrest system or positioning device system) and not to hoist materials.

Personal fall arrest systems and components subjected to impact loading will be immediately removed from service and will not be used again for employee protection until inspected and determined by a competent person to be undamaged and suitable for reuse.

We will provide for prompt rescue of employees in the event of a fall or will assure that employees are able to rescue themselves.

Personal fall arrest systems will be inspected prior to each use for wear, damage and other deterioration, and defective components will be removed from service.

Body belts will be at least one and five-eighths (1 5/8) inches wide.

Personal fall arrest systems will not be attached to guardrail systems, nor will they be attached to hoists except as specified in other portions of OSHA's construction regulations.

When a personal fall arrest system is used at hoist areas, it will be rigged to allow the movement of the employee only as far as the edge of the walking/working surface.

2.5 Positioning Device Systems. Positioning device systems and their use will conform to the following provisions:

Positioning devices will be rigged such that an employee cannot free fall more than 2 feet.

Positioning devices will be secured to an anchorage capable of supporting at least twice the potential impact load of an employee's fall or 3,000 pounds, whichever is greater.

Connectors will be drop forged, pressed or formed steel, or made of equivalent materials.

Connectors will have a corrosion-resistant finish, and all surfaces and edges will be smooth to prevent damage to interfacing parts of this system.

Connecting assemblies will have a minimum tensile strength of 5,000 pounds.

Dee-rings and snaphooks will be proof-tested to a minimum tensile load of 3,600 pounds without cracking, breaking, or taking permanent deformation.

Snaphooks will be sized to be compatible with the member to which they are connected to prevent unintentional disengagement of the snaphook by depression of the snaphook keeper by the connected member, or will be a locking type snaphook designed and used to prevent disengagement of the snaphook by the contact of the snaphook keeper by the connected member.

Only locking type snaphooks will be used.

Unless the snaphook is a locking type and designed for the following connections, snaphooks will not be engaged:

- Directly to webbing, rope or wire rope;
- To each other;
- To a dee-ring to which another snaphook or other connector is attached;
- To a horizontal lifeline; or
- To any object which is incompatibly shaped or dimensioned in relation to the snaphook such that unintentional disengagement could occur by the connected object being able to depress the snaphook keeper and release itself.

Positioning device systems will be inspected prior to each use for wear, damage, and other deterioration and defective components will be removed from service.

Body belts, harnesses and components will be used only for employee protection (as part of a personal fall arrest system or positioning device system) and not to hoist materials.

2.6 Warning Line Systems. The warning line will be erected around all sides of the roof work area.

When mechanical equipment is not being used, the warning line will be erected not less than 6 feet from the roof edge.

When mechanical equipment is being used, the warning line will be erected not less than 6 feet from the roof edge which is parallel to the direction of mechanical equipment operation, and not less than 10 feet from the roof edge which is perpendicular to the direction of mechanical equipment operation.

Points of access, materials handling areas, storage areas, and hoisting areas will be connected to the work area by an access path formed by two warning lines.

When the path to a point of access is not in use, a rope, wire, chain, or other barricade, equivalent in strength and height to the warning line, will be placed across the path at the point where the

path intersects the warning line erected around the work area, or the path will be offset such that a person cannot walk directly into the work area.

Warning lines will consist of ropes, wires, or chains, and supporting stanchions erected as follows:

- The rope, wire, or chain will be flagged at not more than 6-foot intervals with high-visibility material;
- The rope, wire, or chain will be rigged and supported in such a way that its lowest point (including sag) is no less than 34 inches from the walking/working surface and its highest point is no more than 39 inches from the walking/working surface;
- After being erected, with the rope, wire, or chain attached, stanchions will be capable of resisting, without tipping over, a force of at least 16 pounds applied horizontally against the stanchion, 30 inches above the walking/working surface, perpendicular to the warning line, and in the direction of the floor, roof, or platform edge;
- The rope, wire, or chain will have a minimum tensile strength of 500 pounds, and after being attached to the stanchions, will be capable of supporting, without breaking, the loads applied to the stanchions as prescribed elsewhere in this section; and
- The line will be attached at each stanchion in such a way that pulling on one section of the line between stanchions will not result in slack being taken up in adjacent sections before the stanchion tips over.

No employee will be allowed in the area between a roof edge and a warning line unless the employee is performing roofing work in that area.

Mechanical equipment on roofs will be used or stored only in areas where employees are protected by a warning line system, guardrail system, or personal fall arrest system.

2.7 Controlled Access Zones (CAZs). When used to control access to areas where leading edge and other operations are taking place the controlled access zone will be defined by a control line or by any other means that restricts access.

- When control lines are used, they will be erected not less than 6 feet nor more than 25 feet from the unprotected or leading edge, except when erecting precast concrete members.
- When erecting precast concrete members, the control line will be erected not less than 6 feet nor more than 60 feet or half the length of the member being erected, whichever is less, from the leading edge.
- The control line will extend along the entire length of the unprotected or leading edge and will be approximately parallel to the unprotected or leading edge.
- The control line will be connected on each side to a guardrail system or wall.

When used to control access to areas where overhand bricklaying and related work are taking place:

- The controlled access zone will be defined by a control line erected not less than 10 feet nor more than 15 feet from the working edge.
- The control line will extend for a distance sufficient for the controlled access zone to enclose all employees performing overhand bricklaying and related work at the working edge and will be approximately parallel to the working edge.

- Additional control lines will be erected at each end to enclose the controlled access zone.
- Only employees engaged in overhand bricklaying or related work will be permitted in the controlled access zone.

Control lines will consist of ropes, wires, tapes, or equivalent materials, and supporting stanchions as follows:

- Each line will be flagged or otherwise clearly marked at not more than 6-foot intervals with high-visibility material.
- Each line will be rigged and supported in such a way that its lowest point (including sag) is not less than 39 inches from the walking/working surface and its highest point is not more than 45 inches (50 inches when overhand bricklaying operations are being performed) from the walking/working surface.
- Each line will have a minimum breaking strength of 200 pounds.

On floors and roofs where guardrail systems are not in place prior to the beginning of overhand bricklaying operations, controlled access zones will be enlarged, as necessary, to enclose all points of access, material handling areas, and storage areas.

On floors and roofs where guardrail systems are in place, but need to be removed to allow overhand bricklaying work or leading edge work to take place, only that portion of the guardrail necessary to accomplish that day's work will be removed.

2.8 Safety Monitoring Systems. We will designate a competent person to monitor the safety of other employees and we will ensure that the safety monitor complies with the following requirements:

- The safety monitor will be competent to recognize fall hazards;
- The safety monitor will warn the employee when it appears that the employee is unaware of a fall hazard or is acting in an unsafe manner;
- The safety monitor will be on the same walking/working surface and within visual sighting distance of the employee being monitored;
- The safety monitor will be close enough to communicate orally with the employee; and
- The safety monitor will not have other responsibilities which could take the monitor's attention from the monitoring function.

Mechanical equipment will not be used or stored in areas where safety monitoring systems are being used to monitor employees engaged in roofing operations on low-slope roofs.

No employee, other than an employee engaged in roofing work (on low-sloped roofs) or an employee covered by a Fall Protection Plan, will be allowed in an area where an employee is being protected by a safety monitoring system.

Each employee working in a controlled access zone will be directed to comply promptly with fall hazard warnings from safety monitors.

2.9 Covers. Covers for holes in floors, roofs, and other walking/working surfaces will meet the following requirements:

Covers located in roadways and vehicular aisles will be capable of supporting, without failure, at least twice the maximum axle load of the largest vehicle expected to cross over the cover.

All other covers will be capable of supporting, without failure, at least twice the weight of employees, equipment and materials that may be imposed on the cover at any one time.

All covers will be secured when installed so as to prevent accidental displacement by the wind, equipment or employees.

All covers will be color coded or they will be marked with the word "HOLE" or "COVER" to provide warning of the hazard. This provision does not apply to cast iron manhole covers or steel grates used on streets or roadways.

2.10 Protection from Falling Objects. Toeboards, when used as falling object protection, will be erected along the edge of the overhead walking/working surface for a distance sufficient to protect employees below.

Toeboards will be capable of withstanding, without failure, a force of at least 50 pounds applied in any downward or outward direction at any point along the toeboard.

Toeboards will be a minimum of 3½ inches in vertical height from their top edge to the level of the walking/working surface. They will have not more than ¼ inch clearance above the walking/working surface. They will be solid or have openings not over 1 inch in greatest dimension.

Where tools, equipment or materials are piled higher than the top edge of a toeboard, paneling or screening will be erected from the walking/working surface or toeboard to the top of a guardrail system's top rail or midrail, for a distance sufficient to protect employees below.

Guardrail systems, when used as falling object protection, will have all openings small enough to prevent passage of potential falling objects.

During the performance of overhand bricklaying and related work:

- No materials or equipment except masonry and mortar will be stored within 4 feet of the working edge.
- Excess mortar, broken or scattered masonry units, and all other materials and debris will be kept clear from the work area by removal at regular intervals.

During the performance of roofing work:

- Materials and equipment will not be stored within 6 feet of a roof edge unless guardrails are erected at the edge.
- Materials which are piled, grouped or stacked near a roof edge will be stable and self-supporting.

Canopies, when used as falling object protection, will be strong enough to prevent collapse and to prevent penetration by any objects which may fall onto the canopy.

2.11 Fall Protection Plan. This option is available only to employees engaged in leading edge work, precast concrete erection work, or residential construction work who can demonstrate that it is infeasible or it creates a greater hazard to use conventional fall protection equipment.

The Fall Protection Plan must conform to the following provisions.

The Fall Protection Plan will be prepared by the Safety Program Coordinator and/or the Installation Coordinator. The plan will be developed specifically for the site where the leading edge work, precast concrete work, or residential construction work is being performed and must be maintained up to date.

Any changes to the Fall Protection Plan will be approved by the author of the plan.

A copy of the Fall Protection Plan with all approved changes will be maintained at the jobsite.

The Fall Protection Plan will document the reasons why the use of conventional fall protection systems (guardrail systems, personal fall arrest systems, or safety nets systems) is infeasible or why their use would create a greater hazard.

The Fall Protection Plan will include a written discussion of other measures that will be taken to reduce or eliminate the fall hazard for workers who cannot be provided with protection from the conventional fall protection systems. For example, we will discuss the extent to which scaffolds, ladders, or vehicle mounted work platforms can be used to provide a safer working surface and thereby reduce the hazard of falling.

The Fall Protection Plan will identify each location where conventional fall protection methods cannot be used. These locations will then be classified as controlled access zones and we must comply with the criteria in section 2.7 of this program.

Where no other alternative measure has been implemented, we will implement a safety monitoring system in conformance with section 2.8 of this program.

The Fall Protection Plan must include a statement which provides the name or other method of identification for each employee who is designated to work in controlled access zones. No other employees may enter controlled access zones.

In the event an employee falls, or some other related, serious incident occurs, (e.g., a near miss) we will investigate the circumstances of the fall or other incident to determine if the Fall Protection Plan needs to be changed (e.g. new practices, procedures, or training) and will implement those changes to prevent similar types of falls or incidents.

3. Training and Communication

3.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

3.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

3.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

3.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Fall Protection Training Outline/Recordkeeping Form (fall-01) is provided in the training section.

In all cases, training will be conducted by a suitably qualified person.

3.5 Content of Training. The training session will consist of:

- The nature of fall hazards in the work area;
- The correct procedures for erecting, maintaining, disassembling, and inspecting the fall protection systems to be used;
- The use and operation of guardrail systems, personal fall arrest systems, safety net systems, warning line systems, safety monitoring systems, controlled access zones, and other protection to be used;
- The role of each employee in the safety monitoring system when this system is used;
- The limitations on the use of mechanical equipment during the performance of roofing work on low-sloped roofs;
- The correct procedures for the handling and storage of equipment and materials and the erection of overhead protection; and
- The role of employees in Fall Protection Plans;
- Applicable portions of OSHA fall protection regulations

St. Paul Linoleum & Carpet Company

Hearing Conservation Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The regulation applies to any employer whose employees are potentially exposed to noise in excess of 85 dBA, measured as a time weighted average.
- The employer must develop and implement a program consisting of noise exposure monitoring, employee training, providing and recommending the use of hearing protection devices (in some cases, requiring them) and annual audiograms for affected employees.
- The program need not be in writing, but is recommended.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

St. Paul Linoleum & Carpet Company will protect the hearing of its employees by implementing an effective, continuing hearing conservation program. Noise monitoring will be conducted to identify employees exposed to noise at or above safe levels. These employees will be provided with audiometric examinations and hearing protection and they will be trained on the aspects of this program.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Application & Definitions

This policy applies to all employees who accumulate a 50% dose (85 dBA) over the course of any work shift during the year (regardless of the length of shift). Additional provisions apply to employees who accumulate a dose of 100% (90 dBA).

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Hearing Conservation Program

1. Noise Monitoring

1.1 General. We will conduct initial and periodic noise monitoring to adequately measure employees' exposure to noise. When appropriate, noise monitoring will be of a dosimetric nature and will always be representative of actual exposures. Noise monitoring will be conducted with properly calibrated instruments and in compliance with manufacturer's recommendations and other reliable standards.

Employees (and their representatives, when applicable) will be advised of their right to observe noise monitoring.

1.2 Initial Noise Survey. An initial noise survey of the facility will be conducted to identify areas in which employees are exposed to noise at or above the action level in eight hour time-weighted averages. Areas above the action level will be designated as Hearing Conservation Areas (HCAs).

1.3 Periodic Noise Surveys. Monitoring will be re-conducted when there is reason to believe noise levels have changed. These may include:

- Installation of new machines or processes.
- Alteration of existing machines or processes.
- Changes in environment, such as building alterations, etc.
- Changes in raw materials which could affect noise levels.

1.4 Results of Monitoring. Records of noise monitoring will be kept in the section of this manual designated for industrial hygiene records.

2. Engineering Controls

2.1 General. When feasible, we will implement engineering controls to reduce noise exposure, especially in areas in which employees are exposed to noise above the exposure limit.

2.2 Responsibility. The Safety Program Coordinator will be responsible for evaluating, and when appropriate, implementing these engineering controls.

3. Hearing Protection

3.1 General. We will make a variety of hearing protectors available to all employees, regardless of their actual exposure, free of charge. Furthermore, employees are encouraged to bring hearing protection home with them to reduce exposure to non-occupational noise.

Hearing protection will be adequate to reduce exposure to 90 dBA or less. Employees who have experienced an STS will wear hearing protectors which attenuate exposures to 85 dBA or less.

3.2 Requirements for Using Protectors. All employees are encouraged to use hearing protectors when working in any type of noisy environment, especially when working in areas above the action limit. However, under any of the following circumstances, employees are required to wear it:

- Employees exposed to noise at or above the exposure limit.
- Employees exposed above the action limit who have not yet had a baseline audiogram.
- Any employee who has experiences a Standard Threshold Shift (STS).
- Employees who will have an audiometric examination within the next 14 hours.

3.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that a sufficient quantity of hearing protectors are always available to employees and that they are appropriate for the types of exposure being encountered.

4. Audiometric Testing

4.1 General. Audiometric testing will be provided to all employees included in this program, free of charge. The purpose of conducting these examinations is to develop a profile of each affected employee's hearing acuity over the course of employment with us.

Examinations will be conducted only by a licensed or certified audiologist, otolaryngologist, or other physician, or by a technician meeting the requirements of 29 CFR 1910.95(g)(3).

4.2 Frequency of Audiometry. Employees receiving baseline (initial) examinations must be checked within six months of their first exposure above the action limit. The employee should not be exposed to noise for 14 hours prior to the examination unless hearing protection is used.

We may opt to use a mobile testing service to meet these requirements. In such cases, we will obtain a valid baseline audiogram within one year of an employee's first exposure at or above the action level. Where baseline audiograms are obtained more than 6 months after the employee's first exposure at or above the action level, employees will wear hearing protectors for any period exceeding six months after the first exposure until the baseline audiogram is obtained.

4.3 Standard Threshold Shifts. Results of the annual audiogram will be evaluated and compared to baseline results. If results indicate that a Standard Threshold Shift has occurred, as defined in 29 CFR 1910.95(g)(10)(i-ii), we reserve the right to:

- Retest the employee within 30 days of notification and accept the retest results as the annual audiogram and/or,
- Adjust the results for the contribution of presbycusis (aging) by applying Supporting Forms & Documents F of 29 CFR 1910.95.

If the STS is still valid, the following procedure will be applied:

- Employees not previously using hearing protection will be fitted, trained, and required to use them.
- Employees already using hearing protectors will be refitted and retrained, and provided with protection offering greater attenuation.
- The employee will be referred for additional testing if necessary, or if we suspect that a medical pathology of the ear is caused or aggravated by wearing hearing protection.
- The employee will be informed of the need for an otological exam if a medical pathology of the ear that is unrelated to the use of hearing protection is suspected.
- If the employee's total hearing level is 25 dBA or more above audiometric zero (averaged at 2000, 3000, and 4000 Hz) in the same ear as the STS, the case will be recorded in the OSHA 300 log.
- If a subsequent audiogram shows that the threshold shift has not persisted, the employee will be informed in writing, and will no longer be required to wear hearing protection unless he/she is still exposed at or above the exposure limit TWA.

4.4 Audiometry Testing Service. The Safety Program Coordinator or Human Resources is responsible for coordinating employees' audiometric exams with our testing clinic, which is identified on the Who's Who Resource Directory.

5. Training and Communication

5.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

5.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

5.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

5.4 Records. All employee training will be adequately documented and records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Hearing Conservation Training Outline/Recordkeeping Form (hear-01) is provided in the training section.

5.5 Content of Training. The training session will consist of:

- The effects of noise on hearing;
- The purpose of hearing protectors, the advantages, disadvantages, and attenuation of various types, and instructions on selection, fitting, use, and care;
- The purpose of audiometric testing and an explanation of the test procedures.
- Off-the-job activities that may adversely affect hearing.

6. Posting and Recordkeeping

6.1 General. This section describes the various recordkeeping and posting requirements related to the Hearing Conservation Program.

6.2 Posting the Hearing Standard. A copy of the hearing conservation standard, (29 CFR 1910.95) as well as any other useful documentation will be posted for employee reference.

6.3 Noise Monitoring Records. Records of noise monitoring are to be considered exposure records, and as such will be retained for 30 years beyond the termination date of the last employee exposed to that noise level. A copy of reports will be made available for employees within 15 days of the final report.

6.4 Audiometric Results. Audiometric results are considered medical records, and as such, will be confidential (in a file other than the employee's personnel file). Access to them is governed by 29 CFR 1910.20. They also will be retained 30 years beyond the employee's termination date. The Safety Program Coordinator is responsible for these records. They will be kept in the employees' confidential medical files.

Audiometric records must include:

- Employee's name.
- Employee's job class.
- Date of audiogram.
- Examiner's name.
- Date of last calibration.
- Employee's most recent noise assessment.
- Measure of background sound pressure levels in the audiogram test room.

St. Paul Linoleum & Carpet Company

Personal Protective Equipment Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The regulation applies to any employer whose employees are exposed to hazards which could be controlled by the use of personal protective equipment.
- The employer is required to complete a formal, certified hazard assessment survey to identify jobs and tasks requiring PPE and to specify the required protection.
- The required PPE must be provided to affected employees free of charge.
- Employees must be trained on the required PPE; its use, selection, and maintenance.
- A written program is not required, but the hazard assessment described above, is.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

Our preferred means of controlling hazards is to first, attempt to engineer the hazard from the process, and secondly, by administratively controlling employees' exposure to the hazard. When these controls are infeasible, or do not completely control the hazard, or while they are being implemented, we will protect employees by providing appropriate Personal Protective Equipment (PPE).

We will identify jobs, tasks and areas for which PPE is required, and identify and provide appropriate equipment. Employees must wear the equipment when required by St. Paul Linoleum & Carpet Company.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all related materials and records. All such reviews (whether changes were made or not) will be documented on the annual program review document.

Applications & Definitions

This policy applies to all employees who are determined by us to be exposed to hazards that will be identified in subsequent sections of this program.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no

difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Personal Protective Equipment Program

1. Hazard Evaluation

1.1 General. We will assess the workplace to determine if hazards are present, or are likely to be present, which necessitate the use of PPE. If such hazards are present, or likely to be present, we will:

- Select, and have each affected employee use, the types of PPE that will protect the affected employee from the hazards identified in the hazard assessment;
- Communicate selection decisions to each affected employee; and
- Select PPE that properly fits each affected employee.

The Personal Protective Equipment Assessment Survey (or equivalent) (ppe-01) will be used to document this evaluation.

1.2 Certification. We will verify that the required workplace hazard assessment has been performed through a written certification that identifies the workplace evaluated; the person certifying that the evaluation has been performed; the date(s) of the hazard assessment; and, which identifies the document as a certification of hazard assessment.

1.3 Responsibility. The Safety Program Coordinator is responsible for conducting these hazard evaluations. The completed evaluation forms are maintained in the designated section of the administrative health and safety manual.

2. Defective Equipment

2.1 General. Defective or damaged PPE will not be used. Employees should report defective equipment to the Installation Coordinator or the Safety Program Coordinator, who will make a determination as to whether to repair or discard the equipment. Discarded equipment should be destroyed and/or labeled to ensure that other employees do not use it.

3. Selection of Personal Protective Equipment

3.1 General. Selection of PPE will be based on several factors, including its ability to protect employees against the type and degree of hazard for which it is intended to be used. Other factors such as employee preferences, comfort and attractiveness will be secondary considerations.

The Current List of Personal Protective Equipment Inventory (ppe-03) may be used to keep track of Personal Protective Equipment we use.

3.2 ANSI and Other Approvals. All equipment purchased after implementation of this program will meet applicable standards set forth by ANSI, ASTM or other appropriate organizations.

3.3 Employee-Owned Equipment. We reserve the right to dictate the specific types of PPE employees may wear. Some employees may prefer to use their own personal equipment. In these situations the employee should express their intentions to the Installation Coordinator or Safety Program Coordinator. They will inspect the equipment and determine:

- Is the equipment appropriate for the type and degree of hazard to which the employee will be exposed?
- Does the equipment bear appropriate approvals (i.e. ANSI, ASTM, etc.)?
- Even if appropriate for the type and degree of hazard, is it in working order and well maintained?
- Are there other reasons to allow or disallow its use?

Based on the above information, the Installation Coordinator or the Safety Program Coordinator will determine if the employee will be allowed to use the PPE.

3.4 Cost of PPE. We will specify the minimal level of PPE required to be worn by employees. PPE providing the specific level of protection will be provided to all affected employees, free of charge.

However, we reserve the right to hold affected employees financially responsible, or partly responsible, in the following cases:

- The employee wishes to wear PPE which is not required.
- The employee wishes to wear his/her own privately owned PPE
- When an employee wishes to "upgrade" from the specified level of protection specified by St. Paul Linoleum & Carpet Company.
- Non-specialty safety-toe protective footwear (including steel-toe shoes or steel-toe boots) and non-specialty prescription safety eyewear, provided that the employee is permitted to wear such items off the job-site (this exception applies only in Federal OSHA jurisdictions).
- When/if we provide metatarsal guards and allow the employee, at his or her request, to use shoes or boots with built-in metatarsal protection (this exception applies only in Federal OSHA jurisdictions).
- The logging boots required by the OSHA logging standard (this exception applies only in Federal OSHA jurisdictions).
- Everyday clothing, such as long-sleeve shirts, long pants, street shoes, and normal work boots; or
- Ordinary clothing, skin creams, or other items, used solely for protection from weather, such as winter coats, jackets, gloves, parkas, rubber boots, hats, raincoats, ordinary sunglasses, and sunscreen.
- Replacement PPE, when the employee has lost or intentionally damaged the PPE.

4. Training and Communication

4.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

4.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

4.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

4.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Personal Protective Equipment Training Outline/Recordkeeping Form (ppe-02) is provided in the forms and supporting documents section.

4.5 Content of Training. The training session will consist of:

- When PPE is necessary;
- What PPE is necessary;
- How to properly don, doff, adjust, and wear PPE;
- The limitations of PPE; and,
- The proper care, maintenance, useful life and disposal of PPE.

5. Eye/Face Protection

5.1 General. Employees will be provided with, and required to wear eye/face protection where/when they are significantly expose to hazards of:

- Flying objects or particles
- Molten metal
- Liquid chemicals
- Acidic or caustic liquids
- Chemical gases or vapors
- Potentially injurious radiant light

5.2 Selection Criteria. All eye/face protection will meet the requirements of "American National Standards for Occupational and Educational Eye/Face Protection, Z87.1.

5.3 Guidelines. Each employee who is exposed to flying particles or objects will wear eye protection which affords side protection. Clip-on or slide-on shields are acceptable.

Employees who wear prescription lenses will wear eye protection that incorporates the prescription in its design or will wear eye protection designed to be worn over prescription lenses.

Contact lenses are not to be considered protective lenses.

Eye/Face protection will be marked to clearly identify the manufacturer.

Employees exposed to eye hazards related to injurious radiant light will use filter lenses that have a shade number appropriate for the work being performed.

5.4 Shade Numbers. The following tables are provided for reference in selecting shade numbers for protection against radiant energy.

Operations	Electrode Size (in 1/32's of an inch)	Arc Current	Minimum Protective Shade
Shielded metal arc welding	Less than 3 3-5 5-8 More than 8	Less than 60 60-160 160-250 250-550	7 8 10 11
Gas metal arc welding and flux cored arc welding		Less than 60 60-160 160-250 250-500	7 10 10 10
Gas Tungsten arc welding		Less than 50 50-150 150-500	8 8 10
Air Carbon Arc Cutting	Light Heavy	Less than 500 500-1000	10 11
Plasma arc welding		Less than 20 20-100 100-400 400-800	6 8 10 11
Plasma arc cutting	Light Medium Heavy	Less than 300 300-400 400-800	8 9 10
Torch Brazing Torch Soldering Carbon Arc Welding			3 2 14

Operations	Plate Thickness in inches	Plate Thickness in millimeters	Minimum Protective Shade
Gas welding			
Light	Under 1/8	Under 3.2	4
Medium	1/8-1/2	3.2 – 12.7	5
Heavy	Over 1/2	Over 12.7	6
Oxygen Cutting			
Light	Under 1	Under 25	3
Medium	1-6	25-150	4
Heavy	Over 6	Over 150	5

6. Head Protection

6.1 General. Employees will be provided with, and required to wear head protection, where/when they are significantly exposed to hazards of:

- Falling objects
- Impact with fixed objects
- Working with exposed electrical conductors which may contact the head.

6.2 Selection Criteria. Hardhats must comply with ANSI Z89.1.

6.3 Guidelines. Bump caps will be provided when employees are exposed to hazards involving impact with fixed objects.

- Class "G" hardhats will be issued to employees exposed to falling objects and/or contact with electricity up to 2,200 volts.
- Class "E" hardhats will be issued to employees exposed to falling objects and/or contact with electricity up to 20,000 volts.
- Class "C" hardhats will be issued to employees exposed to falling objects who have no exposure to electricity.

7. Foot Protection

7.1 General. Employees will be provided with, and required to wear foot protection, where/when they are significantly exposed to hazards of:

- Falling or rolling objects.
- Objects piercing the sole of footwear.
- Electrical hazards to the feet.

7.2 Selection Criteria. Safety shoes and boots must comply with ANSI/ASTM Z-41.

7.3 Guidelines. ANSI Z41.1-1991 shoes and boots provide both impact and compression protection. Safety shoes can be purchased which provide protection against puncture, metatarsal, and electrical conductive or insulating protection.

Shoes/Boots with impact protection are required when carrying or handling materials such as packages, parts, or other heavy tools which could be dropped and for other activities during which objects might fall on feet. Slip-off/Kick-off shoes or boots will be required in areas where employees handle molten metals.

Shoes/Boots with compression protection are required for activities involving skid trucks, bulk rolls, heavy pipes or other objects which could roll onto employees' feet.

Shoes/Boots with puncture protection are required where sharp objects such as nails, wire, tacks, screws, staples, etc. could be stepped on by employees, causing injury.

8. Hand Protection

8.1 General. Employees will be provided with, and required to wear hand protection where/when they are significantly exposed to hazards of:

- Cuts, lacerations, punctures or abrasions.
- Chemical burns.
- Skin absorption of harmful substances.
- Temperature extremes.

8.2 Selection Criteria. Currently, there are no ANSI standards related to gloves and hand protection.

8.3 Guidelines. We will select gloves based on an evaluation of the performance characteristics (i.e. chemical hazards, cut hazards, flame hazards, etc.) as required for appropriate protection when considering tasks to be performed, conditions present, duration of use, and the hazards/potential hazards identified. Consideration will be given to each specific application, how long it can be worn (chemical resistance or breakthrough time) and if it can be reused.

Other factors to be considered are:

Will the glove provide the employee with the dexterity required to perform the job?

Will the glove selected withstand the duration, frequency and degree of exposure of the hazard and/or physical stresses that may be applied?

Gloves to be used for protection against chemicals will be selected based on the toxic properties of the chemicals; the ability of the chemical to cause local effects on the skin and/or pass through the skin and cause systemic effects.

Gloves used for protection against mixtures/formulations will be selected based on the mixture component with the shortest breakthrough time.

Gloves which are capable of being removed in such a manner that skin is not contaminated will be used.

9. Hearing Protection

9.1 General. Any use of hearing protection will be outlined in the Hearing Conservation Program.

10. Respiratory Protection

10.1 General. Any use of respiratory protection will be outlined in the Respiratory Protection Program.

St. Paul Linoleum & Carpet Company

Powered Industrial Truck (Forklift) Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The OSHA regulation applies to any employer whose employees operate powered industrial trucks, such as forklifts, powered pallet jacks, platform lift trucks, etc, which are powered by electricity or internal combustion engines.
- The regulation establishes requirements for the design, construction, inspection, use and maintenance of the powered industrial trucks.
- There are significant training requirements for operators.
- A written program is not required, but is recommended.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

St. Paul Linoleum & Carpet Company has implemented this program as a part of our overall commitment to the health and safety of our employees. It is intended to reduce the probability of injuries and illnesses to forklift operators and other employees. It is also intended to reduce the probability of loss of physical resource included our facility, inventory, and the trucks themselves.

It is our policy that only trained, authorized employees will operate Powered Industrial Trucks.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

This program contains safety requirements relating to fire protection, design, maintenance and use of forktrucks, tractors, platform lift trucks, motorized hand trucks and other specialized industrial trucks powered by electric motors or internal combustion engines.

This section does not apply to compressed air, nonflammable compressed gas-operated industrial trucks, farm vehicles, or vehicles intended primarily for earthmoving or over-the-road hauling.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Powered Industrial Truck (Forklift) Program

1. Selection and Designation of Trucks

1.1 General. All powered industrial trucks will meet the design and construction requirements for powered industrial trucks established in the "American National Standard for Powered Industrial Trucks, Part II, ANSI B56.1-1969" or current, except for vehicles intended primarily for earthmoving or over-the-road hauling.

1.2 Specification Plates. Approved trucks will bear a label or some other identifying mark indicating approval by the testing laboratory. Nameplates and markings will be maintained in place and in legible condition.

1.3 Additions and Modifications. Modifications and additions which affect capacity and safe operation will not be performed without the manufacturer's prior written approval. Capacity, operation and maintenance instruction plates, tags or decals will be changed accordingly.

If the truck is equipped with front-end attachments other than factory installed attachments, we will request that the truck be marked to identify the attachments and show the approximate weight of the truck and attachment combination at maximum elevation with load laterally centered.

1.4 Powered Industrial Truck Designations. For the purpose of this program there are eleven different designations of industrial trucks or tractors as follows: D, DS, DY, E, ES, EE, EX, G GS, LP and LPS:

- The D designated units are units similar to the G units except that they are diesel engine powered instead of gasoline engine powered.
- The DS designated units are diesel powered units that are provided with additional safeguards to the exhaust, fuel and electrical systems. They may not be used in some locations where a D unit may not be considered suitable.
- The DY designated units are diesel powered units that have all the safeguards of the DS units and, in addition, do not have any electrical equipment, including the ignition, and are equipped with temperature limitation features.
- The E designated units are electrically powered units that have minimum acceptable safeguards against inherent fire hazards.

- The ES designated units are electrically powered units that, in addition to all of the requirements for the E units, are provided with additional safeguards to the electrical system to prevent emission of hazardous sparks and to limit surface temperatures. They may be used in some locations where the use of an E unit may not be considered suitable.
- The EE designated units are electrically powered units that have, in addition to all of the requirements for the E and ES units, the electric motors and all other electrical equipment completely enclosed. In certain locations the EE unit may be used where the use of an E or ES unit may not be considered suitable.
- The EX designated units are electrically powered units that differ from the E, ES, or EE units in that the electrical fittings and equipment are so designed, constructed, and assembled that the units may be used in certain atmospheres contained flammable vapors or dust.
- The G designated units are gasoline powered units having minimum acceptable safeguards against inherent fire hazards.
- The GS designated units are gasoline powered units that are provided with additional safeguards to the exhaust, fuel and electrical systems. They may be used in some locations where the use of a G unit may not be considered suitable.
- The LP designated unit is similar to the G unit, except that liquefied petroleum gas is used for fuel instead of gasoline.
- The LPS designated units are liquefied petroleum gas powered units that are provided with additional safeguards to the exhaust, fuel and electrical systems. They may be used in some locations where the use of an LP unit may not be considered suitable.

1.5 Hazardous Locations. All powered industrial trucks will be approved for the environment in which they are operated.

2. Converted Industrial Trucks

2.1 General. Power-operated industrial trucks that have been originally approved for the use of gasoline for fuel, when converted to the use of liquefied petroleum gas fuel in accordance with the section of this program concerning maintenance, may be used in those locations where G, GS, or LP, and LPS designated trucks have been specified in the preceding paragraphs.

3. Safety Guards

3.1 General. This section details required safeguarding features of all powered industrial trucks.

3.2 Overhead Guards. High Lift Rider trucks will be fitted with an overhead guard manufactured in accordance with Section 1 of this program, unless operating conditions do not permit.

3.3 Load Backrests. If the type of load presents a hazard, the user will equip forktrucks with a vertical load backrest extension manufactured in accordance with Section 1 of this program.

3.4 Seatbelts. All powered industrial trucks equipped with Rollover Protection Systems (ROPs) will be equipped with a seatbelt, which operators will be required to wear.

4. Fuel Handling and Storage

4.1 General. The storage and handling of liquid fueled such as gasoline and diesel fuel will be in accordance with NFPA Flammable and Combustible Liquids Code (NFPA No. 30-1969). The storage and handling of liquefied petroleum gas fuel will be in accordance with NFPA Storage and Handling of Liquefied Petroleum Gases (NFPA No. 58-1969).

All compressed gas cylinders will be stored in the designated location. All compressed gases will be protected from damage, collision, theft, vandalism, ignition sources, temperatures extremes, etc.

5. Changing and Charging Storage Batteries

5.1 General. This section outlines requirements pertaining to facilities, equipment, work practices, etc. related to charging, inspecting and changing batteries.

5.2 Facilities for Battery Charging. Battery charging installations will be located in areas designated for that purpose.

Facilities will be provided for flushing and neutralizing spilled electrolyte, for fire protection, for protecting charging apparatus from damager by trucks, and for adequate ventilation for dispersal of fumes from gassing batteries.

A conveyor, overhead hoist or equivalent material handling equipment will be provided for handling batteries, as necessary.

A carboy tilter or siphon will be provided for handling electrolyte.

5.3 Procedures. When charging batteries, acid will be poured into water; water will not be poured into acid.

Trucks will be properly positioned and brake applied before attempting to change or charge batteries.

Care will be taken to assure that vent caps are functioning. The battery (or compartment) cover(s) will be open to dissipate heat.

Smoking will be prohibited in the charging area. Precautions will be taken to prevent open flames, sparks or electric arcs in battery charging areas.

Tools and other metallic objects will be kept away from the top of uncovered batteries.

5.4 Eyewashes. An approved emergency eyewash will be available within 10 feet of all points at which there is an exposure to electrolyte.

6. Lighting for Operating Areas

6.1 General. Where general lighting is less than 2 lumens per square foot, auxiliary directional lighting will be provided on the truck.

7. Control of Noxious Gases and Fumes

7.1 General. When forklifts powered by internal combustion engines are in use, we will ensure that all employees' exposures to Carbon Monoxide do not exceed applicable limits.

The testing described in sections 7.2 and 7.3 is universally recommended, but may be required in certain OSHA jurisdictions, including Minnesota.

7.2 Exhaust Emission Monitoring. The internal combustion engine powered fork trucks will have exhaust emissions tested after every tune-up. We will ensure that exhaust gases do not contain more than one percent Carbon Monoxide for Propane powered units or two percent Carbon Monoxide for gasoline powered units. Emissions will be checked at idle and three fourths throttle.

It is the responsibility of the Safety Program Coordinator to carry out or delegate this testing.

7.3 Environmental Exposure to Carbon Monoxide. As appropriate, Carbon Monoxide levels inside the facility will be checked on a quarterly basis in the area the internal combustion engine powered unit operates.

It is the responsibility of the Safety Program Coordinator to carry out or delegate this testing.

7.4 Availability of Records. The results of monitoring described in Section 7.2 and 7.3 are considered exposure records and will be made available to employees, upon their request, within 15 days of receipt of results. These records will be maintained for 30 years beyond the termination date of the applicable employees. They will be maintained in the industrial hygiene section of this manual.

8. Dockboards (Bridge Plates)

8.1 General. Portable and powered dockboards will be strong enough to carry the load imposed on them.

Portable dockboards will be secured in position, either by being anchored or equipped with devices which will prevent their slipping.

Powered dockboards will be designed and constructed in accordance with Commercial Standard CS202-56 (1961): "Industrial Lifts and Hinged Loading Ramps," published by the U.S. Department of Commerce.

Handholds, or other effective means, will be provided on portable dockboards to permit safe handling.

Positive protection will be provided to prevent railroad cars from being moved while dockboards or bridge plates are in position.

9. Trucks and Railroad Cars

9.1 General. The brakes of highway trucks will be set and wheel chocks placed under the rear wheels to prevent the trucks from rolling while they are boarded with powered industrial trucks.

Wheel stops or other recognized positive protection will be provided to prevent railroad cars from moving during loading or unloading operations.

Fixed jacks may be necessary to support a semi trailer and prevent upending during the loading or unloading when the trailer is not coupled to a tractor.

Positive protection will be provided to prevent railroad cards from being moved while dockboards or bridge plates are in position.

10. Truck Operations

10.1 General. This section outlines rules governing the actual use and operation of powered industrial trucks.

- Trucks will not be driven up to anyone standing in front of a bench or other fixed object.
- No person will be allowed to stand or pass under the elevated portion of any truck, whether loaded or empty.
- Unauthorized personnel will not be permitted to ride on powered industrial trucks. A safe place to ride will be provided where riding of trucks is authorized.
- Employees will not be permitted to have their arms or legs between the uprights of the mast or outside the running lines of the truck.
- A safe distance will be maintained from the edge of ramps or platforms while on any elevated dock, platform or freight car. Trucks will not be used for opening or closing freight doors.
- Fire aisles, access to stairways, and fire equipment will be kept clear.

10.2 Unattended Trucks. A powered industrial truck is unattended when the operator is 25 feet or more away from the vehicle which remains in his view or whenever the operator leaves the vehicle and it is not in his view.

When a powered industrial truck is left unattended, load engaging means will be fully lowered, controls will be neutralized, power will be shut off and brakes set. Wheels will be blocked if the truck is parked on an incline.

When the operator of an industrial truck is dismounted and within 25 feet of the truck still in his view, the load engaging means will be fully lowered, controls neutralized, and the brakes set to prevent movement.

10.3 Lifting Carriages. Whenever a truck is equipped with vertical only or vertical and horizontal controls elevatable with the lifting carriage or forks for lifting personnel, the following additional precautions will be taken for the protection of personnel being elevated.

- Use of a safety platform firmly secured to the lifting carriage and/or forks.
- Means will be provided whereby personnel on the platform can shut off power to the truck.
- Such protection from falling objects as indicated necessary by the operating conditions will be provided.

11. Traveling

11.1 General. This section outlines the manner in which powered industrial trucks will be permitted to travel.

11.2 General Rules. All traffic regulations will be observed, including authorized plant speed limits. A safe distance will be maintained, approximately three truck lengths from the truck ahead, and the truck will be kept under control at all times.

The right of way will be yielded to ambulances, fire trucks, or other emergency vehicles.

Other trucks traveling in the same direction at intersections, blind spots, or other dangerous locations will not be passed.

The driver will be required to slow down and sound the horn at cross aisles and other locations where vision is obstructed. If the load being carried obstructs forward view, the driver will be required to travel with the load trailing.

Railroad tracks will be crossed diagonally whenever possible. Parking closer than 8 feet from the center of the railroad tracks is prohibited.

The driver will be required to look in the direction of, and keep a clear view of the path of travel.

Grades will be ascended or descended slowly. On all grades, the load and load engaging means will be tilted back if applicable, and raised only as far as necessary to clear the road surface.

When ascending or descending grades in excess of 10 percent, loaded trucks will be driven with the load upgrade.

Under all travel conditions the truck will be operated at a speed that will permit it to be brought to a stop in a safe manner.

Stunt driving and horseplay will not be permitted.

The driver will be required to slow down for wet and slippery floors.

Dockboard or bridge plates will be properly secured before they are driven over. Dockboard or bridge plates will be driven over carefully and slowly, and their rated capacity never exceeded.

Elevators will be approached slowly, and then entered squarely after the elevator car is properly leveled. Once on the elevator, the controls will be neutralized, power shut off, and the brakes set.

Motorized hand trucks must enter elevator or other confined areas with load end forward.

Running over loose objects on the roadway surface will be avoided.

While negotiating turns, speed will be reduced to a safe level by means of turning the hand steering wheel in a smooth, sweeping motion. Except when maneuvering at a very low speed, the hand steering wheel will be turned at a moderate, even rate.

12. Loading

12.1 General. This section outlines requirements pertaining to how the powered industrial trucks will be loaded.

12.2 General Rules. Only stable or safely arranged loads will be handled. Caution will be exercised when handling off-center loads which cannot be centered.

Only loads within the rated capacity of the truck will be handled.

The long or high (including multiple-tiered) loads which may affect capacity will be adjusted.

Trucks equipped with attachments will be operated as partially loaded trucks when not handling a load.

A load engaging means will be placed under the load as far as possible; the mast will be carefully tilted backward to stabilize the load.

Extreme care will be used when tilting the load forward or backward, particularly when high tiering. Tilting forward with load engaging means elevated will prohibited except to pick up a load. An elevated load will not be tilted forward except when the load is in a deposit position over a rack or stack. When stacking or tiering, only enough backward tilt to stabilize the load will be used.

13. Operation of the Truck

13.1 General. This section outlines requirements pertaining to the operation of the truck.

13.2 General Rules. If at any time a powered industrial truck is found to be in need of repair, defective, or is in any way unsafe, the truck will be taken out of service until it has been restored to safe operating condition.

Fuel tanks will not be filled while the engine is running. Spillage will be avoided.

Spillage of oil or fuel will be carefully washed away or completely evaporated and the fuel tank cap replaced before starting the engine.

No truck will be operated with a leak in the fuel system until the leak has been corrected.

Open flames will not be used for checking electrolyte level in storage batteries or gasoline level in fuel tanks.

14. Maintenance of Industrial Trucks

14.1 General. This section outlines requirements related to the inspection, maintenance and repair of powered industrial trucks. Any power-operated industrial truck not in safe operating condition will be removed from service. All repairs will be made by authorized personnel.

14.2 Fire Hazards. No repairs will be made in Class I, II, or III locations.

Those repairs to the fuel and ignition systems of the trucks which involved fire hazards will be conducted only in locations designated for such repairs.

14.3 Repairs to the Electrical System. Trucks in need of repairs to the electrical system will have the battery disconnected prior to such repairs.

14.4 Modifications. All parts of any such industrial truck requiring replacement will be replaced only be parts equivalent as to safety with those used in the original design.

Industrial trucks will not be altered so that the relative positions of the various parts are different from what they were when originally received from the manufacturer, nor will they be altered either by the addition of extra parts not provided by the manufacturer or by the elimination of any part. Additional counterweighing of fork trucks will not be done unless approved by the truck manufacturer. Exception: industrial trucks originally approved for the use of gasoline for fuel may be converted to liquefied petroleum gas fuel provided the complete conversion results in a truck which embodies the features specified for LP or LPS designated trucks. Such conversion equipment will be approved.

14.5 Daily Inspection and Maintenance. Industrial trucks will be examined before being placed in service, and will not be placed in service if the examination shows any condition adversely affecting the safety of the vehicle. Such examinations will be made at least daily. Where industrial trucks are used on a round-the-clock basis, they will be examined after each shift.

Industrial trucks will be kept in a clean condition, free of lint, excess oil and grease. Noncombustible agents should be used for cleaning trucks. Low flash point (below 100 deg. F) solvents will not be used. High flash point (at or above 100 deg. F) solvents may be used. Precautions regarding toxicity, ventilation, and fire hazard will be consistent with the agent or solvent used.

Water mufflers will be filled daily or as frequently as is necessary to prevent the depletion of the water supply be 75 percent of the filled capacity. Vehicles with mufflers having screens or other

parts that may become clogged will not be operated while such screens or parts are clogged. Any vehicle that emits hazardous sparks or flames from the exhaust system will immediately be removed from service and not returned to service until the cause for the emission of such sparks and flames has been eliminated.

When the temperature of any part of any truck is found to be in excess of its normal operating temperature, thus creating a hazardous condition, the vehicle will be removed from service, and not returned to service until the cause for such overheating has been eliminated.

The Operator is responsible for conducting this daily pre-shift inspection. Defects of the powered industrial truck noted during use or inspection will be reported to the Safety Program Coordinator immediately.

14.6 Responsibility for Maintenance. The Warehouse Manager is responsible for performing or overseeing all maintenance to the powered industrial trucks. This includes coordinating work with our service vendor.

14.7 Maintenance Records. The Safety Program Coordinator will maintain written records of all maintenance work performed. All written records will identify the trucks(s) to which they related.

15. Training and Communication

15.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

15.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

15.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

15.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).

- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Forklift Training Outline/Recordkeeping Form (pit-03) is provided in the forms and supporting documents section.

15.5 Content of Training. The training session will consist of:

- Truck-related topics:
  - Operating instructions, warnings, and precautions for the types of truck the operator will be authorized to operate;
  - Difference between the truck and the automobile;
  - Truck controls and instrumentation: where they are located, what they do, and how they work;
  - Engine or motor operation;
  - Steering and maneuvering;
  - Visibility (including restrictions due to loading);
  - Fork and attachment adaptation, operation, and use limitations;
  - Vehicle capacity;
  - Vehicle stability;
  - Any vehicle inspection and maintenance that the operator will be required to perform;
  - Refueling and/or charging and recharging of batteries;
  - Operating limitations;
  - Any other operating instructions, warnings or precautions listed in the operator's manual for the types of vehicle that the employee is being trained to operate.
- Workplace-related topics:
  - Surface conditions where the vehicle will be operated;
  - Composition of loads to be carried and load stability;
  - Load manipulation, stacking, and unstacking;
  - Pedestrian traffic in areas where the vehicle will be operated;
  - Narrow aisles and other restricted places where the vehicle will be operated;
  - Hazardous (classified) locations where the vehicle will be operated;
  - Ramps and other sloped surfaces that could affect the vehicle's stability;
  - Closed environments and other areas where insufficient ventilation or poor vehicle maintenance could cause a buildup of carbon monoxide or diesel exhaust;
  - Other unique or potentially hazardous environmental conditions in the workplace that could affect safe operation.
- The requirements of 29 CFR 1910.178.

15.6 Written Test and "Behind the Wheel" Evaluation. Training participants shall successfully complete a written test and behind the wheel evaluation after training but before being considered qualified. A Written Test and Answer Key (pit-02), and Behind the Wheel Evaluation Form (pit-01) are included in the forms and supporting documents section.

St. Paul Linoleum & Carpet Company

Respiratory Protection Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- OSHA's respiratory protection rule applies to employers whose employees wear any type of respirator, regardless of frequency or use, reason for use, duration of use or whether or not they are mandatory or voluntary users.
- The employer must develop and implement a program which provides for evaluation of hazards, selection of respirators based on hazards, employee training, medical evaluation, fit testing and inspection and maintenance.
- There are significant differences in requirements for voluntary versus mandatory users.
- A written program is required.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

Our primary objective will be to prevent atmospheric contamination. This will be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and the substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators will be used pursuant to the requirements of this program.

Only trained, authorized employees may wear respiratory protection. Employees will use the provided respiratory protection in accordance with training received.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

Except as noted below, this program applies to all use of respirators by our employees, regardless of exposure above or below exposure limits, voluntary or mandatory use, etc.

However, various sections of this program may or may not apply, depending on whether or not a given employee is required to wear a respirator, or wears one voluntarily. Appropriate sections

of the program identify the "class" (mandatory users, or voluntary users) of respirator wearers to which the section applies.

This program does not apply to the voluntary use of filtering face pieces (dust masks) by employees who are not overexposed to any airborne contaminant, and who wear dusts masks simply as an added level of protection and comfort.

Employees are included in the respirator protection program when:

- They are assigned to areas, jobs or tasks which require respiratory protection. We will require the use of respirators for all areas, jobs or tasks where employees are potentially overexposed to atmospheric contaminants. However, we may also require respirator protection in areas, jobs or tasks where employees are not overexposed.
- They wear a respirator voluntarily, or are permitted to wear their own respirators.

Areas, jobs or tasks which require respiratory protection are identified within this program.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Respiratory Protection Program

1. Engineering Controls

1.1 General. In the protection of employees' health, our primary objective is to prevent atmospheric contamination. This will be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators will be used pursuant to this program.

1.2 Responsibility. It is the responsibility of the Safety Program Coordinator to identify and implement feasible engineering controls, for the purposes described above. It is the responsibility of the Safety Program Coordinator to properly maintain, and ensure the proper functioning of engineering controls.

2. Administration of the Program

2.1 General. The effective administration of this program is critical. To ensure the proper administration of this program, we have designated a respiratory protection program administrator.

2.2 The Respiratory Protection Program Administrator. Our Respiratory Protection Program Administrator is the Safety Program Coordinator.

2.3 Responsibilities. The program administrator is responsible for the "hands-on" administration of the program. Examples of these responsibilities include, but are not limited to:

- Addressing respirator user's questions, concerns, etc.
- Coordinating and/or conducting employee training, medical evaluations, etc.
- Assisting in enforcing respirator-related safe work rules.
- Periodically reviewing the effectiveness of this program.

2.4 Training and Qualifications of the Administrator. The program administrator will be appropriately qualified by virtue of his/her education, training or experience.

3. Selection of Respirators

3.1 General. We will identify and evaluate the respiratory hazard(s) in the workplace; this evaluation will include a reasonable estimate of employee exposures to respiratory hazard(s) and an identification of the contaminant's chemical state and physical form. When hazards cannot be identified or reasonably estimated, the atmosphere will be considered IDLH (Immediately Dangerous to Life and Health).

In addition to the evaluation of exposure levels described above, the following criteria are also used in the respirator selection process. These include:

- Warning properties of the contaminant;
- Potential for eye irritation;
- IDLH (Immediately Dangerous to Life and Health) level of the contaminant;
- Sorbent efficiency of filter;
- Potential for skin absorption;
- Vapor pressure of the contaminant;
- Physical state and condition of use (routine versus emergency).

3.2 Approved Respirators. All respirators used will be NIOSH certified. The respirator will be used in compliance with the conditions of its certification. A listing of Approved Respirators and Change Schedules (resp-02) is included in the forms and supporting documents section of this manual.

3.3 Respirators for IDLH Atmospheres. We will provide the following respirators for employee use in IDLH atmospheres:

- A full facepiece pressure demand SCBA certified by NIOSH for a minimum service life of thirty minutes, or
- A combination full facepiece pressure demand supplied-air respirator with auxiliary self-contained air supply.

Respirators provided only for escape from IDLH atmospheres will be NIOSH certified for escape from the atmosphere in which they will be used.

All oxygen-deficient atmospheres will be considered IDLH, except when we can demonstrate that under all foreseeable conditions, the oxygen concentration can be maintained within the ranges specified in the table below. In these cases, any atmosphere-supply respirator may be used.

Altitude (ft.)	**Oxygen Deficient Atmospheres (% Oxygen) for which atmosphere-supplying respirators may be relied on.**
Less than 3,001	16.0-19.5
3,001-4,000	16.4-19.5
4,001-5,000	17.1-19.5
5,001-6,000	17.8-19.5
6,001-7,000	18.5-19.5
7,001-8,000*	19.3-19.5

*Above 8,000 feet, the exception does not apply. Oxygen-enriched breathing air must be supplied above 14,000 feet.

3.4 Respirators for Atmospheres That Are Not IDLH. We will provide a respirator that is adequate to protect the health of the employee and ensure compliance with all other OSHA statutory and regulatory requirements, under routine and reasonably foreseeable emergency situations.

The respirator selected will be appropriate for the chemical state and physical form of the contaminant.

For protection against gases and vapors, we will provide:

- An atmosphere-supplying respirator, or
- An air-purifying respirator, provided that:
  - The respirator is equipped with an end-of –service-life indicator (ESLI) certified by NIOSH for the contaminant; or
  - If there is no ESLI appropriate for conditions in our workplace, we will implement a change schedule for canisters and cartridges that is based on objective information or data that will ensure that canisters and cartridges are changed before the end of their service life. Our change schedule is provided in the designated section of this manual.

For protection against particulates, we will provide:

- An atmosphere-supplying respirator; or

- An air-purifying respirator equipped with a filter certified by NIOSH under 30 CFR part 11 as a High Efficiency Particulate Air (HEPA) filter, or an air-purifying respirator equipped with a filter certified for particulates by NIOSH under 42 CFR part 84; or
- For contaminants consisting primarily of particles with Mass Median Aerodynamic Diameters (MMAD) of at least 2 micrometers, an air-purifying respirator equipped with any filter certified for particulates by NIOSH.

3.5 Respirators in Use. Respirators which are approved for use are identified in the designated section of this binder.

3.6 Responsibility. It is the responsibility of the Safety Program Coordinator to ensure that respirators are appropriate for the types of hazards at hand, and that respirator selection complies with the above information.

The Safety Program Coordinator and the Installation Coordinator are responsible for monitoring the correct use and selection of respirators in the areas they supervise.

4. Medical Evaluation

4.1 General. This section applies to all respirator users; voluntary and mandatory.

Using a respirator may place a physiological burden on employees that varies with the type of respirator worn, the job and workplace conditions in which the respirator is used and the medical status of the employee. Accordingly, this section specifies the procedures and policies for medical evaluation of applicable respirator wearers, in order to determine their ability to use a respirator.

We will provide a medical evaluation to determine the employee's ability to use a respirator, before the employee is fit tested, required, or permitted to use the respirator in the workplace. We may discontinue an employee's medical evaluations when the employee is no longer required to use a respirator.

4.2 Medical Evaluation Questionnaire. An initial screening of each respirator wearer will be made by having each respirator wearer complete a medical questionnaire, or by arranging for a medical examination that obtains the same information as the medical questionnaire.

The questionnaire is provided in the Forms & Supporting Documents and is titled, Medical Questionnaire for Respirator Users (resp-03).

Once the employee has completed the questionnaire, it is forwarded to our Physician or Licensed Health Care Provider (PLHCP). Our PLHCP is designated on the Who's Who Resource Directory. The PLHCP will review the questionnaire to determine if a follow up medical evaluation, as described in section 4.3 is required.

4.3 Follow-Up Medical Examination. A follow-up medical examination will be provided for any employee who gives a positive response to any question among questions 1 through 8 in Section 2, Part A of the questionnaire or whose initial medical examination demonstrates the need for a follow-up medical examination.

The follow-up medical examination will include any medical tests, consultations or diagnostic procedures that the PLHCP deems necessary to make a final determination.

The following information will be provided to the PLHCP before the PLHCP makes a recommendation concerning an employee's ability to use a respirator:

- The type and weight of the respirator to be used by the employee;
- The duration and frequency of respirator use (including use for rescue and escape);
- The expected physical work effort;
- Additional protective clothing and equipment to be worn;
- Temperature and humidity extremes that may be encountered; and
- A copy of the written Respiratory Protection program.

Any of the above supplemental information provided previously to the PLHCP regarding an employee need not be provided for a subsequent medical evaluation if the information and the PLHCP remain the same.

4.4 Medical Determination. In determining the employee's ability to use a respirator, we will obtain a written recommendation regarding the employee's ability to use the respirator from the PLHCP. The recommendation will provide only the following information.

- Any limitations or respirator use related to the medical condition of the employee, or relating to the workplace conditions in which the respirator will be used, including whether or not the employee is medically able to use the respirator;
- The need, if any, for follow-up medical evaluations; and
- A statement that the PLHCP has provided the employee with a copy of the PLHCP's written recommendation.

If the respirator is a negative pressure respirator and the PLHCP finds a medical condition that may place the employee's health at increased risk if the respirator is used, we will provide a PAPR if the PLHCP's medical evaluations finds that the employee is medically able to use a negative pressure respirator, then we may opt to no longer provide a PAPR.

4.5 Administration of the Medical Questionnaire and Examinations. The medical questionnaire and examinations will be administered confidentially during the employee's normal working hours or at a time and place convenient to the employee. The medical questionnaire will be administered in a manner that ensures that the employee understands its content.

We will provide the employee with an opportunity to discuss the questionnaire and examination results with the PLHCP.

4.6 Additional Medical Evaluations. At a minimum, we will provide additional medical evaluations that comply with the requirements of this section if:

- An employee reports medical signs or symptoms that are related to ability to use a respirator;

- A PLHCP, the Installation Coordinator/Respirator Program Administrator informs us that an employee needs to be reevaluated;
- Information from the respiratory protection program, including observations made during fit testing and program evaluation, indicates a need for employee reevaluations; or
- A change occurs in workplace conditions (e.g. physical work effort, protective clothing and temperature) that may result in substantial increase in the physiological burden placed on an employee.

4.7 Records of Medical Evaluations. Records of medical evaluations will be retained and made available in accordance with 29 CFR 1910.1020.

4.8 Responsibility. It is the responsibility of the Safety Program Coordinator to coordinate medical evaluations, and to carry out the requirements of this section.

5. Fit Testing

5.1 General. This section applies only to mandatory respirator users.

This paragraph requires that, before an employee may be required to use any respirator with a negative or positive pressure tight-fitting facepiece, the employee must be fit tested with the same make, model, style and size of respirator that will be used.

This section specifies the kinds of fit tests allowed, the procedures for conducting them, and how the results of the fit tests must be used.

We will ensure that employees using a tight-fitting facepiece respirator pass an appropriate Qualitative Fit Test (QLFT) or Quantitative Fit Test (QNFT) as stated in this paragraph.

5.2 When Fit Testing is to be Conducted. We will ensure that an employee using a tight-fitting facepiece respirator is fit tested prior to initial use of the respirator, whenever a different respirator facepiece (size, style, model or make) is used, and at least annually thereafter.

We will conduct an additional fit test whenever the employee reports, or we, the PLHCP, the Installation Coordinator, or the Safety Program Coordinator/Program Administrator makes visual observations of, changes in the employee's physical condition that could affect respirator fit. Such conditions include, but are not limited to, facial scarring, dental changes, cosmetic surgery or an obvious change in body weight.

If, after passing a QLFT or QNFT, the employee subsequently notifies us, program administrator, Installation Coordinator, or PLHCP that the fit of the respirator is unacceptable, the employee will be given a reasonable opportunity to select a different respirator facepiece and to be retested.

5.3 Fit Test Methods. The fit test will be administered using an OSHA accepted QLFT or QNFT protocol.

QLFT may only be used to fit negative pressure air-purifying respirators that must achieve a fit factor of 100 or less.

If the fit factor, as determined through an OSHA accepted QNFT protocol, is equal to or greater than 100 for tight-fitting half facepieces, or equal to or grater than 500 for tight-fitting full facepieces, the QNFT has been passed with that respirator.

Fit testing of tight-fitting atmosphere-supplying respirators and tight-fitting powered air-purifying respirators will accomplished by performing quantitative or qualitative fit testing in the negative pressure mode, regardless of the mode of operation (negative or positive pressure) that is used for respiratory protection.

- Qualitative fit testing of these respirators will be accomplished by temporarily converting the respirator user's actual facepiece into a negative pressure respirator with appropriate filters, or by using an identical negative pressure air-purifying respirator facepiece with the same sealing surfaces as a surrogate for the atmosphere-supplying or powered air-purifying respirator facepiece.
- Quantitative fit testing of these respirators will be accomplished by modifying the facepiece to allow sampling inside the facepiece in the breathing zone of the user, midway between the nose and mouth. This requirement will be accomplished by installing a permanent sampling probe onto a surrogate facepiece or by using a sampling adapter designed to temporarily provide a means of sampling air from inside the facepiece.
- Any modifications to the respirator facepiece for fit testing will be completely removed, and the facepiece restored to NIOSH approved configuration, before that facepiece can be used in the workplace.

5.4 Responsibility for Fit Testing. The Safety Program Coordinator is responsible for carrying out the fit testing described in this section.

5.5 Records of Fit Testing. A record of each fit test performed will be maintained, and will include:

- The name or identification of the employee tested;
- Type of fit tests performed;
- Specific make, model, style, and size of respirator tested;
- Date of test; and
- The pass-fail results for QLFTs or the fit factor and strip chart recording or other recording of the test results for QNFTs.

A form for documenting employee fit tests is found in the forms and supporting documents and is entitled, Respirator Fit Test Record (resp-04). Records will be retained for respirator users at least until the next fit test is administered. Records of fit testing will be maintained in the employees' personnel files.

6. Use of Respirators

6.1 General. This section outlines procedures that have been implemented by us for the proper use of respirators. These requirements include prohibiting conditions that may result in facepiece seal leakage, preventing employees from removing respirators in hazardous

environments, taking actions to ensure continued effective respirator operation throughout the work shift and establishing procedures for the use of respirators in IDLH atmospheres or in interior structural firefighting situations.

6.2 Facepiece Seal Protection. We will not permit respirators with tight-fitting facepieces to be worn by employees who have:

- Facial hair that comes between the sealing surface of the facepiece and the face or that interferes with valve function.
- Any condition that interferes with face-to-facepiece seal or valve function.

If an employee wears corrective glasses or goggles or other personal protective equipment, we will ensure that such equipment is worn in a manner that does not interfere with the seal of the facepiece to the face of the user.

For all tight-fitting respirators, we will require that employees perform a user seal check each time they put on the respirator using the procedures recommended by the respirator manufacturer.

6.3 Continuing Respirator Effectiveness. Appropriate surveillance will be maintained of work area conditions and degree of employee exposure or stress. When there is a change in work area conditions or degree of employee exposure or stress that any affect respirator effectiveness, we will reevaluate the continued effectiveness of the respirator.

We will ensure that employees leave the respirator use area:

- To wash their faces and respirator facepieces as necessary to prevent eye or skin irritation associated with respirator use; or
- If they detect vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece; or
- To replace the respirator or the filter, cartridge, or canister elements.

If the employee detects vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece, St. Paul Linoleum & Carpet Company must replace or repair the respirator before allowing the employee to return to the work area.

6.4 Procedures for IDLH Environments, and Structural Firefighting. There are no operations which involve exposures to IDLH environments. However, in the even that non-routing circumstances arise which involve potentially IDLH atmospheres, the procedures outlined in the respirator protection standard will be implemented.

7. Maintenance and Care of Respirators

7.1 General. This section describes procedures for the cleaning and disinfecting, storage, inspection and repair of respirators.

7.2 Cleaning and Disinfecting. We will provide each respirator user with a respirator that is clean, sanitary, and in good working order. We will ensure that respirators are cleaned and disinfected using the procedures recommended by the respirator manufacturer.

The respirators will be cleaned and disinfected at the following intervals:

- Respirators issued for the exclusive use of an employee will be cleaned and disinfected as often as necessary to be maintained in a sanitary condition;
- Respirators issued to more than one employee will be cleaned and disinfected before being worn by different individuals;
- Respirators maintained for emergency use will be cleaned and disinfected after each use; and
- Respirators used in fit testing and training will be cleaned and disinfected after each use.

7.3 Storage. All respirators will be stored to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture and damaging chemicals, and they will be packed or stored to prevent deformation of the facepiece and exhalation valve.

In addition, emergency respirators will be kept accessible to the work area, stored in compartments or in covers that are clearly marked as containing emergency respirators, and stored in accordance with any applicable manufacturer instructions.

7.4 Inspection. All respirators used in routine situations will be inspected before each use and during cleaning.

All respirators maintained for use in emergency situations will be inspected at least monthly and in accordance with the manufacturer's recommendations, and will be checked for proper function before and after each use.

Emergency-escape-only respirators will be inspected before being carried into the workplace for use.

Respirator inspections will include the following:

- A check of respirator function, tightness of connections, and the condition of the various parts including, but not limited to, the facepiece, head straps, valves, connecting tub, and cartridges, canisters or filters; and
- A check of elastomeric parts for pliability and signs of deterioration.

In addition, self-contained breathing apparatuses will be inspected monthly. Air and oxygen cylinders will be maintained in a fully charged state and will be recharged when the pressure falls to 90% of the manufacturer's recommended pressure level. We will determine that the regulator and warning devices function properly.

For respirators maintained for emergency use, we will:

- Certify the respirator by documenting the date the inspection was performed, the name (or signature) of the person who made the inspection, the findings, required remedial action, and a serial number or other means of identifying the inspected respirator; and
- Provide this information on a tag or label that is attached to the storage compartment for the respirator, is kept with the respirator or is included in inspection reports stored as paper or electronic files. This information will be maintained until replaced following a subsequent certification.

7.5 Repairs. We will ensure that respirators that fail an inspection or are otherwise found to be defective are removed from service, and are discarded, repaired, or adjusted in accordance with the following procedures.

Repairs or adjustments to respirators are to be made only be persons appropriately trained to perform such operations and will use only the respirator manufacturer's, NIOSH-approved parts designed for the respirator.

Repairs will be made according to the manufacturer's recommendations and specifications for the type and extent of repairs to be performed; and

Reducing and admission valves, regulators and alarms will be adjusted or repaired only by the manufacturer or a technician trained by the manufacturer.

8. Breathing Air Quality and Use

8.1 General. This section describes the methods implemented to ensure that employees using atmosphere-supplying respirators (supplied-air and SCBA) are breathing gases of high purity.

8.2 General Requirements. We will ensure that compressed air, compressed oxygen, liquid air, and liquid oxygen used for respiration accords with the following specifications:

- Compressed and liquid oxygen will meet the United States Pharmacopoeia requirements for medical or breathing oxygen; and
- Compressed breathing air will meet at least the requirements for Type 1-Grade D breathing air described in ANSI/Compressed Gas Association Commodity Specification for Air, G-7.1-1989, to include:
    - Oxygen content (v/v) of 19.5-23.5%;
    - Hydrocarbon (condensed) content of 5 milligrams per cubic meter of air or less;
    - Carbon monoxide (CO) content of 10 ppm or less; and
    - Carbon dioxide content of 1,000 ppm or less; and
    - Lack of noticeable odor.

We will ensure that compressed oxygen is not used in atmosphere-supplying respirators that have previously used compressed air.

We will ensure that oxygen concentrations greater than 23.5% are used only in equipment designed for oxygen service or distribution.

We will ensure that cylinders used to supply breathing air to respirators meet the following requirements:

- Cylinders are tested and maintained as prescribed in the Shipping Container Specification Regulations of the Department of Transportation (29 CFR, part 173, and part 178);
- Cylinders of purchased breathing air have a certificate of analysis from the supplier that the breathing air meets the requirements for Type1-Grade D breathing air; and
- The moisture content in the cylinder does not exceed a dew point of -50 deg. F (-45.6 deg. C) at 1 atmospheric pressure.

We will ensure that compressors used to supply breathing air to respirators are constructed and situated so as to:

- Prevent entry of contaminated air into the air-supply system;
- Minimize moisture content so that the dew point at 1 atmospheric pressure is 10 degrees F (5.56 deg. C) below the ambient temperature;
- Have a suitable in-line air-purifying sorbent beds and filters to further ensure breathing air quality. Sorbent beds and filters will be maintained and replaced or refurbished periodically following the manufacturer's instructions.
- Have a tag containing the most recent change date and the signature of the person authorized by us to perform the change. The tag will be maintained at the compressor.

For compressors that are not oil-lubricated, we will ensure that carbon monoxide levels in the breathing air do not exceed 10 ppm.

For oil-lubricated compressors, we will use a high-temperature or carbon monoxide alarm, or both, to monitor carbon monoxide levels. If only high-temperature alarms are used, the air supply will be monitored at intervals sufficient to prevent carbon monoxide in the breathing air from exceeding 10 ppm.

We will ensure that breathing air couplings are incompatible with outlets for non-respirable worksite air or other gas systems. No asphyxiating substance will be introduced into breathing air lines.

We will use breathing gas containers marked in accordance with the NIOSH respirator certification standard, 42 CFR part 84.

9. Identification of Filters, Cartridges and Canisters

9.1 General. We will ensure that all filters, cartridges and canisters used in the workplace are labeled and color coded with the NIOSH approval label and that the label is not removed and remains legible.

10. Training and Communication

10.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

10.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

10.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

10.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Respirator User Training Outline/Recordkeeping Form (resp-06) is provided in the forms and supporting documents section.

A Respirator Program Administrator Training Outline Recordkeeping Form (resp-05) is provided in the forms and supporting documents section.

10.5 Content of Training. The training will consist of:

- Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;
- What the limitations and capabilities of the respirator are;
- How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;
- How to inspect, put on and remove, use, and check the seals of the respirator;
- What the procedures are for maintenance and storage of the respirator;
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators; and

- The general requirements of this section.

Training will be provided to our employees who wear respirators voluntarily as well. Training will comply with this section, except section 10.5 (above). The training session for voluntary respirator users will consist of the basic advisory information on respirators, as presented in the Supporting Forms & Documents.

The training will be conducted in a manner that is understandable to the employee.

10.6 Partial Exemption for Voluntary Users. Training requirements for employees who are designated as voluntary users are satisfied by providing them with appendix D of the OSHA respiratory protection program (29 CFR 1910.134), which can be found in the forms and supporting documents section, and is entitled Information for Voluntary Respirator Users (resp-01).

11. Program Evaluation

11.1 General. This section describes the procedures used in evaluating the workplace to ensure that the written respiratory protection program is being properly implemented, and to consult employees to ensure that they are using the respirators properly.

11.2 Employee Consultation. The Safety Program Coordinator will regularly consult employees required to use respirators to assess the employees' views on program effectiveness and to identify any problems.

Any problems that are identified during this assessment will be corrected. Factors to be assessed include, but are not limited to:

- Respirator fit (including the ability to use the respirator without interfering with effective workplace performance);
- Appropriate respirator selection for the hazards to which the employee is exposed;
- Proper respirator use under the workplace conditions the employee encounters;
- Proper respirator maintenance.

11.3 Workplace Surveillance. We understand that conditions and employees' exposures may change over the course of time. We will remain cognizant of the potential for contamination long after the initial implementation of this program. It may, at times, be appropriate to conduct atmospheric monitoring when there is reason to believe that exposure levels may have changed. These reasons may include:

- Employee complaints or report of illness.
- Changes in types of, or degrees of odor.
- Changes in production levels, techniques, materials, etc.
- Changes in the building or its ventilation system.

St. Paul Linoleum & Carpet Company

Right-to-Know/ Hazard Communication Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- The term "right to know" applies in Minnesota. "Hazard Communication" is a similar Federal regulation.
- The major difference is that the Federal Hazard communication rule applies only to chemical exposures, the Minnesota Right To Know regulation also applies to harmful physical agents and infectious agents.
- The employer must collect written Material Safety Data Sheets (MSDS) and make them available, ensure that all covered hazards are properly labeled and train employees.
- A written program is required.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
You may also visit OSHA's website to learn more.

Policy

St. Paul Linoleum & Carpet Company wishes all employees to have a safe and healthful workplace, free of recognized hazards. As a portion of our overall Health and Safety Program, we have developed the following employee Right-to-Know Program/Hazard Communication for the protection of our employees.

We will ensure that employees are aware of the hazards, controls of hazardous substances, harmful physical agents, or infectious agents to which they may be exposed during the course of routine work at. This will be accomplished through a program consisting of employee training, product labeling and Material Safety Data Sheets.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

This program applies to all work operations at St. Paul Linoleum & Carpet Company where employees may be exposed to hazardous substances, harmful physical agents, or infectious agents under normal working conditions or during a reasonably foreseeable emergency situation.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

"Appropriate Hazard Warning" means any words, pictures, symbols or combination thereof, which convey the hazards of a hazardous substance, harmful physical agent or infectious agent.

"Container" means any bag, barrel, bottle, box, can, cylinder, drum, reaction vessel, storage tank, or the like which contains a hazardous substance. Pipes, piping systems and pipelines are not considered to be containers.

"Harmful Physical Agent" means a physical agent (heat, noise, ionizing radiation or non-ionizing radiation) which present a significant risk to worker health or safety or imminent danger of death or serious physical harm to an employee.

"Hazardous Substance" means a chemical or substance, or mixture of chemicals or substances which:

- Is regulated by OSHA in title 29, part 1910, subpart Z.
- Is either toxic or highly toxic, an irritant, corrosive, a strong oxidizer, a strong sensitizer, combustible, flammable, dangerously reactive, pyrophoric, pressure generating, a compressed gas, a carcinogen, a teratogen, a mutagen, a reproductive toxic agent, or that otherwise, according to a generally accepted documented medical or scientific evidence, may cause substantial acute or chronic personal injury or illness, during, or as a direct result of any customary or reasonably foreseeable accidental or intentional exposure to the chemical or substance.
- Is determined by the commissioner as part of the standard for the chemical or substance or mixture of chemicals or substances to present a significant risk to worker health or safety or imminent danger of death or serious physical harm to an employee as a result of foreseeable use, handling, accidental spill, exposure or contamination.

"Infectious Agent" means a communicable bacterium, rickettsia, parasites, virus or fungus determined by the commissioner by rule, with approval of the commissioner of health, which according to documented medical or scientific evidence causes substantial acute or chronic illness or permanent disability as a foreseeable and direct result of any routine exposure to the infectious agent.

"Routinely Exposed" means reasonable potential for exposure exists during the normal course of assigned work. It includes the exposure of an employee to hazardous substance when assigned to work in an area where hazardous substance has been spilled. It does not include simple walkthrough of an area where a hazardous substance, harmful physical agent or infectious agent is present, or an assignment to work in an area where a container of hazardous substance is present but there is no actual exposure unless a spill should occur.

The Right-to-Know/ Hazard Communication Program

1. List of Hazardous Substances, Harmful Physical Agents and Infectious Agents

1.1 General. We have developed a listing of hazardous substances, harmful physical agents, infectious agents and related work practices.

A blank form for identifying these materials is provided in the Forms & Supporting Documents of this manual and is titled, Right to Know Exposure Table (rtk-01). The completed table is maintained in the designated section of this manual. As appropriate we will use the Environmental Health and Safety Product Screening Form (rtk-03).

The master listing of these Hazardous Materials is maintained with the Material Safety Data Sheets.

2. Material Safety Data Sheets

2.1 General. We maintain a file of Material Safety Data Sheets (MSDS) for information necessary for worker safety in conjunction with the Employee Right-to-Know standard. Copies of all MSDS are available at the location designated on the safety map or in the MSDS Inventory (msds-01).

2.2 Responsibility. Unless otherwise noted in this paragraph, the individual responsible for coordinating and managing MSDS can be found in the Who's Who Resource Directory. The Safety Program Coordinator and the Installation Coordinator are responsible for requesting, reviewing, and filing Material Safety Data Sheets. If any new material is to be ordered, an MSDS will be requested upon order of the material. Upon delivery of the material, a check will be made to identify if an MSDS has been supplied by the vendor.

2.3 Special Testing of Materials. Examples of special testing of materials include R&D use, evaluation or testing of vendor samples, or any other non-routine, non-permanent use. Only those products accompanied by an MSDS will be accepted for use. When possible MSDS and any other information pertaining to possible use should be obtained prior to any new product arriving on the property.

2.4 Retention of MSDS. In compliance with 29 CFR 1910.1020, MSDS will be retained for 30 years beyond the termination date of the last employee to be exposed to the hazardous substance. MSDS will be treated as exposure records and maintained in the company's archive files.

3. Labels and Other Forms of Warning

3.1 General. We will ensure through this program that all harmful physical agents, infectious agents, and all containers of hazardous substances in the workplace are properly labeled.

3.2 Responsibility. It is the responsibility of all employees to ensure all containers are properly labeled. Any employee who discovers an unlabeled container is responsible for ensuring that it is labeled immediately. When necessary, the Safety Program Coordinator and/or the Installation Coordinator will assist.

3.3 Labeling Harmful Physical Agents. Equipment or a work area that specifically generates harmful physical agents at a level which may be expected to approximate or exceed the permissible exposure limit will be labeled with:

- The name of the physical agent, and
- Appropriate hazard warning.

3.4 Labeling Hazardous Substances. Labels will consist of at least the name of the material, a hazard warning, and the name and address of the manufacturer, importer or other responsible party. An MSDS will be used to assist in verification of label information.

The following are exceptions to labeling requirements for hazardous substances only:

- If hazardous substances are transferred from a labeled container to another container intended for immediate use (use by one employee for a maximum of one shift) no label is required on the immediate use container.
- Pipes, piping systems and pipelines.

4. Training and Communication

4.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

4.2 Timing of Training. Employees will receive training when:

- They are initially assigned to an area, task or activity to which this program applies.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When employees' performance or other observation indicate a need for retraining.
- Refresher training will be provided annually.

4.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

4.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.

- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Right to Know Training Outline/Recordkeeping Form (rtk-02) is provided in the forms and supporting documents section.

4.5 Content of Training. At a minimum, training related to hazardous substances will include:

- The name or names of the substance, including the generic name, chemical name, trade name, or any other commonly used name.
- The level, if any, and if known at which exposure to the substance has been restricted (exposure limits, either enforced or recommended).
- The primary routes of entry and the known acute and chronic effects of exposure at hazardous levels.
- The known symptoms of effects.
- Any potential for flammability, explosion or reactivity of the substance.
- Appropriate emergency treatment.
- The known proper conditions for use of and exposure to the substance.
- Procedures for cleanup of leaks and spills.
- The name, phone number and address of the manufacturer of the hazardous substance.

At a minimum, training related to harmful physical agents will include:

- The name or names of the physical agent including any commonly used synonym.
- The level, if any, and if known at which exposure to the substance has been restricted (exposure limits, either enforced or recommended).
- The known acute and chronic effects of exposure at hazardous levels.
- The known symptoms of effects.
- Appropriate emergency treatment.
- The known proper conditions for use of and exposure to the physical agent.
- The name, phone number and address of the manufacturer of the hazardous substance.

At a minimum, training related to infectious agents will include:

- A general explanation of the epidemiology and symptoms of infectious diseases, including hazards to special at-risk employee groups.
- An explanation of the appropriate methods for recognizing tasks and other activities that may involve exposure to infectious agents, including blood and other infectious materials.
- An explanation of the chain of infection, or infectious disease process, including agents, reservoirs, modes of escape from reservoir, modes of transmission, modes of entry into host, and host susceptibility.

- An explanation of the exposure control plan.
- An explanation of the use and limitations of methods of controls that will prevent or reduce exposure, including universal precautions, appropriate engineering controls, and work practices, personal protective equipment, and housekeeping.
- An explanation of the basis for selection of personal protective equipment, including information on the types, proper use, location, removal, handling, decontamination, and disposal of personal protective equipment.
- An explanation of the proper procedures for cleanup of blood or bodily fluids.
- An explanation of the recommended immunization practices, including but not limited to, the HBV vaccine and our methodology for determining which employees will be offered the HBV, the efficacy, safety, and benefits of being vaccinated .
- Procedures to follow if an exposure incident occurs, method of reporting the incident information on the post exposure evaluation and medical follow up that will be available.
- Information on the appropriate actions to take and persons to contact in an emergency involving blood or other potentially infectious materials.
- An explanation of the signs, labels, tags, color codes, etc. used to denote biohazards.
- An opportunity for interactive questions and answers with the person conducting the training.
- An accessible copy of the regulatory text of the Right-to-Know standard.
- How to gain access to further information and reference material that must be made available in the workplace, including the location, contents and availability of pertinent materials that explain symptoms and effects of each infectious agent.

Training content may related to specific exposure hazards, the common hazards of a broad class of hazardous substances, harmful physical agents, infectious agents or the hazards of a complete production operation. However, specific information on individual hazardous substances or mixtures, harmful physical agents, and infectious agents will be provided to employees requesting it.

4.6 Training for Non-Routine Tasks. If employees are required to perform a hazardous non-routine task, special Right-to-Know training will be provided prior to the task beginning. The training will be provided by the Safety Program Coordinator, and/or Supervisor and it will inform employees of the hazards of the work/process and proper protective measures.

St. Paul Linoleum & Carpet Company

Safety Committee Program

The following summary information about this program area is provided so that we may continually monitor operations to determine if the need for this program changes in the future.

- Safety committees are currently only required in certain jurisdictions.
- These regulations usually establish requirements for the composition of the committee, frequency of meetings, training, recordkeeping and committee activities.
- There is requirement for a written safety committee program safety committee.

If you have questions regarding this topic, please contact Integrated Loss Control, Inc. at:
1-888-475-6525 or e-mail: ILC
There is no applicable OSHA standard for this program.

Policy

Employee participation and empowerment are important to the success of any workplace program. St. Paul Linoleum & Carpet Company understands that our employees, by virtue of their experience, are a valuable resource to the Health and Safety Program as a whole. Pursuant to this belief, we have established this Health and Safety Committee.

This program will be reviewed, at minimum annually, by the Safety Program Coordinator. The purpose of this review is to ensure its ongoing adequacy, effectiveness and accuracy, as well as to identify any opportunities for improvement. This will include a review of all policies, programs, procedures, training records and other available written materials which pertain to the program.

Applications & Definitions

We have established a Health and Safety Committee made up of representation of employees and management staff. This program provides a summary overview of the committee and its functions.

This program applies to temporary employees ("temps") and other such "non-employees" whose work is directed by us. For the purpose of the administration of this program, there will be no difference between our employees and temporary employees. The training and communication elements of this program will be fulfilled by the Safety Program Coordinator.

Contractors (electricians, plumbers, etc.) and visitors will also be required to comply with appropriate portions of this program. This program will be communicated to contractors and visitors by the Safety Program Coordinator.

The Safety Committee Program

1. Responsibilities and Authority of the Committee

1.1 General. This section defines the responsibilities of the safety committee members, as well as the responsibilities of the committee as a whole.

1.2 Management's Responsibilities. Management will provide the necessary staff, time and resources. They will work in the spirit of cooperation with employees to facilitate a team approach to health and safety both on and off the job, and provide training necessary to fulfill its task.

1.3 Committee Members' Responsibilities. Employees will provide representation of their coworkers in the spirit of cooperation with management to facilitate a team approach to health and safety both on and off the job.

1.4 Responsibility of the Committee. The major responsibility of the Committee is to work collectively as a team, assisting us in identifying, implementing, maintaining and promoting Health and Safety Programs, directed toward the prevention of injury and illness on and off the job. It also assists the company in its efforts to comply with federal, state, and company regulations and policies.

1.5 Authority. The committee, and its individual members, have no authority to implement policy, provide corrective or disciplinary action, expend funds, etc. The committee is solely an advisory group.

2. Committee Activities

2.1 General. The committee fulfills its responsibilities as outlined above by performing the following types of activities:

- Reports of personal property accidents/personal injury.
- Reports of allegedly hazardous conditions and safety suggestions.
- Conducting safety inspections.
- Assisting with the development and review of programs, procedures, hazard evaluations, etc.
- Review, conduct and/or participate in training sessions.
- Promote Health and Safety Programs.

2.2 Activities in Which the Committee Will Not Participate. For various reasons, there are some areas with which we believe the Health and Safety Committee should not be involved. Generally, these include areas which necessitate a given level of confidentiality. These topics may include medical testing, drug and alcohol testing, some types of accident investigations, disciplinary actions, etc..

If any employee, any member of the Health and Safety Committee, or any other person has concern that committee activities are inappropriate for the above reason, he/she should voice

his/her concern to a committee member, the General Manager, the Safety Program Coordinator, or the Installation Coordinator.

3. Composition of the Committee

3.1 General. The Committee members are selected from the major areas of activity within our operations.

The Committee will always have at least as many employee representatives as management representatives. However, both groups will always be represented on the committee.

The Committee membership can be rotated over a period of time.

4. Commitment Made by Members

4.1 General. The employees and management are committed to placing individuals on the Committee who have a desire and interest to work as a team toward attaining the safest possible work environment.

Employees and management are committed to open communication, training and access to applicable information so the committee can assist us in developing and maintaining a proactive Health and Safety Program.

All Committee agenda items must be limited to health and safety matters. All Committee recommendations will receive careful consideration. If a recommendation is not accepted, an explanation will be made to the Committee.

5. Training and Communication

5.1 General. This section describes how this program will be communicated to applicable employees, and how they will be trained in the required skills, procedures, etc. The optional use Training Matrix can provide a comprehensive tracking system.

5.2 Timing of Training. Members will receive training when:

- They initially join the committee.
- When changes in hazards, operations, materials, etc. make retraining appropriate.
- When special topics before the committee warrant it.

5.3 Responsibilities. The Safety Program Coordinator is responsible for ensuring that all appropriate employees receive the required training on a timely basis. At least annually, the Safety Program Coordinator, and the other appropriate staff, will review the training program to ensure its adequacy and identify opportunities for improvement.

In all cases, training will be conducted by a suitably qualified person.

5.4 Records. All employee training will be adequately documented. Training records will include:

- The names and job titles of all attendees.
- The name of the person conducting the training.
- The date, location and time of the session(s).
- A brief description or outline of the material discussed.

Training records will be maintained by the Safety Program Coordinator. All records of training will be maintained for a minimum of three years beyond the training date.

A Safety Committee Training Outline/Recordkeeping Form (comm-02) is provided in the training section.

5.5 Content of Training. The training session may consist of:

- Problem solving skills.
- Group dynamics.
- Hazard recognition.
- Training on technical subjects.

6. Committee Meetings and Inspections

6.1 General. The Committee will meet on a regularly scheduled basis. We retain the authority to change the frequency of the meetings, although in all cases, the Committee will meet at least quarterly. This decision will be based on accident/injury records, workers' compensation premium rates, employee input and the need to deal with special situations and issues regarding health and safety.

Analysis and recommendations of the Committee, whether they pertain to policy or practice, should be reviewed and confirmed by those with expertise when they related to specialized areas (example, electrical safety, exposure levels, etc.).

A suggested minutes template can be found in forms and supporting documents and is entitled Safety Committee Minutes Format (comm-01)

All Committee recommendations or reports are kept for a period of two years.