

Pages 138-163

Hard Hat Guidelines:

- This helmet will provide limited protection by reducing the force of falling objects that strike the top of the helmet.
- Inspect before each use and replace any components showing wear or damage.
- Replace helmet if subjected to a severe impact regardless of whether signs of damage are apparent or not.
- Never substitute a suspension of another model or manufacturer.
- Do not paint or clean with solvents or gasoline as these may weaken the shell.
- Clean only with mild soap and water.
- Do not store in direct sunlight or in a manner that applies continued pressure to the helmet shell as this can shorten the life of the helmet.
- Wearing head protection is one of the easiest ways to protect your head from injury.

Head Protection:

- SCS issued hard hats are mandatory for all SCS employees on all construction sites.
- Before wearing, perform an inspection of the hard hat including the suspension. Damaged hard hats shall be replaced immediately.
-

Specific colored hard hats will be issued to employees based on their position:

- HI-VIS – Construction Employees with less than 90 days employment
- Blue – Minors
- Yellow – Visitors
- White – Field
- Gray – Site Superintendents, Safety Specialist, Construction Leadership, Crew Leads
- Red – Other office staff

Exceptions to donning a hard hat are vehicles, SCS offices, job trailers, and buildings that are fully drywalled.

Security



Accidents

ACCIDENT REPORTING, INVESTIGATION & RECORD KEEPING

Purpose

To establish an accident reporting system consistent with governmental requirements, proper claims processing procedures and loss control practices.

Policy

It is the policy of S.C. Swiderski, LLC to voluntarily comply with all employee, worker and visitor accident, injury and illness reporting requirements established by OSHA, state workers compensation agencies and workers compensation insurance carriers.

When an accident occurs, first and foremost, prompt, and appropriate assistance must be provided to the individual(s) involved.

If the individual(s) involved require attention by a health care provider, the supervisor shall, if circumstances allow, complete the [RECORDABLE INJURY FORM](#) and / or [FORM WKC-12-E](#) to accompany the injured individual(s). In addition, a post-accident drug screen of urine and/or blood and breath shall also be required. Refer to the Post Accident/Incident Guidelines as listed in the Substance Abuse Prevention/Detection Program for further guidance.

If the individual(s) involved does not require attention by a health care provider and only requires first aid, the supervisor shall, if circumstances allow, complete the [NON RECORDABLE INJURY FORM](#) to accompany the injured individual(s). In addition, a post-accident drug screen of urine and/or blood and breath may also be required. Refer to the Post Accident/Incident Guidelines as listed in the Substance Abuse Prevention/Detection Program for further guidance.

ALL ACCIDENTS AND/OR INJURIES MUST BE COMMUNICATED IMMEDIATELY OR AS SOON AS CIRCUMSTANCES ALLOW TO THE

SAFETY & COMPLIANCE MANAGER AT: 534-626-0075.

- All employers are required to notify OSHA when an employee is killed on the job or suffers a work-related hospitalization, amputation, or loss of an eye. A fatality must be reported within 8 hours. An in-patient hospitalization, amputation, or eye loss must be reported within 24 hours.

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In addition, the Safety & Compliance Manager will notify the following:

- Corporate CEO
- Corporate COO
- Director of HR & Administration

OSHA 300 Logs

Using the Guidelines for Determining OSHA Recordability (Exhibit “D”), the Safety & Compliance Manager will review the accident, to determine recordability. The Safety & Compliance Manager is then responsible for entering an injury / illness on the OSHA 300 Log (Exhibit “E”).

What is Medical Treatment?

Medical treatment includes managing and caring for a patient for the purpose of combating disease or disorder (Exhibit “D”). The following are **not** considered medical treatments and are **NOT recordable**:

- Visits to a doctor or health care professional solely for observation or counseling.
- Diagnostic procedures, including administering prescription medications that are used solely for diagnostic purposes.
- Any procedure that can be labeled first aid.

Authorization for Medical Treatment Form

When an employee goes to a health care provider for a work-related injury or illness, an Attending Physician's Return to Work Recommendations Record Form (Exhibit “A”) shall accompany the employee.

The employee will not be allowed to return to work without a “Return to Work Release” from the health care provider.

First Aid Treatment vs. Insurance Carrier Notification

Not all injuries result in a Worker's Compensation claim. Each year thousands of injuries, such as scrapes, bruises and cuts receive nothing more than first aid treatment, result in no lost time and the employee recovers rapidly while continuing to work. However, some injuries do result in Worker's compensation claims and must be reported to the insurance carrier as quickly as possible. The following criteria may be used in determining which injury requires first aid treatment and which injury requires immediate notification to the insurance carrier.

First Aid Treatment

Injuries which commonly fall into the first aid treatment category (Exhibit “D”) that do not require insurance carrier notification are generally classified as those injuries which:

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- Are **not** required to be recorded on the OSHA 300 Log (See Exhibit “E”)
- Do **not** result in employee lost time.

Any time an injured employee begins seeing their personal health care provider, returns to a health care provider to have the injury treated a second time, or gives any indication

goes on company business . . . on official travel, on dispersed operations, or along regular routes (e.g. sales representatives, truck drivers, construction workers, field personnel, etc.).

Which Work-Related Injuries and Illnesses Should You Record?

Record those work-related injuries and illnesses that result in:

- Fatality
- Loss of consciousness
- Days away from work
- Restricted work activity, job transfer or termination of employment
- Medical treatment beyond first aid

You must also record work-related injuries and illnesses that are significant (as defined below) or meet any of the additional criteria listed below.

You must record any significant work-related injury or illness that is diagnosed by a physician or other licensed health care professional. You must record any work-related case involving cancer, a fractured or cracked bone, or a punctured eardrum. See 29 CFR 1904.7.

What are the Additional Criteria?

You must record the following conditions when they are work-related:

- Any needlestick injury or cut from a sharp object that is contaminated with another person's blood or other potentially infectious material.
- Any case requiring an employee to be medically removed under the requirements of an OSHA health standard.
- Tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional after exposure to a known case of active tuberculosis.

While most of the above are clear cut and easily understood, "all work-related injuries requiring medical treatment beyond first aid" forces you to make the decision concerning recordability. In this category, recordable and non-recordable injuries are only distinguishable by the actual treatment provided. That is, if the injury required medical treatment as opposed to first aid treatment, it is recordable. If, on the other hand, the injury is such that only first aid treatment is required, regardless of who applies the first aid, it is not a recordable incident.

SIGNIFICANT DIAGNOSED INJURY OR ILLNESS

- Any serious or significant work-related disorder that is diagnosed by a physician or other licensed health care provider or identified by a positive medical test. These include work-related cases involving cancer, chronic irreversible disease, a fractured or a cracked bone or a punctured eardrum.

CLASSIFYING INJURIES

An injury is any wound or damage to the body resulting from an event in the work environment.

Examples: Cut, puncture, laceration, abrasion, fracture, bruise, contusion, chipped tooth, amputation, insect bite, electrocution, or a thermal, chemical, electrical or radiation burn. Sprain and strain injuries to muscles, joints and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.

CLASSIFYING ILLNESSES

- **Skin Diseases or Disorders** are illnesses involving the worker's skin that are caused by work exposure to chemicals, plants, or other substances. Examples: Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants, oil acne, friction blisters, chrome ulcers, inflammation of the skin.
- **Respiratory Conditions** are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes at work. Examples: silicosis, asbestosis, pneumonitis, pharyngitis, rhinitis or acute congestion; farmer's lung, beryllium disease, tuberculosis, occupational asthma, reactive airways dysfunction syndrome (RADS), chronic obstructive pulmonary disease (COPD), hypersensitivity pneumonitis, toxic inhalation injury, such as metal fume fever, chronic obstructive bronchitis and other pneumoconiosis'.
- **Poisoning** includes disorders evidenced by abnormal concentrations of toxic substances in blood, other tissues, other bodily fluids, or the breath that are caused by the ingestion or absorption of toxic substances into the body. Examples: Poisoning by lead, mercury, cadmium, arsenic or other metals; poisoning by carbon monoxide, hydrogen sulfide or other gases; poisoning by benzene, benzol, carbon tetrachloride or other organic solvents; poisoning by insecticide sprays, such as parathion or lead arsenate; poisoning by other chemicals such as formaldehyde.
- **All Other Occupational Illnesses** Examples: heatstroke, sunstroke, heat exhaustion, heat stress and other effects of environmental heat; freezing, frostbite, and other effects of exposure to low temperatures; decompression sickness; effects of ionizing radiation (isotopes, x-rays, radium); effects of non-ionizing

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radiation (welding flash, ultra-violet rays, lasers); anthrax; bloodborne pathogenic diseases, such as AIDS, HIV, hepatitis B or hepatitis C; brucellosis; malignant or benign tumors; histoplasmosis; coccidioidomycosis.

Form approved OMB no. 1218-0176

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Year 20__

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

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you make for each category. Then write the totals below, making sure you've added the entries from every page of the Log. You do not need to enter "0" if there are no cases.

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
(a) _____	(b) _____	(c) _____	(d) _____

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
(e) _____	(f) _____

Injury and Illness Types

Total number of... (M)	(N)
Injuries	(1) Poisonings _____
	(2) Hearing loss _____
Skin disorders	(3) All other illnesses _____
Respiratory conditions	_____

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

Public reporting burden for this collection of information is estimated to average 10 minutes per response, including time to review the instructions, search existing data sources, gathering the data needed, and reviewing and collecting the information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Washington Headquarters Service, Paperwork Project (0182-0001), Washington, DC 20503-2907. OSHA Form 300A (Rev. 01/2004)

Establishment Information

Your establishment name _____

Street _____

City _____ State _____ ZIP _____

Industry description (e.g., Manufacturer of inner tube machine) _____

Standard Industrial Classification (SIC), if known (e.g., 3712) _____

OR _____

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

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

Annual average number of employees _____

Total hours worked by all employees last year _____

Sign here

Knowingly falsifying this document may result in a fine.

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

Company executive _____
(Signature) _____
Title _____

3. Names and departments of the people making up the Exposure Control Committee. **Human Resources, General Superintendent, and Safety & Compliance Manager**
4. Name of the person who has been selected to be your facility's Education/Training Coordinator. **Human Resources and Safety & Compliance Manager**
5. Locations within your facility where copies of your Exposure Control Plan are kept and are accessible to employees. **Safety & Compliance Manager, General Superintendent, and in all Foremen and Superintendents' Safety Boxes**
6. The name of the person responsible for maintaining and updating the lists of job classifications and tasks/procedures in which occupational exposure to bloodborne pathogens occurs. **Human Resources**
7. The date on which your facility began practicing Universal Precautions.
09/02/2014
8. The name of the person or department who is responsible for overseeing your facility's Universal Precautions Program. **Safety & Compliance Manager**
9. The name of the person responsible for overseeing Engineering Controls in your facility. **Safety & Compliance Manager**
10. The date on which your "Engineering Controls Survey" was completed.
N/A
11. The interval (in months) between reviews of your facility's Engineering Controls.
N/A
12. The name of the person responsible for making sure personal protective equipment is available in all appropriate locations. **Superintendent**
13. The name of the person responsible for making sure personal protective equipment is available in all appropriate locations. **Superintendent**
14. The name of the person or department responsible for the disposal of contaminated personal protective equipment. **Superintendent**
15. The name of the person responsible for setting up and carrying out your facility's Cleaning and Decontamination Schedule. **Superintendent**
16. The name of the person or department responsible for the collection and handling of your facility's contaminated waste. **Superintendent**
17. The name of the person or department responsible for setting up and operating your facility's Hepatitis B Vaccination Program. **Human Resources**
18. The date that your Hepatitis B Vaccination program started. N/A
19. The name of the person or department who investigated all "exposure incidents".
Safety & Compliance Manager and Human Resources
20. The names of the people in your facility who oversee your Post-exposure Evaluation and Follow-up Process. **Human Resources**
21. The name of the person or department responsible for setting up and maintaining employee medical records. **Human Resources**
22. The name of the person or department responsible for setting up and maintaining your facility's biohazard labeling program. **Safety & Compliance Manager**

23. The name of the person responsible for overseeing your facility's employee training program. **Safety & Compliance Manager**
24. The names of the persons responsible for assisting with your employee training program. **Human Resources**

"Reshoring" means the construction operation in which shoring equipment (also called reshores or reshoring equipment) is placed, as the original forms and shores are removed, in order to support partially cured concrete and construction loads.

"Shore" means a supporting member that resists a compressive force imposed by a load.

"Vertical slip forms" means forms which are jacked vertically during the placement of concrete.

Jacking operation means the task of lifting a slab (or group of slabs vertically from one location to another (e.g., from the casting location to a temporary (parked) location, or to its final location in the structure), during the construction of a building/structure where the lift-slab process is being used.

Construction Loads

No construction loads shall be placed on a concrete structure or portion of a concrete structure unless the employer determines, based on information received from a person who is qualified in structural design, that the structure or portion of the structure is capable of supporting the loads.

Reinforcing Steel

All protruding reinforcing steel, onto and into which employees could fall, shall be guarded to eliminate the hazard of impalement.

Post-Tensioning Operations

No employee (except those essential to the post-tensioning operations) shall be permitted to be behind the jack during tensioning operations.

Signs and barriers shall be erected to limit employee access to the post-tensioning area during tensioning operations.

Riding Concrete Buckets

No employee shall be permitted to ride concrete buckets.

Working Under Loads

No employee shall be permitted to work under concrete buckets while buckets are being elevated or lowered into position.

To the extent practical, elevated concrete buckets shall be routed so that no employee, or the fewest number of employees, are exposed to the hazards associated with falling concrete buckets.

Personal Protective Equipment

Concrete Buckets

Concrete buckets equipped with hydraulic or pneumatic gates shall have positive safety latches or similar safety devices installed to prevent premature or accidental dumping.

Concrete buckets shall be designed to prevent concrete from hanging up on top and the sides.

Tremies

Sections of Tremies and similar concrete conveyances shall be secured with wire rope (or equivalent materials) in addition to the regular couplings or connections.

Bull Floats

Bull float handles used where they might contact energized electrical conductors, shall be constructed of nonconductive material or insulated with a nonconductive sheath that's electrical and mechanical characteristics provide the equivalent protection of a handle constructed of nonconductive material.

Masonry Saws

Masonry saw shall be guarded with a semicircular enclosure over the blade.

A method for retaining blade fragments shall be incorporated in the design of the semicircular enclosure.

Lockout/Tagout procedures

No employee shall be permitted to perform maintenance or repair activity on equipment (such as compressors mixers, screens or pumps used for concrete and masonry construction activities) where the inadvertent operation of the equipment could occur and cause injury, unless all potentially hazardous energy sources have been locked out and tagged.

Tags shall read "Do Not Start" or similar language to indicate that the equipment is not to be operated.

General Requirements for Formwork

Formwork shall be designed, fabricated, erected, supported, braced, and maintained so that it will be capable of supporting without failure all vertical and lateral loads that may reasonably be anticipated to be applied to the formwork. Formwork, which is designed,

The single post shores shall be vertically aligned.

Precast concrete wall units, structural framing, and tilt-up wall panels shall be adequately supported to prevent overturning and to prevent collapse until permanent connections are completed.

Lifting inserts which are embedded or otherwise attached to tilt-up precast concrete members shall be capable of supporting at least two times the maximum intended load applied or transmitted to them.

Lifting inserts which are embedded or otherwise attached to precast concrete members, other than the tilt-up members, shall be capable of supporting at least four times the maximum intended load applied or transmitted to them.

Lifting hardware shall be capable of supporting at least five times the maximum intended load applied transmitted to the lifting hardware.

No employee shall be permitted under precast concrete members being lifted or tilted into position except those employees required for the erection of those members.

Lift-slab operations

Lift-slab operations shall be designed and planned by a registered professional engineer who has experience in lift-slab construction. Such plans and designs shall be implemented by the employer and shall include detailed instructions and sketches indicating the prescribed method of erection. These plans and designs shall also include provisions for ensuring lateral stability of the building/structure during construction.

Jacks/lifting units shall be marked to indicate their rated capacity as established by the manufacturer.

Jacks/lifting units shall not be loaded beyond their rated capacity as established by the manufacturer.

Jacking equipment shall be capable of supporting at least two and one-half times the load being lifted during jacking operations and the equipment shall not be overloaded. For the purpose of this provision, jacking equipment includes any load bearing component which is used to carry out the lifting operation(s). Such equipment includes, but is not limited, to the following: threaded rods, lifting attachments, lifting nuts, hook-up collars, T-caps, shear-heads, columns, and footings.

Jacks/lifting units shall be designed and installed so that they will neither lift nor continue to lift when they are loaded more than their rated capacity.

Jacks/lifting units shall have a safety device installed which will cause the jacks/lifting units to support the load in any position in the event any jack lifting unit malfunctions or loses its lifting ability.

Jacking operations shall be synchronized in such a manner to ensure even and uniform

(This appendix is non-mandatory)

In paragraph 1926.705(k), OSHA requires employees to be removed from the building/structure during jacking operations unless an independent registered professional engineer, other than the engineer who designed and planned the lifting operation, has determined that the building/structure has been sufficiently reinforced to insure the integrity of the building/structure. One method to comply with this provision is for the employer to ensure that continuous bottom steel is provided in every slab and in both directions through every wall or column head area. (Column head area means the distance between lines that are one and one-half times the thickness of the slab or drop panel. These lines are located outside opposite faces of the outer edges of the shear-head sections - See Figure 1). The amount of bottom steel shall be established by assuming loss of support at a given lifting jack and then determining the steel necessary to carry, by catenary action over the span between surrounding supports, the slab service dead load plus any service dead and live loads likely to be acting on the slab during jacking. In addition, the surrounding supports must be capable of resisting any additional load transferred to them because of the loss of support at the lifting jack considered.

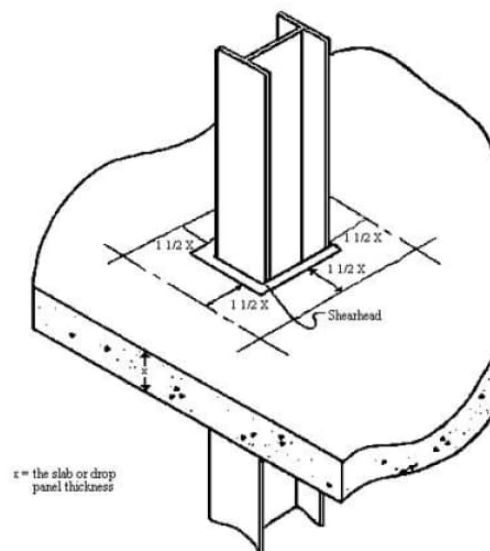


Figure 1- - Column Head Area

Confined Spaces

Purpose

Periodic site visits will be conducted at various job sites to ensure compliance with established guidelines, procedures, and applicable regulations.

2. **Managers, Supervisors, and/or Foremen** shall be responsible for ensuring compliance with the provisions of this plan by ensuring that:
 1. Those employees under their direct control are properly trained.
 2. All necessary equipment is present at the job site and is in safe working order.
 3. All employees follow all procedures outlined in this plan.
 4. A complete site hazard assessment is completed prior to commencement of work to ensure that adequate safety precautions and equipment are taken.
 5. Will report unknown/new exposure situations to the Safety Manager.
3. **Employees** have the responsibility to have awareness of the protection requirements for their work areas. Employees are responsible for wearing the appropriate protective equipment according to proper instructions and maintaining the equipment in a clean, sanitary and operable condition. It is also the responsibility of the employee to follow all established and communicated safety guidelines.
4. **The On-Site Supervisor** will be responsible for obtaining the sub-contractor's Confined Space Entry Program where applicable.
5. **Any employee** that willfully disregards company and/or governmental regulations may be subject to disciplinary actions, up to and including termination.

CONFINED SPACE DEFINITION

Entry into a confined space is considered to have occurred as soon as any part of the entrant's body breaks the plane of an opening into the confined space. For the purpose of this program, Confined Space Entry (CSE) shall mean entry for the purpose of performing any type of work activities into any space or area. A confined space meets the following criteria:

1. *Is large enough and so configured that an employee can bodily enter and perform assigned work.*
2. *Has limited means of entry and exit.*
3. *Is not designed for continuous employee occupancy.*

Examples:

Attics, Boilers, Degreasers, Equipment Rooms, Furnaces, Pipelines, Pits, Pumping Stations, Reaction or Process Vessels, Mills, Septic Tanks, Sewage Digesters, Silos, Storage Tanks, Barges, Sewers, Utility Vaults, Shafts, Caissons.

A **permit-required confined space** will also have one or more of the following characteristics:

1. Does not have adequate natural or mechanical ventilation and contains or has the potential to contain a hazardous atmosphere by the presence of flammable

REQUIREMENTS FOR THE ENTRANT

A confined space is entered when any part of the body crosses the plane of the space opening.

1. Recognize the hazards that may be faced during entry, including information on the route of entry, signs or symptoms and consequences of exposure.
2. Properly use all safety and personal protection equipment.
3. Maintain communication with the attendant as necessary to enable the attendant to monitor entrant status and to enable the attendant to alert entrants of the need to evacuate the space. Communication procedures must be established before entering the space.
4. Keep lifelines orderly and untangled within the confined space.
5. May wear on his/her person an air monitor and perform continuous atmospheric monitoring in the confined space for oxygen content, presence of a flammable atmosphere and the presence of toxic when applicable.
6. Alert the attendant whenever:
 1. The entrant recognizes any warning sign or symptom of exposure to a dangerous situation.
 2. The entrant detects a prohibited condition.
 3. Exit from the permit space as quickly as possible whenever:
7. An order to evacuate is given by the attendant or the entry supervisor.
8. The entrant recognizes any warning sign or symptom to a dangerous situation.
9. The entrant detects a prohibited condition.
10. An evacuation alarm is sounded.

REQUIREMENTS FOR THE ATTENDANT

1. Must be aware of the hazards that may be faced during entry, including information on the route of entry, signs or symptoms and consequences of the exposure such as behavioral effects to the entrants.
2. Post warning signs at the confined space to warn of the dangers involved, e.g. **"DANGER - PERMIT REQUIRED CONFINED SPACE, DO NOT ENTER"**.
3. Continuously maintain an accurate count and identification of authorized entrants in the permit space.
4. **Does not leave the confined space entrance while the entrants are in the space.** If the attendant must leave the opening of the confined space, another properly trained attendant must replace the attendant, or the entrant must leave the confined space.
5. **Must maintain visual and/or verbal communication with authorized entrants** as necessary to monitor entrant's status and to alert entrants of the need to evacuate the space.

6. May continuously monitor the atmosphere of the confined space for oxygen content, presence of a flammable atmosphere, and the presence of a toxic when applicable.
7. Monitors activities inside and outside the space to determine if it is safe for entrants to remain in the space and orders the authorized entrants to evacuate

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