

NAVSEA
STANDARD ITEM

FY-24

ITEM NO: 009-74
DATE: 25 OCT 2022
CATEGORY: I

1. SCOPE:

1.1 Title: Occupational, Safety and Health Plan; accomplish

2. REFERENCES:

2.1 Standard Items

2.2 29 CFR Part 1915, Occupational Safety and Health Standards for Shipyard Employment

2.3 29 CFR Part 1910.67, Vehicle-Mounted Elevating and Rotating Work Platforms

2.4 Safe Work Practices for Marine Hanging Staging: An OSHA Guidance Document, April 2005

2.5 Joint Fleet Maintenance Manual (JFMM)

2.6 S0400-AD-URM-010/TUM, Tag-Out User's Manual

2.7 S9086-KC-STM-010/CH-300, Electric Plant – General

2.8 29 CFR Part 1904.7, Recording and Reporting Occupational Injuries and Illness, General Recording Criteria

3. REQUIREMENTS:

3.1 Establish, document, implement, and maintain a written Occupational Safety and Health Plan appropriate for the work to be accomplished. Provide a copy of the Occupational Safety and Health Plan to the SUPERVISOR upon request. At a minimum, the Occupational Safety and Health Plan must include the following elements:

3.1.1 Method(s) of communicating potential hazards, prior to the start of any task, to contractor's employees, subcontractor employees, and other potentially affected personnel.

3.1.1.1 Hazards to be addressed must include but not be limited to emergency evacuation and muster policy, confined space, and energy control.

3.1.2 A process for performing a Job Safety Analysis/Job Hazard Analysis (JSA/JHA) for:

3.1.2.1 Processes and equipment new to the worksite.

3.1.2.2 Existing processes and equipment that have been involved in mishaps or near misses.

3.1.2.3 Maintain a copy of each JSA/JHA which must be available for review by the SUPERVISOR upon request.

3.1.3 A process for identification, communication, abatement, and prevention of unsafe conditions and work practices.

3.1.4 Method(s) to account for employees and subcontractors working in isolated areas, e.g. Confined spaces.

3.1.5 Method(s) to ensure work areas and walkways are adequately illuminated.

3.1.6 Method(s) to establish and maintain good housekeeping practices.

3.1.7 Method(s) to ensure that medical services and first aid are readily accessible.

3.1.8 Method(s) to provide adequate and readily accessible sanitation facilities.

3.1.9 A process for notifying the Quarterdeck and initiating emergency response.

3.2 Update the Safety Plan as circumstances warrant or at the request of the SUPERVISOR.

3.3 Provide a Safety Point of Contact to the SUPERVISOR before each project.

3.4 Provide appropriate Personal Protective Equipment (PPE) for employees and monitor utilization in accordance with 2.2.

3.5 Mark or tag material and equipment brought aboard naval facilities and vessels. Marking or tags must endure the repair process, and must stay attached and/or be readable until the material or equipment is dismantled.

3.5.1 Marking/tags must display the company name, point of contact, phone number, item description and contents.

3.6 Provide the SUPERVISOR a complete list of subcontractors (e.g., company name) hired by the contractor prior to subcontractor(s) commencing work aboard naval facilities or vessels.

3.6.1 Contractor must monitor, inspect, oversee, and abate hazardous or deficient conditions related to the conduct and work practices of subcontractor(s).

3.7 Ensure Material Handling Equipment (MHE) is operated and maintained in accordance with 2.2 and manufacturer's specifications. Ensure Aerial Work Platforms (AWP) are operated and maintained in accordance with 2.3 and manufacturer's specifications.

3.7.1 Ensure operators of MHE and AWP meet applicable training and licensing requirements and provide documentation to the SUPERVISOR upon request.

3.7.2 Ensure operators conduct a daily operational check of the MHE or AWP before use.

3.7.2.1 Maintain copies of the daily operational checks for the duration of the performance period of the prime contract and provide copies to the SUPERVISOR upon request.

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3.8 Each employee must have a flashlight or other adequate light source onboard a navy vessel.

3.9 Notify personnel of lifting operations by audible alerts during crane operations (e.g., whistles or horns). Audible alerts must be utilized throughout the lifting evolution.

3.10 Comply with the fall protection requirements of 2.2.

3.11 Scaffolding must be built, maintained, and dismantled in accordance with 2.4 and manufacturer's specifications or under the direction of a Professional Engineer.

3.11.1 Provide manufacturer's specifications to the SUPERVISOR upon request.

3.11.2 Tag all scaffolding. Tags must endure the repair process, and must stay attached and be readable.

3.11.2.1 Tags must display the stage of completion, scaffold load capacity, and availability for use.

3.11.3 Erect scaffolding so that a swing gate is installed at each working level accessed by a ladder.

3.11.4 Ensure marine hanging scaffolding meets the guidance provided in 2.4.

3.11.5 When there is a danger of tools, materials, or equipment falling from a scaffold and striking employees below during the erection, dismantling, or altering of scaffolding, the area below the scaffold to which objects can fall must be barricaded and adequately identified with signs and danger tape. Employees not involved with the scaffolding operation must not be permitted to enter the hazard area.

3.12 Ensure protective measures are taken in accordance with 2.2 before creating a deck opening or an unguarded edge.

3.12.1 Deck openings and unguarded edges must not be left unprotected for any amount of time.

3.13 Notify the SUPERVISOR and accomplish the requirements of 2.2, Volume IV, Chapter 10 of 2.5, and 2.6 prior to working aloft.

3.13.1 Accomplish the requirements of the vessel's work aloft instruction and utilize the vessel's working aloft request form.

3.13.1.1 The vessel's working aloft request form must be routed in accordance with the ship's aloft instruction for permission for working over the side or in aloft zones. Do not enter aloft zones or be suspended over the side by a crane without first obtaining written permission from the Officer of the Deck (OOD) in the form of working aloft request form.

3.13.1.2 Verify that the working aloft request form is active prior to going aloft each time.

3.13.2 Provide and use personal fall arrest system (PFAS), working lanyard, and climber safety device when going aloft where a climber safety rail is installed. If a climber safety rail is not installed, use a double lanyard configuration.

3.13.3 In the absence of a properly guarded work platform, position a safety observer on deck near the work being performed. The safety observer must keep the deck area beneath the work aloft free of unnecessary personnel.

3.13.4 In case of an emergency, the safety observer must notify the Quarterdeck or emergency services.

3.14 Accomplish safety precautions as specified in 2.7 for work on electrical/electronic circuits and equipment.

3.14.1 Obtain written authorization from the ship's Commanding Officer before testing or entering components which are energized at a value greater than 30 volts.

3.15 Notify the vessels Quarterdeck and the Supervisor immediately by verbal means of each incident (accident causing damage to vessel, injury meeting the requirements of Ref 2.8, flooding, and electric shock) which occurred, or is occurring on the vessel, dry dock where a naval vessel is docked or a pier/berth where the vessel is moored.

3.15.1 Secure and preserve the scene until released by the SUPERVISOR.

3.15.2 Submit one legible copy, in approved transferrable media, of a formal written report, Attachment A, of the incident to the SUPERVISOR within one day of each accident requiring medical treatment, each electrical shock, or any incident when requested by the SUPERVISOR. Provide daily updates within one day upon request by the SUPERVISOR, until the final report is submitted. The written report must contain the name of each injured person, date and time of incident, extent of each personal injury or property damage, contractor/subcontractor name, Job Order/Work Item Number, type of incident, location of event (ship name and hull number, space, compartment), a brief description of the event including occurrences leading up to the incident, equipment involved, Contract Number, witness and/or individuals involved, short term and long term corrective action, and root cause analysis.

3.16 Repair and maintenance employees working aboard vessels, dry docks and piers must have a valid 10 hour OSHA Maritime Shipyard Employment Course or NAVSEA-approved equivalent completion card within 60 days of employment.

3.16.1 Submit one legible copy, in hard copy or approved transferrable media, of a report listing employees who have completed training required by 3.16 to the SUPERVISOR upon request.

3.16.2 The authorized maritime trainer must have successfully completed the OSHA 5400 trainer course in occupational safety and health standards for the maritime industry. The authorized maritime trainer must have a current OSHA Training Institute ID number and must follow the OSHA outreach training program guidelines.

3.16.3 Maintain current copies of the training documents required by the guidelines for reference by the SUPERVISOR. Submit one legible copy in approved transferrable media when requested by the SUPERVISOR.

3.17 The use of tobacco products (cigarettes, cigars, smokeless tobacco, electronic cigarettes, and electronic nicotine delivery systems) is prohibited onboard vessels, adjacent piers and dry docks, except in designated areas.

3.18 Food and beverages (excluding water and “hydration supplements,” e.g., Gatorade) must not be permitted aboard vessels, except in areas designated by the SUPERVISOR.

3.19 Property taken onboard, such as bags and tool boxes, must be identified to include organization name, employee name and badge number.

3.20 Label compressed gas cylinders or cylinder storage racks with company name or unique identifier.

3.20.1 Secure all compressed gas cylinders in a cylinder rack.

3.20.2 Compressed gas cylinders must not be secured to pier or vessel structures.

3.20.3 Secure all compressed gas cylinders for transportation by pallet or cylinder rack.

3.21 Submit a written request to use Ship’s Force services (e.g., air, water and electrical power). Request must include rationale for deviation, duration of use, and type and description of equipment that will be utilizing ship’s services.

3.21.1 Submit one legible copy, in approved transferrable media, of each request to the SUPERVISOR.

3.22 Comply with the requirements of 2.2 and 2.10 while operating a crane, multi-purpose machine, and material handling equipment that may be used in a crane-like application to lift a suspended load.

3.22.1 Report immediately to the SUPERVISOR, crane, multi-purpose machine, and material handling equipment that may be used in a crane-like application accidents on the vessel, in the dry dock or adjacent pier while at a non-government facility.

4. NOTES:

4.1 The term “medical treatment” is defined in 2.8.

4.2 Requests for deviations/waivers of training requirements will only be approved by NAVSEA and on a case-by-case basis. This includes equivalent training for foreign nationals.

4.3 The term “repair and maintenance employee” is defined as one whose employment relates to or is in conjunction with ship repairing, shipbuilding, or shipbreaking work, including, but not restricted to, inspection, testing, and employment as a fire watch. This excludes employees who provide incidental services that do not influence shipyard employment such as delivery services.

4.4 A "quick disconnect" is a coupling or connecting device/system designed to permit easy and immediate separation of lines without the use of tools and to ensure the contents do not escape.

4.5 Cards that have an expiration date after April 1, 2019 are valid.

4.6 OSHA 5400 trainers meet the requirement of 3.16.

4.7 When a Fact Finding Report is directed in accordance 009-120 of 2.1, complete initial submission of Attachment A as directed by this Standard Item, report corrective action and root cause analysis in accordance with 009-120 of 2.1.

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ATTACHMENT A
FOR OFFICIAL USE ONLY

INCIDENT REPORT		
Report #		
INITIAL REPORT <input type="checkbox"/>	REQUESTED UPDATE <input type="checkbox"/>	FINAL REPORT <input type="checkbox"/>

<u>TYPE OF INCIDENT:</u> <u>NAME(S) OF INJURED (if applicable):</u>	
<u>INCIDENT DATE:</u> <u>TIME:</u> <u>LOCATION OF INCIDENT:</u>	<u>COMPANY:</u> <u>SUPERVISOR:</u> <u>TYPE OF INJURY OR FIRE:</u>
<u>CAUSE OF INCIDENT:</u>	<u>EQUIPMENT INVOLVED:</u>
<u>WORK ITEM NUMBER:</u>	<u>CONTRACT NUMBER:</u>

WITNESS AND/OR INDIVIDUALS INVOLVED

NAME(S)	DEPT.	COMPANY

DESCRIPTION OF INCIDENT

DISPOSITION OF INJURED (if applicable)

IMMEDIATE CORRECTIVE ACTION

ATTACHMENT A
FOR OFFICIAL USE ONLY

INVESTIGATED BY (NAME):	TITLE:
SIGNATURE OF INVESTIGATOR:	DATE:
INCIDENT REPORT	
Report #	

LONG TERM CORRECTIVE ACTION

ROOT CAUSE ANALYSIS

ATTACHMENT A
FOR OFFICIAL USE ONLY

INVESTIGATED BY (NAME):	TITLE:
SIGNATURE OF INVESTIGATOR:	DATE:

Incident Report Instructions

REPORT NUMBER- Unique tracking number created by contractor

TYPE OF INCIDENT- Injury, fire or near miss

NAME(S) OF INJURED- Self Explanatory

INCIDENT DATE: - Self Explanatory

TIME: - Self Explanatory

COMPANY: - Prime and subcontractors involved

SUPERVISOR – Supervisor of employee(s) involved

LOCATION OF INCIDENT: - Base/Yard, Ship name and hull number, space number and compartment name

TYPE OF INJURY OR FIRE – i.e. broken arm, laceration to head or Class A, B, C fires, smoldering

CAUSE OF INJURY – i.e. Equipment failure, PPE, process

ATTACHMENT A
FOR OFFICIAL USE ONLY

EQUIPMENT INVOLVED – Equipment working on and equipment being used to cause incident

WORK ITEM NUMBER – Work Item being accomplished when incident occurred

CONTRACT NUMBER: - Contract Number assigned by government agency i.e. RMC, Alteration Installation Team (AIT) Sponsor.

WITNESS AND/OR INDIVIDUALS INVOLVED – Name, company of witnesses and or individuals involved with the incident.

DESCRIPTION OF INCIDENT OR NEAR MISS – Short description of events leading up to incident and extent of injuries and or damage to equipment.

DISPOSITION OF INJURED – i.e. Transported to hospital via ambulance or POV, transported to clinic, released from hospital, name of hospital or clinic, limited duty or loss time (if known).

IMMEDIATE CORRECTIVE ACTION – i.e. Scene/space secured, ship notified (who and when), RMC notified (who and when) clean up of blood, equipment secured fire debris cleaned up.

INVESTIGATED BY – Self Explanatory.

TITLE – Self Explanatory.

SIGNATURE OF INVESTIGATOR – Self Explanatory.

DATE – Self Explanatory.

LONG TERM CORRECTIVE ACTION – What action(s) were taken so that incident does not reoccur, i.e. training, safety stand down or process/policy change.

ROOT CAUSE ANALYSIS – Process by which you will identify the cause or contributing factors of the incident.

Note: Attach additional information as necessary.