

NAES STANDARD OPERATING PROCEDURE

Public Safety Department (OSH Division)

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1.0 PURPOSE

Inspection of work areas and audits of Explosive safety programs are tools that can be used to identify problems and hazards before these conditions result in accidents or injuries. Assessments also help to identify the effectiveness of the explosive safety program management and can be used as a guide to assure regulatory compliance and a safe workplace. A comprehensive Explosive Safety Self-assessment will be conducted annually of all NAES Safety programs by the Explosive Safety Officer, Weapons Officer and his staff and Physical Security personnel to ensure compliance with applicable Department of Defense, Department of the Navy and Federal Safety & Health Regulations.

2.0 APPLICATION

This SOP applies to the development of annual Self Assessments for the OSH program.

3.0 REFERENCES

OPNAVINST 5100.23E

4.0 PROCEDURES

1. Explosives Safety Management

- Design and schedule self-assessments audits and inspection procedures for all explosive areas, processes and procedures.
- Conduct routine audits and inspections
- Ensure audits are conducted by employees who understand the various safety programs and policies

2. Supervisors

- Conduct informal daily safety inspections and ensure all unsafe conditions are corrected
- Assist in formal inspections scheduled by the OSH staff and ensure all unsafe conditions are corrected

3. Corrections - All safety deficiencies found during audits and inspections should be corrected as soon as possible. Documentation of corrections should be made on the OPNAV Form 5100/12 section B of the inspection sheet. And conditions that present hazards are to be corrected or controlled immediately. A copy via email shall be forwarded to the Public Safety Department, OSH Division Code 8.4.1 Building # 5. Plan of Actions and Milestones (POA&M) may be used to track long-term projects and aid the OSH office in tracking the status of program deficiencies.

4. Types of Inspections

a. **Supervisor & Management Daily Walk-through:** this is an undocumented inspection that is made daily prior to startup and shift change to ensure the facility and equipment are in safe conditions for Employees. All noted unsafe areas are placed in a safe condition prior to Employees working in the area.

b. **Formal NAVOSH Inspections** are conducted and recorded with a supervisor or his representative. This documented inspection provides a focus to ensure current hazard controls are still effective, equipment is in safe condition and safe work practices are in use. Discrepancies are listed on the 5100/12 inspection sheet, recorded on work requests or service calls for Public Works correction. The inspection sheet is forwarded to the Safety Manager for review and logging to track discrepancy correction.

c. **Higher Authority Inspections** may be conducted by local, state and federal agencies such as OSHA, EPA, NJDEP, NAVAIR HQ and the Department of the Navy Naval Oversight and Inspection Unit (NOIU). All inspectors will be granted access to the activity without haste and Command Management will be notified of their presence. All inspectors will be treated with the utmost respect, honesty and provided the requested material if permissible by law or national defense.

d. **NAVOSH Program Surveys** are conducted annually, or whenever modifications are made that impact the specific program. Qualified persons with program experience conduct these surveys. Program Audits of the following be conducted annually and incorporated into the formal Naval Air Engineering Station OSH Self Assessment

- Accident Prevention (Mishap Analysis)
- Fire Prevention (Conducted by Fire Division & may be used for reference)
- Material Handling (Conducted by Supply Department & may be used for reference)
- Lockout-Tag-out
- Hazard Communication
- Personal Protective Equipment
- Confined Space Entry
- Asbestos Controls
- Blood-borne Pathogens
- Respiratory Protection
- Laser Safety Program

e. **Records** - Records of audits and inspection will be maintained in accordance with the requirements of the Department of the Navy's Occupational Safety and Health program manual OPNAVINST 5100.23(x) series. As a minimum, the last three years program audits will be kept on record. Routine inspection records will be maintained on a most current basis. Records of deficiency corrections will be maintained for 5 calendar years from date of correction.

5. **Conducting Process Review & Measurement System Safety Audits** - The Navy's new approach of measuring the effectiveness of its OSH program represents significant changes in the way we conduct our business. The old standard of measuring a commands compliance with local, state and federal requirements have shown historically that they provide little or any benefit on mishap reduction. By changing the culture and the way we conduct business here at NAES the PR&MS model allows us to try to focus on the mishap before it occurs, therefore it is the philosophy of this OSH office to aggressively pursue a mishap prevention posture before it occurs. By compiling and analyzing data we will focus our efforts in areas of concern that will lead to a safer workplace for all of Navy Lakehurst. NAVOSH performance will be assessed in each of the following 5 key processes:

- Mishap Prevention
- Regulatory Compliance
- Supervision
- Training
- Self Assessments

In addition to these key processes the effectiveness of our employees OSH program can only be measured with input from our customers. It is imperative that we solicit feedback from our customers both internally and externally. Compensation program effectiveness will follow the PR&MS Injury Cost Control model. This data driven analysis will assist us in identifying potential trouble spots and afford us the opportunity to be more proactive in mishap prevention, and overall OSH program implementation. There are four basic questions an audit should answer. The persons or team designated to conduct the audits should take a fact-finding approach to gather data. These auditors should be familiar with both the safety program and the various requirements. All audit comments; recommendations and corrective actions should focus on these four questions:

1. Does the program cover all regulatory and best industry practice requirements?
2. Are the program requirements being met?
3. Is there documented proof of compliance?
4. Is employee training effective?

6. **Phase One: Audit Preparation**

- a. **Step One** - one week prior to the audit, inform all affected managers and supervisors. They should be directed to have all records, documents and procedures available when the audits start.
- b. **Step Two** - Review all past program area audits and corrective action recommendations.
- c. **Step Three** - Review all local, state and federal requirements for the specific program. Become familiar with the document, inspection and training requirements.
- d. **Step Four** - Determine the scope of the audit. This can be based on accident and inspection reports and input from various managers.

7. **Phase Two: Fact Finding**

A fact-finding event is used to gather all applicable information. OSH personnel should make an effort not to form an opinion or make evaluative comments during this phase.

- a. **A Team Approach** - If an audit team is used, make assignments to each person that defines their area of inspection. Ensure they have the proper program background information and documents.
- b. **Audit Areas** - most audits can be broken down into these areas:

- **Employee knowledge** – OSHA & NAVOSH standards require "effective training" - an effective program ensures that employees have the knowledge required to operate in a safe manner on a daily basis. The level of knowledge required depends on the specific activities in which the employee is involved and their specific duties and responsibilities. Generally, managers and supervisors should have a higher level of knowledge than general employees. This includes practical knowledge of program administration, management and training. They should be able to discuss all elements of each program that affects their assigned employees. Many programs divide employees into these two groups- authorized employees and affected employees. Authorized employees must have a high level of working knowledge involving hazard identification and hazard control procedures. Determining employee level of knowledge can be achieved through written quizzes, formal interviews or informal questions in the workplace.

Written Program Review - during the self-assessment audit, a comprehensive review of the written Instructions, SOP's, JSA's and any other guidelines should be conducted. This review compares our program requirements for hazard identification and control, required employee training and record keeping against the local, state and federal requirements. Additionally, if applicable, the Naval Air Systems Command, Naval Safety Center or experts in that particular area of expertise should be asked to conduct an independent written program review.

- **Program Administration** - This review checks the implementation and management of specific program requirements. This section asks these and other similar questions:
 - Is there a person assigned and trained to manage the program?
 - Are specific duties and responsibilities assigned?
 - Are sufficient assets provided?
 - Is there an effective and on-going employee-training program?
- **Record & Document Review** - Missing or incomplete documents or records is a good indication that a program that is not working as designed. Records are our only means of proving that specific regulatory requirements have been met. Record review also includes a look at the results, recommendations and corrective actions from the last program audit.
- **Equipment and Material** - This area of an audit inspects the material condition and applicability of the equipment for hazard control in a specific program. Examples of audit questions for this area are:
 - Is the equipment in a safe condition?
 - Is there adequate equipment to conduct tasks safely?
 - Is personal protective equipment used and stored properly
- **General Area Walk-Through** - While audits are not designed to be comprehensive physical wall-to-wall facility inspections, a general walk-through of work areas can provide additional insight into the effectiveness of our NAVOSH safety programs.

8. Phase Three: Review of Findings

After all documents, written programs, procedures, work practices and equipment have been inspected, the OSH Specialist or Team must formulate a concise report that details all areas of the program. Focus on the four basic audit questions. Each program requirement should be addressed with deficiencies noted. Include comments of a positive nature for each element that is being effectively managed.

9. Phase Four: Recommendations POA&M

Develop a Plan of Action and Milestones for each deficient condition of the program if necessary. Careful forethought should be applied to ensure that this is not a process that simply makes more rules, additional record keeping requirement or makes production tasks more difficult. Examine the manner and means in which the current deficient elements are managed to determine if there is a simpler procedure that can be employed.

10. Phase Five: Corrective Actions

Development of corrective action should involve the managers and supervisor who will be required to execute the corrections. Set priorities based on level of hazard. All corrective actions should be assigned a completion and review date (POA&M). Records of completed corrective actions should be reviewed through the normal management chain and then be filed for use during the next audit.

