



OREGON SUSTAINMENT MAINTENANCE SITE
 Camp Withycombe
 15300 SE Industrial Way
 Clackamas, OR 97015



MEMORANDDUM FOR RECORD

22 SEPTEMBER 2011

SUBJECT: Safety Meeting for September 2011.

The OSMS (Oregon Sustainment Maintenance Site) Safety Committee met on 21 September 2011, at the lunch room in building 6480. The meeting convened at 1000 hrs. The members in attendance were as follows:

Aaron Hochstrasser	RSMS Automotive	President
Eric Walstrom	OSMS Front Office	Member
Tyler Nitzke	RSMS Inspection	Scribe
Michael Bays	CSMS Supply	Member
Michael Evans	RSMS Supply	Member
Danner Robbs	RSMS Automotive	Member
Dan Eggleston	Power Division Supervisor	Member
Eric Kliever	Allied Trades	Member
Ed Kimberly	RSMS State Shop	Member
Malia Childs	OSMS Front Office	Member
Charles Scantling	RSMS Electronics	Member
Arna Meyer	CSMS Electronics	Member
Sarah Crawford	FMS #2 Office	Member
James Jones	OSMS Electronics	Member
Dena Byrum	Power Division	Member
Patrick Lafontaine	CSMS Armament	Fill-in

1. **Review of Minutes:** Minutes from August were reviewed. No further input.

2. **Old Business:**

- **Monthly checklist** – Question was brought up concerning item #55 about compressed air tanks. A permit is not required but there does need to be an ASME label, drain pipe/valve, and pressure gauge (refer to OSHA standard 1910.169). Completed checklists should go to your section supervisor.
- **Mr. Snook inspection** – Only 2 out of 42 findings have been closed out. Although a majority of the findings have been addressed you need documentation to complete the close out (i.e. work order, memo, write directly on abatement plan).
- **GIS map** – Nothing really to update on this, MAJ Wunderlich is POC who is not in attendance. Waiting for AGI to give the final OK on map.
- **1st aid cabinets** – COL Rathburn is still in discussions about OTC meds in the 1st aid cabinets. We are still leaning towards contracting out the job of filling the cabinets. There was a question brought up about where to go for safety equipment (earplugs,

glasses, etc.), there is no fund for this right now so it was recommended to contact the state safety officer. Also, Bays contacted Zee Medical about coming to get rid of the unwanted OTC meds pulled from the cabinets and they said they do not want them and to just keep them ourselves.

3. Report of Incident/Accident/Illness: One incident to report. Employee was filling a spray container and got some fluid in their eyes due to the pump gone bad from old O-rings. This was not a task that this particular employee normally does and wasn't wearing safety glasses. Safety committee recommendation was to always wear proper PPE!

4. New Business:

- **OSHA findings** – Committee went over the Federal and State OSHA findings. We have received the official report for the Federal ones but not the State, abatements have been submitted for both. Quick summary of the Federal findings: #1) Guard not used when compressed air used for cleaning (should be below 30 psi); #2) Compressed gases not stored correctly (need to be chained); #3) Machines not anchored to ground (drill press); #4) Machine guard issues (band saws); #5) Rack system not bolted to the ground. Here is a quick summary of the State findings: #1) Air quality from CARC paint grinding and cleaning (Aaron passed out memo he wrote up for abatement of this issue); #2) Housekeeping, exposure to chemicals from wipe test (chromium, lead, and cadmium above acceptable levels in certain areas of the floor bay).
- **SIM4 training** – Aaron is looking into having SAIF Corp come and do SIM4 training (Safety In Motion®). Basically it is injury prevention, ergonomics, lifting techniques, etc. There are 4 modules which are 1 hour a piece. They are not authorized to train Federal employees so that is one obstacle trying to be overcome right now.
- **New accident report form** – Mr. Snook and Robin Webb composed a new accident report form for us to try out and give feedback on. There is also a different form you need to use if you are a contractor (EGS). One committee member had already used the new form and said it was very thorough.
- **Confined space** – We had new signs come in for labeling of confined spaces. Aaron handed out a confined space/permit space evaluation survey to assist in determining whether or not you have any confined spaces in your work area and if any of them require an entry permit. Aaron will also research what policies we have in place right now (probably at State Shop) and add it to our Safety SOP.
- **New safety committee chairman** – No new nominations were brought forth.
- **Issues not on schedule** – Some topics that were discussed not on the schedule:
 - **Toolbox safety** – Some good topics and resources were presented for toolbox safety ideas: asbestos awareness (handout distributed), OSHA website, toolboxtopics.com, traffic issues, forklift safety, and spider awareness.
 - **Helipad** – More blacktop is needed around the helipad as well as signage, which someone stated is already in the works. A lot of dust and debris is flung about when the helicopter is landing which could also be stirring up hazardous chemicals so just be cautious and aware.

5. Next Meeting: The next meeting is scheduled for 19 October 2011 at 1000hrs. Please bring your copy of the minutes with you to be able to discuss any issues or updates to previous concerns so we can do our job by keeping our agency safe!

Confined space/permit space evaluation survey

Name/description of this space _____

Location of this space _____

Person performing this survey _____

Date of this survey _____

Section 1 — Use this section to determine if the space is a confined space

Yes No Is the space large enough and so configured that an employee can enter and perform assigned work?

Yes No Does the space have restricted means for entry or exit? Doorways and other portals through which a person can walk are normally not considered restricted means for entry or exit.

Yes No Is the space *not* designed for continuous employee occupancy?

If *all three* answers are Yes, this is a confined space. Proceed to Section 2.

Section 2 — Use this section to determine if the space is a permit space

Yes No Does the space contain or have a potential to contain a hazardous atmosphere? Examples: combustible dusts, flammable mixtures, or oxygen deficiency that may expose employees to the risk of death, incapacitation, or acute illness.

Yes No Does the space contain a material that has the potential for engulfing an entrant? Examples: liquids or granular solids.

Yes No Does the space have an internal configuration such as inwardly converging walls or a sloping floor that could trap or asphyxiate an entrant?

Yes No Does the space contain another serious safety or health hazard? Examples: radiation, noise, electricity, and moving parts of machinery.

If *any* answer is Yes, this is permit space. An entry permit is required for entry.



READINESS SUSTAINMENT MAINTENANCE SITE
Camp Withycombe
15300 SE Industrial Way
Clackamas, OR 97015



RSMS

Sep 2, 2011

SUBJECT: Personal Protective Equipment and Hygiene Practices to be used when working on equipment that has had a CARC (Chemical Agent Resistive Coating) applied.

1. Any and all grinding, sanding, cutting, heating or welding of CARC painted components will be done with the use of NIOSH approved N100, P100 or R100 half face respirator, coveralls, safety glasses, gloves, face shield and welding hood when welding.
2. Always remove CARC by sanding or grinding to bare metal 4 inches on either side of an area to be welded or torch cut, and from both the front and back sides of the metal. Welding will be done using the Donaldson Torit Porta-Trunk dust and welding fume collector.
3. Cleaning will be done with a HEPA vacuum cleaner. However, you can use wet cleanup methods or sweeping compounds as an alternative. CARC residue will not be swept dry or dispersed with compressed air. Compressed air will not be used to clean the shop floors. If compressed air is used on equipment it will be done outside.
4. All of the material removed by grinding, chipping or sanding, including the sandpaper used, needs to be placed in a sealed container and disposed of as hazardous waste.
5. Coveralls will stay at work and be laundered by our contracted vendor. Contaminated clothing is not allowed in our lunchroom facilities. Employees must wash hands and face prior to eating, drinking, smoking, chewing tobacco or gum, or applying cosmetics.
6. Every Thursday toolboxes and work surfaces will be completely wiped down with a lead removing wipe and shop bays will be wet mopped.

Sincerely
Aaron Hochstrasser
R.S.M.S. Automotive Project Manager
Camp Withycombe, Clackamas

- Near-Miss
- First Aid

TABLE 801, IF BOXES BELOW ARE CHECKED

- Medical Care
- Time Loss
- Fatal

SYSTEM CHALLENGES

Management Do we have:

- Policy Enforcement
- Hazard Recognition
- Accountability
- Supervisor Training
- Corrective Action
- Production Priority
- Proper Resources
- Job Safety Training
- Hiring Practices
- Maintenance
- Adequate Staffing

Employee Was the employee:

- Following Procedure
- Training
- Previous Injury
- Mental Ability
- Physical Capacity
- Equipment Use
- Short Cuts
- PPE Worn
- Safety Attitude

Equipment Do we have:

- Proper Tool Selection
- Tool Availability
- Maintenance
- Visual Warnings
- Guarding

Environment What about:

- Plant Layout
- Chemical
- Temperature
- Noise
- Radiation
- Weather
- Terrain
- Vibration
- Ergonomics
- Lighting
- Ventilation
- Housekeeping
- Biological

Additional Causal Factors:

- Faulty Equipment
 - Non-Employee
 - Prior Injury
 - Late Reporting
 - Off-the-Job Injury
- (Explain any checked boxes on separate sheet)

Supervisor's Incident/Accident Analysis

Immediate supervisor should complete this form promptly with worker.

Company Name: _____

Employee: _____

Occupation/Department: _____

Where Incident Occurred: _____ Date/Time: _____ AM/PM

If injury, describe (Nature/Body part) _____

Treatment: None First Aid Only Doctor Hospital

Treating Physician: _____

Phone: _____

Witnesses: _____

Supervisor's description of Accident/Incident after Employee Interview:

Identify factors which contributed to or caused accident (refer to list on left side of page):

Management:	Employee:
Equipment:	Environment:

List recommendations to prevent reoccurrence:	Who	By When
1.		
2.		
3.		
4.		

What corrective Action has been initiated at this point: _____

Next Line Supervisor Review (Sign & Date): _____

Safety Committee Review Date: _____

If accident/incident was caused by a person not employed by us, who?

Name: _____ Phone: _____

Date: _____

Supervisor's Signature

Note: Complete entire Workers Compensation claim (Form 801 or 801s) if injury required doctor's treatment. Form 801 or 801s must be received by SAIF within five (5) days of your knowledge of doctor treatment. If needed, complete Employer's Page (Page 1) of 801 for OSHA recordkeeping requirements.

Immediate supervisor portion continued

1. Identify all witnesses and/or interested parties that have knowledge of the accident and processes involved in said accident:

2. Witness or Interview Statements:

**If you need more room, please attach additional pages as needed to this form.

Completing the Accident/Incident Analysis

All close calls, near-misses, incidents, and accidents should be analyzed for corrective action regardless of severity. Time and distance work against a thorough analysis as most people quickly forget important facts and key details.

Distance from the incident means loss of visual information, so complete the analysis at the scene as soon as possible. This form should be completed by the immediate supervisor of the person(s) directly involved in the incident. A manager, safety committee, safety officer or analysis team can assist in the absence of the immediate supervisor. This form asks no questions other than a brief description of an injury, if one occurred. Questions often provide closed answers, so the key items on the analysis document are designed to encourage open dialogue and communication about facts and details. This is the primary opportunity for those involved to gather key information for preventing similar incidents in the future.

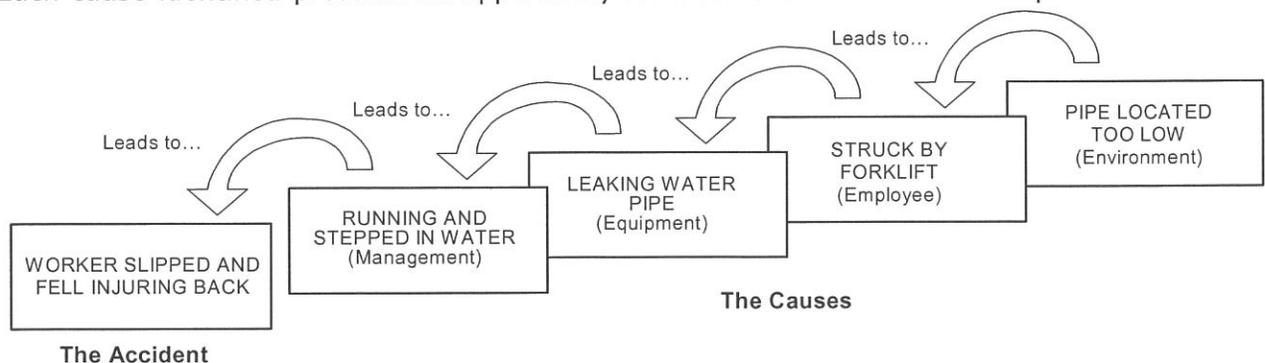
A Successful Analysis Process: The person(s) conducting the analysis need to look at the systems/procedures/policies within the business that are not working and may have contributed in some way to the incident. Even minor contributions should be listed. The systems to review are: Management, Employee, Equipment, and Environment (MEEE). Review system items shown in the left margin of the Accident/Incident Analysis form **in relation to the incident**. These are areas to explore within these systems, they are not questions. Once the contributing system elements are identified, write them in the Counter measures/best practices box along with any other system changes that will prevent recurrence.

First Step - Care for the injured: Insure appropriate medical care or first aid is provided for anyone injured.

Second Step - Secure the scene of the accident: Make certain that key evidence is preserved so that all pertinent facts of the accident can be determined. In the case of serious accidents, photographs of the scene are a valuable tool in determining causes, particularly if the area needs to be put back in order quickly. Note the position of equipment and materials, presence or lack of equipment safeguarding, specific materials and chemicals involved, warning signs and any other physical evidence.

Third Step - Interview witnesses: Witnesses to the accident or persons having knowledge valuable to the analysis should be met with individually. Emphasis should be placed on determining the facts, not on placing blame. If the injured employee(s) is/are not seriously injured, they should be interviewed while awaiting transport for medical treatment. All questions should be open-ended (who, what, when, where, how and why), to encourage a detailed account of the facts. Yes and No questions should be avoided.

Fourth Step - Analyze data to determine causes and best practices to prevent recurrence: Refer to your notes from the scene of the accident and witness interviews. Work backwards from the accident to trace all causes to their source. It is helpful to have multiple people involved in determining possible solutions. Each cause identified presents an opportunity for intervention to reduce the potential for future accidents:



Fifth Step - Follow up on corrective actions: This is usually the function of the safety officer or safety committee. At the next safety committee meeting, any accident analysis reports should be reviewed to ensure appropriate corrective actions (Countermeasures/Best Practices) were identified. Furthermore, steps should be taken to ensure that these actions have been implemented at the site of the accident as well as in any other areas appropriate in the organization. Any accidents or incidents occurring, for which a report was not completed, should be referred to the appropriate person responsible for completion of the report.

Oregon Military Department

Employee Incident/Accident Report

To be completed by employee:

1. Describe your work activity prior to and up to the time of accident.

2. Describe exactly what happened:

3. Describe what cause or causes attributed to the accident? (your actions, equipment, other factors)

4. Were you aware of the hazard prior to this incident (i.e. signs, hazard identified)? If so, describe how you became aware of it (i.e. reported to supervisor prior? If so, whom?)

5. Describe the type of medical treatment you received (if any):

Treatment: None First Aid Only Doctor Hospital

6. List any witnesses to the Incident/Accident: