

## **DNREC DIVISION OF AIR AND WASTE MANAGEMENT PROGRAM ADMINISTRATION AND ORGANIZATIONAL STRUCTURE**

The purpose of the Department of Natural Resources and Environmental Control (DNREC) Division of Air and Waste Management's (DAWM or Division) comprehensive Health and Safety Program is to define the minimum health and safety standards required on a division-wide basis. The Health and Safety Program applies to all DAWM employees, and sets forth minimum requirements for contractors working under contract to DAWM. The responsibilities, organizational structure, recordkeeping requirements, and evaluation of the Division Health and Safety Program are discussed below.

### **1.0 RESPONSIBILITIES**

#### **1.1 ADMINISTRATION**

The following personnel are responsible for implementing and administering the DAWM Integrated Health and Safety Program and Standard Operating Procedures.<sup>1</sup>

- ◆ The ***Division Director*** of DAWM is ultimately responsible for ensuring that all employees actively participate in the DAWM Comprehensive Health and Safety Program and follow applicable standard operating procedures (SOPs). The Division Director may assign the responsibility for tracking and retaining records of employee training and medical surveillance to a *Training and Medical Surveillance Coordinator*. The Division Director will chair the Integrated Health and Safety Workgroup and will dedicate at least one senior staff meeting per year to discussing health and safety with program/branch managers.
- ◆ ***Program/Branch Managers*** are delegated the authority and responsibility for implementing and enforcing the Health and Safety Program at the program/branch level. This will include the responsibilities for tasks such as developing, reviewing and approving branch and site-specific health and safety plans and standard operating procedures relating to health and safety; emphasizing health and safety in planning and implementing daily activities; requiring compliance with health and safety programs, plans, and policies in individual performance plans, dedicating time and branch meetings to discuss health and safety topics; and complying with reporting and tracking requirements associated with branch and Division health and safety programs, plans and procedures. To ensure a truly integrated and coordinated program, each program/branch manager is required to assign at least one appropriately qualified person to serve as liaison on the *DAWM Integrated Health and Safety Workgroup*. Further, program/branch managers shall identify and assign a work category for each of their assigned employees. The program/branch managers will provide the assigned employee with a complete description of the DAWM activity categories. Program/branch managers are responsible for budgeting allocated funds for: (a) required health and safety training; and (b) purchasing, maintaining, and storage of employee safety and personal protective equipment (PPE). The program/branch manager shall determine a 'core group' of individuals in his/her program to receive first aid and cardiopulmonary resuscitation (CPR) training, including automated external defibrillator training

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<sup>1</sup> These procedures identify four distinct activity categories into which employees are assigned, based upon their training certification classification (29 CFR 1910.120 and 29 CFR 1910.121) and exposure potential. The categories are defined and outlined in Section 2.0 of this section.

as appropriate. The program/branch managers will be held accountable for ensuring the proper training of their personnel. The program/branch managers will supply all necessary information to the training and medical surveillance coordinator as requested.

- ◆ The **DAWM Integrated Health and Safety Workgroup (IHSW)**, is responsible for coordination and maintenance of the Division Integrated Health and Safety Program and Standard Operating Procedures. The IHSW will support program/branch managers with advice, technical assistance, selection of auditors, and resolution of issues relating to the implementation of the overall Division Health and Safety Program, but will not be responsible for implementing the program at the branch level. Branch implementation of the health and safety program will be done by program/branch managers. The IHSW shall review, advise, and coordinate changes, additions, amendments or modifications of the Division Health and Safety Program and Standard Operating Procedures. The IHSW may also request or review audits. IHSW is responsible for overseeing the DAWM audit program and ensuring that corrective actions are taken to address findings identified in the safety audits. Similarly, a key role of this group is to investigate any health and safety incidents and share learned information with the DAWM organization to prevent future incidents. The IHSW representative is the focal point for coordinating the office activities with regard to DAWM worker occupational health and safety activities. Each program/branch manager will assign a representative to the DAWM IHSW. The director will serve as the chair of the workgroup. Although the director is not required to attend each meeting, as the person responsible for the overall implementation of the Health and Safety Program, the director will receive recommendations and reports from the IHSW. The IHSW will conduct regularly scheduled meetings and may additionally hold ‘emergency’ meetings. After each IHSW meeting, minutes of the proceedings will be prepared and distributed to each program/branch manager. Included in the minutes will be a list of ‘action items’ to be addressed by the appropriate personnel before the next IHSW meeting.
- ◆ The **Training and Medical Surveillance Coordinator (TMSC)** is responsible for tracking the types and amount of health and safety training each DAWM employee has received, and for notifying employees when they are due for scheduled medical surveillance examinations. Training and medical monitoring shall be tracked using a database. The TMSC will periodically notify the program/branch managers as to which employees are due for annual refresher training or other types of training.
- ◆ **Occupational Medical Advisor:** DNREC DAWM contracts a medical advisor, who is a physician, qualified to make clinical decisions regarding medical monitoring for personnel. All contact with the medical advisor regarding the selection of exam protocols and medical monitoring program is made through the training and medical monitoring coordinator.

The medical advisor has the following responsibilities: advising DNREC on the fitness for duty of employees in the program, and recommending limitations in their duties if applicable; advising DNREC on the adequacy of the medical monitoring program; recommending additional testing for special employee needs or site-specific project needs; and providing medical consultation.

- ◆ **Project Managers/Project Officers** are responsible for the following on all sites:
  - Conducting all operations in accordance with applicable safety and health regulations and the DNREC DAWM health and safety program and standard operating procedures;

- Ensuring that health and safety aspects of all prospective projects are reviewed and approved by qualified personnel;
  - Ensuring that necessary and appropriate protective equipment is available on site and used as required;
  - Ensuring that employees assigned to projects are trained in SOPs and adequately informed of the hazards associated with their work;
  - Informing contractors of site emergency procedures and any potential fire, explosion, health, safety, or other hazards, as necessary;
  - Ensuring that all necessary respiratory equipment and personal protective equipment (PPE) are available on site;
  - Reporting all accidents and exposures or near misses their program/branch managers and to the appropriate IHSW representative;
  - Performing or assigning periodic on-site inspections/audits to ensure that the Health and Safety Program is being implemented;
  - Stopping work at a project where unsafe conditions exist that can not be remedied without a work stoppage; and
  - Reporting to the program/branch manager any health and safety concerns associated with DAWM projects, and recommending topics to be addressed in the periodic training update and/or by the IHSW or the director.
- ◆ **Affected DAWM Employees<sup>2</sup>** must read and fully understand the DAWM Health and Safety Program and Standard Operating Procedures and must sign a statement attesting to that fact. The program/branch manager provides the statement forms to each employee. Once the employee has signed the form, the training and medical surveillance coordinator will retain the form for documentation purposes.

For operations that take place on uncontrolled hazardous waste sites or RCRA Treatment, Storage and Disposal Facilities (TSDFs) as defined by Title 29 of the *Code of Federal Regulations* (CFR), Part 1910.120, the Occupational Safety and Health Act (OSHA) Hazardous Waste Operations and Emergency Response (HAZWOPER) standard, additional responsibilities apply to on-site workers and management as described in Section 3-1 of this manual, “Hazardous Waste Operations”. A site-specific health and safety plan (HASP) must be developed for these sites in accordance with the DAWM “Site-Specific Health and Safety Plan Program”, in Section 3-2 of this manual. The HASP will outline the specific chain of command for the project.

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<sup>2</sup> An “employee” is defined as any full, part-time, seasonal, temporary, or permanent DAWM employee; a detailee or fellow to DAWM from another government agency; a student assigned to DAWM; an intern or fellow assigned to DAWM; and any other individual who is designated on a case-by-case basis by the Division Director.

## 1.2 TRAINING

The development, implementation, and ongoing management of health and safety training programs is the highest DAWM training priority. The Division Director of DAWM bears the ultimate responsibility for ensuring that all DAWM employees receive the appropriate safety equipment and training, or equivalent, in accordance with DAWM Policies and Programs and 29 CFR 1910 and 1926. Although the Division Director is ultimately responsible for employee training, the task of ensuring that all employees receive the proper mandatory safety training and equipment on a day-to-day basis is borne jointly by the DAWM Program/Branch Managers and employees. Types and dates of training are tracked by the TMSC. The requirements for Health and Safety Training are further detailed in the “Health & Safety Training Program”.

## 1.3 MEDICAL SURVEILLANCE

The Division Director of DAWM, or designee, bears the ultimate responsibility for ensuring that all DAWM employees receive the appropriate medical surveillance, in accordance with DAWM Policies and Programs and 29 CFR 1910 and 1926. Although the Division Director is ultimately responsible for employee medical monitoring, the task of ensuring that all employees receive the proper medical exams and clearances on a day-to-day basis is borne by the training and medical surveillance coordinator. The requirements for medical surveillance are further detailed in the “Medical Surveillance Program”, Section 2-8 of this manual.

## 2.0 WORK CATEGORIES AND PROCEDURES

Four distinct work categories have been identified for DAWM personnel. Each work category requires different levels of initial and annual training as well as medical surveillance requirements. The training and medical surveillance requirements for each work category are described in the Training and Medical Surveillance Programs (Section 2-7 and 2-8 of this manual), respectively, and are summarized below. In some cases, employees’ job responsibilities may fit into more than one of the work categories; in that case, the more protective of the classifications will apply.

A program/branch manager will assign personnel to the appropriate work category. The TMSC will keep a record of which category applies to each employee.

A program/branch manager may modify an employee’s work category assignment by providing written notification placed in the employee’s file. This notification must identify the changes(s) in the work category and verify that the appropriate training, equipment, and medical examination(s) have been provided to the individual.

- ◆ **Category 1** is established as the DAWM highest risk category. This category includes all employees whose job description/critical job elements require handling of, or potential exposure to, identified or unidentified hazardous chemicals and wastes in uncontrolled environments such as employees who respond to spill or other environmental emergencies. Category 1 employees must qualify to wear all HAZWOPER Levels of PPE (i.e., Levels A, B, C, and D) which include fully-encapsulated chemical protective clothing, atmosphere supplying respirators, air purifying respirators, etc.

All Category 1 employees are required to undergo a baseline medical examination. Thereafter, the frequency of medical examinations and tests is to be annual and after potential overexposure or injury unless agreed to by the consulting physician.

All Category 1 employees must be certified in OSHA 40-hour Hazardous Waste Operations and Emergency Response (HAZWOPER) at the First Responder (Emergency Response) level. Annual refresher training certification must be kept current. Further training is dependent upon job responsibilities as described in the DAWM “Training Program”, Section 2-7 of this manual.

- ◆ **Category 2** includes employees who are authorized to perform work in a hazardous atmosphere as part of a regulatory program in a non-emergency response situation. This includes those DAWM personnel who enter sites where planned or ongoing remedial actions, building demolitions, or facility operations require the use of respiratory equipment. Included are project related staff in SIRB, Solid and Hazardous Waste, Asbestos Control, and Tanks staff. Other staff may be assigned to category 2 based on specific job duties.

Category 2 employees must qualify to wear HAZWOPER PPE Levels B, C and D and will be required to be in the Division’s Respiratory Protection Program. Category 2 employees include those employees who may perform sampling of contaminated media (soil, ground water, surface water, air etc.) at a remedial action sites (HSCA, LUST, RCRA, etc.) or who conduct oversight of contractors at such sites. These persons may encounter, and should be able to recognize potentially hazardous atmospheres.

Category 2 employees are also required to submit to a baseline medical examination. Thereafter, the frequency of medical examinations will be annual unless agreed to be the consulting physician.

- ◆ **Category 3** includes DAWM employees who conduct field inspections and site visits and may be subject to hazards, such as confined spaces, engulfment hazards, noise, and slip, trips or falls during their work. These employees may encounter, and should be able to recognize potentially hazardous conditions which they must never voluntarily enter. Category 3 personnel require special training on the specific hazards of their jobs and on PPE used for their work. Included is staff performing site visits relating to project scoping, emissions testing, permitting, pollution prevention, and compliance inspections. Category 3 personnel will be included in the hearing protection program and have training for fall protection and the use of escape respirators. If it is determined that a category 3 employee requires respiratory protection as part of their job duties they will be reassigned to a higher work category.

A baseline medical examination will be conducted for Category 3 employees. Periodic examination will be conducted biennially or as recommended by the consulting physician.

- ◆ **Category 4** includes personnel who perform their job functions in a “**Secure/Clean Area**” or in an office environment. Category 4 employees may attend meetings in administrative or support areas at a site or be part of a facility tour. These employees can enter any clear areas of a facility or field site when they are escorted by either DNREC’s Site Safety Officer and/or the Facility’s

Site Safety officer. There should be no significant risk of chemical exposure and/or physical hazards (such as, but not limited to, confined spaces, engulfment hazards, hazardous atmospheres, or noise above 85dBA). While performing the site visit, they must be knowledgeable of and follow procedures specified in a site-specific health and safety plan and wear appropriate personal protection equipment including hardhat and steel-toed safety shoes or hearing protection. Training will be provided to Category 4 personnel on the hazards of their jobs and the methods to control those hazards, and necessary personnel protection equipment.

**A BASELINE MEDICAL EXAMINATION WILL BE CONDUCTED FOR CATEGORY 4 EMPLOYEES ONLY AS DEEMED NECESSARY AS DESCRIBED IN THE DAWM MEDICAL SURVEILLANCE PROGRAM IN SECTION 2-8 OF THIS MANUAL (SUCH AS IN THE EVENT OF INJURY OR ACCIDENTAL EXPOSURE) OR ON A VOLUNTARY BASIS.**

### **3.0 RECORDKEEPING REQUIREMENTS**

All sections of the DNREC DAWM Health and Safety Program (including organizational plan, policies, and procedures) will be maintained in a binder entitled “DNREC DAWM Health and Safety Manual.” Each program/branch manager shall maintain one manual. The program binder shall be kept current and in order. The existence of the program shall be communicated to all staff, and the manual shall be readily available for their reference. Recordkeeping requirements for specific policies and procedures are addressed within each health and safety program document.

### **4.0 EVALUATION**

The director shall conduct, or shall assign qualified personnel or contractors to conduct annual evaluations of the Health and Safety Program to ensure the implementation and effectiveness of health and safety policies and procedures. Audit procedures are addressed in a separate policy entitled “Health and Safety Audit Program”, Section 1-8 of this manual.