



Health & Safety Webinars

Preparing Your OSHA & Environmental Programs for 2023



NON-FERROUS
FOUNDERS' SOCIETY

**Post your OSHA 300
Summary Report
IN THE PLANT**

February 1

**Post your OSHA 300
Summary
Report ONLINE**

March 1

**NO Hazardous
Waste Report due
to the EPA in 2023**

Next Year!

March 1, 2023, is the deadline for electronically reporting your OSHA Form 300A data for calendar year 2022.

Covered establishments must only submit information from the OSHA Form 300A (Summary of Work-Related Injuries and Illnesses).

Although not all establishments are covered by this requirement, foundries and ingot makers ARE in the group that must file this form online!

Where to file? You need to go to the Injury Tracking Application website (ITA) launch page:

<https://www.osha.gov/injuryreporting/ita/>

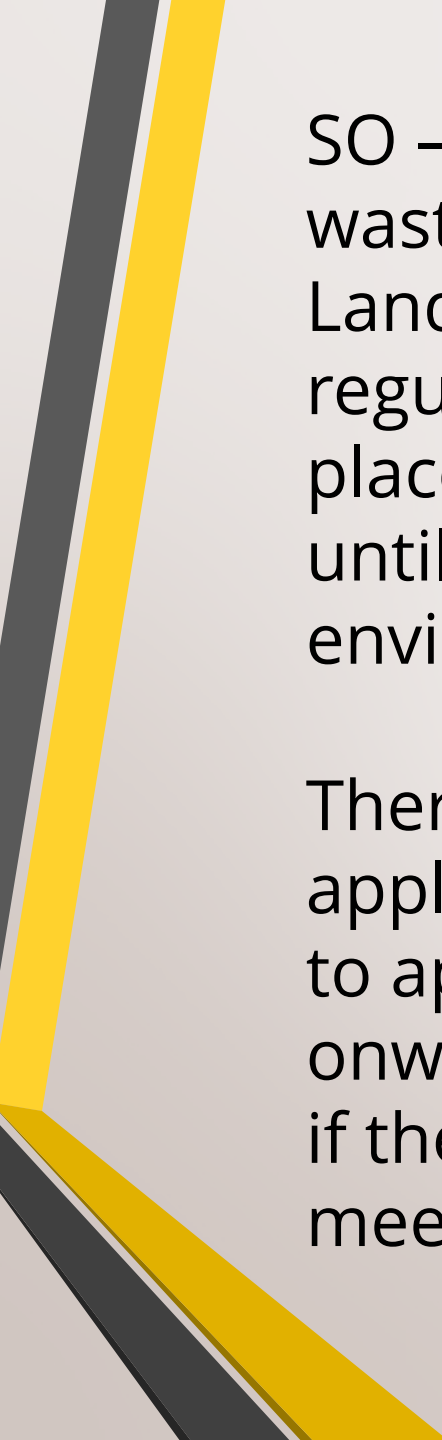
For more information, call NFFS or go to the ITA website:

<https://www.osha.gov/injuryreporting/index.html>

NO March 1 - Hazardous Waste Report due to the EPA for reporting year 2022

**NOTE: Many states require
that you report on the disposal
of residual (non-hazardous)
waste in the years when
hazardous waste is not
reportable.**

If you DO dispose of HAZARDOUS WASTE that is eventually placed or disposed of in a LANDFILL, **be CERTAIN that you have provided a LAND BAN Notification Letter** and that you MAINTAIN it in your records!!



SO – if your foundry generates hazardous wastes, you will need to understand the EPA's Land Disposal Restrictions (LDRs). Under EPA regulations, hazardous waste may not be placed in a land fill or surface impoundment until it has been treated to make it safer for the environment.

There are specific LDR treatment standards apply to hazardous waste—and they continue to apply from the point of generation and onward throughout the life of the waste—even if the waste is “treated” so that it no longer meets the EPA's definition of “hazardous.”

Most foundries will choose to send their hazardous waste OFF SITE to be treated before disposal. Wastes such as oils and solvents will generally NOT be place on the land.

However, most waste streams with metals ARE eventually placed on the land (such as lead bearing wastes).

Some larger foundries may treat their metal containing hazardous waste ON SITE.

Those that send the waste OFF SITE for disposal MUST supply the treatment site with a NOTIFICATION of the waste characteristics, etc.

Those that treat the waste ON SITE must supply the disposal site with a CERTIFICATION that the waste has been properly treated and is now not hazardous!!

If you send your waste OFF SITE you need to have a NOTIFICATION document – which is often called a "land ban form."

This Notification or land ban form is sent to the treatment, storage, and disposal facility (TSDF) that handles your waste. It states that the waste does not yet meet LDR standards and must be treated before it can go onto "the land" (land fill or surface impoundment).

It is a one-time notification – unless the waste stream characteristics change!!

There is no EPA format for this notification, but your treatment/disposal site may have their own form that they require you to complete.



NRC Environmental of Maine, Inc. (EMI)
 106 Main Street
 South Portland, ME 04106
 Phone: 207-799-0850 | Fax: 207-799-5565
 EPA ID: MED019051069

Land Ban Restrictions (LDR/Land Ban) Notification Form

Generator: _____ EPA ID#: _____

Manifest Number: _____ Manifest Document #: _____

The waste identified on the above manifest and bearing EPA Hazardous Waste Codes as described below are subject to the Land Disposal Restrictions of 40 CFR 268. The wastes do not meet the treatment standards specified in 40 CFR 268 Subpart D or the prohibitions specified in 40 CFR 268.32 or RCRA Section 3001 (d). In compliance with the notification requirements of 40 CFR 268.7(a), we are indicating below the proper waste code and subcategory for the waste as applicable.

LINE ITEM SEE MANIFEST	WASTE CODE/SUBCATEGORY	WASTEWATER/ NON-WASTEWATER	
_____	D001 Ignitable Characteristic Liquids	<input type="checkbox"/> NWW	
_____	>10% TOC, Managed in Non-CWA Systems		
_____	D004 Arsenic	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	D005 Barium	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	D006		
_____	<input type="checkbox"/> Cadmium	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	<input type="checkbox"/> Cadmium Containing Batteries	<input type="checkbox"/> NWW	
_____	D007 Chromium	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	D008		
_____	<input type="checkbox"/> Lead	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	<input type="checkbox"/> Lead Containing Batteries	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	D010 Selenium	<input type="checkbox"/> NWW	
_____	D011 Silver	<input type="checkbox"/> WW	<input type="checkbox"/> NWW
_____	D018 Benzene Characteristic Liquids	<input type="checkbox"/> WW	<input type="checkbox"/> NWW

Generator Certification

The information provided here is true and accurate to the best of my knowledge and is solely to comply with 40 CFR 268. I certify that all information is true and accurate and I am aware that there are significant penalties for submitting false certification, including the possibility of fine and/or imprisonment.

Signature: _____ Date: _____

Printed Name: _____ Title: _____

Generator: _____ EPA ID Number: _____

Waste Stream or Profile Number: _____ Manifest Doc. No. _____ Line No. _____

 Waste is a: Wastewater (<1% TSS and TOC) Non-wastewater Debris

 Notification Frequency: One Time Required with Each Shipment

Shipment EPA Waste Codes (from 40 CFR 268.40) _____

 UHC's (Underlying Hazardous Constituents 40 CFR 268.48)? Yes No

If yes, list: _____

 Does a subcategory apply per 40 CFR 268.40? Yes No

If yes, list: _____

 Constituents requiring treatment in F001-5, F039, debris, and alternate soils? Yes No

If yes, list: _____

 See Profile for analysis (if any).

- A. Restricted Waste Meets Treatment Standards (40 CFR 268.7(a) (3))**
 The restricted waste identified above meets the treatment standards in 40 CFR 268.40 or Alternative LDR treatment standards for contaminated soil 40 CFR 268.49 and can be landfill disposed without further treatment.
 If applicable, under 268.49, this contaminated soil does or does not contain listed hazardous waste and does or does not exhibit a characteristic of hazardous waste and complies with the soil treatment standards as provided by 268.49 (c) or the universal treatment standards.
 I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D. I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- B. Restricted Waste Treated To Treatment Standards (40 CFR 268.7(b) (i) & 268.7 (b) (2))**
 The treatment residue, or extract of such residue, or the restricted waste identified above has been tested to assure that the treatment residues or extract meet all applicable treatment standards in 40 CFR 268.40 and/or performance standards in 40 CFR 268.45.
 I certify under penalty of law that I personally have examined and am familiar with the treatment technology and operation of the treatment process used to support this certification. Based on my inquiry of those individuals immediately responsible for obtaining this information, I believe that the treatment process has been operated and maintained properly so as to comply with the treatment standards specified in 40 CFR 268.40 without impermissible dilution of the prohibited waste. I am aware there are significant penalties for submitting a false certification, including the possibility of fine and imprisonment.
- C. Restricted Waste Soil treated to alternative standards (40 CFR 268.7 (b) (4))**
 I certify under penalty of law that I have personally examined and am familiar with the treatment technology and operation of the treatment process used to support this certification and believe that it has been maintained and operated properly so as to comply with treatment standards specified in 40 CFR 268.49 without impermissible dilution of the prohibited wastes. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- D. Restricted Waste Decharacterized But Requires Treatment For UHC (40 CFR 268.7 (b) (4) (iv))**
 I certify under penalty of law that the waste has been treated in accordance with the requirements of 40 CFR 268.40 or 268.49 to remove the hazardous characteristic. This decharacterized waste contains Underlying Hazardous Constituents that require further treatment to meet treatment standards. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.
- E. Restricted Waste Subject To Treatment (40 CFR 268.7(a) (2))**
 The restricted waste identified above must be treated to the applicable treatment standards in 40 CFR 268.40, or treated to comply with applicable prohibitions set forth in Part 268.32 or RCRA Section 3004(d) and 268.49 (c).
 If applicable, under 268.49, this contaminated soil does or does not contain listed hazardous waste and does or does not exhibit a characteristic of hazardous waste and is subject to the soil treatment standards as provided by 268.49 (c) or the universal treatment standards.
- F. Hazardous Debris Subject To Treatment (40 CFR 268.45)**
 This hazardous debris identified above must be treated to the alternative treatment standards in 40 CFR 268.45.

I certify and warrant that the information that appears on this form, and appended documents, is true and correct. I have correctly indicated how my waste is to be managed in accordance with 40 CFR 268. My certification is based on personal examination of the information submitted, or is based on my inquiries of those individuals responsible for obtaining the information.

Authorized Signature: _____ Title: _____ Date: _____



If you treat your waste ON SITE, which means that the waste already meets LDR standards when it arrives at the Treatment/ Disposal site, you must have CERTIFICATION documentation.

While there is no specific form for this document, it must meet EPA requirements for EVERY load sent off site.

§ 268.7 Testing, tracking, and recordkeeping requirements for generators, reverse distributors, treaters, and disposal facilities.

(a) Requirements for generators and reverse distributors –

(1) A generator of hazardous waste must determine if the waste has to be treated before it can be land disposed. This is done by determining if the hazardous waste meets the treatment standards in § 268.40, 268.45, or § 268.49. This determination can be made concurrently with the hazardous waste determination required in § 262.11 of this chapter, in either of two ways: testing the waste or using knowledge of the waste...

In addition, some hazardous wastes must be treated by particular treatment methods before they can be land disposed and some soils are contaminated by such hazardous wastes. These treatment standards are also found in § 268.40, and are described in detail in §268.42, Table 1.

TIER II is due

These forms vary from state to state, but ALL states require filing (may be called “Right to Know” in your state)

March 1

Your State May Have an AIR Emissions Requirement

Air Emission Audit:

Many states now require annual air emission audits for larger foundries

Month:

Your State May Have STORMWATER Requirements

**Many states now require
periodic stormwater tests
AND/OR stormwater
discharge reports**

- Stormwater Sampling**
- Stormwater Inspection Reports**

Month(s):

SILICA - OSHA is Beginning to Target Silica Users!

REMEMBER: MEDICAL SURVEILLANCE MUST BE for ALL employees exposed to respirable silica above the ACTION LEVEL of 25 ug/m³ for 30 days or more per year.

The **medical surveillance obligations** in paragraph (i)(1)(i) for employees who will be occupationally exposed to respirable crystalline silica above the PEL for 30 or more days per year. **Those obligations are based upon the AIR SAMPLING results -AIR SAMPLING is the responsibility of the EMPLOYER to establish exposure levels for all potentially affected workers**

However, IF YOU COULD NOT DO MEDICAL SURVEILLANCE AS A RESULT OF COVID-19 RESTRICTIONS, be sure to document WHY and HOW you are protecting employees. Also, testing must resume as soon as possible.

Questions? Ask NFFS for more information and a copy of our webinar on this topic.

SAMPLE LETTER WAIVING MEDICAL TESTING
Must be renewed annually

The undersigned employee has been informed of his/her rights under the OSHA Lead (Silica) Standard and is aware that the company is required to make available to me under certain circumstances biological monitoring in the form of blood sampling for lead levels and/or medical examinations.(medical examinations for silica)

I acknowledge that the requirements of the OSHA Lead (Silica) Standard with respect to blood sampling and/or medical examinations have been explained to me by Company representatives.

I also acknowledge that Company representatives have explained to me the potential effects of lead (silica) in my body.

With this knowledge, I voluntarily waive my right to have my blood sampled or have medical examinations performed whenever the company is required to do so by OSHA standards.

I waive this test voluntarily without any promises or threats made to or against me by anyone from the company, and release the company, its directors, officers, employees, etc. from any liability for failure to take such blood sample or provide such examinations.

Employees Signature and name _____

Witness Signature and name _____

Date: _____

R FORMS are due July 1!

- **EPA Section 313 “R” Forms are due July 1**
- **AGAIN this year the EPA REQUIRES everyone to file online**
- **If you have a machine shop, be sure to consider the pounds processed and any potential releases from these operations as well!**

OSHA Posting Requirements

OSHA 300 Report Completed

___ All columns and totaled

___ Signed

___ Dated

___ Post summary form: **2/1 - 4/30**

___ Post summary form on line no later than **March 1**

___ Medical Access Notice Up at all times

___ SDS/MSDS or Notice of their location – **UPDATE where possible to GHS format**

___ Emergency Evacuation Plan

___ Labels on Hazardous Substance – **UPDATE where possible to GHS format**

___ PPE Requirements Posted

___ Labels for Lead contaminated clothing/clothing containers covered

___ Maintain a copy of the letter to laundry washing lead contaminated clothes of the presence of lead

___ Signs up for PPE/Noise/LEAD/REGULATED SILICA areas

___ Confined Spaces identified

**REMEMBER THE REVISED RULE REQUIRING ACCIDENTS
RESULTING IN HOSPITALIZATION BE REPORTED TO OSHA!**

As of January 1, 2015, **ALL** employers must report:

- All work-related fatalities within 8 hours.
- **All work-related inpatient hospitalizations** (NOT including hospitalization for OBSERVATION ONLY and no treatment), **all amputations and all losses of an eye within 24 hours.**
- You can report to OSHA by:
 - Calling OSHA's free and confidential number at 1-800-321-OSHA (6742)
 - Calling your closest OSHA Area Office during normal business hours
 - Using the online form.

SAMPLE LETTER TO LAUNDRY FOR LEAD CONTAMINATED CLOTHING

The laundry that (fill in name of company) sends to your facility for cleaning may have come into contact with lead containing materials resulting in lead deposited on the materials. The containers/bags used to transport this laundry have been labeled in accordance with OSHA standard 1910.1025.

We have included with this correspondence a copy of Appendix A of the OSHA Lead standard which describes the hazards associated with exposure to lead. We have also enclosed a copy of Appendix B from the standard which outlines the requirements of the standard.

If you should have any questions concerning this issue, please contact _____ at _____.

Sincerely,

NOTICE: TO ALL EMPLOYEES

Under OSHA Regulation 1910.20 (Access to Employee Exposure and Medical Records) all employees have a right to see and copy any medical records as well as any environmental monitoring data. Employees may apply to the office for this information or a copy of the OSHA Standard.

Be Sure You Know Your Correct SIC and NAICS Number

- Many regulations and inspections are determined by the SIC code and/or NAICS number for your facility.
- These numbers are not assigned to your facility by any government agency. **YOU determine the proper code based upon the manufacturing process at your plant.**
- You can have **more than one** code. If so, the primary code is the process that results in the **majority of monies** associated with that process (for example, if you have both a foundry and a machine shop).

Foundry and Ingot Maker SIC Numbers

- **Industry Group 334: Secondary Smelting And Refining Of Nonferrous**
 - 3341 [Secondary Smelting and Refining of Nonferrous Metals](#)
- **Industry Group 336: Nonferrous Foundries (castings)**
 - 3363 [Aluminum Die-Castings](#)
 - 3364 [Nonferrous Die-Castings, Except Aluminum](#)
 - 3365 [Aluminum Foundries](#)
 - 3366 [Copper Foundries](#)
 - 3369 [Nonferrous Foundries, Except Aluminum and Copper](#)

Foundry and Ingot Maker NAICS Numbers

NAICS CODE

Description

331314	Secondary Smelting and Alloying of Aluminum
331410	Nonferrous Metal (except aluminum) Smelting and Refining
331420	Copper Rolling, Drawing, Extruding, and Alloying
331492	Secondary Smelting, Refining and Alloying of Nonferrous Metals (except copper and aluminum)
331511	Iron Foundries
331513	Steel Investment Foundries
315132	Steel Foundries (except Investment)
33152	Nonferrous Metal Foundries
331523	Nonferrous Metal Die-Casting Foundries
331524	Aluminum Foundries (except Die-Casting)
331525	Copper Foundries (except Die-Casting)
331529	Other Nonferrous Metal Foundries (except Die-Casting)

OSHA & EPA Programs that Require Training/Written Programs

- X Hazard Communication
- Electrical Safety
- Medical Access
- Confined Space
- Hearing Conservation
- Stormwater Discharge Best
Mgmt Plan **EPA requirement**
- X Emergency Evacuation
- X Lockout/Tagout
- Spill Preparedness, Prev. & Cont
Plan **EPA requirement**
- Respiratory Protection
- X Personal Protective Equipment
 - Lead
 - Hexavalent Chromium
 - Formaldehyde
 - Silica
 - Cadmium
 - Asbestos
- X Tier II/313 Chemical Inventories
- Forklift Operators (and other
powered vehicles)
- Crane Operators
- Solid/ Hazardous Waste Training
 - EPA requirement**
 - DOT Hazmat Training** (once/3 yrs)
- X Bloodborne Pathogens
- Oil Spill Program (SPCC)
 - EPA requirement**
- X Fire Extinguisher Training
- X Fire Extinguisher Inspection
 - ___ Annual
 - ___ Monthly
- Crane Inspection Program

Sample Policy Regarding Inspections


The management of this company will take every reasonable precaution to provide a safe and sanitary workplace for all employees and visitors in accordance with the standards and regulations of the Occupational Safety & Health Act.

Since workplace safety is regulated by the Occupational Safety & Health Administration (OSHA) it is possible that a Health & Safety Compliance Officer from that organization would have occasion to visit our facility on official business. In order for management to dedicate the necessary time and resources to an important inspection such as this, it is imperative that this policy be implemented.

Effective, immediately, ABC Foundry management reserves its rights under The Occupational Safety & Health Act to be present during any inspection. No employee has authority to permit entry to any inspector or representative of a regulatory agency in the absence of the owner (designated person or persons) .

If (or when) this situation arises, XXXXX will inform the inspector that no one present as the authority to grant entry and that the staff will attempt to locate the owner (designated person or persons) immediately. A request for a delay in the inspection until the owner can be located should be made to the inspector and an appointment established, if possible.

We realize that this policy may sound restrictive, but rest assured, we will fully cooperate with any and all inquiries regarding our safety program. This policy is necessary simply for the safety of all who enter this facility.



There are programs that
require ANNUAL
CERTIFICATION. This is
different from annual reviews!
Other programs require ONE
certification – with
amendments as needed.

BE SURE TO CERTIFY ALL LOCK OUT PROCEDURES ANNUALLY

LOCKOUT- TAGOUT PROCEDURE					
Description: #1 Machine			Manufacturer: ABC Mfg Co.		
Model: 1234A		Serial: 12345678		Date: 1/1/23	
HAZARDS:	Electrical: 440 V	Compressed Air: 90 psi	Hydraulic: NA		
Gravity: NA	Chemical: NA	Thermal: NA	Other: NA		
TYPE of Lock Out/Tag Out Equipment:				Number Needed :	
1) Lock(s) - PER WORKER				2	
2) Tags - PER WORKER				NA	
3) Valve Cover(s)				1	
4) Block(s)				NA	
5) Other: Describe:				NA	

NAME	Occupation	✓ if demonstrated knowledge of Lock Out Procedures	✓ if used all proper LOCKOUT devices	✓ if followed Lock Out Procedures	✓ If LOCKOUT procedures were adequate

DESCRIBE ANY CORRECTIVE ACTIONS. RETRAINING REQUIRED:

Inspector Name

Signature

Date

Review Your PPE Certifications, Have You Certified Your PPE Program?

CERTIFICATION OF HAZARD ASSESSMENT UNDER 29 CFR 1910.132(d)

On August 15, 2021, John Doe, plant Safety Manager, conducted a hazard assessment XYZ Inc's Philadelphia plant for the purpose of determining whether hazards are present or likely to be present which necessitate employee use of personal protective equipment providing eye and/or face protection, head protection, foot protection or hand protection. The following work areas were evaluated during that hazard assessment: assembly area, finishing area, packaging area, warehouse, and shipping/receiving area.

Safety Manager

Date: _____

Hearing Conservation

Hearing Conservation Written Program Review NFFS has a written program for members!	Month:
Annual hearing tests: BE SURE to put any RECORDABLE SHIFTS on your 300 Reports and inform the affected employee in writing - THIS IS IMPORTANT	Month:
Hearing Protection/Program Training	Month:

If you were unable to complete your hearing tests because of COVID-19, BE SURE TO DOCUMENT WHY AND WHEN TESTING WILL RESUME. BE SURE ALL NEW EMPLOYEES AND THOSE NEWLY EXPOSED TO NOISE ARE TRAINED, EVEN IF YOU COULD NOT TRAIN ALL WORKERS BECAUSE OF COVID-19.

What if there is a Recordable Threshold Shift?

If the comparison of annual audiograms to the baseline audiogram indicates a significant threshold shift, the employee is informed of this fact **within 21 days** of this determination.

Unless a physician determines that the standard threshold shift is not work related, the following steps are taken when a standard threshold is determined to have occurred:

1. **The Shift will be recorded on the OSHA 300 Form.**
2. If the employee is not presently wearing hearing protection, he or she will be fitted with hearing protection and be trained in its use and care,. The employee will be required to wear the hearing protection during work.
3. Employees already wearing hearing protection will be refitted and retrained in the use of hearing protection.
4. The employee will be referred for a clinical audiological evaluation or an otological examination if additional testing is necessary or if the employer suspects that the hearing loss may have occurred or be aggravated by the wearing of the hearing protection.

Fire Extinguishers

<p>FIRE EXTINGUISHERS CHECKED MONTHLY</p> <ul style="list-style-type: none"> - In place (MOUNTED) - FULL, NOT BLOCKED - with a SIGN 	Jan	Feb	Mar	April	May	June
	July	Aug	Sept	Oct	Nov	Dec
<p>All fire extinguishers certified/recertified by outside company</p>	<p>Month:</p>					
<p>Annual fire extinguisher use training FOR EVERYONE WHO MAY USE A FIRE EXTINGUISHER IN THE PLANT</p>	<p>Month:</p>					

Slings and Cranes

REMEMBER: ALL CRANE HOOKS REQUIRE A SAFETY LATCH UNLESS YOU CAN PROVE THEY ARE DANGEROUS OR NOT FEASIBLE.

<p>ALL SLINGS CHECKED MONTHLY</p> <p>You must also visually check EVERY sling before using it in the shift. Be sure your people are trained on what to look for distortions, cracks bends.</p>	Jan	Feb	Mar	April	May	June
	July	Aug	Sept	Oct	Nov	Dec
<p>ALL CRANES CHECKED MONTHLY</p> <p>This must be done in WRITING and records kept.</p>	Jan	Feb	Mar	April	May	June
	July	Aug	Sept	Oct	Nov	Dec
<p>All alloy steel slings checked by outside company. BE SURE ALL CHAIN SLINGS HAVE TAGS ATTACHED and keep these records.</p>	Month:					
<p>Cranes inspected by outside company</p>	Month:					

Pre-Operational/Daily Checklist

Instructions. Inspect sling using this checklist. Sign off only if all checklist items are found satisfactory. Any unsatisfactory items should be reported to the supervisor.

CONDITION S=Satisfactory, U= Unsatisfactory, NA=Not Applicable

		S	U	NA
HOIST	Upper limit switch (slowly inch up to limit switch)			
	Lower limit switch			
	Raise (check all speeds for smooth full operation)			
	Lower (check all speeds for smooth full operation)			
	Pendant controls (check all buttons for operation, no broken controls)			
	Electrical Cable/Suspension cable (check cable not cut or worn, exposed wires, Pendant Strain relief from suspension cable)			
	Capacity Markings (check hoist for capacity markings)			
	Brake system (check brakes for hold, no drift)			
	Load chain (check for wear, twist, breaks, cracks)			
	Wire rope (check for wear, twist distortions, broken wires, improper dead ending)			
	Hook and Latch (check for deformation, cracks, chemical damage, safety latch functions)			
	Air system leakage (check for air leaks, loss of pressure)			
	Hydraulic system leaks (check for leaks in lines, pumps, valves and tanks)			

TROLLEY BRIDGE	Trolley left (check all speeds for smooth full operation)			
	Trolley right (check all speeds check for smooth full operation)			
	Trolley brakes (check brakes for hold, no drift)			
	Bridge forward (check all speeds for smooth full operation)			
	Bridge reverse (check all speeds for smooth full operation)			
	Bridge brakes (check brakes for hold, no drift)			

BE SURE YOUR AFFECTED WORKERS KNOW HOW TO RECOGNIZE WHEN A SLING IS DAMAGED AND NEEDS TO BE REMOVED FROM SERVICE

Pre-Operational/Daily Sling Checklist						
Instructions. Inspect sling using this checklist. Sign off only if all Checklist items are found satisfactory. Any unsatisfactory items should be reported to the supervisor.						
CONDITION S = Satisfactory, U = Unsatisfactory, NA = Not Applicable						
			S	U	NA	
SLING DEFECTS	Slings must be marked with manufacturer and the load capacity of the sling.					
	Alloy slings (check for cracked, deformed or excessively worn links)					
	Wire rope slings (check for 10 or more random broken wires, 5 broken one lay, scraping 1/3 dia. outside wires, kinking, crushing bird caging, heat damage)					
	Metal Mesh Slings (check for broken weld, heavy abrasion, broken wire, cracked end fitting)					
	Synthetic webbing slings (check for chemical damage, burns, melting, charring, snags, punctures, tears cuts, worn stitches)					

Emergency Evacuation and Confined Space

Emergency Evacuation Training Be sure everyone knows WHERE to MEET and who takes roll – and be sure ALL exits are properly marked.	Month:
Confined Space Audit complete Be sure you have an OSHA Decision Tree or comparable chart certifying how you decided the status of your spaces.	Month:
Confined Space Written Program Review INITIAL and date your review!!	Month:
New/Reassigned workers trained in Confined Space	Month:
All signs for Confined Spaces are in place ALL spaces must have signs – this includes NON PERMIT required Confined Spaces!	Month:

Powered Vehicles, Medical Access, Personal Protective Equipment

NEW powered industrial vehicle drivers trained or those to be requiring retraining	Month:
All affected workers trained in Medical Access	Month:
New employees and those to be retrained/ trained in Personal Protective Equipment	Month:
Personal Protective Equipment Program Review Do you have a simple chart so EVERYONE knows what is required for any job he or she may do?	Month:

Respiratory Protection

Respirator Written Program Review BE SURE to initial and date your review and any updates. NFFS has a written program for you!	Month:
Respirator fit tests - YOU NEED ONE PER YEAR	Month:
Respirator Training for new employees/ those to be retrained	Month:
Medical Surveillance	

If you were unable to pulmonary function (or other) tests because of COVID-19, BE SURE TO DOCUMENT WHY AND WHEN TESTING WILL RESUME. **BE SURE ALL NEW EMPLOYEES AND THOSE NEWLY REQUIRED TO WEAR RESPIRATORS ARE TRAINED AND FIT TESTED EVEN IF YOU COULD NOT TRAIN ALL WORKERS BECAUSE OF COVID-19.**

Hazard Communication

<p>Hazard Communication Written Program Review</p> <p>NFFS has a written program for members!</p> <p>Are your SDS up to date?</p> <p>Are ALL labels in place?</p> <p>IS YOUR PROGRAM GHS COMPLIANT?</p>	Month:
<p>Hazard Communication Training for new employees/those to be retrained</p>	Month:

Labels for Lead Contaminated Clothing

REQUIRED AFTER JUNE 1, 2015

1910.1025(g)(2)(vii)(A)

The employer **shall** ensure that labels of bags or containers of contaminated protective clothing and equipment include the following information:

DANGER: CLOTHING AND EQUIPMENT CONTAMINATED WITH LEAD. MAY DAMAGE FERTILITY OR THE UNBORN CHILD. CAUSES DAMAGE TO THE CENTRAL NERVOUS SYSTEM.

DO NOT EAT, DRINK OR SMOKE WHEN HANDLING. DO NOT REMOVE DUST BY BLOWING OR SHAKING. DISPOSE OF LEAD CONTAMINATED WASH WATER IN ACCORDANCE WITH APPLICABLE LOCAL, STATE, OR FEDERAL REGULATIONS.

If you were unable to perform BLOOD LEAD (or other) tests because of COVID-19, BE SURE TO DOCUMENT WHY AND WHEN TESTING WILL RESUME.

BE SURE ALL NEW EMPLOYEES AND THOSE NEWLY REQUIRED TO WEAR RESPIRATORS ARE TRAINED AND FIT TESTED EVEN IF YOU COULD NOT TRAIN ALL WORKERS BECAUSE OF COVID-19.

BE SURE TO GIVE ALL POTENTIALLY EXPOSED WORKERS, EVEN THOSE BELOW THE ACTION LEVEL, A COPY OF APPENDIX A & APPENDIX B OF THE LEAD STANDARD!

Hazardous Waste

- Hazardous Waste Training Program
- It is a requirement – and any violations can result in very high fines!
- NFFS has some guidance for this program requirement!

There are five basic types of solid waste:



- 1) MUNICIPAL SOLID WASTE – General garbage and trash from homes, schools, and industry.
- 2) CONSTRUCTION AND DEMOLITION WASTE – Material from the demolition of structures or the construction of buildings.
- 3) RESIDUAL WASTE – Materials that are NOT raw materials or products from industry. This type of waste must have resulted from the production operations at the facility.
- 4) HAZARDOUS WASTE – Materials that are NOT raw materials or products from industry that fail any of several tests or are listed as hazardous by the state or federal EPA.
- 5) UNIVERSAL WASTE – Materials that would be considered hazardous waste if they were not legally recycled. Universal wastes can include nickel-cadmium batteries, fluorescent light bulbs, and mercury sodium vapor bulbs.

Do You Have a Universal Waste Program in Place?

- Remember you must have an established program for the proper disposal of **lamps (light bulbs) and batteries** and other small components that contain mercury, or they will be considered **HAZARDOUS WASTE**.
- A program for the proper handling and disposal of **spray cans that contain hazardous waste** must also be in place or these cans will be considered **HAZARDOUS WASTE**.
- **NFFS HAS PROGRAMS FOR THESE UNIVERSAL WASTE STREAMS**

Other EPA Programs

Check of Hazardous Waste Storage Sites Yes, we do have sample inspection sheets	Jan	Feb	Mar	April	May	June
	July	Aug	Sept	Oct	Nov	Dec
Update PPC Plan Your state may call it something else – if you have Hazardous Waste or file an R Form, you need this one!	Month:					
Update SPCC Plan This is if you have over 1400 gallons of ANY oil on site	Month:					
Inspect Storage Tanks	Jan	Feb	Mar	April	May	June
	July	Aug	Sept	Oct	Nov	Dec

ABC Foundry Company
20,000 Gallon Oil Aboveground Storage Tank
SPCC Facility Inspection Checklist

Date: _____ Time: _____ Inspector: _____	X= Satisfactory NA= Not Applicable 0=Repair or adjustment required C= See comment under Remarks/Recommendations
--	--

AST ___ Tank surfaces checked for signs of leakage ___ Tank condition good (no rusting, corrosion, pitting) ___ Bolts, Rivets, or seams – not damaged ___ Tank foundation intact ___ Level of tanks monitored ___ Vents are not obstructed ___ Valves, flanges, gaskets are leak free ___ Containment walls are intact	Pipelines ___ No signs of corrosion damage to pipelines or supports ___ Buried pipelines are not exposed ___ Out of service pipes are capped ___ Barriers to protect pipelines from vehicles are in place ___ No leaks at valves, flanges, or fittings
---	--

Drainage: ___ No standing water in containment area ___ No visible oil sheen in containment area	Truck Unloading Area ___ Containment curbing or trenches intact ___ Connections are capped or blank flanged
---	--

Security ___ Fence and gates intact ___ Gates have locks ___ AST locked when not in use ___ Portable Lighting available & used when needed.	Training ___ Spill prevention briefing held ___ Training records are in order
--	--

Other Observations
 Note anything or any problem that would allow escape of oil or air pollution:
Show any damaged areas or problem areas on attached drawing:

Stormwater Plans

<p>Update Stormwater Management Plan</p> <p>Many of you now are in states that require a storm water permit and a plan to manage this stormwater. Be sure you know what YOUR state requires.</p>	<p>Month:</p>	
<p>Test Stormwater</p> <p>These requirements are determined by your STATE.</p>		

Many states have already or will soon UPDATE their stormwater programs. If they follow the federal guidelines, the programs **will REQUIRE that foundries and ingot makers subject to the standard do TESTING** twice a year (frequency may vary based upon test results). In addition, plants will be required to do **self inspections** and report the results to the state. Most states are requiring electronic reporting of the test results and the inspection reports.

Silica Requirements

- Identify occupations/employees potentially exposed to respirable silica
- Complete air sampling or other means to determine exposure to employees
- Identify occupations/persons exposed
 - Below the Action Level of 25 ug/m^3
 - At or above the Action Level but below the Permissible Exposure Limit of 50 ug/m^3
 - At or above the Permissible Exposure Limit of 50 ug/m^3

Silica Requirements

- Train all affected employees
- Provide medical surveillance for employees above the PEL for 30 days or more in the year
- Mark all areas of exposure above the PEL with signs
- Limit access to these areas and require respiratory protection to enter
- Provide respiratory protection to ALL exposed at or above the PEL

Silica Requirements

- **Complete Silica Control Exposure Plans for affected occupations/areas**
- Establish engineering program for those areas not yet in compliance including:
 - Description of operations, sources of silica, plans to control
 - Schedule for compliance
 - Respiratory Protection
 - Medical Surveillance
 - Enforcement


If you were unable to do Medical Surveillance tests including the required pulmonary function (or other) tests because of COVID-19...

BE SURE TO DOCUMENT WHY AND WHEN TESTING/FIT TESTING WILL BE DONE **and RESUME**

BE SURE ALL NEW EMPLOYEES AND THOSE NEWLY IN THE PROGRAM ARE TRAINED IN THE SILICA PROGRAM AND IF THEY ARE REQUIRED TO WEAR RESPIRATORS BE CERTAIN THEY ARE FIT TESTED EVEN IF YOU COULD NOT TRAIN ALL WORKERS BECAUSE OF COVID-19

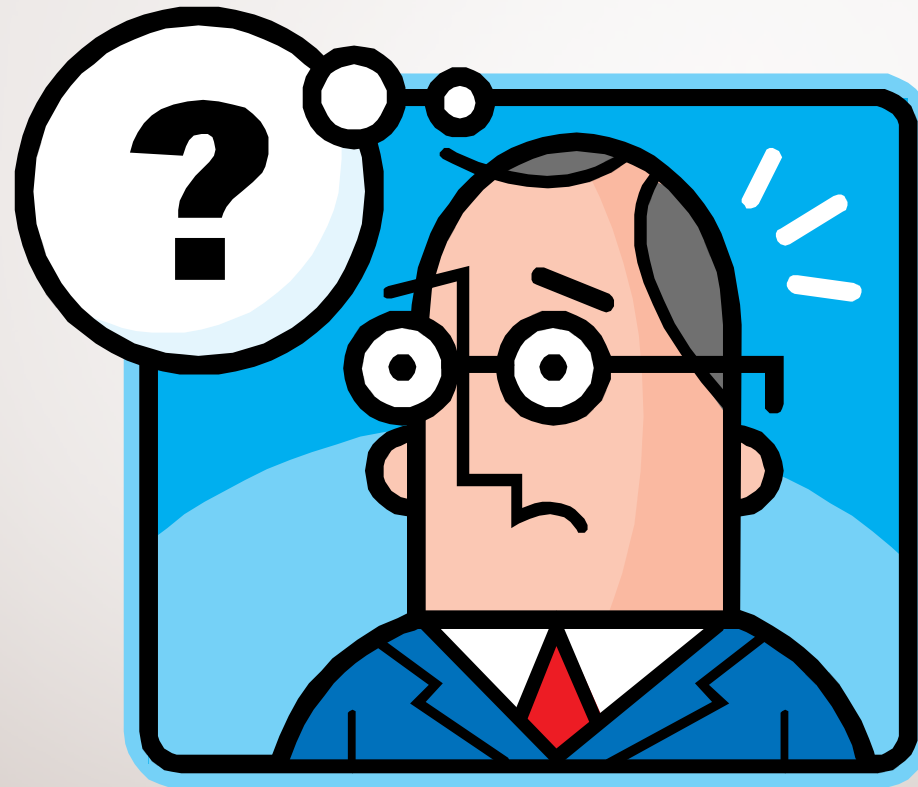
ABC Foundry
123 Main Street Anytown, USA 34567
Silica Exposure Control Plan

Source/Material: Silica used as molding material	Task: Pedestal Grinder: Using abrasive wheel mounted on pedestal to remove unwanted silica sand adhering to casting surface
Equipment and Control(s): Hood mounted on pedestal grinder to provide exhaust to dust control system. General ventilation – Respiratory Protection	
Task/Control Description: Grinder operators remove crystalline silica (sand) adhering to casting surface with abrasive wheel permanently mounted. Grinders are in an area separated from the rest of shop (wall with opening sufficient to allow movement of castings in and out to the department. Room (Cleaning and Finishing Department) is designated as a Regulated area. The room is equipped with local exhaust ventilation. Operator wears a Half-mask APR respirator (N-95), face shield, safety glasses, gloves, and hearing protection. Compressed air is not to be used to clean floor or equipment.	
Regulated Area: The Grinder area of the Cleaning and Finishing Department (as marked) is identified as a Regulated Area. Warning signs are posted at all entrances to the room. Unauthorized employees are restricted from entering the area. Any persons authorized to enter the restricted area while in operation, or during cleaning activities, will be provided with appropriate respiratory protection. Individuals not authorized for respirator use will not be allowed to enter the restricted area while in operation, or during cleaning activities that can generate airborne respirable crystalline silica	
Training: Employees are trained in silica hazard, proper work procedures to control dust, proper use of safety equipment, and respirator use. Training is provided through combination of tool box safety talks (conducted by supervisory personnel) and formal “classroom” training (conducted by safety and health staff.)	
Housekeeping: Dry sweeping will be prohibited where feasible. Wet sweeping, HEPA filtered vacuuming or other methods will be used, unless not feasible. Compressed air will not be used to clean equipment or worker clothing. HEPA vacuum will be provided to clean clothing.	
Medical Surveillance: All employees exposed to respirable crystalline silica at or above the OSHA Action Level of 30 µg/m ³ for 30 or more days per year will be included in the Medical Surveillance Program which includes initial examination (medical history, physical examination with emphasis on respiratory system, chest x-ray, pulmonary function test, testing for latent tuberculosis infection, and any other tests deemed necessary by the physician). Periodic examinations will also be provided at least every three years.	
Other Considerations: Hearing protection will be provided for employees in the Cleaning and Finishing Department. Eye Protection must be worn (safety glasses and face shields) while grinding.	



NFFS has a webinar on air sampling and other means to determine exposure to employees. We will be happy to assist you in determining options for sampling at your foundry!

Questions and Answers



Non-Ferrous Founders' Society

Occupational Safety & Health Training

For further information about this or other training modules:

Non-Ferrous Founders' Society
(847) 299-0950
www.nffs.org

