

Worker Safety and Health Support Annex

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1 **Coordinating Agency:** **Department of Labor-Occupational Safety and Health**
2 **Administration**

3
4 **Cooperating Agencies:** Department of Health and Human Services
5 Department of Homeland Security
6 Department Of Energy
7 Department of Defense
8 Environmental Protection Agency
9 National Institutes of Health

10 11 **I. Introduction**

12 13 **A. Purpose**

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15 The purpose of this annex is to detail how response and recovery worker safety and
16 health will be coordinated in support of the Safety Coordinator on the Joint Field Office
17 (JFO) Coordination Staff for a potential or actual Incident of National Significance. The
18 goal of this support is to ensure that responder safety and occupational health injuries
19 and illnesses are anticipated, recognized, evaluated, and controlled consistently so that
20 responders are properly protected during all phases of an incident.

21 22 **B. Scope**

- 23
24 1. This annex applies to all responders and response organizations.
25
26 2. This annex provides mechanisms to coordinate exposure controls and personal
27 protective equipment (PPE) selection and use within the NRP structure. This
28 coordination is done in support of the response organizations and their role in the
29 incident.
30
31 3. This annex does not address public safety and health.
32
33 4. This annex supports the following responder safety and health functional areas:
34
35 a. Proactive collaboration among response organizations for responder
36 health and safety-related planning and preparedness.
37
38 b. Coordination and provision of technical assistance for incident activities
39 including:
40
41 (1) Incident hazard identification and characterization;
42 (2) Guidance for the development, implementation, and monitoring
43 of PPE selection, use, and decontamination;
44 (3) Distribution of PPE;
45 (4) Implementation of a respirator fit-test program;
46 (5) Responder exposure sampling and analysis;
47 (6) Responder medical surveillance and medical monitoring;
48 (7) Responder and site safety and health risk assessment;
49 (8) Responder exposure and safety data sharing;
50 (9) Development and implementation of coordinated and consistent
51 site-specific safety and health plans for a single incident site or
52 among multiple incident sites, as appropriate;
53 (10) Coordination of 24/7 responder safety and health monitoring;
54 (11) Provision of technical guidance and risk management to ensure
55 appropriate hazard correction methods; and

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1 (12) Ongoing evaluation of the site-specific safety and health plan's
2 effectiveness and updating the plan as appropriate.

3
4 c. Responder safety and health post-incident and post-exercise evaluation
5 and continuous improvement.
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7 **II. Policies**

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9 A. Private-sector and Federal employers are responsible for the safety and health of their
10 own employees. State and local governments are similarly responsible pursuant to State
11 and local statutes, and in some cases 40 CFR 311. This responsibility includes allocating
12 sufficient resources for safety and health programs, training staff, purchasing protective
13 clothing and equipment as needed, and correcting unsafe or unsanitary conditions. The
14 NRP does not replace these primary responsibilities; rather, it ensures that in fulfilling
15 these responsibilities, response organizations plan and prepare in a consistent manner
16 and that interoperability is considered.
17

18 B. Several Federal and State agencies, including the Department of Labor – Occupational
19 Safety and Health Administration (DOL-OSHA), and Environmental Protection Agency
20 (EPA), have oversight authority for responders and response operations. While these
21 agencies would retain these oversight authorities, their roles within the Annex would be to
22 work cooperatively and proactively with Federal, State, local, and private responders
23 before and during responses so that all responders are adequately protected.
24

25 C. DOL-OSHA and cooperating agencies support the incident as assistants to the Safety
26 Officer. DOL-OSHA and the annex cooperating agencies also may serve as technical
27 specialists in other areas of the Incident Command System (ICS) as determined
28 appropriate by the Incident Command (e.g., Planning, Operations). The technical
29 specialist coordinates safety and health information and resource needs in support of the
30 Safety Officer.
31

32 D. DOL-OSHA implements a system to capture and manage incident exposure data in a
33 centralized location so that the data can be shared among agencies with a responder
34 safety and health focus.
35

36 E. DOL-OSHA ensures that for all samples collected under the auspices of this Annex,
37 responders are notified of personal sampling results and their meaning as promptly as
38 possible.
39

40 F. The Joint Information Center (JIC) releases general occupational safety and health
41 information only after it has been reviewed by the response organizations impacted and
42 any confidential information noted in the preceding paragraph has been removed.
43

44 G. During and after an incident, the Department of Health and Human Services (HHS)
45 evaluates the need for longer term epidemiological medical monitoring and surveillance
46 of responders.
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1 **III. Concept of Operations**

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3 **A. General**

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5 DOL-OSHA, as the Coordinator for the Worker Safety and Health Support Annex,
6 coordinates Federal safety and health assets to ensure proactive consideration of all
7 potential hazards and to ensure the availability and management of personal protective
8 equipment and other resources used by responders to an Incident of National
9 Significance.

10
11 **B. Organization**

12
13 **1. Headquarters Level**

- 14
15 a. DOL-OSHA manages the framework of Federal agencies that provide the
16 core architecture for worker safety and health support during an Incident of
17 National Significance or when directed.
18
19 b. Using the NRP protocols, mission assignments for scientific and technical
20 needs are coordinated through the Annex Coordinator and passed on to the
21 cooperating agencies for support.
22
23 c. The coordinating and supporting agencies to this annex take immediate
24 actions to activate, mobilize, and deploy the appropriate worker safety and
25 health assets to protection responders from injury.

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27 **2. Regional Level**

28
29 Representatives from the private sector; State, local, and tribal governments; and
30 the Federal agencies involved in incident characterization, stabilization, and
31 cleanup will meet as often as necessary, but at least daily, to identify and resolve
32 conflicts, share information, and ensure that the IC/UC is provided with the
33 information and consensus expert opinion necessary to manage responder
34 safety and health risks.

35
36 **C. Actions**

- 37
38 1. The worker safety and health assets of DOL-OSHA and cooperating agencies
39 support the following functions within the Incident Command System:
40
41 a. Provide occupational safety and health technical advice and assistance
42 to the the JFO Coordination Group.
43
44 b. Develop, implement, and monitor a site-specific occupational safety and
45 health plan and assure that plans are coordinated and consistent among
46 multiple sites, as appropriate.
47
48 c. Coordinate hazard identification and incident characterization.
49
50 d. Conduct incident safety monitoring, 24/7.
51
52 e. Conduct responder personal exposure monitoring, 24/7.
53
54 f. Ensure responder medical surveillance and medical monitoring is
55 addressed.
56
57 g. Coordinate responder safety and health risk assessment.
58
59 h. Assess and identify responder safety and health resource needs..
60
61 i. Develop, implement, monitor PPE selection, use, and decontamination
62 guidance.
63
64 j. Provide for PPE distribution.

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- k. Provide for respirator fit testing.
- l. Coordinate task-specific responder exposure monitoring for:
 - (1) Chemical and biological contaminants.
 - (2) Physical stressors (e.g., noise, heat/cold, ionizing radiation).
- m. Ensure that data (exposure data, accident/injury documentation, etc.) are managed in a consistent format and can be shared among response organizations.
- n. Provide liaison to labor unions, contractors, and other organizations concerned about responder safety and health issues.
- o. Coordinate and provide incident-specific responder training.
- p. Ensure that responders have access to information on incident stress management during the incident and a debriefing once responders have completed their response/recovery activities.

- 3. In the case of a dispute that cannot be resolved, DOL-OSHA will summarize the disputed areas for presentation to the Safety Officer and, if necessary, the IC/UC for resolution.

C. After Action

At the conclusion of response and recovery operations, DOL-OSHA facilitates a critique of operations to gather "lessons learned" related to responder safety and health issues.

IV. Responsibilities

A. Department of Labor-Occupational Safety and Health Administration

- 1. DOL-OSHA acts as the primary agency for the coordination of technical assistance for responder safety and health.
- 2. DOL-OSHA resolves technical, procedural, and risk assessment conflicts before they adversely affect the consistency and accuracy of the advice and information provided to responders and to the JFO Coordination Group.
- 3. DOL-OSHA is responsible for ensuring that the policies identified in this annex are carried out.

B. Department of Health and Human Services

- 1. National Institute for Occupational Safety and Health (NIOSH)
 - a. HHS-NIOSH provides technical support and expertise in the characterization of complex, unknown, and multiple contaminant worker exposures to support this annex.
 - b. HHS-NIOSH and DOL-OSHA collaborate in all areas and ensure that their collective safety and industrial hygiene assets are aligned to produce consistent, vetted advice to the incident command structure.
- 2. Department of Health and Human Services- Agency for Toxic Substances and Disease Registry (ATSDR). Under CERCLA section 104(i) [42 USC 9604(i)], ATSDR is required to cooperate with the National Institute for Occupational Safety and Health and the Occupational Safety and Health Administration in the protection of worker health and safety. ATSDR, through the health consultation process, provides the following support aimed at protecting workers. ATSDR

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1 provides information on the toxic effects of chemicals based on peer review
2 studies, emergency medical management information specific to the potential
3 exposures, recommendations on worker protective measures including selection
4 of appropriate respiratory protection and chemical protective clothing,
5 recommendations on action levels to upgrade the protective ensemble, and
6 recommendations on appropriate means of monitoring the hazards during
7 response actions as defined in CERCLA.
8

9 **C. The Environmental Protection Agency.** Functions performed by EPA are identified in
10 ESF #10 – Oil and Hazardous Materials.
11

12 **D. Department of Homeland Security/United States Coast Guard.** Functions performed
13 by the U.S. Coast Gaurd are identified in ESF #10 – Oil and Hazardous Materials.
14

15 **E. Department of Homeland Security/Emergency Preparedness and Response**
16 **Directorate/Federal Emergency Management Agency (DHS/EPR/FEMA).** Functions
17 pertaining to DHS/EPR/FEMA are identified in ESF #5 – Emergency Management.
18

19 **F. Department of Energy.** Functions pertaining to DOE are identified in ESF #12 –
20 Energy.
21

22 **G. Department of Defense/United States Army Corps of Engineers (USACE)**
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- 24 1. When USACE is tasked to provide ice, water, emergency power, debris removal,
25 temporary housing, temporary roofing, or structural safety assessment, it deploys the
26 appropriate number of Safety and Occupational Health (SOH) professionals to the
27 emergency location to provide technical assistance to USACE assets.
28
- 29 2. USACE SOH professionals coordinate with DOL-OSHA and the other annex
30 cooperating agencies to ensure appropriate implementation of coordinated, effective
31 worker safety and health is accomplished in support of the ICS as established by the
32 National Incident Management System.
33
- 34 3. USACE provides emergency location SOH support through utilization of its worldwide
35 SOH Functional Planning and Response Teams.
36

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38 **H. National Institutes of Health- National Institute of Environmental Health Sciences**
39

- 40 1. Provides training technical assistance such as instructional staff, curriculum-
41 development experts, subject matter experts, and professional staff.
42
- 43 2. Provides safety training to worker target populations with respect to the nature
44 and location of the incident and the particular hazards.
45
- 46 3. Provides assistance and support in the development and delivery of site-specific
47 safety and health training through appropriately qualified Worker Education and
48 Training Program awardee instructional staff.
49
- 50 4. Also provides assistance such as respirator fit testing and distribution of PPE.
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I. Other Responding Organizations

1. Organizations with responders at the incident provide technical support and expertise in accordance with their agency's mission and expertise for the incident.
2. Organizations lacking safety and occupational health technical expertise are expected to provide liaisons to the IC/UC safety staff, attend appropriate safety briefings, identify issues about potential hazards, and communicate those issues back both to their responders and to the SO.