

Form A-02
U.S. Army Corps of Engineers
Accident Prevention Plan Checklist

Date of Inspection

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|------------------------------|---------------------|
| Location (Plant or Facility) | Contract Number |
| Contractor Name | Project Name |
| Inspector Name (Print) | Inspector Signature |

This checklist serves as a guide only, it does not replace or eliminate the need to comply with the requirements set forth in Engineering Manual 385-1-1, Safety and Health Requirements Manual, dated 30 Nov 2014. The references included in this checklist correspond to the applicable sections of EM 385-1-1.

| Item Description | Yes | No | N/A | Remarks (Any NO or N/A item) |
|--|-----|----|-----|------------------------------|
| a. Signature sheet | | | | |
| 1. Includes the name, title, signature, telephone number, and qualifications of the Plan Preparer (<i>Qualified person, i.e. corporate safety staff person, QC</i>) | | | | |
| 2. Includes the name, title, signature, telephone number, and qualifications of the Plan Approver (<i>e.g. owner, company president, regional vice president</i>) (HTRW activities require approval of a Certified Industrial Hygienist, a Certified Safety Professional may approve the plan for operations involving UST removal where contaminants are known to be petroleum, oils, or lubricants). | | | | |
| 3. Includes the name(s), title(s), signature(s), telephone number(s), and qualifications for Plan Concurrence (provide concurrence of other applicable corporate and project personnel (contractor)) (<i>e.g. Chief of Operations, Corporate Chief of Safety, Corporate Industrial Hygienist, project manager or superintendent, project safety professional, project QC.</i>) | | | | |
| b. Background information | | | | |
| 1. Includes the Contractor Name. | | | | |
| 2. Includes the Contract Number. | | | | |
| 3. Includes the Project Name. | | | | |
| 4a. Includes the Brief Project Description. | | | | |
| 4b. Includes a Discription of the Work to be Performed. | | | | |
| 4c. Includes the Location of the Project (map). | | | | |
| 4d. Includes the Equipment to be Used. | | | | |
| 4e. Includes the Anticipated High Risk Activities. | | | | |
| 5. Includes the Major Phases of Work Anticipated. (<i>Within these major phases of work identified, activities [includes Definable features of Work (DFOWs) and tasks] to be performed that will require an AHA shall be specifically highlighted. This information can then be used by QC, QA and Safety personnel to track AHA submittals. The AHAs for these activities, tasks of DFOWs are NOT submitted at this time (AHAs created/submitted at this time would not be activity-specific as they are intended to be). > See Sections 01.A.14 and 01.A.15.</i>) | | | | |

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U.S. Army Corps of Engineers Accident Prevention Plan Checklist (cont'd)

| Item Description | Yes | No | N/A | Remarks (Any NO or N/A item) |
|--|-----|----|-----|------------------------------|
| c. Statement of Safety and Health Policy. | | | | |
| 1. Provide a copy of current corporate/company Safety and Health Policy Statement, detailing commitment to providing a safe and healthful workplace for all employees. <i>(In addition to the corporate policy statement, a copy of the corporate safety program may provide a portion of the information required by the accident prevention plan.)</i> | | | | |
| 2. Includes Contractor's written safety program goals. | | | | |
| 3. Includes Contractor's written safety program objectives. | | | | |
| 4. Includes the Contractor Accident Experience <i>(Copy of OSHA 300 Forms, or equivalent documentation).</i> | | | | |
| d. Responsibilities and Lines of Authority. | | | | |
| 1. Includes statement of the employer's ultimate responsibility for the implementation of his SOH program for his own employees, all sub-contractors and all others on the worksite (includes the strict enforcement of the program). | | | | |
| 2. Includes the identification and accountability of personnel responsible for safety and health at both the corporate and project level – including their resumes. Qualifications shall be in accordance with Section 01.A.17. <i>(Only official OSHA 30-Hour cards will be accepted or, if equivalent training is provided, appropriate instructor qualifications.)</i> | | | | |
| 3. Includes equivalent training to the OSHA 30-Hour classes is being presented as qualification, the training shall cover, as a minimum, the areas discussed in Appendix A, Section 3.d.3.(a-d). | | | | |
| 4. Includes the names of Competent (CP) and/or Qualified Person(s) (QP) and proof of competency/qualification to meet specific OSHA CP/QP requirements. <i>(Must include copies of proof of CP/QP).</i> | | | | |
| 5. Includes requirements and details of the employer's Risk Management Process. <i>(USACE uses the Activity Hazard Analysis (AHA) as part of a total risk management process. Contractors and other individual employer's may use the AHAs or their own version [Job Safety Analyses (JSAs), Job Hazard Analyses (JHAs), or similar Risk Management assessment tools]. These documents are considered equivalent to, and acceptable substitutes for, the USACE's AHA provided the data collected is the same as that required by the AHA.)</i> | | | | |
| 6. Includes requirements for initial activity-specific AHAs to be submitted and accepted at preparatory meetings, prior to work being performed; | | | | |
| 7. Includes requirements that no work by the Contractor shall be performed unless a designated Competent Person/SSHO is present on the job site. | | | | |
| 8. Includes policies and procedures regarding non-compliance with safety requirements (to include disciplinary actions for violation of safety requirements). | | | | |
| 9. Lines of authority. | | | | |
| 10. Includes written company procedures for holding managers and supervisors accountable for safety. | | | | |

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| Item Description | Yes | No | N/A | Remarks (Any NO or N/A item) |
| e. Subcontractors and Suppliers. | | | | |
| 1. Includes the list of subcontractors and suppliers. <i>(If not known at the time of initial APP submittal, the contractor shall include the following statement in their initial APP: "The subcontractors for the following DFOWs/activities are not known at this time, but additional information will be submitted to the APP for acceptance prior to the start of any activities listed")</i> | | | | |
| 2. Includes safety responsibilities of subcontractors and suppliers. | | | | |
| f. Training | | | | |
| 1. Includes requirements for new hire SOH orientation training at the time of initial hire of each new employee. | | | | |
| 2. Includes requirements for mandatory training and certifications that are applicable to this project (e.g., explosive actuated tools, confined space entry, crane operator, diver, vehicle operator, HAZWOPER training and certification, PPE) and any requirements for periodic retraining / recertification. | | | | |
| 3. Includes procedures for periodic safety and health training for supervisors and employees. | | | | |
| 4. Includes the requirements for emergency response training. | | | | |
| g. Safety and Health Inspections | | | | |
| 1. Includes specific assignment of responsibilities for a minimum daily jobsite SOH inspection during periods of work activity. | | | | |
| 1a. Includes the name(s) of individual(s) responsible for conducting safety inspections. (e.g., PM, safety professional, QC, supervisors, employees) | | | | |
| 1b. Includes proof of inspector's training / qualifications. | | | | |
| 1c. Indicates when inspections will be conducted. | | | | |
| 1d. Indicates procedures for documentation. <i>(Furnished sample forms upon which inspections will be recorded.)</i> | | | | |
| 1e. Indicates deficiency tracking system and follow-up procedures. | | | | |
| 2. Includes any external inspections / certifications which may be required. (e.g., US Coast Guard) | | | | |
| h. Mishap Reporting and Investigation | | | | |
| 1. The plan identifies how, when, and who shall complete the Exposure data (man-hours worked). | | | | |
| 2a. The plan identifies how, when, and who shall complete mishap investigations, reports, and logs. <i>(The contractor shall report, thoroughly investigate, and analyze all mishaps occurring incidentally to an operation, project or facility for which this manual is applicable.)</i> | | | | |
| 2b. The plan identifies how, when, and who shall make immediate notification of major mishaps. <i>(Mishaps shall be reported as soon as possible but not more than 24 hours afterwards to the KO/COR.)</i> | | | | |
| 2c. Includes how, when, and who will provide notice to the KO/COR when corrective actions are completed. <i>(Implement corrective actions as soon as reasonably possible.)</i> | | | | |

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Based on a risk assessment of contracted activities and on mandatory OSHA compliance programs, the Contractor shall address all applicable safety and occupational health risks and associated compliance plans. Using the EM 385-1-1 as a guide, plans, programs, procedures (assessments and evaluations), may include but not be limited to:

- (1) Include a project-specific compliance plan, as applicable to the work being performed, and as identified below. The plans shall incorporate project-wide procedures to control hazards to which the employees of all project employers may be exposed.*
- (2) These procedures shall be coordinated with all project employers and shall include project-specific, project-wide emergency response and evacuation procedures, PPE requirements, recordkeeping and reporting requirements, and training requirements.*
- (3) The plans shall be prepared prior to the start of any work activities on the job site (as much as the information can be known at that point in time). The plans shall be updated throughout the life of the project to include changes in personnel, equipment, conditions, etc. Additional revisions shall be incorporated as necessary to reflect changing site conditions, construction methods, personnel roles and responsibilities and construction schedules.*
- (4) No activity (DFOW) shall be started on site until the APP is revised and submitted to the GDA for acceptance, with the site-specific plans, programs and procedures required to complete the project.*

| Item Description | Yes | No | N/A | Remarks (Any NO or N/A item) |
|---|-----|----|-----|------------------------------|
| i. Plans (Programs, Procedures, Assessments, and Evaluations) required by the Safety Manual | | | | |
| 1. <u>Fatigue Management Plan (01.A.20)</u> | | | | |
| 2. Emergency Plans (01.E): | | | | |
| (a) Procedures & Test (01.E.01) | | | | |
| (b) Spill Plans (01.E.01, 06.A.02) | | | | |
| (c) Fire Fighting Plan (01.E.01; 19.A) | | | | |
| (d) Posting of Emergency Telephone Numbers (01.E.05) | | | | |
| (e) Man overboard/abandon ship (19.A.04) | | | | |
| (f) Plan for prevention of alcohol and drug abuse (01.C.02 & Specs) | | | | |
| 3. <u>Site Sanitation/Housekeeping Plan (02.B)</u> | | | | |
| 4. <u>Medical Support Agreement</u> . Outline on-site medical support and off-site medical arrangements including rescue and medical duties for those employees who are to perform them, and the name(s) of on-site Contractor personnel trained in first aid and CPR. A minimum of two employees shall be certified in CPR and first-aid per shift/site (03.A.01, 03.A.03) | | | | |
| 5. <u>Blood-borne Pathogen Program (03.A.05)</u> | | | | |
| 6. <u>Exposure Control Plan (03.A.05)</u> | | | | |
| 7. <u>Automatic External Defibrillator (AED) Program (03.B.04)</u> | | | | |
| 8. <u>Site Layout Plan (04.A)</u> | | | | |
| 9. <u>Access/Haul Road Plan (04.B)</u> | | | | |
| 10. <u>Hearing Conservation Program (05.C)</u> | | | | |
| 11. <u>Respiratory Protection Plan (05.G)</u> | | | | |
| 12. <u>Health Hazard Control Program (06.A)</u> | | | | |
| 13. <u>Hazard Communication Program (06.B.01)</u> | | | | |
| 14. <u>Process Safety Management Plan (06.B.04)</u> | | | | |
| 15. <u>Lead Compliance Plan (06.C.02 & Specifications)</u> | | | | |
| 16. <u>Asbestos Abatement Plan (06.C.03 & Specifications)</u> | | | | |

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Based on a risk assessment of contracted activities and on mandatory OSHA compliance programs, the Contractor shall address all applicable occupational risks and compliance plans. Using the EM 385-1-1 as a guide, plans, programs, procedures (assessments and evaluations), may include but not be limited to:

| Item Description | Yes | No | N/A | Remarks (Any NO or N/A item) |
|--|-----|----|-----|------------------------------|
| i. Plans (Programs, Procedures) continued. | | | | |
| 17. Radiation Safety Program (06.F) | | | | |
| 18. Abrasive Blasting Plan (06.I) | | | | |
| 19. Heat Stress Monitoring Plan (HSMP) (06.J.02) | | | | |
| 20. Cold Stress Monitoring Plan (CSMP) (06.J.04) | | | | |
| 21. Indoor Air Quality Management Plan (06.L) | | | | |
| 22. Mold Remediation Plan (06.L.04) | | | | |
| 23. Chromium (VI) Exposure Evaluation (06.M) | | | | |
| 24. Crystalline Silica Assessment (06.N.02) | | | | |
| 25. Lighting Plan for Night Operations (07.A.06) | | | | |
| 26. Traffic Control Plan (08.C.05) | | | | |
| 27. Fire Prevention Plan (09.A.01) | | | | |
| 28. Wild Land Fire Management Plan (09.L) | | | | |
| 29. Arc Flash Hazard Analysis (11.B) | | | | |
| 30. Assured Equipment Grounding Control Program (AEGCP), (11.D.05, Appendix E) | | | | |
| 31. Hazardous Energy Control Program and Procedures (12.A.01) | | | | |
| 32. Standard Pre-Lift Plan – LHE (16.A.03) | | | | |
| 33. Critical Lift Plan – LHE (16.H) | | | | |
| 34. Naval Architectural Analysis – LHE (Floating) (16.L) | | | | |
| 35. Floating Plant Inspection and Certification (19.A.01) | | | | |
| 36. Severe Weather Plan for Marine Activities (19.A.03) | | | | |
| 37. Emergency Plan for Marine Activities (19.A.04) | | | | |
| 38. Man Overboard/Abandon Ship Procedures (19.A.04) | | | | |
| 39. Float Plan for Launches, Motorboats, Skiffs (19.F.04) | | | | |
| 40. Fall Protection and Prevention Plan (21.D) | | | | |
| 41. Demolition/Renovation Plan (to include engineering survey) (23.A) | | | | |
| 42. Rope Access Work Plan (24.H) | | | | |
| 43. Excavation/Trenching Plan (25.A.01) | | | | |
| 44. Fire Prevention and Protection Plan for Underground Construction (26.D.01) | | | | |
| 45. Compressed Air Work Plan for Underground Construction (26.I.01) | | | | |
| 46. Erection and Removal Plan for Formwork and Shoring (27.C) | | | | |
| 47. Precast Concrete Plan (27.D) | | | | |

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Based on a risk assessment of contracted activities and on mandatory OSHA compliance programs, the Contractor shall address all applicable occupational risks and compliance plans. Using the EM 385-1-1 as a guide, plans, programs, procedures (assessments and evaluations), may include but not be limited to:

| Item Description | Yes | No | N/A | Remarks (Any NO or N/A item) |
|---|-----|----|-----|------------------------------|
| i. Plans (Programs, Procedures) continued. | | | | |
| 48. Lift-slab Plans (27.E) | | | | |
| 49. Masonry Bracing Plan (27.F.01) | | | | |
| 50. Steel Erection Plan (28.B) | | | | |
| 51. Explosives Safety Site Plan (ESSP) (29.A) | | | | |
| 52. Blasting Plan (29.A; 26.J) | | | | |
| 53. Dive Operations Plan (30.A.14, 30.A.16) | | | | |
| 54. Safe Practices Manual for Diving Activities (30.A.15) | | | | |
| 55. Emergency Management Plan for Diving (30.A.18) | | | | |
| 56. Tree Felling/Maintenance Program (31.A.01) | | | | |
| 57. Aircraft/Airfield Construction Safety & Phasing Plan (CSPP) (32.A.02) | | | | |
| 58. Aircraft/Airfield Safety Plan Compliance Document (SPCD) (32.A.02) | | | | |
| 59. Site Safety and Health Plan (HTRW) (33.B) | | | | |
| 60. Confined Space Entry Procedures (34.A.05) | | | | |
| 61. Confined Space Program (34.A.06) | | | | |
| j. Risk Management Processes (AHAs). Detailed project-specific hazards and controls shall be provided by Activity Hazard Analysis for each activity (DFOW). No work will begin on an activity (DFOW) until the initial AHA has been accepted by the GDA addressing the project-specific hazards. (01.A.14 & 01.A.15) <i>Note: USACE uses the Activity Hazard Analysis (AHA) as part of a total risk management process. Contractors and other individual employer's may use the AHAs or their own version [Job Safety Analyses (JSAs), Job Hazard Analyses (JHAs), or similar Risk Management assessment tools]. These documents are considered equivalent to, and acceptable substitutes for, the USACE's AHA provided the data collected is the same as that required by the AHA.</i> | | | | |

Remarks:

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| <p style="text-align: center;">Form A-02 U.S. Army Corps of Engineers Accident Prevention Plan Checklist (cont'd)</p> | <p style="text-align: center;">Date of Inspection</p> |
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Other Remarks: