

Lead Awareness Program

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Lead

Lead was one of the first industrial materials recognized as a serious health hazard that still accounts for many cases of disability. Acute lead poisoning usually manifests as gastroenteritis. Lead accumulates in the body; chronic lead poisoning manifested by anemia constipation, and abdominal pain. Accumulation in the peripheral nerves leads to wrist and ankle drop.

Lead enters the body primarily by inhalation. In the respiratory tract, most lead compounds are absorbed rapidly and stored in nerve tissue so that poisoning can develop from long-term exposure to low doses. Poisoning can also develop slowly from ingestion by way of lead contaminated food, drink, or tobacco products. Prevention of lead poisoning is almost entirely a matter of good personal hygiene and housekeeping and of dust and fume control. The Cal-OSHA 8-hour for lead dust exposure must not be exceeded the TWA for that day.

Purpose

The purpose of this program is to assure that none of our employees on jobsites under our control are exposed to lead at concentrations greater than fifty micrograms per cubic meter of air averaged over an eight hour time weighted average or:

A. If exposed to lead for more than an eight hour period, the allowable exposure will be reduced utilizing this formula - allowable employee exposure (in $\mu g/m^3$)=400 divided by hours worked in the day

B. When respirators are used to limit the exposure as required above, the level of exposure will be at the level provided by the protection factor of the respirator for those periods the respirator was worn. These periods will be averaged with periods when the respirator was not worn to determine the time weighted average for the total period.

C. Action will be taken to an airborne concentration of lead of thirty micrograms per cubic meter of air calculated as an 8-hour time-weighted average (TWA).

Specific Means To Achieve Compliance

Depending on job conditions and exposures, several means of compliance may be used to comply with exposure levels ranging from engineering controls, that is, water spray to eliminate/minimize airborne lead particulate, local or general ventilation. Administrative controls if implemented would include job rotation if necessary, based on the levels of exposure. As a final measure of protection, the use of personal protective equipment including but not limited to face shield/cover goggles, protective coveralls (disposable or through a uniform service), shoe coverlets, gloves and respiratory equipment which is acceptable for tile level of exposure as determined through individual monitoring.

Air Monitoring Documentation

All air monitoring documentation including sampling strategy, field worksheet, field monitoring data including actual exposure levels, analysis and results of field sampling will be kept on the jobsite and in the main office.

Multi-Contractor Jobsite Agreements/Responsibilities

All agreements between the prime contractor and subcontractors not otherwise covered in this program such as items that will relieve either the prime contractor or the subcontractor(s) from any duties (without relieving them from their legal responsibility) will be outlined in separately.

Jobsite Inspection Activity

Worksite Inspections

The jobsite inspections will be conducted by a competent person daily and/or when there is a significant weather or work procedure change that will change the operation to the point where it will affect the safety of the worksite. All items noted that affect the safety of the workplace or any individual operation will be corrected in an expedient manner. Records of the inspections will be received from the site owner and maintained at the job site and the main office.

Complete jobsite inspections will be conducted by a competent person weekly which will include but not be limited to the worksite, vehicles, tools, any trenching/excavations, SDS's and HazMat Plans, personal protective equipment, fire equipment, etc. All items affecting the safety of the operation will be noted and corrected in an expedient manner. Records of the inspections will be maintained. If at anytime questions or concerns arise, our safety manager, Tony Nichols needs to be contacted immediately.

Equipment & Materials

All equipment, tools and materials will be checked at a minimum on a daily basis before use. All equipment that will be used by more than one operator will be inspected before use by each operator regardless of the number of previous inspections held during that workday. Items found that affect the safe operation of the equipment will be repaired before the use of that equipment. Repairs will be made by a competent person. Where applicable, records of inspections and repairs will be maintained.

At a minimum, and where applicable, operators of mobile and/or hoisting equipment will be responsible for checking fluid levels of vehicles along with conducting a general visual check of other pertinent aspects of equipment, that is, tires, wire ropes, slings, hooks, etc. When the equipment is operated by more than one operator in a day or during a work shift, each operator will be responsible for conducting an inspection of the equipment. Where defects are noted that affect the safe operation of that equipment, repairs will be made by a competent person on an expedient basis before that equipment being used. Where applicable, records of inspections and repairs will be maintained.

Mechanical Ventilation

Should the necessity arise on any jobsite for the use of mechanical ventilation, performance evaluations of the ventilation systems will be made in controlling exposures and copies of the system efficiency will be maintained.

Administrative Controls

In the event that administrative controls are used to control employee exposure below the Time Weighted Average (TWA), we will establish a job rotation schedule that will include:

- A. Name and/or identification number of each employee affected.
- B. Duration and exposure levels at each job or workstation where each affected employee is located.
- C. Any other information which may be useful in assessing the reliability of administrative controls to reduce exposure to lead.

Respiratory Protection

When required, respiratory protection will meet required regulations and will be provided and maintained in accordance with the respiratory protection program and respirator selection will be accordance with Table 1.

Table I Respiratory Protection For Lead Aerosols

Airborne Concentration of	Required Respirator. 1
Lead	
or Condition of Use	
Not in excess of 500 mg/m3	*1/2 mask air purifying respirator with high efficiency filters. 2,3
	*1.2 mask supplied air respirator operated in demand (negative
	pressure) mode.
Not in excess of 1,250 mg/m3	*Loose fitting hood or helmet powered air purifying respirator with
	high efficiency filters. 3
	*Hood or helmet supplied air respirator operated in a continuous-flow
	mode-e.g., type CE abrasive blasting respirator operated in
	continuous-flow mode.
Not in excess of 2,500 mg/m3	*Full facepiece air purifying respirator with high efficiency filers. 3
	*Tight fitting powered air purifying respirator with high efficiency
	filters. 3
	*Full facepiece supplied air respirator operated in demand mode.
	*1/2 mask or full facepiece supplied air respirator operated in a
	continuous flow mode.
	*Full facepiece self-contained breathing apparatus (SCBA) operated in
	demand mode
Not in excess of 50,000	*1/2 mask supplied air respirator operated in pressure demand or other
mg/m3	positive-pressure mode.
Not in excess of 100,000	*Full facepiece supplied air respirator operated in pressure demand or
mg/m3	other positive-pressure-mode-e.g., type CE abrasive blasting
C	respirators operated in a positive-pressure mode.
Greater than 100,000 mg/m3	*Full facepiece SCBA operated in pressure demand or other positive-
unknown concentration or	pressure mode.
firefighting.	•

- Respirators specified for higher concentrations can be used at lower concentrations of lead.
- Full facepiece is required if the lead aerosols cause eye or skin irritation at the use concentrations.
- A high efficiency particulate filter (HEPA) means a filter that is 99.97 percent efficient against particles of 0.3 micron size or larger. Respirators will be required in the following circumstances:
- A. Whenever an employee's exposure to lead exceeds the PEL;
- B. In work situations in which engineering controls and work practices are not sufficient to reduce exposures to or below the PEL.
- C. Whenever an employee requests a respirator; and
- D. An interim protection for employees performing the following tasks
- Where lead containing coatings or paint are present: manual demolition of structures (e.g., dry

wall), manual scraping, manual sanding, heat gun applications, and power tool cleaning with dust collection systems;

• Spray painting with lead paint

Along with the respirator selection we will provide a powered air-purifying respirator in lieu of those mentioned in Table 1 whenever:

- An employee chooses to use this type of respirator; and
- This respirator will provide adequate protection to the employee.

Protective Work Clothing and Equipment

Where an employee is exposed to lead above the PEL without regard to the use of respirators, where employees are exposed to lead compounds which may cause skin or eye irritation and as interim protection for employees performing tasks as listed in the previous section, we will provide at no cost to the employee and ensure that the employee uses appropriate protective work clothing and equipment that prevents contamination of the employee and the employee's garments such as, but not limited to:

- A. Coveralls or similar full body work clothing;
- B. Gloves, hats, shoes, or disposable shoe coverlets;
- C. Face shields, vented goggles, or other appropriate protective equipment which complies with all applicable requirements for personal protective equipment selection and use.

We will provide all the above mentioned clothing and equipment in clean, dry condition at least weekly, and daily to employees whose exposure levels without regard to a respirator are over 200 micrograms/cubic meter of lead as an 8 hour Time Weighted Average (TWA). We will:

- A. Provide cleaning, laundering and disposal of protective clothing and equipment;
- B. Provide repairing and/or replacing of protective clothing and equipment as needed to maintain their effectiveness;
- C. Assure that contaminated protective clothing is removed at the completion of the work shift only in the change areas provided for that purpose,
- D. Assure that contaminated protective clothing that is to be cleaned, laundered or disposed of is placed in a closed container in the change area that prevents dispersion of lead outside the container.
- E. Notify in writing to those persons who clean or launder contaminated clothing of the potentially harmful effects of exposure to lead.
- F. Label all containers of contaminated protective clothing with the following:
 - "Caution. Clothing Contaminated With Lead. Do Not Remove Dust By Blowing Or Shaking. Dispose Of Lead Contaminated Wash Water In Accordance With Applicable Local, State And Federal Regulations."
- G. Prohibit removal of lead from protective clothing or equipment by blowing, shaking, or any other means that disperses lead into the air.

Housekeeping

As a general practice, all work surfaces will be maintained as free as practical from any accumulations of lead. Floors, that is, change rooms, indoor areas, etc., other work surfaces where lead accumulates shall whenever possible, be cleaned by vacuuming or other methods that minimize the likelihood of lead becoming airborne.

- A. Outdoor work areas, that is, excavations, etc. where aerially deposited lead or other lead contaminants shall be either covered or sprayed with water mist to eliminate or minimize airborne lead.
- B. Shoveling, brushing, dry or wet sweeping will only be used where vacuuming or other equally effective methods have been tried and found not to be effective.
- C. When vacuum methods are used, the vacuums will be equipped with HEPA filters which will be used and emptied in a manner that minimizes re-entry of lead into the workplace.
- D. The use of compressed air is prohibited to remove lead from any surface unless the compressed air is used in conjunction with a ventilation system designed to capture the airborne dust created by the compressed air.

Hygiene Facilities and Practices

All personnel in areas where there is lead exposure above the permissible exposure limit (PEL) are (without regard to the use of respirators) prohibited from bringing having present or consuming food or beverage, having present any or using tobacco products and having present and applying any cosmetic products.

Change Areas

We will provide clean change areas for employees whose airborne exposure to lead is above the PEL, and as interim protection for employees performing tasks as in previous sections without regard to the use of respirators. We will:

- A. Assure that change areas are equipped with separate storage facilities for protective work clothing and equipment and for street clothes that prevents cross contamination.
- B. Assure that employees do not leave the workplace wearing any protective clothing or equipment that is required to be worn during the work shift.

Showers

We will provide shower facilities, where feasible, for use by employees whose airborne exposure to lead is above the permissible exposure limit (PEL). Where shower facilities are available, employees are required to shower at the end of the work shift and use all cleansing agents/towels that will be supplied by us specifically for their use.

Eating Facilities

Where employee exposure to lead is above the permissible exposure limit and without regard to respirator use, we will provide lunchroom facilities or eating areas for those affected employees. All lunchroom facilities and/or eating areas will be readily accessible to employees and maintained such that they will be as free as possible from lead contamination.

Regardless of their use of a respirator, all employees exposed to airborne lead will be required to wash their hands and face prior to eating, drinking, smoking or applying cosmetics.

Employees gaining access to lunchroom and eating facilities will not enter the facilities with protective work clothing or equipment until they have had the surface dust from their clothing or equipment removed by vacuuming, downdraft booth, or other cleaning method that limits dispersion of dust.

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Hand Washing Facilities

Adequate hand washing facilities that comply with federal and state regulations will be provide to all employees exposed to airborne lead contaminants. On jobsites where shower facilities are not provided, all employees will be required at a minimum to wash their hands and face at the end of the work shift.

Medical Surveillance

Initial medical surveillance will be made available to all employees who at any time during the present job will be exposed to lead any day at or above the action level. The medical surveillance program will be established for all employees who are or may be exposed at or above the action level for more than 30 days in any consecutive 12 months. Medical surveillance will be performed under supervision or by a licensed physician. All surveillance and multiple physician review will be conducted at no cost to employees.

Biological Monitoring

- A. Biological sampling in the form of blood sampling and analysis for lead and zinc proptoporphyrin (ZPP) will be provided for the above personnel.
 - Every 2 months for the first 6 months
 - Every 6 months thereafter
 - For each employee with a blood level at or above 40 micrograms/deciliter testing will be conducted every 2 months until 2 consecutive sample analyses indicate a blood level of less than 40 micrograms/deciliter
 - For each employee removed from exposure to lead due to an elevated blood level, testing will be conducted at least monthly during the removal period.
- B. Follow up blood sampling tests will be conducted when blood level test indicate that the employee's blood level exceeds the numerical criterion for removal of 50 micrograms/deciliter. A follow up test will be conducted within 2 weeks of time that we are notified of the first test result.
- C. All blood sampling and analyses will be conducted by a laboratory and have an accuracy (to a 95 % confidence level) within plus or minus 15% or 6 micrograms/deciliter, whichever is greater.
- D. All employees will be notified in writing of the results of their blood sample and analysis within 5 days of receipt of test results.
- E. For those test results exceeding 40 micrograms/deciliter, employees must be notified in writing that they will be temporarily removed from the jobsite and will be notified in writing of their entitlement to Medical Removal Benefits when they have an exposure to lead at or above the action level on each occasion that a periodic and a follow-up blood sampling test conducted indicate that the employee's blood lead level is at or above 50 micrograms/deciliter.

Medical Examination and Consultations

We will make available to all employees occupationally exposed on any day to lead at or above the action level medical examinations and consultations on the following schedules:

- A. For each employee for whom a blood sampling test was conducted within the last 12 months which indicated a blood lead level at or above 40 micrograms/deciliter, exams and consultations would be provided at least annually.
- B. Exams and consultations will be provided as soon as possible when
 - An employee notification is received with regard to developed signs or symptoms commonly associated with lead intoxication,

- That the employee desires medical advice concerning the effects of current or past exposures to lead on the employee's ability to procreate a healthy child,
- That the employee is pregnant,
- That the employee has demonstrated difficulty in breathing during a respirator fit testing session or during use
- C. Further exams and consultations will be offered as medically appropriate for each employee either removed from exposure to lead due to a risk of sustaining material impairment to health, or otherwise limited pursuant to a final medical determination.

The content of the physical examinations and consultations, the multiple physician review mechanism and information provided to examining and consulting physicians shall be determined by the examining physician and be in keeping with the guidelines addressed in the regulations.

Written medical opinions will be obtained by us and furnished to the employee with a copy of a written medical opinion from each examining or consulting physician which contains only the following information:

- A. Physician's opinion as to whether the employee has any detected medical conditions that would place the employee at increased risk of material impairment of the employee's health from exposure to lead.
- B. Any recommended special protective measures to be provided to the employee, or limitations to be placed upon the employee's exposure to lead.
- C. Any recommended limitations upon the employee's use of respirators, including a determination of whether the employee can wear a powered air purifying air respirator if a physician determines that the employee cannot wear a negative pressure respirator.
- D. The results of the blood lead level determination.

We will instruct each examining physician:

- A. Not to reveal in the written opinion or orally, or in any other means of communication with the employer, findings, including laboratory results, or diagnoses unrelated to an employee's occupational exposure to lead and
- B. Advise the employee of any medical condition, occupational or non-occupational, which dictates further medical examination or treatment.

Medical Removal Protection

We will provide medical removal protection to employees under the following conditions:

- A. Temporary removal due to elevated blood lead level. Employees having an exposure to lead at or above the action level of 30 micrograms/cubic meter of air on each occasion that a periodic and follow up blood sampling test conducted indicate that the employee's blood lead level is at or above 50 micrograms/ deciliter and:
- B. Temporary removal due to a final medical determination.
 - Employee's will be removed from work when they have an exposure level at or above the action level on each occasion that a final medical determination results in a medical finding, determination, or opinion that the employee has a detected medical condition which places the employee at increased risk of material impairment to health from exposure to lead.

- Where a final medical determination results in any recommended special protective measures for an employee or limitations in an employee's exposure to lead, we will implement and act accordingly with the recommendation.
- C. Employees will be returned to their regular work status from medical removal protection when:
 - An employee removed due to a blood level at or above 50 micrograms/ deciliter has 2 consecutive blood sampling tests that indicate the blood lead levels are below 40 micrograms/deciliter;
 - An employee removed due to medical determination has a prior final medical determination that results in a medical finding, determination, or opinion that the employee no longer has a detected medical condition which places the employee at increased risk of material impairment to health from exposure to lead.

Medical Removal Protection Benefits

We will provide an employee up to eighteen (18) months of medical removal protection benefits on each occasion that an employee is removed from exposure to lead or otherwise limited to work. Medical Removal Protection Benefits will be provided for as long as the job the employee was removed from the job and work continues as directed by the law. We will maintain the normal earnings, seniority and other employment rights and benefits of an employee, including the employee's right to his or her former job status as though the employee had not been medically removed from the job or otherwise medically limited as per the law requirements.

- A. During any medical removal, all employees will be required to be actively involved in our medical surveillance program in order to maintain eligibility for Medical Removal Protection Benefits.
- B. If an employee files a worker's compensation claim in addition to receiving Medical Removal Protection Benefits, we will maintain payment of those benefits pending disposition of the worker's comp claim. To the extent that an award is made to the employee for lost earnings, during the period of removal, our medical protection obligations shall be reduced by such an amount.
- C. Our obligation to provide Medical Removal Protection Benefits shall also be reduced if the employee receives compensation benefits from lost earning from any publicly or employer funded program or receives income from employment with another employer made possible by the virtue of the employee's removal.
- D. If we voluntarily remove an employee from lead exposure when not required to do so or otherwise places' limitations on an employee due to the effects of lead exposure on the employee's medical condition, that employee will be afforded the same Medical Removal Protection Benefits as other employees removed from the job as required by law.

Employee Information and Training

We will conduct training programs for lead exposure in accordance with current prescribed regulations for all employees subject to lead exposure at or above the action level or for employees subjected to lead compounds, etc., that may cause skin or eye irritation. Training shall be provided before the time of the job assignment or startup date and at least annually for each employee who is subject to lead exposure at or above the action level on any given day.

Training

The training program will be made available to employees, their designated representatives and to Cal OSHA upon request. The contents of the training program will consist of the following elements:

- A. The contents of the regulations and this program.
- B. The specific nature of operations that could result in lead exposure at or above the action level.
- C. The purpose, proper selection, fitting, use and limitation of respirators.
- D. The purpose and description of the Medical Surveillance Program and The Medical Removal Protection Program and Benefits, adverse effects of lead exposure including reproductive effects of males, females and the fetus, with additional warning and emphasis for pregnant women.
- E. Proper engineering controls and work practices associated with the employee's jobs.
- F. The contents of any compliance plan in effect.
- G. Instruction to employees that cleansing agents should not be routinely used to remove lead from their bodies except under the direction of a licensed physician.

Signs

We will use specific signage as required by the regulations including those mandated by this section. There will be no statements on or near the required signs that would lend confusion, misinterpretation, contradiction and/or detract from the meaning of the required sign. The following signs will be posted in each work area where the employee exposure to lead is above the permissible exposure limit (PEL).

"WARNING LEAD AREA POISON NO SMOKING"

Recordkeeping

We will establish and maintain an accurate record of all monitoring and other data used in conducting employee exposure assessments. The records should include:

- A. Dates, number, duration, location and results of each of the samples taken if any including a description of the sampling procedure used to determine representative employee exposure where applicable.
- B. A description of the sampling and analytical methods used and evidence of their accuracy.
- C. Type of respiratory devices worn if any.
- D. Name, social security number, job classification of the employee monitored and of all employees whose exposure the measurement is intended to represent.
- E. Environmental variables that could affect the measurement of employee exposure.

Medical surveillance records and other medical records will include:

- A. Name, social security number and description of duties of the employee.
- B. A copy of the physicians written opinions.
- C. Results of any airborne exposure monitoring done on or for that employee and provided to the physician.
- D. Any employee medical complaints related to lead exposure.

We will ensure that the examining physician will maintain and keep the following record in accordance with accepted practice under state and federal requirements:

- A. The medical examination results including medical and work history required by Cal OSHA.
- B. A description of the laboratory procedures and a copy of any standards or guidelines used to interpret the test results or references to that information.
- C. A copy of the results of biological monitoring.

Medical removal records will be maintained for each employee removed from current exposure to lead for at least the duration of employment. Each record will include:

- A. The name, social security number of the employee.
- B. The date of each occurrence that the employee was removed from current exposure to lead as well as the corresponding date on which the employee was returned to his/her former status.
- C. A brief explanation of how the removal was/is being accomplished.
- D. A statement with respect to each removal indicating whether or not the reason for the removal was an elevated blood level test.

Objective data for materials being exempted from the requirement for initial monitoring will be kept for a period of at least thirty years. This may include lead compounds etc., where airborne dusts, etc., may not reach the action level.

We will make available all records to affected employees, former employees, and their designated representatives (as long as that request is in writing by the employee) and to Cal OSHA for examination and copying. Record transfers by us will be handled as follows:

- A. If we cease to do business, the successor employer (if there is one) will receive and retain all records.
- B. If we cease to do business and there is no successor, the records required to be maintained will be sent to the Director of Cal-OSHA.

Observation and Monitoring

Whenever observations of monitoring procedures and protocol takes place, we will require all observers to comply with all necessary procedures and precautions as well as to wear all personnel protective equipment required by the regulations for the exposure observed.

- A. Without interfering with the monitoring, the observers will be entitled to
- B. Receive and explanation of the monitoring procedures;
- C. Observe all steps related to the monitoring of lead performed at the place of exposure;
- D. Record the results obtained or receive copies of the results when returned by the laboratory upon written request.

See and review our written Respiratory Protection Program when lead is over the permissible level.