



INTEROFFICE CORRESPONDENCE

DATE: March 7, 1994

TO: H. S. Berman, Engineering and Technology, Bldg. 130, X2389

FROM: S. G. Stiger, Environmental Restoration Management, Bldg. 080, X8540 *SAS*

SUBJECT: EG&G COMPLIANCE WITH 29 CFR1910.120 - SGS-152-94

Ref: Mark N. Silverman ltr (00409) to Harry P. Mann, EG&G Compliance with 29 CFR 1910.120, January 26, 1994

Environmental Restoration Management (ERM) has reviewed the assessment and surveillance documentation provided by the Department of Energy/Rocky Flats Office (DOE/RFO) Occupational Safety and Health Division of compliance with 29 CFR 1910.120, Hazardous Waste Operations and Emergency Response. Following is a brief response for the three identified issues:

Issue 1: Inconsistent application of health and safety criteria for the procurement of subcontract services.

Response: ERM has directed Procurement to procure all subcontracts that include construction related activities under Section 01700, Division 1, Health and Safety for Service Subcontracts. This will ensure a consistent approach to the screening and selecting of subcontractors.

Issue 2: Inadequate control over subcontractors in regard to health and safety compliance.

Response: ERM has initiated in conjunction with Safety, Safeguards, and Security (SS&S) regularly scheduled and unannounced inspections of Subcontractors by Health and Safety Support. These inspections evaluate the compliance to and implementation of the Site Specific Health and Safety Plan and applicable Federal, State, Local, and EG&G Rocky Flats, Inc. practices and policies. SS&S communicates identified deficiencies to the Contract Technical Representative (CTR) for corrective action. In addition, several Occupational Safety and Health Administration (OSHA) tracking efforts that will provide information in regards to subcontractor performance have been initiated.

Issue 3: EG&G and the environmental subcontractor have not implemented a program that ensures compliance with the OSHA safety and health standards.

Response: Extensive efforts have been made to upgrade the overall Environmental Restoration Health and Safety Program, including active involvement and oversight by ERM and SS&S of field activities and stressing to ERM subcontractors mandatory compliance

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BY	G. I. Ostdiek <i>820</i>
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Response: to applicable Federal, State, and Rocky Flats Plant (RFP) practices and policies. It is noted that Health and Safety inspections for the Operable Unit 1 Groundwater Treatment Facility Project have been reduced to quarterly due to the efforts by project personnel to maintain a safe and healthful workplace.

ERM assumes that the general issue identified is related to deficiencies noted at the Operable Unit 2 (OU2) Field Treatability Unit (FTU). Of the deficiencies noted at OU2 FTU, all but one have been closed out. The remaining deficiency has been addressed.

Many of the deficiencies have been addressed in the Construction Safety Action Plan (dated December 10, 1993). The remaining deficiencies, recommendations, and comments are discussed in the following attachments.

For further assistance, please contact Keith D. Anderson of my staff at extension 6979.

KDA:lmw

Attachments:
As Stated (5)

cc:
G.M. Aldrich
G.W. Beers
J. M. Brooks
M. C. Broussard
G.W. Coles
M. L. Littleton
C.A. Lopez
L. A. Nelowet
ERM Records Center (2)

Assessment 93-GDN-IH-16.02-084, Procurement of Subcontractors

A response to the issue revised by this assessment is provided in the cover letter; Issue 1, Response.

Recommendation 1: Expand "Section 1700" to emphasize 29CFR 1910.120.

Response: "Section 1700" that was issued by Environmental Restoration Management (ERM) to subcontractors was amended to stress compliance to 29 CFR 1910.120.

Recommendation 2: Include representation of Health and Safety in the evaluation of the Master Task Subcontract (MTS) list.

Response: Environmental Procurement is presently restructuring the issuance of the MTS lists. Presently the Cost and Technical components of the MTS are reviewed. Procurement will incorporate the review for safety and health performance into the MTS review.

Recommendation 3: Amend existing MTS contracts to include "Section 1700".

Response: All existing MTS contracts issued by ERM were amended to include Division 1, Section 01700, Subcontractor Safety and Health Requirements for Service Subcontracts in November, 1993.

Recommendation 4: The Contract Technical Representative (CTR) needs to be informed of the subcontractor health and safety concerns.

Response: Regularly scheduled and unannounced inspections have been implemented as of May 1993 for all ERM field projects. A Health and Safety Team comprised of Occupational Safety, Industrial Hygiene, and Radiological Engineering visit the project/site to ensure comprehensive implementation and compliance to the Project Specific Health and Safety Plans. All deficiencies and recommendations are communicated directly to the ERM Project Manager, who is or works with the CTR, for corrective action and implementation. Additionally, ERM Project Managers now must approve the Project Specific Health and Safety Plans (HASPs) and are held accountable for implementation. This process is being incorporated into the revision of the Environmental Restoration Health and Safety Program Plan (ERHSPP).

Recommendation 5: Revise Health and Safety Practice (HSP) Section 224.01 (Safety and Health Responsibilities for Construction Activities) to include environmental contracts.

Response: ERM is not responsible for revision to HSP 24.01. However, ERM subcontracts that include construction related activities as defined by DRAFT DOE Order 5480.9A, Attachment 1, are required to comply with HSP 24.01. This has been ensured by the incorporation of Section 01700, Division 1 in the ERM MTS list.

Assessment 93-GDN-IH-16.01-085, Review of RTG Health and Safety Plan (HASP).

Recommendation: Provide greater detail as to the daily work activities and related controls.

Response: The generation of HASPs have met the requirements of 29 CFR 1910.120. ERM is revising the *Environmental Restoration Health & Safety Program Plan and Workbook (ERHSPP)* to reflect a task analysis methodology when discussing major work activities performed under the Project Work Plan. Present HASPs are developed in compliance to 29 CFR 1910.120 and no changes will be submitted to these documents.

Recommendation: Include an example HASP in the work book given to subcontractors.

Response: The ERHSPP and Workbook are being revised and will include a new "Boilerplate" that delineates the content requirements of a HASP.

Assessment 93-GDN-16.04-087, EG&G Contractor Hazardous Waste Program.

Deficiency 1a: A Radiation Protection Technologist (RPT) was not performing all tasks required.

Response: In accordance with the OU15 HASP, EG&G Radiological Control Technicians (RCTs) did monitor the OU15, Building 881 work site before and during sample collection. An initial pre-job survey of Room 165 was performed on 7/28/93 and included direct alpha and beta surveys, and smear samples for removable alpha and beta for every square meter in the room. Additional smear samples for removable alpha and beta were collected in Room 165 on 7/30/93 as part of the implementation of the OU15 field sampling plan. The RCT assigned to the job for the hot water rinsate sampling activities performed on 8/16/93 did conduct some monitoring during the sampling activities, although not always on a frequent or regular basis. Based on the results of the pre-job surveys and the initial monitoring of the area during sampling, it was evident that radiological hazards in the area were extremely low. The RCT did monitor out the subcontractor sampling personnel following completion of the sampling activities. Building 881 Rad Ops performed the radiological monitoring in accordance with the Radiological Operating Instruction Manual. The same applies to the recording of monitoring results on the RWP. Based upon the support activities provided, the identified deficiency is not confirmed.

Deficiency 1b: The RPT was not wearing the same PPE as other site personnel.

Response: The RCT was not actually performing hot water rinsate sampling. The Personal Protective Equipment(PPE) requirements specified in the OU15 HASP were for those individuals involved in the collection of the rinsate samples. The RCT was instead present in a support role. The selected PPE for this support activity was adequate.

Deficiency 1c: The Operable Unit 15 (OU15) did not clearly specify personal protective equipment requirements.

The PPE requirements identified in the OU15 HASP were in some instances left flexible in order to address the variations in conditions between Individual Hazardous Substance Sites (IHSSs) and the differences in procedures between buildings. Based on the low potential for radiological hazards and the absence of any splashing or misting during sample generation and collection in IHSS 211, PPE requirements were downgraded (with concurrence from Radiological Engineering and Industrial Hygiene) for the two remaining IHSSs in Building 881 (IHSSs 178 and 217). Initially Anti-C clothing, which included hoods and Tyvek coveralls, was worn for sampling IHSS 211. Following the downgrading of PPE, blue RFP furnished coveralls were specified for the sampling activities in IHSSs 178 and 217. No deficiency existed.

Deficiency 1d: Personnel decontamination requirements as specified in the OU15 HASP were not being adhered to.

- Response: Some difficulties were encountered with decontamination procedures during sampling of IHSS 178, based on access requirements and the layout of the area. Measures were taken to better delineate and control the sampling, decontamination and support areas in the remaining IHSSs. These measures allowed sampling personnel to remove all their disposable protective clothing in the decontamination area prior to entering the support area.
- Deficiency 1e: Organizational instruction was not addressed in the HASP.
- Response: The OU15 HASP does identify the Project Manager, the Project Health and Safety Officer, and other project personnel, along with their respective responsibilities. The chain of command and lines of authority, responsibility and communication are addressed, although not necessarily in a clear and discreet manner. Future HASPs will more clearly identify these items.
- Deficiency 1f: Site control measures were inadequate.
- Response: Site maps and site work zones were not specifically included in the OU15 HASP. Site maps were included in the OU15 Phase I RCRA [Resource Conservation and Recovery Act] Facility Investigation/Remedial Investigation (RFI/RI) Work Plan and later redrawn based on field measured dimensions. The site maps and site work zones were reviewed by all personnel in project and health and safety meetings prior to sampling. It is stated in 29 CFR1910.120 (d)(3) that "where these requirements are covered elsewhere they need not be repeated." Access control was difficult in Room 165, since a representative from the RFP Fire Department directed the subcontractor not to block off the main access and egress routes in Building 881. Field personnel attempted to *direct building personnel away from the sampling area*, however, one person was able to walk through the work area. The layout and locations of the remaining IHSSs enabled the subcontractor to properly control access, and as a result the problem did not reoccur.
- Deficiency 1g: Training requirements were not clearly defined.
- Response: Section 4.0 of the OU15 HASP identifies the training requirements for field personnel. The elements defined in 29 CFR1910.120 (e)(2) were covered during portions of the RFP training classes and the 24-hour site-specific training. In addition, all subcontractor field personnel reviewed the EG&G HSP and signed the certification in Appendix A of the OU15 HASP. Changes to the ERHSPP have identified specific HSP sections that are applicable to field activities and those that are appropriate for review.
- Deficiency 1h: A safety and health hazard analysis for each site task was not identified.
- Response: Section 1.3 of the OU15 HASP identifies the potential contaminants of concern for each IHSS. Section 2.0 describes and analyzes the potential physical, biological, chemical and radiological hazards associated with the OU15 sampling activities. The hazard analysis provided in Sections 1.3 and 2.0 is applicable to all the sampling site tasks identified in Section 1.4. In the

future, HASPs will more explicitly tie the analysis of hazards to the specific site tasks.

Deficiency 1i: Workers were not signing the RWP roster.

Response: Field personnel did not consistently sign the RWP personnel roster in accordance with the requirements of Section 4.3 of HSP 6.07 during the performance of field activities in Building 881. Some confusion existed because the three IHSSs in Building 881 were not in RCAs. Subcontractor personnel were aware of the requirement for signing RWP rosters as they entered and left RCAs, but were not familiar with the personnel roster requirements for work in general building areas. The confusion was cleared up and proper RWP personnel roster sign in and out procedures were then followed for work in the remaining three IHSSs.

Deficiency 1j: The OU15 HASP did not adequately address Emergency Response.

Response: Some of the elements of an emergency response plan not covered by the OU15 HASP, such as evacuation routes and procedures, were addressed in building indoctrination training. Since emergency response actions are typically coordinated by RFP personnel and not by subcontractors (especially for inside building work), the OU15 HASP deferred many of these responsibilities to RFP. In the future, reference to the RFP Emergency Response Plan in the HASP will be included, if appropriate.

Assessment 93-GDN-OSB-1.02-088 General Safety Inspection of Operable Unit 2

A response to the issue raised by this assessment is provided in the cover letter, Issue, Response.

All the deficiencies identified during the site inspection of the OU2 Field Treatability Unit (FTU) have been closed. ERM takes exception to the following deficiencies. A copy of the action tracking list for the OU2 FTU is included in this attachment.

Deficiency: Electrical insulating material such as mats need to be provided where electrical shock hazards could exist.

Action: Mats are not required per Health and Safety Practices (HSP) Section 15.01. Mats are only required for work on energized systems, which does not occur on the identified system.

Deficiency: Fire extinguisher needs to be the appropriate size and type for the area of potential use.

Action: The EG&G Fire Department was asked to check the fire extinguisher size on 9/14/93. The Fire Department determined that the type and size were appropriate.

Deficiency: Electrical panel/box was not weather proofed in order to prevent moisture or water from entering or accumulating in the enclosure.

Action: The electrical panel/box is weather tight and deemed acceptable.

Deficiency: Emergency flushing/eye wash station was not flushed and verified for proper operation each week.

Action: EG&G Industrial Hygiene was contacted. No flushing was required as the "water" is replaced every 6 months and an inspection of the unit is done each week by verifying the pressure gauges is acceptable. The inspection is noted on the Inspection Tag.

Assessment 93-GDN-OSB-1.02-102, Building 903 Decon Pad

A response to the issue raised by this assessment is provided in the cover letter, Issue 2, Response.

Deficiency 1: Deficiency in protective foot wear.

Response: EG&G Industrial Hygiene (IH) provided guidance in response to Action Plan #93-003328. On August 3, 1993, IH recommended the use of knee-high, neoprene or polyvinyl chloride (PVC) boots meeting American National Standards Institute (ANSI) Z 41 Class 75. The use of meta-tarsal guard boots was not recommended and are no longer used for high pressure steam cleaning operations. This change has been implemented and reflected in the Health and Safety Plan (HASP) for Decontamination Facilities.

Deficiency 2: Deficiency in eye protection.

Response: EG&G Radiological Engineering (RE) provided guidance in response to Action Plan #93-003328. This involved a re-evaluation of the respiratory protection requirements for the pressure steam cleaning activity. Based upon their evaluation of 24 months of operations at the decontamination facility, RE recommended that suitable face shields be used in lieu of the full face respirators for routine decontamination procedures. For decontamination efforts involving radiological contamination, full face respirators are required. This change has been implemented and reflected in the HASP for Decontamination Facilities.

Deficiency 3: Inadequate respiratory protection for steam cleaning and sweeping.

Response: Daily radiological contamination control surveys are conducted of the decontamination pads. If radiological contamination in excess of unrestricted limits are detected, immediate decontamination of the pad surface is done. Therefore, there is no potential for exposure to airborne radioactive material caused by sweeping activities.

In regards to chemical and nuisance dust while sweeping the decon pad concerns, ERM has requested IH to evaluate this potential exposure. A response, with implementation, will be provided by March 22, 1994.

Respiratory protection requirements for pressure steam cleaning will be defined in the revision to HASP for the Decontamination Facilities. The revision is expected to be completed by March 22, 1994.

Recommendation 1: Consider the addition of a canopy over the decon pad.

Response: Funding has been provided to upgrade the Protected Area and the 903 Decontamination Facilities (FY94, Work Package #12960). The upgrades include the installation of a canopy to reduce the amount of incidental waster which must be controlled.

Deficiency 4: Planned oversight in the form of on-site inspections by EG&G were not being conducted.

Response: The CTR provides consistent oversight of all operational cost, schedule, technical, and quality performance criteria of the subcontractor operating the decontamination facility. Monthly inspections by Health and Safety Support of the decontamination facility were initiated in September, 1993. These inspections have continued with all deficiencies communicated directly to the CTR.

Deficiency 5: No Material Safety Data Sheet (MSDS) for "aquaset".

Response: An MSDS for "aquaset" has been obtained and is readily available for reference at the Protected Area and the 903 Decontamination Facilities.