|  |  |  |
| --- | --- | --- |
| **BLR** | **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
| **Audit** | **Work Area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
| **Checklists** | **Inspected By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |  |
|  |  |

|  |  |  |
| --- | --- | --- |
| **Emergency Preparedness Checklist** |  |  |
|  |  |  |
| **Emergency Preparedness [29 CFR 1910.38; .165; .1200]** |  |
| **ALARM SYSTEMS:** | **EMPLOYEE COMMUNICATION** |  |
| 29 CFR 1910.38; .165 | **AND TRAINING:** |  |
| o Is there an established employee alarm | 29 CFR 1910.38; .1200(h) |  |
| system? [.38(d)] | o Have a number of employees been |  |
| o Is there a distinctive sound for each alarm | designated and trained to assist in emergency |  |
| purpose? [.38(d)] | evacuation procedures? [.38(e)] |  |
| o Do you review the plan with each affected |  |
| o Is the employee alarm easily identified over |  |
| workplace noise and light levels? | employee when the plan is developed, |  |
| whenever the employee's responsibilities |  |
| [.165(b)(2)] |  |
| change, or when the plan itself is changed? |  |
| o Is the alarm distinctive enough so that |  |
| [.38(f)(1)(2)(3)] |  |
| employees will easily recognize it as a signal |  |
| o Are employees provided with information |  |
| to evacuate the area or perform critical |  |
| and training on hazardous chemicals in their |  |
| functions under the emergency action plan? |  |
| work areas at the time of assignment, as well |  |
| [.165(b)(3)] |  |
| as whenever a new chemical hazard is |  |
| o Have you explained to each employee the |  |
| introduced into the work area? [.1200(h)(1)] |  |
| preferred method of reporting emergencies |  |
| o Is chemical-specific information always |  |
| (such as manual pull box alarms, public |  |
| available through labels and SDSs? |  |
| address systems, radio, or telephones)? |  |
| [.1200(h)(1)] |  |
| [.165(b)(4)] |  |
| o Are employees informed of OSHA |  |
| o Are emergency numbers posted near |  |
| telephones, employee notice boards, etc.? | requirements regarding HazCom training? |  |
| [.1200(h)(2)(i) |  |
| [.165(b)(4)] |  |
| o Are employees informed of any hazardous |  |
| o Are employee alarm systems maintained in |  |
| operating condition except when undergoing | chemicals present in their work area? |  |
| [.1200(h)(2)(ii)] |  |
| repairs or maintenance? [.165(d)(1)] |  |
| o Do employees know where to find the |  |
| o Is a test of every non-supervised employee |  |
| alarm conducted every two months? | written hazard communication program, |  |
| including required lists of hazardous |  |
| [.165(d)(2)] |  |
| chemicals and SDSs? [.1200(h)(2)(iii)] |  |
| o Are supervised alarms tested at least |  |
| o Are employees trained in methods to detect |  |
| annually? [.165(d)(4)] |  |
| the presence or release of hazardous |  |
| o Are any manually operated actuation devices |  |
| chemicals in the work area? [.1200(h)(3)(i)] |  |
| used in conjunction with alarms |  |
|  |  |  |
| unobstructed, conspicuous, and easily |  |  |  |
| accessible? [.165(e)] |  |  |  |
|  | *Continued* + |  |
| 10007700 | 110-3 |  |

* Do employees know the physical, health, simple asphyxiation, combustible dust and pyrophoric gas hazards, as well as hazards not otherwise classified, of the chemicals in the work area? [.1200(h)(3)(ii)]
* Are employees aware of the ways they can protect themselves from these hazards, including appropriate work practices, emergency procedures, and use of PPE? [.1200(h)(3)(iii)]
* Have employees been instructed in the details of the hazard communication program developed by the employer, including an explanation of the labels received on shipped containers and the workplace labeling system used by their employer and SDSs, including the order of information? [.1200(h)(3)(iv)]
* Do employees know how to obtain and use the appropriate hazard information? [.1200(h)(3)(iv)]
* Does it include procedures to be followed by employees who remain to operate critical plant operations before they evacuate? [(c)(3)]
* Does it include procedures to account for all employees after evacuation? [(c)(4)]
* Does it include procedures to be followed by employees performing rescue and medical duties? [(c)(5)]
* Does it include the name or job title of every employee who may be contacted by employees who need more information about the plan or an explanation of their duties under the plan? [(c)(6)]

 **EMERGENCY ACTION PLANS:**

29 CFR 1910.38

o o o

Do you have an emergency plan if required

by an OSHA standard? [(a)]

Is it in writing, kept in the workplace, and

available to employees for review? [(b)]

Does it include procedures for reporting a fire

or other emergency? [(c)(1)]

* Does it include procedures for emergency evacuation, including type of evacuation and exit route assignments? [(c)(2)]



Corrective Action Completed (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Routed to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| 110-4 | 10007700 |  |