Alameda County
DEC 1 8 2002
Environmental Health

HEALTH AND SAFETY PLAN
GROUNDWATER SAMPLING OF EXISTING
MONITORING WELLS
FORMER HEGENBERGER
MAINTENANCE STATION
555 HEGENBERGER ROAD
OAKLAND, CALIFORNIA

Prepared for
Department of Transportation, District 4
111 Grand Avenue
Oakland, California 94612

Prepared by

Professional Service Industries, Inc. 4703 Tidewater Avenue Oakland, California 94601 (510) 434-9200

> September 25, 2002 575-2G020

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PROJECT SUMMARY

Site Description:

Former California Department of Transportation

Hegenberger Maintenance Station.

Project Description:

Collect groundwater samples from existing groundwater

monitoring wells.

Hazardous Materials

Anticipated:

Testing for petroleum hydrocarbons in groundwater. No appreciable amount of hazardous materials anticipated.

Chemical exposure limits and potential exposure symptoms are described in Section 6.2 of this Health and Safety Plan

(HSP).

Other Health

and Safety Concerns:

Traffic.

Air Monitoring

Equipment:

None.

Initial Personal

Protection:

Modified Level D. Personal protective equipment (PPE)

clothing to be washed after each workday and prior to next

use.

Wind Direction Indicator:

None required.

Hospital:

Summit Medical Center 350 Hawthorne Avenue Oakland, California (510)655-4000

1.0 EMERGENCY REFERENCES

(to be posted on site)

AMBULANCE: 911

POLICE: 911

FIRE: 911

SPILL 911

HOSPITAL (510) 655-4000

DIRECTIONS TO HOSPITAL:

Start out going South on HEGENBERGER RD by turning right. Take the I-880 N ramp towards OAKLAND. Merge onto I-880 N. Take the OAK STREET exit towards LAKESIDE DR. Turn RIGHT onto OAK ST. OAK ST becomes LAKESIDE DR. LAKESIDE DR becomes LAKESIDE DR/HARRISON ST. LAKESIDE DR/HARRISON ST becomes HARRISON ST. Turn SLIGHT LEFT onto 27TH ST. Turn RIGHT onto BROADWAY AUTO ROW/BROADWAY. Turn LEFT onto HAWTHORNE AVE. The hospital's address is 350 Hawthorne Ave.

TOTAL ESTIMATED TIME: 14 minutes

TOTAL DISTANCE: 7.8 miles

CLIENT CONTACT: Jafar Roudsari (510) 286-6334

 NATIONAL RESPONSE CENTER:
 1-800-424-8802

 POISON CONTROL CENTER:
 1-800-682-9211

 TOXLINE:
 1-301-496-1131

 CHEMTREC:
 1-800-424-9300

EMERGENCY TELEPHONE NUMBERS:

PSI 1-888-221-4644

PSI PROJECT MANAGER: Frank Poss 1-510-434-9200

Project Health and Safety Officer 1-510-750-3369

2.0 INTRODUCTION

This Health Safety Plan (HSP) has been developed by PSI, a Division of Professional Services Industries, Inc. (PSI), to establish the health and safety procedures required to minimize potential risk to personnel of PSI and its subcontractors who will be involved in Groundwater Sampling activities in Fremont, California. The provisions of this HSP directly apply to personnel of PSI and its subcontractors who may be exposed to health and/or safety hazards related to the performance of the investigation described in the Work Plan to which this document is appended.

The procedures in this HSP have been developed based upon current knowledge of specific chemical and physical hazards that are known or anticipated to be encountered in the operations to be conducted at the work site.

This HSP has been written to comply with:

- The requirements of PSI Safety and Health policies,
- ✓ The Federal Occupational Safety and Health Administration's (Fed/OSHA) hazardous waste operation and emergency response regulations found in Title 29 Code of Federal Regulations (CFR) å 1910.120, and

It is PSI's policy that all activities covered by this HSP shall be conducted in accordance with this HSP and all applicable federal, State, and local health and safety regulations, including CCR Title 8, å 1500 General Industry and Construction Standards. PSI personnel and PSI contractors covered by this HSP who cannot, or will not, comply with these requirements will be excluded from project activities. All personnel of PSI and its subcontractors covered by this HSP must read and sign the HSP and return the HSP sign-off sheet to the PSI Site Health and Safety Officer (SHSO) prior to the start of field operations.

3.0 SITE DESCRIPTION

The work will be performed on the existing monitoring wells at the Former Hegenberger Maintenance Station (555 Hegenberger Road).

4.0 SCOPE OF WORK

Collect groundwater samples from the existing groundwater monitoring wells.

5.0 PROJECT PERSONNEL

PSI Project Manager:	Frank R. Poss
Project Health and Safety Officer:	Frank R. Poss
Site Health and Safety Officer:	Chris Merritt

The responsibilities of these personnel are described in the following paragraphs. The implementation of health and safety procedures at this site and/or facility will be an integrated effort among the PSI Project Manager (PM), PSI Project Health and Safety Officer (PHSO), the appointed Site Health and Safety Officer (SHSO), PSI Field Personnel (FP), and any subcontractor(s).

5.1 PSI PROJECT MANAGER

The PSI PM is, by designation, the individual who has the primary responsibility for assuring the health and safety of personnel involved throughout the duration of this project. The PM, therefore, has the primary responsibility for implementing this HSP. Some of the PM's specific responsibilities include the following:

- Assuring that all project personnel have received and read a copy of this HSP and have completed the HSP sign-off sheet.
- Assuring that all personnel have attended a briefing apprising them of the contents of the HSP and specific hazards identified as present at the site/facility prior to performing work.

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- Assuring that sufficient PPE, as required by this HSP, is available during the project.
- Assuring that all subcontractor personnel submit documentation of employee participation in a medical monitoring program and a training program.
- Maintaining a high level of safety and health consciousness among employees at the site/facility.
- Preparing accident/incident investigations with the assistance of the SHSO and the PHSO.
- Maintaining regular communications with the SHSO and, if necessary, resolving safety and health conflicts with PHSO.

5.2 PROJECT HEALTH AND SAFETY OFFICER

The PHSO is the individual responsible for the implementation and development of PSI's safety and health policies. The PHSO prepares and approves all HSP's before presentation to regulatory agencies or field implementation. The SHSO or other appointee consults with the PHSO on PSI policy and specific site characteristics during development of all HSPs.

The PHSO is the individual responsible for the preparation, interpretation, and modification of this HSP. Modifications to this HSP that may result in less stringent precautions cannot be undertaken by the PM or the SHSO without the approval of the PHSO. Specific duties of the PHSO include the following:

- Advising the PM and SHSO on matters relating to safety and health on this project.
- Recommending appropriate PPE and air monitoring instrumentation to protect personnel from potential hazards.
- Performing field audits, when necessary, to monitor the effectiveness of this HSP and to assure compliance with this HSP.

- Performing or directing the performance of personal exposure monitoring where required and where deemed necessary to determine the adequacy of protective measures and PPE specified by this HSP.
- Maintaining contact with the PM to regularly evaluate project conditions and new information that might require modifications to the HSP.
- Working with the PM to assure that sufficient PPE is available at the location.
- Conducting briefing meetings, when necessary, to apprise personnel of the contents of this HSP and the project hazards.
- Assisting with the preparation of accident/incident report(s) as needed.

5.3 SITE HEALTH AND SAFETY OFFICER

The appointed SHSO will be a member of the PSI project field team and has specified hazardous materials operation training as required in 29 CFR § 1910.120 (e) and Title 8 § 5192 (e). The SHSO is responsible for enforcing the requirements of this HSP once work begins. By design, the SHSO has the authority to immediately correct all situations where noncompliance with this HSP is noted and to immediately stop work in cases where an immediate danger is perceived. Some of the SHSO's specific responsibilities include:

- Procuring and distributing the PPE needed for this project.
- Procuring the air monitoring instrumentation required and performing air monitoring.
- Verifying that all PPE and safety and health equipment is in good working order.
- Setting up and maintaining the personnel cleansing facility, if necessary.
- Notifying the PM and the PHSO of all noncompliance situations and immediate danger situations.
- Keeping track of weather conditions and wind directions to the extent that they could affect potential exposure.

- Supervising and monitoring the safety performance of all personnel to assure that required health and safety procedures are followed, and correcting any deficiencies.
- Reporting all accidents/incidents to the PM and assisting the PM and PHSO in accident/incident reports.
- Initiating emergency response procedures (Section 12.0).

5.4 FIELD PERSONNEL

All PSI and subcontractor FP are responsible for following the health and safety procedures specified in this HSP and for performing their work in a safe and responsible manner. Some of the specific responsibilities of the FP are as follows:

- Reading the HSP in its entirety prior to the start of field work.
- Signing the HSP sign-off sheet acknowledging receipt and understanding of this HSP (see Appendix D) and returning the sheet to the SHSO.
- Bringing forth any questions or concerns regarding the content of the HSP to the SHSO prior to the start of work.
- Reporting all accidents and incidents to the SHSO.
- Complying with the requests of the appointed SHSO.

6.0 HAZARD ANALYSIS

6.1 HEALTH AND SAFETY RISK ANALYSIS

The nature of the tasks that will take place during this project present the potential for a number of chemical and physical exposure hazards. A summary of the hazards associated with each of the tasks is presented in Table 1.

TABLE 1 HEALTH AND SAFETY RISK ANALYSIS

Location	Tasks	Hazards	Initial Level of Protection
Site	Groundwater Sampling	Chemical hazard of skin absorption of petroleum hydrocarbons.	Latex gloves to be worn during sampling.

TABLE 2 (CONTINUED) CHEMICAL HAZARDS

6.2 CHEMICAL HAZARDS

Minimal hazard from chemical exposure is to be mitigated with use of latex gloves during sampling.

TABLE 2
CHEMICAL HAZARDS

Mixture/Chemical	Physical and Chemical Properties	Routes of Exposure		Signs and Car Symptoms of Exposure	cinogen?	PEL STEL IDLH
Diesel Fuel No. 2	Complex mixture of hydrocarbons (C ⁹ to C ²¹). Viscous brown liquid with a characteristic kerosene odor.	Inhalation, dermal, and ingestion	Central nervous system, eyes, skin, lungs, and GI tract	Headache, nausea, contact dermatitis, severe internal lung injury if ingested and subsequently aspirated, unconscious-ness and death.	No	1 ppm (oil mist) NR NR Unocal recommends a TLV-TWA 100 ppm

NOTES: PEL = permissible exposure limit

STEL = short-term exposure limit

IDLH = immediately dangerous to life and health

ppm = parts per million

NR = not reported

TLV-TWA = threshold limit value/time-weighted average

ppb = parts per billion

CCR = California Code of Regulations

6.3 FLAMMABILITY HAZARDS

PSI and subcontractors will recognize specific work practices in the event of flammable conditions. Most petroleum products are extremely flammable with an extremely low vapor pressure of 5 to 15 psi (Reid vapor pressure). They are generally clear liquids with yellow to brown coloration and have the characteristic gasoline odor. Gasoline has a flash point of -36 F and an ignition temperature range of 536 F to 850 F. The lower explosive limit (LEL) of gasoline is 1.3 percent (13,000 ppm) by volume in air, whereas the upper explosive limit (UEL) is 7.4 percent. Gasoline vapor is three to four times more dense than air; therefore, vapor pockets will tend to form in low areas. However, due to the open space at the site, this hazard is not expected to occur.

6.4 EXCAVATION HAZARDS

No excavation is planned, so excavation hazards are not expected.

6.5 HEAT STRESS/WEATHER CONDITIONS

The climate at the site is characterized by summers with frequent warm days, and cool winters. High/low temperatures are as follows:

	<u>January</u>	<u>July</u>
Approx. mean high (☜F)	65	81
Approx. mean low (☜F)	51	63

Given the ambient temperatures in California, workers wearing protective clothing may experience varying degrees of heat stress if precautions are not taken. All project participants will be trained to recognize the following forms of heat stress and associated symptoms:

- Heat Rash can be caused by continuous exposure to hot and/or humid air. The condition is characterized by a localized red skin rash and reduced sweating.
- <u>Heat Cramps</u> can be caused by profuse perspiration with inadequate fluid intake and salt replacement. This condition is characterized by muscle spasm and pain in the extremities and abdomen. To care for heat cramps,

have the person lie in a cool place and give cool water or a sports drink. Lightly stretch the muscle.

- Heat Exhaustion, a mild form of shock, can be caused by substantial physical activity in heat and profuse perspiration without adequate fluid and salt replacement. Symptoms include weak pulse; shallow breathing; pale, cool, moist skin; profuse sweating; dizziness; and fatigue.
- Heat Stroke, the most severe form of heat stress, can be fatal. Symptoms include red, hot, dry skin; body temperature of 105% F or greater; no perspiration; nausea; dizziness and confusion; strong rapid pulse; coma; and death. Heat stroke is a true medical emergency.

Should a worker appear to be suffering from any of these conditions, attempts should be made to reduce the individual's body core temperature. First, remove the victim out of the heat. Apply cool water to their skin with a cloth and have him/her drink cool (but not ice cold) water. Do not let the victim drink too quickly. Refusing water, vomiting, and changes in breathing rhythm indicates that the victim's condition is getting worse. The victim must be immediately transported to a medical care facility.

6.6 NOISE HAZARDS

Noise hazards are not expected to be encountered during water sampling activities.

6.7 SOLAR RADIATION HAZARD

Ultraviolet rays (UV) from the sun can damage the exposed areas of the skin and cause the skin to become hot or even burn. The American Conference of Governmental Industrial Hygienists (ACGIH) has established UV guidelines. Tanned individuals can tolerate skin exposure in excess of the threshold limit value (TLV) without experiencing inflammatory redness of the skin. However, such conditioning may not protect persons from exposure to skin cancer. Therefore, personnel of PSI and its subcontractors will be required to apply a sunscreen designed to protect the exposed areas of the skin from the sun.

6.8 VIBRATIONS

No vibrational hazards are expected.

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6.9 BIOLOGICAL HAZARDS

No biological hazards are expected.

7.0 OVERVIEW OF GENERAL SAFE WORK PRACTICES

All site participants will be trained on the contents of this HSP. The following measures are designed to augment the specific health and safety guidelines provided in this plan:

- Under no circumstances may PSI personnel nor its subcontractor(s) enter any confined spaces without approval by the SHSO and issuance of a confined-space entry permit.
- Avoidance of contact with chemicals or chemical products is of the utmost importance. Whenever possible, avoid contact with chemically impacted (or potentially chemically impacted) surfaces or materials. Walk around (not through) puddles and discolored surfaces. Avoid sitting, kneeling, or resting equipment on chemically impacted surfaces.
- Eating, drinking, chewing gum or tobacco, smoking, or any practice that increases the probability of hand-to-mouth transfer of materials is prohibited in the exclusion zone and contamination reduction zone.
- Hands and face must be thoroughly washed upon leaving the work area before eating, drinking, or any other activities.
- Beards and other facial hair that interfere with respirator fit are prohibited for those individuals who may be required to use respiratory protection.
- The use of alcohol or illegal drugs is prohibited during field operations. Personnel deemed mentally or physically impaired by alcohol or any illegal drug(s) will be prohibited from participating in field operations by the SHSO. (Medicine and alcohol can exacerbate the effects of exposure to potentially toxic chemicals. If an individual is taking prescribed drugs, he or she should contact PSI' occupational doctor at Memorial Occupational Medical Services (telephone 310/433-0085) to determine whether there is potential conflict. If

there is, the individual should not work at the site while taking the prescribed medication.

- No sparks or open flames will be permitted during site operations.
- Safety equipment described in this HSP will be required for all field personnel unless otherwise approved by the PSI PHSO.
- Unauthorized personnel shall remain outside the exclusion zone at all times.
- All site participants will be informed of the hazards due to mechanical equipment or machinery (e.g., overhead falling objects; faulty wiring [electrocution]) as well as the causes of hazardous trip/slip/fall accidents.

7.1 SITE CONTROL

Only authorized personnel will be allowed to enter the exclusion zone. This zone includes the immediate work area where there is a high probability of physical hazard. All personnel entering the exclusion zone will be required to sign the Health and Safety sign-in sheet prior to entry. Due to the hazards associated with working around heavy equipment that may be used during the field program, the exclusion zone will be defined at a maximum radius of 10 feet. The exclusion zone may be reduced if physical conditions or chemical exposures permit smaller exclusion zones. The exclusion zone will be identified with cones, barricades and tape. All PSI personnel and subcontractors will be required to wear appropriate PPE in the exclusion zone (see Section 9.0).

Hand signals shall be employed by field operations personnel to communicate emergency information if the individual's voice is overcome by noise from equipment operations. The hand signals will be taught to all field personnel before commencement of field operations and shall be reviewed during the daily on-site safety briefings. In addition, the "buddy system" shall be employed during field activities so that communication does not deteriorate. The following hand signals will be used when operating heavy equipment:

Signal

Meaning

Hand grabbing throat
Grip the coworker's wrist

Out of air, cannot breathe. Leave area immediately, no debate. Hands on top of head Thumbs up Thumbs down Need assistance. OK, I am all right, I understand. No, negative.

7.2 SECURITY

Site security is necessary to:

- Prevent the exposure of unauthorized, unprotected people to site hazards,
- Avoid the increased hazards from vandals or persons seeking to abandon other wastes on the site,
- Prevent theft, and
- Avoid interference with safe working procedures.

To maintain site security during working hours, PSI will conduct the following tasks:

- Frect boundaries around the perimeter of the exclusion zones, and
- Periodically monitor the perimeter for spectators and explain to them that "we are performing a subsurface investigation." No other reference to the site is necessary unless approved by the PM.

To maintain site security during off-duty hours, PSI will conduct the following tasks:

- Secure the area with existing fence, if possible; if not, remove all equipment and other potential physical hazards each workday; and
- Secure all drums, and/or temporarily store soil stockpiles on and cover with plastic sheeting.

Site activities will be limited to only authorized personnel. During site hours, all visitors will be required to sign the HSP sign-off sheet to document their presence and the nature of their business (Appendix D).

8.0 PERSONAL PROTECTIVE EQUIPMENT (PPE)

Personal protective equipment selection shall be based on an evaluation of PPE performance characteristics relative to the potential physical and chemical hazards, along with requirements and limitations of the site. The selection of level of PPE for personnel of PSI and its subcontractors is dictated by the probability of encountering potential hazards.

8.1 RESPIRATORY PROTECTION

Respiratory protection is not required.

8.2 OTHER PROTECTIVE EQUIPMENT

Level D is defined in Title 8, δ 5192 as a work uniform affording minimal protection that is only used for nuisance contamination. The following protective equipment identifies Modified Level D protection and will be required to be worn in the exclusion zone:

- Latex clothing,
- Work gloves,
- Steel toed work boots,
- Safety glasses,
- Hearing protection,
- Fluorescent vest, and
- Hard hat.

9.0 PERSONNEL AND EQUIPMENT DECONTAMINATION

No decontamination of personnel or equipment used during this project is required.

10.0 MEDICAL SURVEILLANCE/TRAINING REQUIREMENTS

All personnel must meet the training and medical surveillance requirements specified in Title 8 CCR § 5192(e)(f). All on-site personnel must have completed the specified 40 hours of initial health and safety training and 8 hours of refresher training, as well as 3 days of on-site training, within the last year. Managers or supervisors of personnel performing such activities must have completed the specified 8 hours of management training and 3 days of on-site training. The 3 days of on-site training for personnel and managers/supervisors shall have been under the direction of a skilled supervisor. In addition, such personnel must have completed and passed, without restrictions, an annual and/or baseline occupational medical surveillance examination within the last year. The medical examinations shall have been conducted by or under the supervision of a certified occupational medical physician who is aware of the site-specific hazards. PSI personnel and subcontractors entering the exclusion zone must be trained in the potential hazards therein, and in safe work procedures. Copies of training certificates shall be available for review upon request.

11.0 EMERGENCY RESPONSE/ACCIDENT INVESTIGATION PROCEDURES

The telephone numbers of the police and fire departments, ambulance service, local hospital, and PSI representatives are provided in the emergency reference sheet in Section 1.0. Directions to the hospital are also provided on this sheet and a copy of the hospital route is provided in Figure 1. A copy of this information must be posted in a visible location at the project location before operations commence. Directions to the hospital are repeated below:

Start out going South on HEGENBERGER RD by turning right. Take the I-880 N ramp towards OAKLAND. Merge onto I-880 N. Take the OAK STREET exit towards LAKESIDE DR. Turn RIGHT onto OAK ST. OAK ST becomes LAKESIDE DR. LAKESIDE DR becomes LAKESIDE DR/HARRISON ST. LAKESIDE DR/HARRISON ST becomes HARRISON ST. Turn SLIGHT LEFT onto 27TH ST. Turn RIGHT onto BROADWAY AUTO ROW/BROADWAY. Turn LEFT onto HAWTHORNE AVE. The hospital's address is 350 Hawthorne Ave.

TOTAL ESTIMATED TIME: 14 minutes

TOTAL DISTANCE: 7.8 miles

Any accident/incident resulting in an OSHA-reportable injury or illness, treatment at a hospital or physician's office, property damage, or a near-accident requires that an accident/incident investigation and report be completed by the PHSO with assistance from the SHSO and PM. The investigation shall be initiated as soon as emergency conditions are under control. The purpose of this investigation is not to attribute blame, but rather to assess the pertinent facts so that repeat or similar occurrences can be avoided. PSI shall assure that accidents/injuries are reported to the appropriate local, and State authorities.

11.1 PLANNING

Prior to conducting the investigation, the SHSO shall plan emergency actions and discuss them with personnel conducting project work. Initial planning includes establishing the best means for evacuation from the area in case of a catastrophe (e.g., explosion or fire). Before project activities begin, the SHSO shall locate safe places of refuge should an emergency or accident occur, and advise personnel of these locations during the on-site health and safety meeting. Refer to Sections 12.2, 12.3, 12.6, and 12.7 for a review of emergency procedures.

11.2 EMERGENCY SERVICES

A tested system must exist for rapid and clear distress communications. The SHSO will use an alarm system in the form of a car horn to notify personnel of the emergency. One long blast (at least 5 seconds) requires evacuation and two short blasts that all is clear. The SHSO shall corroborate that all personnel working at the site know how to communicate with the appropriate local emergency response units, and shall provide adequate and clear directions between PSI work locations and the location of those units before commencing any facility investigation or operations. The PSI or subcontractor vehicle shall have a cellular telephone for obtaining assistance in an emergency.

11.4 FIRST AID

Qualified personnel shall give first aid and stabilize any employee needing assistance. Life support techniques such as cardiopulmonary resuscitation (CPR) and treatment of life-threatening problems such as bleeding, airway maintenance, and shock shall be given top priority. Professional medical assistance shall be obtained at the earliest

possible opportunity. If assistance beyond first aid is required, dial 911 to request emergency medical assistance.

A first-aid kit will be required on the subject site and an emergency portable eyewash (15 minutes of continuous flushing) may be required at the facility. Prior arrangements must be made to facilitate easy access (preferably within 10 seconds of the work area) to water.

11.5 PROTECTION FROM BLOOD-BORNE PATHOGENS

Personnel of PSI or its subcontractors who have direct exposure to blood and other potentially infectious materials while administering first aid run the risk of contracting blood-borne infections. These infections include hepatitis B virus (HBV); human immunodeficiency virus (HIV), which causes acquired immunodeficiency syndrome (AIDS); and other blood-borne pathogens. Although the risk of contracting the HIV through occupational exposure is minimal, wearing proper PPE can greatly reduce the potential exposure to blood-borne infections.

Personnel of PSI and its subcontractors shall adhere to the blood-borne pathogen standard as codified in 29 CFR § 1910.1030. If personnel must have contact with the victim's blood or other potentially infectious materials or contaminated surfaces, they must wear a pair of latex gloves at a minimum. If personnel are performing CPR, they must wear a pocket mask or equivalent level of protection.

If an employee's or subcontractor's skin or eyes come into contact with blood, the individual must wash the affected area with soap and water and/or continuously flush the eyes for 15 minutes as soon as possible. In addition, workers must wash their hands immediately or as soon as feasible after removing PPE. If soap and water are not immediately available, workers may use other hand-washing measures such as moist wipes. However, personnel of PSI or its subcontractors must wash their hands as soon as possible.

Personnel of PSI and its subcontractors must remove PPE before leaving the work area. If the clothing comes in contact with blood, workers must remove it immediately or as soon as feasible. Gloves or other forms of PPE that have potentially come into contact with blood shall be disposed of in a designated container and appropriately labeled as "potentially infectious waste." The SHSO shall contact a medical waste representative for proper disposal.

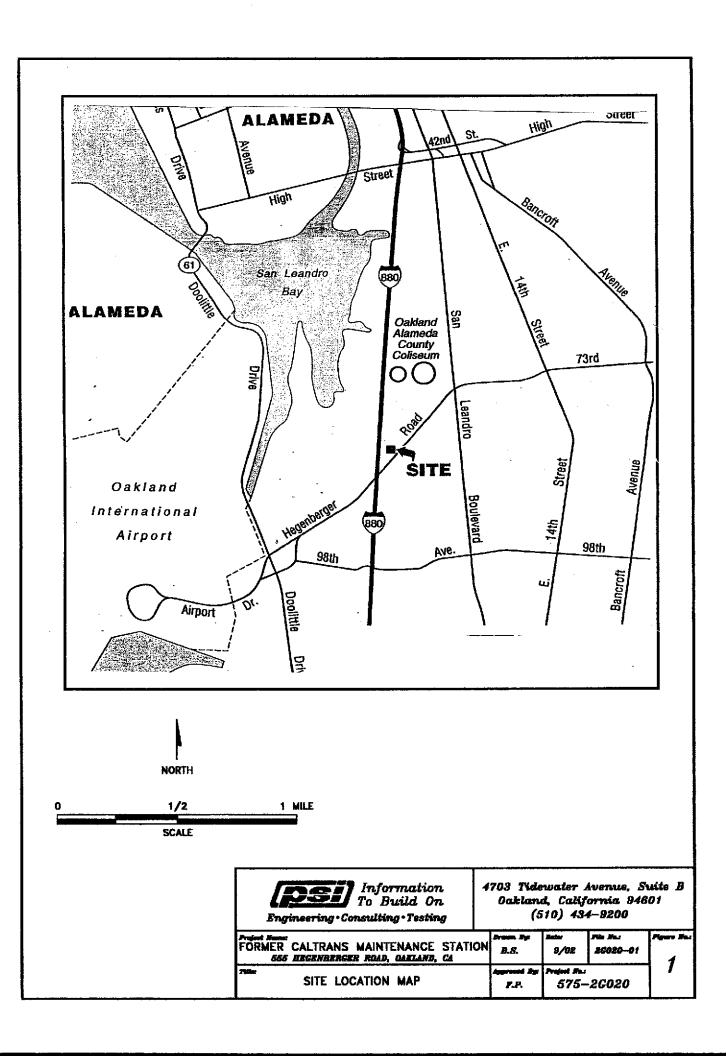
11.6 FIRE PROTECTION AND RESPONSE

Dial 911 in the event of any fire at the work location.

11.7 GUIDELINES FOR A RESPONSE

If any emergency involving actual or suspected personal injury occurs, the SHSO, the work supervisor, or the surviving person(s) on the site shall follow these steps:

- Remove the exposed or injured person(s) from immediate danger.
- Render first aid if necessary. Decontaminate affected personnel.
- Obtain paramedic service or ambulance transport to local hospital by dialing 911 to get emergency response. Notify the gate guard of the site operations so that in case of an emergency, a quick response can be effected. A PSI field member will accompany any person to the medical facility and will remain with the person until release or admittance is determined.
- Evacuate other personnel at the facility to a safe distance until the Fire Department determines that it is safe for work to resume.
- Contact the PM (or his designee) and the PHSO at the earliest time practicable, and relate details of the incident. Also, notify Mr. Michael Mooradian, President of PSI. Mr. Mooradian will then make appropriate notifications to government agencies as appropriate and required by law, and notify client contacts.
- Any accident/incident resulting in an OSHA-reportable injury or illness, treatment at a hospital or physician's office, property damage, or a nearaccident requires that an accident/incident report be completed and submitted to the PHSO.





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FORMER CALTRANS MAINTENANCE STATION 666 HEGENBERGER BOAD, GARTAND, CA		Juin: 9/02	Pile He.: 2G020-01	Figure Fea
HOSPITAL ROUTE MAP	Approved Mar P.P.	1 "	2G020	~

HEALTH AND SAFETY SIGN-OFF SHEET

Water Sampling at Former Hegenberger Maintenance Station Oakland, California

PSI PROJECT NUMBER: 575-2G020

I have read and understood the contents of this Health and Safety Plan and I agree that I will abide by its requirements.

Name (Print)	Signature	Date	Company
	•		

ACCIDENT/INCIDENT INVESTIGATION REPORT

Month/Day/Year of report	Prepared by:	Title:
	Address	Dhono number
Company name:	Address:	Phone number:
Name of workers compensa	ation:	Policy number:
Traine of workers compense	idon.	i olicy humber.
Name of employee:	Home	Social security number:
Traine or ampleyee.	address:	l
Male or female:	Married or single:	No. of children:
Date and time of accident/ir	ncident:	Did employee die?
How did the accident/incide	ent occur?	
What part(s) of the body we	ere affected:	
Engaged in what time of to	ak whon ini mad?	
Engaged in what type of ta	sk wnen injurea <i>r</i>	

What was the source responsible for the injury?
What hazardous conditions/methods or lack of protective device(s) that contributed to the accident/incident?
What unsafe act caused the accident/incident?
Medical services rendered? hospitalized?
Name of physician and address:
Hospital Name, Address, and Phone Number:
Note: To be submitted to the Project Health and Safety Officer.