

XII. Contractor Program

Nevada Division of Environmental Protection Chemical Accident Prevention Program Element Audit Checklist

Revision 1, 03/10/09



Facility:	Process(es) Covered:	Date:	
A. PROCEDURE/POLICY REVIEW			
1) EXISTENCE OF EFFECTIVE CONTRACTOR PROGRAM		Percentage Completion Score – Total 100% (Weighting of Elements is Defined Below)	
Overall NDEP-CAPP Element Audit Checklist Score for Contractor Program (as evaluated in sections 2 through 5 below)		%	
Notes/Comments Pertaining to Responses to Questions under Issue 1):			
2) FACILITY RESPONSIBILITIES		NAC Ref.	Resp. Code
<i>Item #2 Completion Score – Weighted 25% of Total</i>		%	
i.	Does the program procedure require that information be obtained and evaluated regarding a contractor’s safety performance and programs; and does the procedure define what information is reviewed, the responsible individual(s), and the acceptance criteria?	459.95435(1a) 459.95341	
ii.	Does the program procedure require that the facility inform the contractor of known potential fire, explosion or toxic release hazards related to the work of the contractor and to the process where the work is taking place; and does the procedure define what information is reviewed, the responsible individual(s), and how the review is conducted?	459.95435(1b) 459.95341	
iii.	Does the program procedure require that the facility inform the contractor of applicable provisions of the facility’s Emergency Action Plan or Emergency Response Plan; and does the procedure define what information is reviewed, the responsible individual(s), and how the review is conducted?	459.95435(1c) 459.95341	
iv.	Does the program procedure require that the facility’s safe work practices be implemented by the contractor; and does the procedure define how safe work practices are reviewed and implemented, and the responsible individual(s)?	459.95435(1d) 459.95341	
v.	Does the program procedure require that facility staff periodically evaluate the contractor’s performance; and does the procedure define the frequency of evaluation, the responsible individual(s), what is included in the evaluation, and the acceptance criteria, in fulfilling the following obligations:	459.95435(1e) 459.95341	
a.	Instructing contractor employees in the work practices necessary to perform their job safely?	459.95435(1e) 459.95341	

Response Code (Point Valve): Y = Yes (1), N = No (0), NA = Not Applicable (Not Scored), U = Undetermined (0), P = Partially Satisfied (½), NR = Not Reviewed (Not Scored), R = Reviewed (1)

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b.	Instructing contractor employees in the known fire, explosion or toxic release hazards related to the job and the process where the work is taking place?		459.95435(1e) 459.95341	
c.	Instructing contractor employees in the applicable portions of the emergency action plan or emergency response plan?		459.95435(1e) 459.95341	
d.	Instructing contractor employees in the facility safety rules, including safe work practices?		459.95435(1e) 459.95341	
Notes/Comments Pertaining to Responses to Questions under Issue 2):				
3) CONTRACTOR RESPONSIBILITIES			NAC Ref.	Resp. Code
<i>Item #3 Completion Score – Weighted 20% of Total</i>			%	
i.	Does the program procedure require the contractor to:		459.95435(2)	
a.	Instruct their employees in work practices necessary to perform their job safely?		459.95435(2a)	
b.	Instruct their employees in the known potential fire, explosion or toxic release hazards related to the job and the process where the work is taking place?		459.95435(2b1)	
c.	Instruct their employees in the applicable portions of the emergency action plan or emergency response plan?		459.95435(2b2)	
d.	Instruct their employees in the facility safety rules, including facility safe work practices (Hot work, Lockout/Tagout, Confined Space, Line Breaking, Controlled Access)?		459.95435(2e)	
e.	Instruct their employees to advise supervisor or facility personnel of any hazards identified?		459.95435(2f)	
ii.	Does the program procedure require the contractor to:		459.95435(2)	
a.	Document that contract employees have received and understood the training required pursuant to question i above?		459.95435(2c)	
b.	Ensure the training documentation includes name, date of training, and means used to verify that the employee understood the training?		459.95435(2d)	
Notes/Comments Pertaining to Responses to Questions under Issue 3):				

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4) MANAGEMENT PLAN AND DOCUMENT CONTROL	NAC Ref.	Resp. Code
<i>Item #4 Completion Score – Weighted 5% of Total</i>	%	
i. Is there a site-specific plan that addresses how the Contractor Program requirements will be developed and maintained, including:	459.95341	
a. Document the names of person(s) who are members of the team with overall responsibility for the development, implementation and integration of the Contractor Program Requirements?	459.95341	
b. How is facility program monitored for compliance with NAC 459.95435, CAPP Contractor Program?	459.95341	
ii. Is there a site-specific policy or procedure that addresses how Contractor Program documentation is controlled to ensure that the most current information is in circulation and use?	459.95341	
Notes/Comments Pertaining to Responses to Questions under Issue 4):		
5) VERIFICATION OF CONTRACTOR PROGRAM IMPLEMENTATION	NAC Ref.	Resp. Code
<i>Item #5 Completion Score – Weighted 50% of Total</i>	%	
i. Does the contractor files reviewed indicate facility compliance with the contractor program? <i>Refer to Part B-1</i>	459.95435	
Notes/Comments Pertaining to Responses to Questions under Issue 5):		
General Procedure/Policy Review Notes/Comments:		

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B. ON-SITE INSPECTION - RECORDS AUDIT				
1) SELECT 1 TO 4 CONTRACTOR FILES/RECORDS TO REVIEW (Include Contractors Presently On Site)				
<i>List on the Following Table:</i>				
#	Contractor Name	Services Provided & Processes Where the Services are Rendered	Time in Facility	
i				
ii				
iii				
iv				
Inquiry/Observation			Resp. Code :	
			i	ii
			iii	iv
a.	Is there a record of the facility obtaining and evaluating a contractor's safety performance and programs?			
b.	Is there a record of the facility informing the contractor of known potential fire, explosion or toxic release hazards related to the work of the contractor and to the process where the work is taking place?			
c.	Is there a record of the facility informing the contractor of the applicable provisions of the facility's Emergency Action Plan or Emergency Response Plan?			
d.	Is there a record of the facility providing and reviewing the facility safe work practices with the contractor?			
e.	Is there a record of the facility auditing the contractor's performance instructing contractor employees in work practices necessary to perform their job safely?			
f.	Is there a record of the facility auditing the contractor's performance instructing contractor employees in the known potential fire, explosion or toxic release hazards related to the job and the process where the work is taking place?			
g.	Is there a record of the facility auditing the contractor's performance instructing contractor employees in the applicable portions of the emergency action plan or emergency response plan?			

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h. Is there a record of the facility auditing the contractor’s performance instructing contractor employees in the facility safety rules, including safe work practices?				
i. Did the facility audit indicate that the contractor was fulfilling their obligations?				
j. If the contractor was not fulfilling their obligations, is there evidence that the facility took steps to correct the situation?				
k. Based upon the response codes used to complete items a through j above, is it possible to confirm that the contractor program is being implemented in accordance with the regulation?				
Notes/Comments Pertaining to Responses to Questions under Issue 1):				
General On-Site Inspection Notes/Comments:				



C. INTERVIEWS			
1) SELECT TWO OR MORE PERSONNEL TO INTERVIEW REGARDING THE EFFECTIVENESS OF THE INCIDENT INVESTIGATION PROGRAM USING THE FOLLOWING QUESTION SETS <i>Responses are to be Logged on Following Pages:</i>			
Question Set	Questions to Consider		
a	What is your job description and associated tasks?		
b	Were you informed of known potential hazards in the work area, such as fire, explosion or toxic releases? What personnel protective equipment must you have in your possession?		
c	Were you informed on how to recognize an actual incident? How do you report an incident or accident? What have you been told regarding possible evacuation to a safe location? How do you report any safety hazards you may discover?		
d	Have you been instructed in the facility's Hot Work permit procedure? (Lock-Out/Tag-Out, Confined Space Entry, Line Breaking, Controlled Access)?		
2) RECORD RESPONSES OF SELECTED PERSONNEL TO QUESTIONS FROM THE QUESTION SETS <i>Refer to Part C-1</i>			
Employee Profile			
Job Title/Position	Department/Unit/Group	Time in Job	Time w/Co.
Response to Question Set _:			