



**NOT MEASUREMENT
SENSITIVE**

DOE-STD-1232-2019/3

DOE STANDARD
U.S. DEPARTMENT OF ENERGY
VOLUNTARY PROTECTION
PROGRAM-APPLICATION
Volume 3 of 4



U.S. Department of Energy
Washington, DC 20585

AREA SAFT

DISTRIBUTION STATEMENT A. Approved for public release; distribution is unlimited.

FOREWORD

This Department of Energy (DOE) Standard is approved for use by all DOE Components and their DOE-regulated contractors. Originating on January 26, 1994, DOE Voluntary Protection Program (VPP) encourages and recognizes excellence in occupational safety and health protection. This program parallels the Occupational Safety and Health Administration (OSHA) VPP. DOE designed DOE VPP to apply to all DOE-regulated contractors in the DOE complex, including production facilities, laboratories, subcontractors, and support organizations. DOE contractors are not required to participate in DOE VPP. In keeping with OSHA and DOE VPP philosophy, participation is strictly voluntary. Additionally, participants may withdraw from the program at any time.

This Standard uses the word “shall” to denote a requirement of this Standard; the word “should” denotes a recommendation of this Standard; and, the word “may” denotes permission, but not a requirement or a recommendation of this Standard. To satisfy this Standard, program participants need to meet all applicable “shall” statements. Alternate approaches that demonstrate an equivalent level of safety are also acceptable, if approved by the DOE field element. “Should” statements represent DOE technical expectations. Alternative approaches to “should” statements are permitted and do not require approval by DOE.

Beneficial comments (recommendations, additions, and deletions), as well as any pertinent data that may be of use in improving this document, should be e-mailed to: brad.davy@hq.doe.gov or sent to:

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Office of Environment, Health, Safety and Security
U.S. Department of Energy
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I. THE DOE-VPP APPLICATION PROCESS

A. Background

The Department of Energy (DOE) created the DOE Voluntary Protection Program (VPP) to recognize and encourage excellence in occupational safety and health protection.

This program closely parallels the Department of Labor's Occupational Safety and Health Administration's (OSHA) VPP. OSHA's VPP has demonstrated that cooperative action among Government, industry, and labor can achieve excellence in worker health and safety.

DOE-VPP identifies areas where DOE contractors and subcontractors can go beyond compliance with DOE regulations and Orders and OSHA standards. The program encourages the creative search for excellence through systematic approaches and cooperative efforts involving managers, employees, and DOE.

DOE-VPP is available to all contractors in the DOE complex and encompasses production facilities, research and development operations, and various subcontractors and support organizations. Comprehensive management systems, with employees actively involved in anticipating, recognizing, evaluating, and controlling the potential health and safety hazards at the site form the basic participation expectations.

In keeping with OSHA's VPP philosophy, participation in DOE-VPP is strictly voluntary. Additionally, any participant may withdraw from the program at any time.

B. Instructions for Contractors Completing an Application

DOE contractors and subcontractors who wish to apply for DOE-VPP shall submit a formal application, which describes how they meet the requirements. The current document, which constitutes an application notebook, facilitates and outlines the DOE-VPP application process (Chapter I) and provides guidance on assembling the application materials (Chapter II).

Chapter II contains a general information section and sections for each of the five major program elements of DOE-VPP: Management Leadership, Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training. Each of the Gold Sheets addresses one aspect of a program element. The sheets act as dividers and specify what information is required, what additional information may be included and what should not be included. Following the program elements section, the "Assurance of Commitment" section lists the assurance statements that are required in the application. The entire application shall fit into a 3-inch binder. Alternatively, the contractor may submit the application electronically via portable media (e.g., CD/DVD-ROM) or through electronic mail. Applicants are encouraged to make use of electronic documents for transmittal and review.

- To avoid having an application returned, please follow the instructions stated below.
- Work closely with your DOE Field Element during the assembly of your application package.
- Place a cover on the notebook identifying your company name, the site, the date of submission, and the fact that this is a DOE-VPP application submission.

Review each Gold Sheet carefully and insert the required information directly behind that divider. Do not set up appendices; all documentation shall go into the appropriate section. The purpose of the submittals is to demonstrate that appropriate systems are in place, not to provide all safety and health program documents. The applicant may reference information provided on previous Gold Sheets, rather than duplicating the information within the application.

- Sign each Gold Sheet after you have assembled all of the requested information;
- Submit the completed application to the designated reviewer in your DOE Field Element. If there is no responsible Field Element, submit the application directly to the applicable Contracting Officer; and
- Respond to requests for clarification or additional information from the Field Element within 10 working days.

C. Instructions for DOE Personnel Reviewing an Application

1. Field Activities

- During the informal review phase, provide guidance to the contractor on the best way to demonstrate how its programs and procedures meet the DOE-VPP requirements.
- Upon formal receipt of the application, notify a Headquarters DOE-VPP Coordinator in the Office of Worker Safety and Health Assistance (AU-12) at (301) 903-1007.
- Review the documents assembled in each section for accuracy and completeness.

Field Elements should complete the application review within 20 working days of receipt. If necessary, request additional information from the applicant. The applicant should respond within 10 working days.

Within 10 working days of receiving any additional requested information, sign the appropriate line in the Reviewer Signature Blocks on the Gold Sheets, indicating agreement or disagreement, and forward the application and recommendation to the Field Element Point of Contact.

The Field Element's application review process should not exceed 40 working days.

2. Line Program Office

- Review the completed application and, if there are no objections, sign the Program Office recommendation sheet found in the back of the application notebook.

If there are concerns, indicate them on the Program Office recommendation sheet and fax the sheet to the Field Element. The Field Element should respond within 10 working days.

II. APPLICATION MATERIALS

A. General Information

The following information is required on all DOE-VPP applications:

- Organization Name
 - Address
 - Site Address (if different)
 - President/Director
- Site DOE-VPP Point of Contact
 - Title
 - Address
 - Phone Number
 - Email address
 - Organization's Parent Company (if any)
- Corporate DOE-VPP Point of Contact (if applicable)
 - Title
 - Address
 - Phone Number
 - Email address
- Collective Bargaining Agent(s)
 - Address(es)
 - Phone Number(s)
- Number of Employees, including subcontractor employees, if any.
- Type of Work Performed: Describe the primary and secondary missions of your organization.
- Types of Hazards: Provide an overview of the typical hazards and hazard sources encountered in your workplace(s), e.g., explosives, highly hazardous chemicals, radiation hazards.
- North American Industry Classification System (NAICS) code

NAICS is a six-digit hierarchical coding system to classify all economic activity into twenty industry sectors. The applicant should identify the NAICS code that most closely relates to their business. If the applicant does not know the appropriate NAICS code, the applicant should provide

the most likely NAICS, or propose an alternative method for comparison subject to approval by AU-12.

- Injury Incidence Rate or Total Recordable Case Rate (TRC)

Provide separate rates for the applicant contractor and for the combined activities of all subcontractors involved in the operations covered by the application for each of the last 3 complete calendar years. Also, provide the average for those years.

- $TRC\ Rate = (N/EH) \times 200,000$

Where:

N = number of TRC's

EH = total number of hours worked by all employees during the calendar year

To calculate averages for 3 complete calendar years, use the same formula as above, substituting the TRC rates for all three years for N, and dividing by the total number of hours worked during all 3 years for EH.

Sites that have less than 200,000 employee hours during each calendar year may opt to use the best 3 of the previous 4 years to minimize the negative effect of normalizing the statistics. Sites opting to use this method should use the same 3 years for both TRC and Days Away, Restricted or Transferred (DART) calculations.

- DART Case Rate

Provide separate rates for the applicant contractor and for the combined activities of all subcontractors involved in the operations covered by the application for each of the last 3 complete calendar years. Also, provide the average for those years.

Along with the TRC rate and DART case rate, provide the numbers used in the calculations: i.e., for each of the 3 years provide the number of hours worked, number of injuries, and number of DART case rates.

The DART case rate calculation is similar to the TRC rate, except N equals only the number of DART cases.

- Provide the Computerized Accident Incident System (CAIRS) organization codes that the data above represents.

- Site Plan

Provide a site map or general plant layout. For larger sites, or multiple contractors' sites, please delineate respective areas of responsibility.

B. Management Leadership**1. Commitment*****Required Information***

- Provide a narrative describing the site's management approach to the occupational safety and health policy.
- Describe the system in place for communicating the policy to all employees. Describe the system used to set goals and objectives.
- Describe how the applicant communicates goals and objectives to all employees.
- Describe how top management is visibly involved in the safety and health program. Attach the current year's goal and objectives.

Additional Guidance

- Attach the site's occupational safety and health policy, goals, and objectives for the current year. This section should not include specific safety and health programs, such as confined space entry, but rather the site's overall occupational safety and health policy.
- Objectives should target specific areas of performance that the applicant can measure or verify.

Examples of management participation include an "open door" policy, participation in formal and informal inspections, participation in regular safety meetings, and insistence on accountability.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

2. Organization

Required Information

- Provide a narrative describing how the site safety and health functions fit into the overall management organization.
- Attach the overall organizational chart.
- For larger sites, include a separate organizational chart for the safety and health functions.

Additional Guidance

- Names are not necessary on the organizational charts.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

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Field Activities			
Headquarters DOE-VPP Office			

3. Responsibility

Required Information

- Describe the assignment of line and staff safety and health responsibility. Attach previously established written material, such as job descriptions.

Additional Guidance

- The applicant should clearly define responsibility for safety and health at all levels. Any examples of authority provided to responsible persons would be helpful.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

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Field Activities			
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4. Accountability

Required Information

- Describe how the applicant documents, and holds managers and supervisors accountable for safety and health performance.
- Attach blank performance appraisal forms for managers and supervisors.

Additional Guidance

- The applicant may attach previously established written material, such as management objectives or performance evaluations for managers, supervisors, and employees.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

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Field Activities			
Headquarters DOE-VPP Office			

5. Resources

Required Information

- Provide a narrative summary of personnel, equipment, budget, capital investments (if any), and other resources devoted to the safety and health program, including the radiological control program.
- Include the current fiscal year site budget and the percentage devoted to safety and health programs.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

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Field Activities			
Headquarters DOE-VPP Office			

6. Planning

Required Information

- Describe how safety and health are a part of management planning.

Additional Guidance

- The applicant can attach portions of actual planning documents.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

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Field Activities			
Headquarters DOE-VPP Office			

7. Subcontractor Workers

Required Information

- Describe how the applicant considers past performance in safety and health in selecting subcontractors.
- Describe how the applicant ensures, through oversight, coordination, and enforcement, that the subcontractor implements an adequate safety and health program. Specify site entry and exit procedures for subcontractors.
- Describe the programs for familiarizing and holding accountable all persons in subcontractor-controlled areas.
- Describe the means used to ensure prompt correction or control of hazards under the subcontractor's control.
- Describe the methods used to ensure that subcontractors record and submit all injuries and illnesses occurring during work performed under the subcontract.
- Describe methods, such as monetary penalties and dismissal from the site, used to discourage willful or repeated noncompliance by subcontractors or their employees.
- Provide the number of resident subcontractors on the site.

Additional Guidance

- Include criteria for selecting subcontractors.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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8. Program Evaluation

Required Information

Safety and Health Program Evaluation

- Describe the safety and health program evaluation system.
- Provide a narrative describing how the applicant annually evaluates safety and health objectives, and integrates recommendations from the annual program evaluation into the safety and health objectives.
- Attach the current year's goal and objectives.
- Attach a copy of the recent annual safety and health program evaluation.

Rate Reduction Information (for applicants with rates above the industry average).

- Specify short-term and long-term strategies for reducing injury and illness rates below the industry average; include specific methods.

Additional Guidance

- Ensure that the program evaluation follows the requirements set forth in *Volume 1: Elements*, i.e., it shall be in narrative form, shall address the five basic elements, and all the sub-elements.
- Do not attach external or independent assessments, appraisals, or corrective action plans. Do not submit checklists to demonstrate program evaluation.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
Headquarters DOE-VPP Office			

9. Site Orientation

Required Information

- Describe the program(s) for familiarizing and holding accountable all persons using the site, including vendors, consultants, students, and visiting scientists.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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10. Employee Notification

Required Information

- Describe the methods used to ensure that all employees, including newly hired employees understand the following:
 - Employee rights under title 10, Code of Federal Regulations, Part 851, *Worker Safety and Health Program* (10 CFR Part 851).
 - How the applicant implements Integrated Safety Management, including individual employees' roles and responsibilities in that process.
 - Employees' role in the applicant's pursuit of DOE-VPP participation.

Additional Guidance

- The applicant can attach sections from orientation handbooks for new employees, posters, flyers, and bulletin board notices.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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C. Employee Involvement**1. Degree and Manner of Involvement*****Required Information***

- Describe how employees are involved in the safety and health program.
- Provide specific information about decision processes that employees affect, such as hazard analysis, accident investigation, safety and health training, or safety and health program evaluation. Also, address the role of employees in problem resolution.

Additional Guidance

- Documents containing input from employees on any of the above items would be of value.
- Any description or documents providing the results of employee participation, such as workplace changes or corrections, would be helpful.
- For transitional applications, include discussions of employee participation in developing changes and commitments that differ from the previous contractor.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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2. Safety and Health Committees

*Required Information**

- Date of committee inception
- Method of selecting employee members
- Name, job, and length of service of employee members
- Average length of service of employee members
- Committee meeting requirements:
 - Frequency
 - Quorum rules
 - Minutes
- Committee's role
- Frequency and scope of committee inspections
- Procedures for inspecting entire worksite
- Role in accident investigation
- Role in employee hazard notification
- Describe hazard recognition training procedures (if covered under Safety and Health Training, indicate "see training")
- Safety and health information accessible to and used by the committee.

Additional Guidance:

*Construction applicants shall provide the above information. Non-construction applicants may also provide this information, if a safety and health committee is used. At least half of the members of construction committees shall be bona fide employee representatives who work at the site, or hourly craft workers who rotate through committee membership.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
Headquarters DOE-VPP Office			

D. Worksite Analysis**1. Preuse/Prestartup Analysis*****Required Information***

- Explain how the applicant analyzes new or significantly modified equipment, materials, processes, and facilities for potential hazards prior to use.

Additional Guidance

- The applicant may attach documents such as project design evaluations, preliminary hazard analyses, process hazard analyses, fault tree analyses, or management change forms.
- Analysis should include radiological hazards, if applicable. Construction sites may want to include hazard analyses for each phase of construction.
- Do not include complete Safety Analysis Reports, Documented Safety Analyses, Integrated Safety Management System Verifications, or Operational Readiness Reviews. The applicant may attach summaries of findings and tables of contents from recent documents.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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2. Comprehensive Surveys

Required Information

- Describe the methods used for initially determining safety and health hazards. Methods may include baseline industrial hygiene surveys, comprehensive safety surveys, radiological surveys/exposure mappings, and/or project safety reviews at the time of design.
- Provide evidence that the surveyors are qualified to perform the work.

Additional Guidance

- Do not attach entire surveys; executive summaries and tables of contents should be sufficient.
- Evidence that the applicant uses nationally recognized procedures for all sampling and analysis would be helpful.
- Demonstrate that industrial hygienists, safety professionals, health physicists, and specialists in occupational medicine are the professionals generally used on teams performing comprehensive surveys.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

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Field Activities			
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3. Self-Inspections

Required Information

- Describe the system for conducting routine, general worksite safety and health inspections. Include schedules and types of inspections, qualification requirements for those conducting the inspections, and describe how the applicant tracks corrections.
- Describe how these inspections cover the entire site quarterly, through at least monthly assessments.*

Additional Guidance

- Include sample tracking forms.
- Samples of checklists used for self-inspections would be of value.

* For construction sites, safety and health inspections shall cover the entire construction worksite weekly; the safety committee shall conduct hazard inspections monthly.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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4. Routine Hazard Analysis

Required Information

- State how the applicant reviews jobs, processes, and/or the interaction among activities to determine safe work procedures. Describe the frequency of these analyses and provide supporting documents.
- Construction applicants shall describe phase planning.
- Describe how the applicant uses results from analyses, such as job hazard analyses, in training employees to do their jobs safely and in planning and implementing the hazard correction and control program.
- If the applicant conducts process hazard analyses, describe how the applicant decides which processes to analyze.

Additional Guidance

- Include procedures used in conducting job hazard analyses. As appropriate, discuss analysis used to implement *Work Planning and Control*, EFCOG Contractor Guide 2012-0001 Rev 0, dated May 18, 2012.
- Documents showing that line personnel participate in job hazard analyses would be helpful.
- Include a list of any processes the applicant has analyzed, and two or three examples of job hazard analyses.
- Risk Analysis is not synonymous with Hazard Analysis; the applicant shall perform hazard analysis before it can evaluate risk.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Reviewer	Agree	Disagree	Date
Field Activities			
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5. Employee Reporting of Hazards

Required Information

- Describe how employees notify management when they observe conditions or practices that may pose safety and health hazards. Employees shall have the option to submit written notices, anonymously if desired. The reporting system shall protect employees from reprisal, provide timely and adequate response, and track correction of identified hazards to completion.
- Describe how employees report, and managers respond to imminent danger situations.
- Describe the mechanism used by managers to respond to employees. Describe the system for tracking corrective actions.

Additional Guidance

- The applicant may attach forms or procedures, such as maintenance work orders or "stop" cards.
- An actual tracking form following a hazard to correction would be valuable.
- Documents demonstrating timely and appropriate responses to individual employees would be helpful.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

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Field Activities			
Headquarters DOE-VPP Office			

6. Accident Investigations

Required Information

- Describe the system for conducting accident and incident investigations.
- Describe training and/or guidance given to investigators, provide criteria used for deciding which accidents/incidents shall be investigated, and describe how near-miss incidents are handled.
- Describe the applicant's "lessons learned" process, and demonstrate root cause analysis.
- Provide summary of findings or justifications of needs and status of corrective actions from any Type A or Type B Accident Investigations in the previous 3 years.

Additional Guidance

- Include a copy of a brief accident investigation report; however, do not include any DOE Accident Investigations. Reference Type A and Type B accident reports where applicable.
- Do not include supervisors' first reports of injury/illness.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

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7. Trend Analysis

Required Information

- Describe the system(s) for conducting trend analysis of all data generated under the safety and health program, including employee reports of hazards, hazard assessment data, radiological exposure data, and injury and illness experience data.
- Describe how the line organizations disseminate and use results of the trend analysis.

Additional Guidance

- Attach a copy of a recent trend analysis, including recommendations if applicable.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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E. Hazard Prevention and Control**1. Professional Expertise*****Required Information***

- Provide details concerning the use of certified professionals, such as occupational medical personnel, health physicists, industrial hygienists, and safety professionals.
- Describe what services are available at the site, how these professionals integrate their services with each other, and how they maintain open communication.

Additional Guidance

- References to the organizational charts may be appropriate to demonstrate where the various safety and health professions fall within the organization.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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2. Safety and Health Rules

Required Information

- List the site's safety and health rules and describe the disciplinary system used to enforce those rules. Demonstrate that the rules apply to, and are communicated to, all employees.
- Describe positive reinforcement system(s).

Additional Guidance

- Entire safety and health manuals are not appropriate here. It is acceptable to attach a table of contents from the manual, with pages that demonstrate the disciplinary system.
- Positive reinforcement may include such activities as:
 - Informal positive feedback;
 - Formal "one-on-one" feedback sessions; and
 - Rewarding desirable behavior. Award systems should recognize positive activities, rather than simply an absence of injuries.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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3. Personal Protective Equipment

Required Information

- Describe the requirements for maintaining, distributing, and using personal protective equipment.

Additional Guidance

- If personnel use respirators, attach the table of contents from the respirator program.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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Field Activities			
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4. Preventive Maintenance

Required Information

- Summarize and briefly describe the equipment preventive maintenance programs. Include information on scheduling, and describe how the applicant implements the maintenance timetable.

Additional Guidance

- Examples of maintenance schedules are of value.
- Describe how the applicant uses computers for scheduling and tracking of preventive maintenance.
- As appropriate, discuss how the applicant uses the concepts of *Work Planning and Control*, EFCOG Contractor Guide 2012-0001 Rev 0, dated May 18, 2012, to perform maintenance activities.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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5. Emergency Preparedness

Required Information

- Describe the company's emergency planning and preparedness program. Include information on emergency or annual evacuation drills.
- Describe how the applicant chooses credible scenarios emergency drills and how those scenarios relate to site-specific hazards.

Additional Guidance

- The applicant may attach actual forms from training drills.
- Summary of findings and status of corrective actions from comprehensive emergency management program evaluations in the past 3 years should be included.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

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Field Activities			
Headquarters DOE-VPP Office			

6. Radiation Protection Program

Required Information

- Summarize and briefly describe (2-3 pages) the procedures used for protecting employees from radiological hazards.
- Summarize any Notices of Violation or Enforcement Actions under 10 CFR 835, *Occupational Radiation Protection*, in the past 3 years, and provide current status of corrective actions.

Additional Guidance

- Some As Low As Reasonably Achievable (ALARA) performance indicators may be useful, particularly collective dose, maximum individual dose, and number of contamination incidents for each of the previous 3 years.
- Do not attach external or independent assessments, appraisals, corrective plans, or other implementation plans.
- Do not submit checklists to demonstrate program evaluation.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

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7. Medical Programs

Required Information

- Describe how the applicant integrates the medical program with the safety and health program.
- Describe the availability of both onsite and offsite medical services and physicians. Indicate the coverage provided by employees trained in first aid, cardio pulmonary resuscitation (CPR), and other paramedical skills, and indicate what type of training they have received. Address coverage on all shifts.
- Describe how occupational health professionals are involved in routine hazard analysis, early recognition and treatment of illness and injury, and in limiting severity of harm.
- Describe how the site addresses specific programs - e.g., hearing conservation, fitness testing for respirators, bioassay and/or whole body counting, and other required medical testing - under OSHA and DOE Standards, such as those for lead, asbestos, and Hazardous Waste Operations and Emergency Response (HAZWOPER). Describe how the medical program interacts with the industrial hygiene, health physics, and safety programs.

Additional Guidance

- The applicant should not attach individual medical tests, although aggregated results are acceptable. Similarly, the applicant may include forms with no personally identifiable information.
- Describe the location and the accessibility of medical services. Maps, directions, and access times are valuable information, but are not required.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

8. List of Occupational Safety and Health Programs***Required Information***

- List the applicant's current occupational safety and health written programs.
- Summarize findings, notices of violation, or enforcement actions related to 10 CFR Part 851, *Worker Safety and Health Program*, Integrated Safety Management evaluations or verifications within the past 3 years, as well as the status of corrective actions.

Additional Guidance

- Do not attach the programs themselves to this application. Only a list is required, but it should include document numbers that may facilitate identifying and retrieving the documents during the onsite visit.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

F. Safety and Health Training**1. Employees*****Required Information***

- Describe formal and informal safety and health training programs for employees. Specifically address how the applicant teaches employees to recognize the hazards of their jobs.
- Describe how often and in what way courses are evaluated and updated.
- Describe the tests that ensure employees retain course information.

Additional Guidance

- The applicant may attach sample course attendance lists and tracking methods.
- Address how employees receive safety training during job training. Supporting documentation is helpful.
- A list of safety and health courses provided to employees would be helpful.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

2. Supervisors

Required Information

- Describe formal and informal safety and health training for supervisors. Training should pay particular attention to understanding hazards associated with a job; potential effects on employees; how to ensure through teaching and enforcement that employees follow rules, procedures, and work practices; and how to ensure that everyone knows what to do in emergencies.

Additional Guidance

- The applicant may attach sample course attendance lists and tracking methods.
- A list of safety and health courses provided to supervisors would be helpful.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

3. Managers

Required Information

- Describe how all levels of managers learn their safety and health responsibilities.

Additional Guidance

- The applicant may accomplish this training through informal means, e.g., staff meetings.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

G. Assurance of Commitment**1. Union Statement.**

If the site is unionized, the authorized collective bargaining agent(s) shall sign a statement of support for the DOE-VPP application. The statement shall be included in the application before the DOE-VPP Team arrives onsite.

2. Management Statement.

The assurance statements required in the application shall include the following:

- a. We are committed to doing our best to provide outstanding safety and health protection to our employees through management systems and employee involvement.
- b. We are also committed to the achievement and maintenance of the Star level requirements and to the goals and objectives of DOE-VPP.
- c. We agree to provide the information listed below for DOE-VPP review onsite. We agree to retain these records until DOE communicates its decision regarding initial DOE-VPP participation. We shall retain comparable records for the period of DOE-VPP participation covered by each subsequent evaluation until DOE communicates its decision regarding continued approval.
 - Written safety and health program.
 - Copies of the log of injuries and illnesses and the OSHA Form 301, *Injury and Illness Incident Report*, or the DOE Form 5484.3, *Individual Accident/Incident Report*.
 - Injury and illnesses records for subcontractor workers in areas controlled by the participant contractor.
 - Monitoring, sampling, and analysis records (where applicable).
 - Medical records (which DOE shall hold confidentially).
 - Training records.
 - Agreement between management and the collective bargaining agents(s) concerning the functions of the safety committee and its organization, where applicable.
 - Minutes of each Safety Committee, where applicable.
 - Committee inspection records, where applicable.
 - Management inspection and accident investigation records.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

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- Records of employees' reports of unsafe or unhealthful conditions, and actions taken, taking into account appropriate privacy concerns.
 - Annual internal health and safety program evaluation reports.
- d. In agreeing to make this information available to DOE, we understand that DOE shall view any materials we feel are classified, confidential, or revealing of trade secrets onsite to avoid placing those materials in government files that are subject to Freedom of Information Act requests.
- e. We agree to correct all hazards identified through any assessments, investigations, reports, or maintenance in a timely manner.
- f. We agree that control of hazards shall be implemented in the following order:
- Elimination
 - Process and/or material substitution
 - Engineered control
 - Administrative controls
 - Work rules
 - Operating procedures
 - Personal Protective Equipment
- g. We shall provide the results of self-audits, appraisals, assessments, and accident/incident investigations to our employees upon request.
- h. We shall protect any employee who has safety-related duties, or who calls attention to safety related items, from any reprisal or harassment resulting from these duties.
- i. By February 15 of each year, we shall provide DOE our annual TRC rates and DART case rates, hours worked, estimated average employment for the past calendar year and our safety and health program evaluation.
- j. We shall notify employees about participation in DOE-VPP, their right to register a complaint with DOE, and their right to obtain self-inspection and accident investigation results upon request.

3. Withdrawal.

We understand that we may withdraw our participation at any time for any reason, should we so desire.

Applicant agrees that the required information is included and is correct to the best of his or her knowledge.

Applicant Signature: _____

Reviewer Signature Block

Reviewer	Agree	Disagree	Date
Field Activities			
Headquarters DOE-VPP Office			

DOE VOLUNTARY PROTECTION PROGRAM RECOMMENDATION SIGNATURE SHEET

The following signature documents that the Program Office representative has reviewed this DOE-VPP formal application to ensure it includes the required information, and that the Program Office has no objections to the application's content.

Program Office Representative

Date

Mail stop