The Certified Renovator for our Lead Renovation Program and Lead Competent Person is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Testing**

It is our company policy to test all pre-1978 homes for lead based paint by a qualified certified renovator using Lead Check or D-Lead and the EPA guidelines before beginning any work that may disturb lead based paint.

We also recognize other materials in plumbing, glazing, and flashing may contain lead and have our Competent Person assess the hazard and request testing as necessary.

Lead Renovation Safety Plan WAC 296-155-17611

This document serves as our required written lead in construction or maintenance activities safety program.
Recognizing the PEL of lead is 50 μg/m3, our program focuses on containment, low dust work practices, PPE, and decontamination.

Job Hazard Analysis: LEAD

Potential exposure to lead paint chips, lead dust, and or lead fumes on the jobsite is during demolition of painted surfaces, replacing windows and doors, removing and replacing painted baseboards or baseboard materials on painted walls, or prepping surfaces for repaints by pressure washing, sanding, grinding, or using a chemical paint remover.

Our job hazard analysis concludes we must also have a written Hazard Communication program and Respiratory Protection program to protect our employees. Both of these are part of the Housing Authority of Grant County accident prevention program.

Prohibited Activities

The following activities performed on lead based paint are prohibited to our employees, as they cause an anticipated exposure to lead of over 10x the PEL.

* Using a heat gun over 1100 degrees
* power sanding or grinding without a NIOSH approved HEPA vacuum attachment
* and open flame or torch burning on any surface with LBP
* Welding on a lead painted surface

Avoiding these activities should keep us under the 10 times the PEL and is company policy.

Information on Lead’s effect on Employees

Ways for lead to enter the body, such as Inhalation or Ingestion:

When lead is absorbed into the body in certain doses it is a toxic substance. Lead is not absorbed through the skin, but can enter the body by inhalation and ingestion (unless it is in gasoline, then it can be absorbed). When lead is scattered through the air as a dust, fume, or mist it can be inhaled and absorbed by the lungs and upper respiratory tract. Handling food, cigarettes, chewing tobacco, or make-up with hands contaminated with lead will contribute to ingestion. It is for these reasons that eating, drinking, and smoking in identified lead areas are avoided.

A significant portion of the lead that you inhale or ingest gets into the blood stream. Once in your blood stream, lead is circulated throughout your body and stored in various organs and body tissue. Some of the lead is filtered out of the body by excretion, but some remains in the blood and other tissues. The amount of lead stored in the body will increase if lead absorption is more than body excretion. The lead stored in the body can slowly cause irreversible damage to cells, organs, and the body system.

Health Effects of Lead Overexposure

If steps are not taken to control exposure, continued absorption of lead could result in:

* Constipation or diarrhea.
* Lack of appetite, weight loss, nausea, abdominal pain.
* Adverse effects in the male and female reproductive systems.
* Adverse effects in an unborn fetus.

Exposure to lead in large enough quantities can kill in a matter of days. A condition affecting the brain may arise, known as acute encephalopathy that develops into seizures, coma, and death. A short-term exposure of this magnitude is highly unlikely, but not impossible.

There is no sharp dividing line between developing acute and chronic health effects. Lead adversely affects numerous body systems and causes forms of health impairment and disease that arise after periods of exposure as short as days or as long as several years.

Health Effects of Long Term Overexposure WAC 296-155-17609:

Chronic overexposure to lead may result in severe damage to:

* blood forming abilities.
* nervous, urinary and reproductive systems.
* Some common symptoms of chronic overexposure include:
* loss of appetite, metallic taste in the mouth
* anxiety, constipation, nausea, excessive
* tiredness, weakness, insomnia, headache, nervous irritability, muscle and joint pain or soreness, fine tremors, numbness, dizziness, and hyperactivity.

At this stage, a qualified physician may diagnose lead poisoning. The medical and scientific community has recognized that lead exposure can have significant adverse health effects on an unborn fetus and the reproductive systems of males and females.

Some symptoms of lead overexposure affecting the male reproductive system may include:

* a decrease in sexual drive, impotence, decreased ability to produce healthy sperm and sterility.
* With respect to females, these effects may include:
* menstrual disturbances.
* decreased viability of the fertilized ovum.
* changes in reproductive capacity.

Reporting of Problems

Immediately notify your maintenance manager if you develop potential signs or symptoms associated with lead poisoning. You should also notify your maintenance manager if you have difficulty breathing while wearing a respirator or suspect problems with other personal protective equipment.

Exposure Assessment

The Permissible exposure limit (PEL) for lead is stated in WAC 296-155-17607. The standard sets a permissible exposure limit (PEL) of 50 micrograms of lead per cubic meter of air (50 μg/m3), averaged over an 8-hour workday which is referred to as a time-weighted average (TWA).

Any surface that contains lead being disturbed such as, the demolition of painted surfaces, replacing windows and doors, removing and replacing painted baseboards or baseboard materials on painted walls, or prepping surfaces for repaints by pressure washing, sanding, grinding, or using a chemical paint remover will require air monitoring.

Using EPA’s objective data of the exposure to workers, we will assume these activities have an exposure level above the PEL but not above 10 times the PEL, if prohibited practices are not used, until such exposure can be determined.

*Note: WAC 296-155-17609(2)(a)*

*2. Protection of employees during assessment of exposure.*

*(a) With respect to the lead related tasks listed in this subdivision, where lead is present, until the employer performs an employee exposure assessment as required in this section and documents that the employee performing any of the listed tasks is not exposed above the PEL, the employer shall treat the employee as if the employee were exposed above the PEL, and not in excess of ten (10) times the PEL, and shall implement employee protective measures prescribed in subdivision (296-155-17609)(2)(e) of this subsection. The tasks covered by this requirement are:*

*i. Where lead containing coatings or paint are present: Manual demolition of structures (e.g., dry wall), manual scraping, manual sanding, heat gun applications, and power tool cleaning with dust collection systems;*

*ii.Spray painting with lead paint.*

To rule out the exposure of lead at or above the action level of 25 ug/m3 on an eight-hour TWA, the exposure determination shall be based on the following:

Personal exposure monitoring

Objective data demonstrating that the lead containing material, product, process, operation, or activity cannot result in exposure at or above the action level must be used to establish the lowering of required respiratory protection.

Historical measurements of airborne lead that have been taken within the last 12 months.

If the initial exposure determination reveals employee exposure to be at or below the PEL, monitoring will be performed at least every six months. If the exposure determination reveals employee exposure above the PEL, monitoring will be performed quarterly. Additional monitoring will take place if a change in an operations production process occurs which may result in additional exposure to lead. In addition, employees will be given written notification of the results of their exposure assessment within five working days.

A competent person will do air monitoring when activities may disturb lead based paint.

Methods of Compliance can be seen on Trigger Tasks chart in this document and include low-dust work practices, decontamination, proper PPE and containment.

Respiratory Protection WAC 296-155-17619:

Exposure to hazardous materials requires special precautions against absorption of toxic compounds. While engineering controls (e.g. HEPA vacuums) are the primary means of controlling materials such as lead dust, fumes, vapors, and mists, it is often necessary to rely on respiratory protection. The respirator will give you the proper amount of protection based on the nature of the hazard.

See our Respiratory Protection Program for respiratory training, selection, fit testing and medical surveillance required.

Personal Protective Equipment required to protect personnel is to be supplied at no cost to the employees.

Respiratory Selection for Lead Hazards Only:

For exposure up to 10 times the PEL, a half mask respirator with P100 filters shall be worn.

For exposure up to 50 times the PEL, a full face respirator with P100 filters shall be worn.

 PAPR respirators with P100 filters may also be used.

Protective work clothing and Equipment WAC 296-155-17615:

Protective work clothing and equipment includes coveralls, gloves, hats, shoes, shoe coverlets, face shield or vented goggles. All clothing and equipment will be repaired, replaced, cleaned, laundered, or disposed of as necessary by the company.

Contaminated work clothing and equipment must be removed in the designated change area and placed in the provided closed containers to be cleaned or disposed of.

You must ensure that the containers of contaminated protective clothing and equipment required under (e) of this subsection are labeled as follows:

DANGER: CLOTHING AND EQUIPMENT CONTAMINATED WITH LEAD.

MAY DAMAGE FERTILITY OR THE UNBORN CHILD.

CAUSES DAMAGE TO THE CENTRAL NERVOUS SYSTEM.

DO NOT EAT, DRINK OR SMOKE WHEN HANDLING.

DO NOT REMOVE DUST BY BLOWING OR SHAKING.

DISPOSE OF LEAD CONTAMINATED WASH WATER IN ACCORDANCE WITH APPLICABLE LOCAL, STATE, OR FEDERAL REGULATIONS.

At no time may lead be removed from protective clothing or equipment by any means which disperses lead into the workplace air (such as by blowing off ).

Hygiene WAC 296-155-17613:

Employees exposed to lead above the PEL must change, and eat in designated areas, free of lead.

After changing, no clothing or equipment worn during the shift should be worn home. It should be disposed of or placed in a bag and laundered SEPARATELY from your family’s laundry. WE DO NOT WANT TO POISON OUR FAMILIES.

Finally, workers exposed above the PEL must remove PPE, wash both their hands and face prior to eating, drinking, smoking, or applying cosmetics.
See the “Trigger Tasks” chart for required change areas, work practices, and respiratory protection.

The trained lead competent person will determine work practices for each project and required PPE, respiratory protection, and decontamination procedures.

Medical Surveillance WAC 296-155-17621:

Employees exposed to lead must have a baseline BLL or ZPP test preformed according to WAC 296-155-17621.

Employees exposed to more than 30 days of work at or above the action level must participate in a Medical surveillance program includes blood-lead and zinc level tests:

* At least every six months.
* 30 day follow-up.
* If the last blood sampling and analysis indicated a blood lead level at or above 40 ug/100g of whole blood, monitoring will continue every two months.

Monitoring will continue until two consecutive blood samples and analysis indicate a blood lead level below 40 ug/100g of whole blood. Written notification of test results will be given to employees within five days indicating blood lead levels and be given medical removal protection benefits when blood sampling and analysis indicate a blood lead level at or above 40 ug/100g of whole blood.

The second phase of medical surveillance is medical examinations and consultations for employees who meet the following conditions:

At least annually for each employee for whom a blood-sampling test conducted at any time during the preceding 12 months indicated a blood level at or above 40 ug/100g.

Prior to the assignment for the first time to an area in which airborne concentrations of lead are at or above the action level.

As soon as possible, upon notification by an employee, that he/she has developed signs and symptoms commonly associated with lead intoxication, or desire medical advice concerning the effects of current or past exposure to lead and the ability to procreate a healthy child.

As medically appropriate for each employee either removed from exposure to lead due to risk of sustaining material impairment to health, or otherwise limited pursuant to a final medical determination.

A licensed physician will perform all medical examinations and a laboratory licensed by the Center for Disease Control will perform consultations, sampling and analysis.

Medical Removal Protection WAC 296-155-17623

Medical Removal Protection (MRP) is a means of protecting employees when, for whatever reasons, such as engineering controls, work practices, and respirators, have failed to provide the needed protection. Employees with a BLL of 50 ug/dL MRP involves the temporary removal of an employee from his or her regular job to a place of lower exposure without loss of earnings, seniority, or benefits.

You must return an employee removed due to a blood lead level at or above 50 µg/dl when two consecutive blood sampling tests indicate that the employee's blood lead level is below 40 µg/dl.

Post Warning Signs WAC 296-155-17627

A warning sign must be illuminated, kept clean, and posted in work areas where the exposure to lead exceeds the PEL. The sign must read:

DANGER LEAD WORK AREA

MAY DAMAGE FERTILITY OR THE UNBORN CHILD

CAUSES DAMAGE TO THE
CENTRAL NERVOUS SYSTEM

DO NOT EAT, DRINK OR SMOKE IN THIS AREA

Employee Information and Training WAC 296-155-17625

Information and training will be given to all employees who may be exposed to lead above the action level, or who may suffer skin or eye irritation from lead.

Lead in Construction Training must be done annually.

Our training includes the Health Hazards PowerPoint, videos and handout. The training program will inform employees of the dangers of lead, work practices, PPE, and other related materials. We will reference 296-155-17650.

Appendix A to WAC 296-155-176—Substance data sheet for occupational exposure to lead and WAC 296-155-17652

Appendix B to WAC 296-155-176—Employee standard summary in their entirety.

We will use NICA’s lead hazards in construction PowerPoint and handout to cover initial lead competent person training based on WAC 296-155-176 in its entirety.

Additionally, we will train on the Globally Harmonized System of Hazard Communication Program using the NICA GHS Videos, PowerPoint and Handout.

Work Practices

Whenever possible these four processes are applied to work involving lead:

* Contain any dust created
* Wear appropriate PPE
* Use low dust work practices
* Decontaminate after leaving work area

Record Keeping WAC 296-155-17629

The following records will be kept on file at the corporate office, if applicable:

* Exposure monitoring for airborne lead by project if done.
* Names of employees and social security numbers in Medical Surveillance under this program.
* Copy of exam results, records will be kept on file for 30 years after termination of employment, whichever is longer.
* Date of removal and return, whether or not the removal was due to an elevated blood lead level.

| TRIGGER TASKS IN RENOVATIONS CONSTRUCTION | WRITTEN PROGRAMS REQUIRED | AIR MONITORING | PERSONAL PROTECTIVE EQUIPMENT | DECONTAMINATION |
| --- | --- | --- | --- | --- |
| 296-155-17609 (2)(a)(i) The tasks covered by this requirement are: Manual demolition of structure, manual scraping, heat gun applications, power tools with dust collection(ii) spray painting with lead paintor(b) employer has any reason to believe worker performing a task may be exposed over the PEL | - WAC 296-155-17625 Lead in Construction Program- WAC 296-901-140, Hazard communication; - WAC 296-155-17625 Respirator Program; - WAC 296-155-100 Accident Prevention Program  | Until the employer performs an employee exposure assessment, the employer shall treat the employee as if the employee were exposed above the PEL, and not in excess of ten (10) times the PEL. | 1. Appropriate respiratory protection in accordance with WAC 296-155-17613.
2. Use 1/2 Mask Respirator with P100 Filters

(ii) Appropriate personal protective clothing and equipment in accordance with WAC 296-155-17615. Wear disposable coveralls or full body work clothing, gloves, hats, and disposable shoe covers, face shields or vented goggles. | (iii) Change areas in accordance with WAC 296-155-17619(2).(iv) Hand washing facilities in accordance with WAC 296-155-17619(5). |
| 296-155-17609 (2)(c)The tasks covered by this requirement are: (i) Using lead containing mortar; lead burning;(ii) Where lead containing coatings or paint are present: Rivet busting; power tool cleaning without dust collection systems; cleanup activities where dry expendable abrasives are used; and abrasive blasting enclosure movement and removal.  | - WAC 296-155-17625 Lead in Construction Program- WAC 296-901-140, Hazard communication; - WAC 296-155-17625 Respirator Program; - WAC 296-155-100 Accident Prevention Program  | Exposure Monitoring RequiredUntil such assessment the Employer assumes the exposure is above 500 mg/m3` | (i) Appropriate respiratory protection in accordance with WAC 296-155-17613.Use Full Face Respirator with P100 Filters (ii) Appropriate personal protective clothing and equipment in accordance with WAC 296-155-17615. Wear disposable coveralls or full body work clothing, gloves, hats, and disposable shoe covers. | (iii) Change areas in accordance with WAC 296-155-17619(2).(iv) Hand washing facilities in accordance with WAC 296-155-17619(5). |
| 296-155-17609 (2)(c)Protection described in this section is required where lead containing coatings or paint are present on structures when performing:(i) Abrasive blasting;(ii) Welding;(iii) Cutting; and(iv) Torch burning. | - WAC 296-155-17625 Lead in Construction Program- WAC 296-901-140, Hazard communication; - WAC 296-155-17625 Respirator Program; - WAC 296-155-100 Accident Prevention Program  | Exposure Monitoring RequiredUntil such assessment the Employer assumes the employee were exposed to lead in excess of 2,500 µg/m3 | (i) Appropriate respiratory protection in accordance with WAC 296-155-17613.Use Supplied Air Respirator with Grade D Air (ii) Appropriate personal protective clothing and equipment in accordance with WAC 296-155-17615. Wear disposable coveralls or full body work clothing,gloves, hats, and disposable shoe covers. | (iii) Change areas in accordance with WAC 296-155-17619(2).(iv) Hand washing facilities in accordance with WAC 296-155-17619(5). |
| Objective or Statistical Data: Where the employer has previously monitored for lead exposures, and the data was obtained within the past twelve months during work operations conducted under workplace conditions closely resembling the processes, type of material, control methods, work practices, and environmental conditions used and prevailing in the employer's current operations, the employer may rely on such earlier monitoring results to satisfy the requirements air monitoring if the sampling and analytical methods meet the accuracy required in WAC 296-155-17609. Limitations on the use of objective date is found at WAC 296-155-17609 (3)(d)(iii). |
| Employee notification.Within five working days after completion of the exposure assessment the employer shall notify each employee in writing of the results which represent employees’ exposure, and the employer shall include in the written notice a statement if the employees’ exposure was at or above that level and a description of the corrective action taken or to be taken to reduce exposure to below that. level. |