

Laboratory Integrated Safety Plan

Joint Assessment Checklist

Section 1 General Safety

Q#	Question	Weight	Procedure	Observable Evidence
1.01	Is the outside of the laboratory door posted with current emergency contact information and relevant hazard warnings (e.g. biohazards, radioactive materials)?	1	None	Signage is present and current.
1.02	Is the presence of food/drink/cosmetics prohibited in the laboratory? Are refrigerators/freezers/microwaves labeled prohibiting food and drink?	2	CHP	Signage on refrig/freezer/microwaves/blenders/ no visible food/trash
1.03	Where in use, are extension cords in safe working condition and used properly?	2	OSHA 1910.303(g)(2)(i)	Visual - 100%
1.04	Are step stools/ladders periodically inspected and in safe condition? If personnel use ladders, have they received training?	1	OSHA 1910.23	Observation/Interview <5 - all records >5 - 75% of records
1.05	Where lights are used for general illumination, are they protected from accidental contact by a fixture or guard?	1	OSHA 1910.305(a)(2)(ix) and 1910.305(j)(i)	Visual/100%
1.06	Are exits and aisles clear - 28 inches wide (office areas are permitted to be 22 inches)?	1	CHP	Observation
1.07	Are exits clearly visible and marked by a sign reading "Exit"? Are doors, passageways or stairways that are neither exits nor a way to an exit, and which can be mistaken for an exit, marked with a sign reading "Not An Exit" or identify its function?	1	OSHA 1910.37	Observation
1.08	Are floors free of oil, grease, liquids, broken and uneven surfaces, or sharp objects?	1	CHP	Observation
1.09	Is there evidence of a lab housekeeping standard - area is uncluttered, there is not excessive storage of materials, trip hazards, egress access, etc.?	3	CHP	Observation
1.10	Are laboratory hoods within annual certification, if not have they been taken out of service?	1	OSHA	Current hood certification on hood.
1.11	Do laboratory hoods contain minimal clutter?	2	CHP	80% of back vent unobstructed/no chemical containers in the sink/items 6 inches from sash.
1.12	Are gas cylinders properly labeled, properly stored (separation of empties from non-empties & separation between flammables and oxidizers by 20 ft. or barrier), associated piping properly secured, and safety caps replaced when not in use?	1	CHP	100% secured; Observation/interview.

1.13	Are cylinders of all gases that are greater than lecture bottle size and have health hazard ratings of 3 or 4 and cylinders of gases that have a health hazard rating of 2 without physiological warning properties (e.g., lack of odor) and pyrophoric gases stored in gas cabinets that are continuously mechanically ventilated?	3	Flammable Liquid and Compressed Gas Handling Procedure	Observation
1.14	Are pressure vessels inspected by competent persons and are pressure relief valves properly maintained?	3	Boiler and Pressure Vessel Regulations (680 IAC 2)	Inspection and maintenance records
1.15	Are sharps (needles, razor blades) disposed of in approved sharps containers?	1	Infectious Waste Procedure	Observation
1.16	Are those who operate machines wearing the appropriate PPE and have no loose fitting clothing, hair or jewelry that could become entangled?	1	Machine Guarding and Shop Safety Program	Observation of 100% of personnel. If no one using equipment, interview operators.
1.17	Are machines guarded to prevent the operator and other people in the area from making contact with hazards such as those created by point of operation, ingoing nip points, rotating parts, flying chips, and sparks?	3	Machine Guarding and Shop Safety Program	Observation of 100% of equipment, looking for: -Tongue guard and work rest appropriately adjusted on bench grinders. -Telescoping guard & spring loaded chuck wrench on drill presses. -Chuck guard & spring loaded chuck wrench on lathes. -Fixed guards, two hand controls, light curtains, etc. for power press/brake press.
1.18	Are hand and portable power tools are in good condition and properly guarded, including tools and equipment which may be furnished by employees.	3	Machine Guarding and Shop Safety Program	Observation Wooden handles of tools free of splinters or cracks and kept tight in the tool. Electrical cords free of damage.
1.19	Is shelving not overloaded (sagging) and are heavy items (>15 lbs.) stored on lower and middle shelves of storage rooms and cabinets or items are not blocking sprinklers 18" clearance?	3	OSHA	Visual/Physical test
1.20	Is sufficient access and working space provided and maintained (free of storage) around electric distribution equipment such as fuse boxes, panels, knife switches, etc.?	1	29 CFR1910.305 (d)	Working space in front of the electrical equipment must be minimum of 30 in. in width and 36 in. in depth.
1.21	Other	1	N/A	N/A
Section 2 Training				
Q#	Question	Weight	Procedure	Observable Evidence
2.01	Is a completed Training Needs Assessment available with a list of Personnel available?	1	None	Training needs assessment completed with list of personnel.

2.02	Have active personnel in the laboratory received General Lab Safety Parts 1-3 initially and Refresher training annually thereafter?	2	CHP	<5 - all records >5 - 75% of records
2.03	Have all appropriate lab personnel been trained on existing lab SOPs?	1	CHP	<5 - all records >5 - 75% of records
2.04	Is there documentation that employees have received machine specific training for the equipment in which they are using?	2	Machine Guarding and Shop Safety Program	<5 - all records >5 - 75% of records
2.05	Other	1	N/A	N/A
Section 3 Personal Protective Equipment (PPE)				
Q#	Question	Weight	Procedure	Observable Evidence
3.01	Is a completed PPE Assessment and certification form signed by all lab personnel?	1	Personal Protective Equipment Policy	Completed assessment <5 - all records >5 - 75% of records
3.02	Is appropriate eye, face and hand protection used and lab coats worn when handling chemicals, radioactive materials or biological materials? Is FR lab coat being used per procedure?	1	Personal Protective Equipment Policy	Visual observation of: - Insulated gloves for handling cryogenics (dry ice or liquid nitrogen) - Ear plugs or muffs when employees exposed to 85 dBA or greater as 8 hr TWA - Leather gloves, appropriate filter lens or welding helmet for hot work activities
3.03	Is appropriate attire being worn in the lab (safety glasses, closed toed long pants or long skirts, short sleeved (at a minimum) shirts? If PPE requirements have been relaxed, is documented approval available indicating so?	3	Personal Protective Equipment Policy	Observation
3.04	Are employees inspecting, cleaning, and maintaining their lab coats as required?	1	Personal Protective Equipment Policy	Visual and/or verbal conversation
3.05	Have employees who use respiratory protection received an annual medical exam, a respiratory fit test, and current in annual training?	1	Respiratory Protection Policy	<5 - all records >5 - 75% of records
3.06	For employees who voluntarily wear a respirator, have they completed a Voluntary Use form?	1	Respiratory Protection Policy	Review of 100% records
3.07	Other	1	N/A	N/A
Section 4 Emergency Response				
Q#	Question	Weight	Procedure	Observable Evidence

4.01	Have all active personnel in the laboratory received emergency response training that includes evacuation procedures and assembly areas for building evacuation, severe weather, and emergency response during an incident (cut, needle stick, chemical burn, fire, chemical spill, etc. and is training documented?	2	CHP	<5 - all records >5 - 75% of records
4.02	Are fire extinguishers mounted, unobstructed, and monthly and annual inspections current and documented?	1	CHP	Area around extinguisher is unobstructed and inspection documentation is current (annual - within 1 year; monthly within 1 month)
4.03	Are safety showers inspected annually by facilities and documented and do they have unobstructed access?	3	CHP	Area around safety shower is unobstructed and inspection documentation is current (within 1 year)
4.04	Are eyewash stations inspected monthly and documented and do they have unobstructed access?	3	CHP	Monthly inspections documented for each eye wash station and areas around the sink or floor provide clear access to eye wash.
4.05	Are sprinkler heads unobstructed and maintained with 18" of clearance horizontally across the space?	2	NFPA	18" of clearance around and below sprinkler heads are maintained horizontally across entire space.
4.06	Other	1	N/A	N/A
Section 5 Chemical Storage and Use				
Q#	Question	Weight	Procedure	Observable Evidence
5.01	Are all chemical containers properly labeled?	2	CHP	Chemical containers include chemical name and hazard warnings. (includes reaction vessels, oil baths, squirt bottles). - Food products labeled "Not for human consumption" - Labels - legible and in English - Chemical names must be used
5.02	Are all chemical containers in good condition, clean, stored upright and closed securely?	1	None	Chemical containers are closed securely: with caps intact (no cracks) and no visible leakages, no spillage, stored upright. No containers that once held food - Closed reaction vessels in storage - No spillage down sides - No cracked caps
5.03	Are the (M)SDS for all chemicals used readily available to all laboratory personnel?	1	CHP/Hazard Communication Standard	Hard copy or verbal explanation
5.04	Is an inventory of all chemicals taken annually that is documented and includes quantities?	1	CHP	Electronic or hard copy available for review
5.05	Does the lab have appropriate spill response absorbents, neutralizing agents and equipment?	1	CHP	Visual of spill response materials.
5.06	Are the spill response materials in a designated location and employees are aware of the location?	1	CHP	Clearly identified area

5.07	Are time sensitive chemicals (ethers and peroxide formers) dated, within expiration and stored in dark colored glass / metal to avoid reactions with light?	2	Handling Time Sensitive Materials	100% bottles labeled and within expiration
5.08	Are all hazardous materials NOT stored above eye level? - >6 feet	1	CHP	100% hazardous materials on lower shelves
5.09	Are there 3 or less flammable cabinets in the lab, are they appropriately vented and grounded (grounding is only necessary when storing Class 1A flammable liquids), and contain 60 gallons or less of Class I liquids and no more than 120 gallons of Class I-III liquids?	1	Flammable and Combustible	Count and calculation
5.10	Does the lab have less than 8 gallons/100 sq. feet of flammable / combustible liquids (Class I, II, III) stored in cabinets and on bench or hood and no more than 4 gallons/100 sq. feet out in use?	1	Flammable and Combustible	Count and calculation
5.11	Does the lab allow no more than 2 gallons/100 sq. feet of Class I flammable liquids to be out of a flammable cabinet (on bench top or in hood) and no more than 4 gallons/100 sq. ft. in a storage cabinet.	1	Flammable and Combustible	Count and calculation
5.12	Are refrigerators being used to store flammable liquids rated as laboratory safe?	1	None	Observation
5.13	Are incompatible chemicals/wastes segregated appropriately?	2	CHP	Visual inspection : Oxidizers (nitrates, perchlorates, permanganates, sulfuric, nitric and perchloric acids, etc.) and Flammables (acetone, methanol, ethanol, ether) - Water reactives and aqueous solutions
5.14	Is dry ice stored in a well-ventilated location (no walk-in freezers or coolers) and placed in a container designed for the storage of dry ice and are dry ice baths open to the atmosphere? Is unneeded dry ice properly disposed (never placed in sink, toilet, drain, trash/garbage)?	1	Dry Ice Procedure	Observation
5.15	Have personnel who ship packages containing dry ice been trained on DOT/IATA requirements?	1	Dry Ice Procedure	<5 - all records >5 - 75% of records
5.16	Other	1	N/A	N/A
Section 6 Hazardous Waste				
Q#	Question	Weight	Procedure	Observable Evidence
6.01	Are waste containers labeled " <u>Hazardous Waste</u> " with each constituent noted on the label?	2	Haz Waste Proc.	Observation

6.02	Are all waste containers capped or closed except when filling?	2	Haz Waste Proc.	Observation
6.03	Are waste containers in good condition, leak-proof, clean, and safe for transport?	2	Haz Waste Proc.	Observation
6.04	Are wastes stored in containers that have secondary containment large enough to contain 10% of total volume of container or 100% of volume of largest container, whichever is greater?	2	Haz Waste Proc.	Observation
6.05	Is waste stored at or near the point of generation and under the control of the person generating the waste?	1	Haz Waste Proc.	Observation
6.06	Are universal wastes (e.g., batteries, lamps, mercury containing equipment, pesticided) properly stored and labeled to identify the waste type and have personnel handling wastes been trained?	2	Universal Waste Proc.	Observation
6.07	Other	1	N/A	N/A
Section 7 Biological Safety				
Q#	Question	Weight	Procedure	Observable Evidence
7.01	Are BSL-2 agents secured from unauthorized use or removal?	1	Biosafety Manual	Visual inspection of area: -Locked, and/or not open for any to take and in a certified BSL-2 lab
7.02	Is there appropriate signage on the equipment using agents?	1	CHP/Biosafety Manual	100 % of signage on equipment Biohazard symbol on centrifuges, incubators, liquid nitrogen dewers with samples, freezers, refrigs - Signage on door
7.03	Have all active personnel in the laboratory received Biosafety level 1-2 training within the last year?	1	Biosafety Manual	Record Review: <5 all >5 75%
7.04	Have all active personnel in the laboratory completed BBP training within the last year?	1	BBP	Record Review: <5 all >5 75%
7.05	Have all personnel "At Risk" from BBP received appropriate vaccinations or signed a waiver declining these vaccines?	2	BBP	Record Review: <5 all >5 75%
7.06	Has a protocol been approved by the Institutional Biosafety Committee (IBC) within the last 3 years for the biohazard? Has an IBC Registration Document been approved within the last 3 years for rDNA research that is being conducted in the lab?	2	Biosafety Manual	Protocols are available and current
7.07	In a BSL-2 lab, there are no upholstered chairs/couches or carpeting. Is Biosafety cabinet within its annual certification date?	2	Biosafety Manual (CDC)	Visual

7.08	Are biohazardous wastes contained and decontaminated appropriately?	1	Biosafety Manual/Infectious Waste Procedure	Closed waste container/ Autoclave bags used in lab. Deconned: autoclave, treat with bleach, alcohol or Lysol (as appropriate) - Sealed or deconned prior to removing from cabinet?
7.09	Other	1	N/A	N/A
Section 8 Radiation Safety				
Q#	Question	Weight	Procedure	Observable Evidence
8.01	Has the use of radiation in this area been approved by the campus Radiation Control Committee?	2	Radiation Safety	Sign on door.
8.02	Is there documentation that all personnel working in the area where the radioactive materials are used and/or stored have been appropriately trained?	1	Radiation Safety	100% of users, 75% of non-users over the first five. Cards must be available for review. Include 2 day a week users.
8.03	Are the records for radioactive material use, contamination surveys, and inventory properly updated and maintained for inspection?	2	Radiation Safety	100% of users, 75% of non-users over the first five. Cards must be available for review. Include 2 day a week users.
8.04	Are work surfaces covered with absorbent paper or are trays used? This is necessary only in the area(s) where open, non-sealed sources of radiation are used.	1	Radiation Safety	Observation
8.05	Is the NRC Form 3 "Notice to Employees" posted in the lab. In labs using machine produced radiation (x-ray machines/accelerators) is ISDH Board Form X on or near the unit or its control panel.	1	Radiation Safety	Observation
8.06	Are all radioactive materials and wastes properly labeled?	2	Radiation Safety	All radioactive material containers must be labeled with the radiation symbol and the name of the isotope and all radioactive wastes containers require the radiation symbol, name of isotope, and the following wording "Radioactive Waste- Do Not Remove"
8.07	Are all radioactive materials and wastes properly secured against unauthorized use or removal?	2	Radiation Safety	Door locked when no one in lab; or in locked storage unit. This includes rad waste.
8.08	Is the Radiation Safety Manual available in the room and have personnel been informed of its location?	1	Radiation Safety	2007 Edition present and available for review.
8.09	Other	1	N/A	N/A
Section 9 Laser/UV Safety - (Class 3b and 4)				
Q#	Question	Weight	Procedure	Observable Evidence
9.01	Have all lasers and laser areas been approved by the campus Laser Safety Officer?	2	Laser/UV Safety Protocol	Verify with Laser Safety Officer.

9.02	Are laser use areas identified by the proper signage, including lighted signs for Class 4 lasers?	2	Laser/UV Safety Protocol	Proper (3B or 4)classification on sign, lighted sign for Class 4 lasers.
9.03	Is there documentation of Laser Safety Training for all personnel working with or around the laser(s)?	1	Laser/UV Safety Protocol	Record Review: 100% of laser users 75% of non-users over the first five
9.04	Is the appropriate Laser Safety Eyewear available?	2	Laser/UV Safety Protocol	Eyewear must be available for inspection.
9.05	Have all laser users undergone a baseline eye exam as required by the Laser Safety Manual?	1	Laser/UV Safety Protocol	Must be on file in RMS.
9.06	Are SOPs written and available for review in the lab?	1	Laser/UV Safety Protocol	SOP's must be available for review.
9.07	Are open laser beams appropriately confined and terminated (this includes covering windows if a curtain is not used)?	2	Laser/UV Safety Protocol	Observation
9.08	Is the Laser Safety Manual available in the room and have personnel been informed of its location?	1	Laser/UV Safety Protocol	Must be able to show that they have 2009 Edition.
9.09	Does UV equipment have warning labels affixed?	1	Laser/UV Safety Protocol	Observation
9.10	Other	1	N/A	N/A
Section 10 Life Critical Processes				
Q#	Question	Weight	Procedure	Observable Evidence
10.01	Are live parts of electrical equipment operating at 50 volts or more guarded against accidental contact?	3	OSHA 1910.303(g)(2)(i)	Visual - 100%
10.02	Have all employees who perform work on exposed electrical conductors >50 volts completed training in accordance with applicable OSHA and NFPA 70E electrical safety-related work practices and equipped with necessary PPE and tools?	3	OSHA 1910.303(g)(2)(i)	Visual - 100% for guarded parts If parts not guarded: -Training 100% complete -Visual of PPE, tools, safe work practices
10.03	Are confined spaces properly labeled and is there a documented inventory list identifying each space?	2	Confined Space	Visual of equipment 100% review of inventory

10.04	Have all employees who serve as either entrants, attendants or competent persons completed Permit Required Confined Space training (including hands-on), and equipped with appropriate equipment for entry?	3	Confined Space Procedure	<5 - all records >5 - 75% of records
10.05	Are entry permits or reclassification forms completed for each entry and have entry evaluations (field audits) been conducted and documented?	3	Confined Space Procedure	100% review of completed permits and program review
10.06	Have operators of aerial platforms and scissor lifts been trained on the use of Aerial Work Platforms and fall protection, equipped with the necessary equipment, and performed documented pre-start and workplace inspections prior to use of equipment?	2	OSHA 1910.67	<5 - all training records >5 - 75% of training records Visual of equipment 100% review of completed permits and program review
10.07	Have all employees who operate fork lifts and/or powered pallet movers completed training, conducted pre-shift inspections prior to use, and have annual third party inspections been completed? If the forklift is equipped with front-end attachments other than factory installed ones, is the lift marked to identify the attachments?	2	OSHA 1910.178(l)(4), 1910.178(q)	<5 - all training records >5 - 75% of training records Random sample of 10 completed inspection forms and all found correctly documented. Review of forklift data plate for attachment ratings
10.08	Have all employees who use fall protection completed fall protection training, including hands-on?	1	Fall Protection	<5 - all records >5 - 75% of records
10.09	Is there a documented inventory of Personal Fall Arrest Systems and are they inspected prior to use, inspected periodically by a Competent Person and documented, properly designed (based on fall distance), in safe working condition, properly stored and anchor points periodically certified?	1	Fall Protection	<5 - all records >5 - 75% of records Observation of 100% of equipment in lab. 100% review of inventory and inspections

10.10	<p>Are equipment-specific energy control procedures available for each piece of equipment that address the elements listed below?</p> <ul style="list-style-type: none"> • Identification of the equipment and/or task • Type and magnitude of all hazardous energy sources • Listing of all applicable energy isolation devices • Specific steps to obtain zero energy state • Specific steps for verifying energy control including the release of stored energy <p>Written procedures are NOT required for cord and plug connected equipment and pieces of equipment that have single, readily identifiable energy isolation devices if there is no potential for stored energy after shut down.</p>	3	Lock, Tag, Try	<p>Review written energy control procedures to ensure they include all elements: < 5 machines - all records 5-10 machines - 75% of records 11-100 machines - 25% of records > 100 machines - 10% of records</p> <p>Interview personnel performing lockout/tagout activities that they can identify and understand an energy control procedure: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews</p>
10.11	<p>Are periodic audits of procedures and authorized personnel conducted and documented to ensure authorized persons are following prescribed energy control procedures and that energy controls are being utilized properly? The certification shall identify the machine or equipment on which the energy control procedure was being utilized, the date of the inspection, the employees included in the inspection, and the person performing the inspection.</p>	3	Lock, Tag, Try	<p>Review of equipment specific lockout inspection records: < 5 - all records 5-10 - 75% of records 11-100 - 25% of records > 100 - 10% of records</p> <p>Interview personnel performing lockout/tagout inspections to assess if periodic audits are being completed: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews</p>
10.12	<p>Have authorized persons been trained?</p>	3	Lock, Tag, Try	<p>Review training records of all personnel conducting lockout/tagout: < 5 - all records 5-10 - 75% of records 11-100 - 25% of records > 100 - 10% of records</p>
10.13	<p>Have affected employees been trained in the purpose and use of the energy control procedure.</p>	3	Lock, Tag, Try	<p>Review training records of affected personnel. < 5 - all records 5-10 - 75% of records 11-100 - 25% of records > 100 - 10% of records</p>

10.14	Are locks, tags, or other hardware provided for isolating, securing and blocking of machines or equipment from energy sources?	3	Lock, Tag, Try	Interview authorized employees and visually review equipment to verify proper equipment is provided: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews
10.15	Are lockout and tagout devices, (1) red in color for personal locks, (2) blue for group lockout and (3) green for long term equipment isolation? Are locks prohibited from use for other purposes, capable of withstanding the environment to which they are exposed, standardized, i.e., color, shape, size, paint and format, and substantial enough to prevent removal without the use of excessive force?	3	Lock, Tag, Try	Inspect authorized employees' issued equipment. Interview authorized employees to verify proper equipment: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews
10.16	Are locks equipped with tags that read "Do not start", "Do not open", "Do not close", "Do not energize", or "Do not operate" and identify lock owner?	2	Lock, Tag, Try	Inspect authorized employees' issued equipment and verify tags are appropriate: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews
10.17	Do authorized persons verify that de-energizing has been effective by attempting to start the equipment and release residual energy before starting servicing or maintenance work?	3	Lock, Tag, Try	Interview authorized employees to verify authorized personnel attempt to restart equipment to verify effectiveness: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews
10.18	Where more than one authorized employee is conducting maintenance, is each authorized employee affixing a personal lockout/tagout device to the group lockout device, group lockbox, or comparable mechanism when he or she begins work and when he or she stops working on the equipment?	3	Lock, Tag, Try	Interview authorized employees to verify individual and group lockout processes < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews

10.19	Do procedures exist for removing and transferring locks and tags? Are documented emergency lock removal forms completed in such situations?	3	Lock, Tag, Try	<p>Interview authorized employees to verify procedures exist for removing and transferring locks and tags.</p> <p>Interview authorized employees to verify authorized personnel attempt to restart equipment to verify effectiveness: < 4 authorized employees - 100% of interviews 4-10 authorized employees - 75% of interviews 11-20 authorized employees - 50% of interviews > 20 authorized employees - 25% of interviews</p> <p>Review emergency lock removal records and interview personnel to ensure process is being adhered to: < 5 - all records 5-10 - 75% of records 11-100 - 25% of records > 100 - 10% of records</p>
10.20	Are hoists initially load tested, inspected daily prior to use and annually by a third party, clearly marked with their Rated Loads and the sum of all lifting units is less than or equal to the rated load of the bridge, jib, or monorail, and operators have completed training.	2	OSHA 1910.179(b)(5), 1910.179(j)	<5 - all training records >5 - 75% of training records Visual of marked loads 100% review of inspections
10.21	Are all under-hook lifting attachments in safe working order, properly stored, and thorough inspection conducted at least once every 12 months?	1	None	Visual of equipment 100% review documentation
10.22	Have all employees who conduct hot work activities completed hot work employee training? Have employees performing hot work in a non-designated area completed Hot Work Fire Watch and Permit Issuer training? Are hot work permits completed? Are designated hot work areas properly labeled and identified?	2	Hot Work	<5 - all records >5 - 75% of records 100% review of hot work permits Observation of labeling/signage
10.23	Other	1	N/A	N/A