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Subcontractors	Program Requirements Document	For Additional Info: http://EDMS	Effective Date: 09/19/22
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Manual: Subcontractor Requirements

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1. PURPOSE

This document establishes requirements designed to protect workers against fall hazards and the associated risk of personnel injury. This document implements requirements from codes and standards along with *contractor* (see def.) requirements. Any applicable regulatory or contractor requirements must be followed, with the most stringent requirement being met.

2. APPLICABILITY

This document applies to all subcontractors working at the Idaho Cleanup Project (ICP) Core as specified in their contract with contractor. Stricter requirements may be imposed by subcontractors upon their employees or sub-tier contractors. The requirements of this document shall be followed by subcontractors; however, the means of implementation may vary as determined by the subcontractor.

3. REQUIREMENTS

3.1 General Requirements

- 3.1.1 Fall protection will be in accordance with 29 CFR 1926, Subpart M, “Fall Protection.”
 - 3.1.1.1 Some additional requirements are listed from 29 CFR 1910, Subpart D, “Walking and Working Surfaces.”
- 3.1.2 Competent persons, as assigned by the subcontractor, shall perform the following tasks:
 - A. Developing or assisting in the completion of a Fall Hazard Prevention Analysis (FHPA) (see Section 3.6 for the requirements) for whenever an employee will be assigned to or has a potential to be working or traveling within 6 ft of any fall hazard of 6 ft or more
 - B. Assigning appropriate protective measures for fall hazards on work control documents
 - C. Perform formal inspection fall protection equipment every 6 months and affix suitable tags which indicate inspection frequency/dates
 - D. Routinely assess the effectiveness of the FHPA and update to include additionally identified hazards and their controls

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- E. Review hazards associated with ladder work
 - F. Review hazards associated with work performed on commercial vehicles and heavy equipment
 - G. Inspect components from different manufacturers that are mixed together to provide a personal fall arrest system (PFAS) to ensure that they are compatible, comply with ANSI 359.1, and are used as designed.
- 3.1.3 Any employee who is exposed to a fall hazard greater than 6 ft (4 ft for general industry applications) shall be protected by a conventional fall protection system, with the exception of the following conditions:
- A. The employee is working with an approved fall protection plan (FPP) that specifies fall hazards greater than 6 ft (4 ft for general industry applications) (see Section 3.14 for use of FPPs)
 - B. Work on scaffolding where the work activity has been reviewed by both a scaffold competent person and a fall protection competent person, and it is determined to not be feasible or necessary
 - C. Work from a ladder which has been reviewed by a fall protection competent person, and it is determined to not be feasible or necessary
 - D. Work on a commercial vehicle or heavy equipment which has been reviewed by a competent person, and it is determined to not be feasible or necessary.
- NOTE:** *An exception to this requirement may be obtained for emergency situations and the work to be performed is documented in a work control document.*
- 3.1.4 Work at heights shall be evaluated during weather conditions that may increase the hazard of falling, including snow, rain, icing, or winds of 25 mph or greater.
- 3.1.5 Employees climbing to work locations above 6 ft without a standard access route (such as portable or fixed ladders and stairs, manufactured heavy equipment accesses) shall be provided fall arrest protection or safe access shall be provided.
- 3.1.6 Fall protection equipment shall meet the requirements of ANSI A10.14-1991, or ANSI 359.1-1992.

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3.2 Equipment Inspections

- 3.2.1 Fall protection equipment shall be inspected in accordance with 29 CFR 1926, Subpart M.
- 3.2.2 Fall protection equipment must be inspected by a fall protection competent person and marked to indicate the expiration date of the inspection, which in no case will be longer than 6 months from the time of the last inspection.
- 3.2.3 Only fall gear with current inspections will be made available for use.

NOTE: *Carabineers and installation snaphooks do not need to be marked.*

3.3 Work on Low-Sloped Roofs

- 3.3.1 Employees working on a low-sloped roof shall be protected by one of the following methods:
 - A. A conventional fall protection system
 - B. A travel restriction system
 - C. A warning line system in combination with a safety monitor
 - D. A safety monitor alone, on roofs with a width of less than 50 ft.

NOTE: *A safety monitor alone (Item D above) is acceptable protection only for personnel performing roofing work. A safety monitor alone is not an authorized method of protecting employees performing any other kinds of work on a roof.*

- 3.3.2 Materials and equipment shall not be stored within 6 feet of a roof edge unless guardrails are erected at the edge.
- 3.3.3 Mechanical equipment on roofs shall be used or stored only in areas where employees are protected by a warning line system, guardrail system, or personal fall arrest system (PFAS).
- 3.3.4 Work on low-sloped roofs for operational or maintenance work activities may utilize the requirements of designated areas as described in 29 CFR 1910.29, Fall Protection Systems and Falling Object Protection—Criteria and Practices; (d) Designated Areas.

3.4 Protection from Falling Objects

- 3.4.1 Protection from falling objects shall be in accordance with 29 CFR 1926, Subpart M.

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3.5 Overhand Bricklaying and Related Work

- 3.5.1 Overhand bricklaying and related work shall be in accordance with 29 CFR 1926, Subpart M.
- 3.5.2 On floors and roofs where guardrail systems are in place but need to be removed to allow bricklaying work or leading edge work to take place, only the portion of the guardrail needed to accomplish that day's work may be removed.

3.6 Fall Hazard Prevention Analysis for Fall Hazards

NOTE: *A fall hazard prevention analysis (FHPA) must be conducted to support work control documents associated with the task. This FHPA must be documented on the form (Appendix B) a job safety analysis (JSA), work order on company Form 442.24, "Fall Hazard Prevention Analysis."*

- 3.6.1 A FHPA shall be completed and signed by a competent person whenever an employee will be assigned to or has a potential to be working or traveling within 6 ft of any fall hazard of 6 ft or more.

3.6.1.1 The following items shall be identified in the FHPA:

- A. Each fall hazard associated with a routine task
- B. The conventional fall protection system that will be used to prevent a fall or mitigate the consequences of a fall
- C. Specific fall protection equipment and anchor points for each fall hazard, including detailed description of the personal fall arrest system (PFAS)
- D. Specific fall protection equipment and anchor points for each fall hazard, including detailed description of any travel restriction systems used

NOTE: *The detail of the PFAS/travel restraint must include the anchorage point, the anchorage criteria, the lanyard type, lanyard length, other components such as retractable lanyard systems and snaphooks, and the number of workers per anchor.*

- E. Considerations for rescue of a worker experiencing a fall (this may include use of aerial lifts/scissor lifts or the fire station rescue response).

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3.6.2 Employees who will be exposed to fall hazards shall read, review, and sign the FHPA.

3.6.3 Responsible management shall review and approve the FHPA.

3.7 Personal Fall Arrest Systems (PFAS)

3.7.1 If scaffolding, guardrails, aerial lifts, other conventional protection, or equally protective fall protection cannot be used, a personal fall arrest system with adequate anchorage shall be used. In such cases, employees shall be tied off 100% of the time, using two lanyards, if necessary.

3.7.1.1 The use of a personal fall protection systems are not required when inspecting, investigating, or assessing workplace conditions or work to be performed prior to the start of work or after all work has been completed.
<29 CFR 1910.28(a)(2)(ii)>

3.7.1.2 The FHPA must describe when fall protection will not be used, or 100% fall protection is not met (for example, access areas, performing assessments/inspections, walking on designated pathways, accessing anchorage, etc.).

3.7.2 PFASs shall meet the criteria in accordance with 29 CFR 1926.

3.7.2.1 The gate strength of snaphooks and carabiners must be proof tested to 3,600 lb. as listed in 29 CFR 1910.140.

3.7.2.2 Travel restraint system must meet the requirements of a PFAS as listed in 29 CFR 1910, Subpart D.

3.7.3 PFASs shall be installed such that an employee can neither free fall more than 6 ft (4 ft for general industry applications) nor contact any lower level.

3.7.4 PFASs used at hoist areas shall be rigged to allow the employee to move only as far as the edge of the walking or working surface.

3.7.5 A competent person must review and verify the use, care, and maintenance of self-retracting lifelines in accordance with the manufacturer's requirements, recommendations, or limitations. Any limitations of the lifeline system must be noted in a JSA or other work control document.

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3.8 Compatibility of Equipment

- 3.8.1 Fall protection components from different manufacturers that are mixed together to provide a PFAS shall be inspected by a competent person to ensure that they are compatible, comply with ANSI 359.1, and are used as designed.

3.9 Lifelines

- 3.9.1 Lifelines and their use will be in accordance with 29 CFR 1926, Subpart M.

3.10 Anchorage

- 3.10.1 Anchorages shall be in accordance with 29 CFR 1926, Subpart M.
- 3.10.1.1 Fall protection anchorage shall be selected and installed only by a fall protection competent person.

3.11 Warning Lines

- 3.11.1 Warning lines shall be in accordance with 29 CFR 1926, Subpart M.

3.12 Controlled Access Zones (CAZ)

- 3.12.1 Controlled access zones will be in accordance with 29 CFR 1926, Subpart M.

3.13 Safety Monitors

- 3.13.1 Safety monitors shall be in accordance with 29 CFR 1926, Subpart M.

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3.14 Fall Protection Plan (FPP)

NOTE 1: *It is presumed that the use of a conventional fall protection system is feasible and will not create a greater hazard. The burden of proving infeasibility or increased hazard lies with the subcontractor.*

NOTE 2: *A completed FPP must be included with other work control documents when authorizing elevated work without the use of conventional fall protection.*

NOTE 3: *This option is available only to employees engaged in leading edge work, precast concrete erection work, or residential construction work (See 1926.501(b)(2), (b)(12), and (b)(13)) who can demonstrate that it is infeasible, or it creates a greater hazard to use conventional fall protection equipment.*

3.14.1 Fall Protection Plans will be used in accordance with 29 CFR 1926, Subpart M.

3.14.2 When it can be demonstrated that the use of a conventional fall protection system is infeasible or it creates a greater hazard to employees, then work can be allowed under a FPP (see Appendix A).

3.14.3 The contractor point of contact (POC) shall be notified in the event of an employee falling or some related serious incident.

4. DEFINITIONS

See LST-27, “Glossary”

5. REFERENCES

5.1 Source Documents

29 CFR 1910.140; “Personal fall protection systems”

29 CFR 1910, Subpart D, “Walking and Working Surfaces”

29 CFR 1926, Subpart M, “Fall Protection”

ANSI A10.14-1991, “Requirements for Safety Belts, Harnesses, Lanyards, and Lifelines for Construction and Demolition Use”

ANSI Z359.1-1992, “Safety Requirements for Personal Fall Arrest Systems, subsystems and Components”

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5.2 Related Requirements

The following documents may also contain requirements that apply to this activity:

PRD-2003, “Ladders”

PRD-2004, “Scaffolding”

PRD-2005, “Walking and Working Surfaces”

PRD-2006, “Aerial Lifts and Elevating Platforms”

6. APPENDIXES

Appendix A, Fall Protection Plan

Appendix B, Fall Hazard Prevention Analysis

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Appendix A

Fall Protection Plan

Fall Protection Plan	FPP #:	Revision:
	Bldg./Area:	WO/Proc. #:
	Issue Date:	Review Due:
APPROVALS		
Prepared By:	Reviewed By:	Implemented By:
Qualified/Competent Person	Fac./Resp. Manager	Competent Person
Date: _____	Date: _____	Date: _____
Non-Conventional System Justification		
Describe the reason conventional fall protection cannot be used, or why its use would create a greater hazard than a guardrail or connection to a personal fall arrest system.		
_____ _____ _____		
Measures to Reduce or Eliminate Hazards		
Describe other measures that will be taken to reduce or eliminate the fall hazard. (Such as work platform positioning, body positioning, back up personnel, overhead protection, material or tool positioning, or establishing CAZs).		
_____ _____ _____		
Job Location/Description		
Identify the area and location where the work will be performed. (Example: WERF PER 632, Highbay, Top of Baghouses):		
_____ _____ _____		
Rescue Plan		
Describe the method for prompt rescue of personnel at risk.		
_____ _____ _____		

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Sign-On Log

Work Order/Proc. #: _____ Issue Date: _____
 Fall Protection Plan #: _____ Bldg./Area: _____

At-Risk Workers

I have received training on and understand the fall protection work plan for this job.

Date	S #	Company Name	Name (print)	Signature

Safety Monitors

Date	S #	Company Name	Name (print)	Signature

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Appendix B

Fall Hazard Prevention Analysis

Fall Hazard Prevention Analysis		FHPA #:	Revision:
_____		Bldg./Area:	WP/Proc. #:
Job Description		Issue Date:	Review Due:
Prepared By: _____		Reviewed By: _____	
_____		Approved By: _____	
Fall Protection Competent Person Date		Job Supervisor Date	
Fac./Resp. Manager Date			
Qualified Person Required (if applicable) <input type="checkbox"/> N/A <input type="checkbox"/> documented anchor point <input type="checkbox"/> horizontal lifeline <input type="checkbox"/> vertical lifeline <input type="checkbox"/> rope decent system		Qualified Fall Protection Person Date	
Personal fall prevention system		Job Preparation	
<input type="checkbox"/> Travel Restraint <input type="checkbox"/> PFAS <input type="checkbox"/> Positioning system <input type="checkbox"/> CAZ <input type="checkbox"/> Warning Line <input type="checkbox"/> Warning line w/monitor <input type="checkbox"/> Designated Area			
Anchor Point and Location		Additional Safety Equipment	
<input type="checkbox"/> at/above head <input type="checkbox"/> mid-body <input type="checkbox"/> at/below feet <input type="checkbox"/> N/A Describe location: _____		Equipment: _____	
Rescue Service or Equipment		PFAS Calculation	
<input type="checkbox"/> ladder <input type="checkbox"/> aerial/scissor lift <input type="checkbox"/> self-rescue/decent <input type="checkbox"/> trauma straps <input type="checkbox"/> crane <input type="checkbox"/> Fire Department <input type="checkbox"/> special access issues requiring emergency plan other describe: _____		Calculated from: <input type="checkbox"/> anchor point <input type="checkbox"/> working surface	
Fall Protection System Components		From SRL/PFL Chart: Clearance needed:	
System capacity: <input type="checkbox"/> 130 to 310 lbs. <input type="checkbox"/> 311 to 420 lbs. Anchor device: <input type="checkbox"/> Beam clamp (Qty _____) <input type="checkbox"/> Beam strap (Qty _____) <input type="checkbox"/> Post <input type="checkbox"/> wall/floor anchor <input type="checkbox"/> Other describe: _____ <input type="checkbox"/> Fixed lanyard (Qty _____) <input type="checkbox"/> Adj lanyard (_____ ft) (Qty _____) <input type="checkbox"/> 1 leg <input type="checkbox"/> 2 leg <input type="checkbox"/> SRL/PFL (_____ ft) Shock absorber <input type="checkbox"/> YES <input type="checkbox"/> NO Rated for: <input type="checkbox"/> electrical arc flash <input type="checkbox"/> use for hot work <input type="checkbox"/> Lanyard/SRL/PFL length: _____ ft. <input type="checkbox"/> Full body harness <input type="checkbox"/> Warning line; describe location <input type="checkbox"/> Warning line w/monitor; describe location and number of monitors: <input type="checkbox"/> Designated area; describe locations:		A. Free Fall B. Deceleration/arrest distance <input type="checkbox"/> 2' <input type="checkbox"/> 3.5' <input type="checkbox"/> 4' <input type="checkbox"/> 5.5' <input type="checkbox"/> 6' C. D-ring/person's height 6 ft D. Safety Factor 2 ft E. Additional Factors Total System Calculation Fall Clearance (≤ system calculation)	
		Notes:	

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Fall Hazard Prevention Analysis		FHPA #:	Revision:
Job Description		Bldg./Area:	WP/Proc. #:
		Issue Date:	Review Due:
<input type="checkbox"/> CAZ; describe zone: <input type="checkbox"/> Positioning Device (Qty)			
Job Step	Hazard	Hazard Control/PPE	

FHPA Sign-On Log

Date	Job Supervisor	Name of Worker

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Fall Hazard Prevention Analysis		FHPA #:	Revision:
Job Description		Bldg./Area:	WP/Proc. #:
		Issue Date:	Review Due: