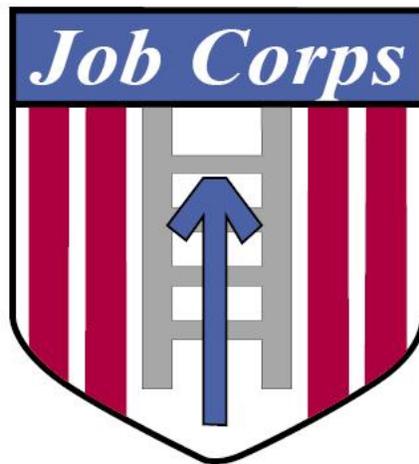


PROGRAM ASSESSMENT GUIDE



CHAPTER 5: MANAGEMENT

November 23, 2010

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PRS Ratings Definitions and Scoring Scale
<i>Exceptional (8/9)</i>
Programs, procedures, and systems are well organized, clearly communicated, and administered to ensure quality delivery of all requirements and achievement of quality indicators. Innovative approaches result in program enhancements and improved outcomes. Through rigorous self-assessments and quality assurance, the operator safeguards program assets and maintains the integrity of program data.
<i>Very Good (6/7)</i>
Programs, procedures, and systems are consistently in place to ensure delivery of requirements and achievement of quality indicators. Some innovative approaches are employed to promote continuous improvement. A viable quality assurance plan ensures integrity and accountability of program assets and data.
<i>Satisfactory (4/5)</i>
Requirements and quality indicators are generally evident in applicable program areas with minor exceptions. A quality assurance plan is in place that demonstrates adequate controls to ensure integrity and accountability of program assets and data.
<i>Marginal (2/3)</i>
Requirements and/or quality indicators are missing or minimally evident in applicable program areas. Quality assurance is minimal resulting in inconsistencies in accountability and integrity of program assets and data.
<i>Unsatisfactory (0/1)</i>
Critical requirements are missing or minimally evident. Quality indicators are not achieved. The program lacks procedures and controls necessary to ensure compliance, quality, and data integrity.

Note: A glossary of acronyms is located at the end of the PAG Preamble.

5.0 OBJECTIVES

To enable Job Corps centers, outreach/admissions, and career transition services providers to deliver quality services by establishing systems that ensure:

- Effective program organization and management
- Program integrity and accountability
- Staff professionalism and development
- Services are provided in a cost-effective and financially responsible manner

To ensure that Job Corps provides safe, clean, well-maintained facilities that are adequately furnished and equipped to meet student needs.

5.1 PROGRAM MANAGEMENT

PURPOSE

- P1. To establish and maintain systems which support the admission, career preparation, career development, and career transition of students.
- P2. To monitor and track operations and outcomes to ensure program accountability, integrity, performance, and quality.

REQUIREMENTS

R1. Goal Achievement

Centers operated by contractors and agencies, and OA/CTS contractors shall establish:

- a. Procedures to develop and clearly communicate goals to staff and students.
- b. Procedures to hold staff responsible for achieving communicated goals.

Strategy:

- Review Senior Staff Meeting Minutes for past six (6) months, review staff meetings for every department, determine methods of communications. Check for follow-up. Are there defined goals? How are staff held responsible for these goals?

1	2	3	4	5	6	7	8	9
Deficient			Acceptable			Commendable		
Rationale for Rating:								

R2. Quality Assurance

Centers operated by contractors and agencies, and outreach and admissions/career transition services (OA/CTS) contractors shall:

- a. Establish procedures and conduct periodic self evaluations and audits to ensure integrity, accountability, and prevention of fraud and program abuse. The Quality Assurance Plans and Procedures shall be submitted annually to the Regional Office for approval as outlined in Exhibit 5-2. Approval of the Quality Assurance Plan shall be based upon:
 - 1. The extent to which the oversight, monitoring, and assessment plan will provide a reasonable assurance of contractor/agency compliance and quality.

2. The extent to which the contractor's/agency's data validation system ensures the accuracy and integrity of student outcomes and financial data.
 3. The extent to which the contractor's/agency's quality assurance activities track and ensure that corrective action is taken to maintain outcomes and quality standards.
 4. The degree to which the contractor's/agency's documents the results of inspections, tests, audits and assessments.
- b. Establish systems to ensure performance is accurately tracked and reported and necessary corrective actions are taken to achieve the performance outcome goals and quality standards established by the National Director of Job Corps and contained in Appendices 501a through 501d.
 - c. Conduct annual comprehensive assessments of center or OA/CTS operations.

Job Corps Regional Offices shall:

- a. Schedule and conduct comprehensive program assessments of OA, Job Corps center, and CTS operations at least every 24 months.
- b. Conduct audits of approximately 10% (Contracted On-Board Strength [OBS] or Average CTS caseload) of all student records associated with performance measurements during center and CTS program assessments, using targeted samples generated by the National Office of Job Corps.
- c. Document the results of program assessments and audits and furnish a copy of the assessment report to the National Office and the Contractor or Agency. If excessive reporting problems are present, the extent of misreporting shall be brought to the **immediate** attention of the National Office.
- d. Assess liquidated damages from contractor's base/incentive fee for instances of misreporting of data based on the following schedule:

Description	Liquidated Damages
Invalid HSD/GED Credits	\$500 each
Invalid Vocational Completion Credits	\$750 each
Artificially Extending Enrollment and/or Invalid Leave Days	15% of the Student Year Cost (SYC) per day. The amount is calculated as (annual operating budget/planned SY's) X 15% X Number of Unexcused Days.
Invalid Placement Credit	\$750 each

Note: The interpretation and specific application of “liquidated damages” to Agency-operated Job Corps centers, is currently being addressed by the Departments of Labor, and Agriculture as part of a collaborative effort to update, revise and consolidate the two existing Interagency Agreements. When this process is concluded, the PRH will be updated accordingly.

- e. Require the operator to post the liquidated damages to the fee line applicable ETA 2110. The Region will request an Annual Advanced Procurement Plan/Financial Operating Plan (AAPP/FOP) change to document the assessment or damages and recover the funds through a contract modification. Misreporting of data by agency operated centers shall be reported to the National Office of Job Corps and the respective agency for corrective action.

Notify the National Office of Job Corps and the Job Corps Data Center (JCDC) to remove invalid (General Educational Development/High School Diploma [GED/HSD], CTT Completion, and Placement) credits from the Outcome Management System(s) (OMS).

Note: Invalid credits will be removed from each measure that is affected regardless of the report card (OAOMS, OMS, POMS, CTT Training Report Card [CTTRC]) or contractor responsible for the error (OA, center, or CTS). For example, where verification of a HSD has been invalidated, credit would be removed for the GED/HSD Attainment measure. In this instance, if the HSD was the sole determinant of his/her graduate status, the student would also be removed from the pool for any placement-related measure(s) in the OMS, POMS, and CTTRC report cards. Similarly, a credited placement that has been found to have been misreported by a CTS provider would lead to the removal of the student from the placement pool of both the CTS and the center OMS report cards. Both scenarios hold true whether the center operator and the CTS provider are separate, or one and the same.

- f. Contracting Officers must exercise discretion when assessing liquidated damages when such action may not be appropriate where an error or omission occurred or when the action was careless or a result of an innocent mistake. This is particularly true if the were improperly recorded, but the student outcome was likely achieved (e.g., a CTT completion, a GED credit, or a placement credit that was incorrectly reported, but there is verification that the student actually earned the credit).
- g. When a Contracting Officer becomes aware of apparent fraud, the matter should be thoroughly investigated. If the investigation leads the Contracting Officer to conclude there is a likelihood of fraud, it should be referred to the Regional Office of the OIG by filing an incident report. The Incident Report Form can be found at:

<http://www.internal.doleta.gov/forms/Documents/IncidentReport.dot>

In addition to filing the report, inform the OIG of the actions intended by the Contracting Officer to address the incident. Make it clear that they intend to take these actions, unless the OIG specifically instructs them not to do so. Proceed with contract enforcement, unless otherwise directed.

Strategy:

- Review corporate involvement and how they support the contract (e.g., corporate assessments, site visits, etc.). Read CDSS Plan to ensure all items are included.
- Determine if the operator has developed and implemented a quality assurance plan. Validate if the operator is following the plan. Ask staff to identify problem-solving techniques used. Review corrective action plans and monitoring practices to ensure resolution has occurred.
- Interview management staff to determine if the organization has a self-assessment plan. Determine if internal reviews have been conducted within the last year. Request documentation. Determine if the organization has a standardized procedure to support internal assessments (assessment or review guide). Does a standard operating procedure (SOP) exist? Does the policy/procedure include a process for following up on the self-assessment and any past DOL, corporate, or agency review deficiencies? Determine if corrective actions have been implemented and if monitoring of corrective actions is ongoing. Determine who is responsible for ensuring deficiencies are addressed in a timely manner.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Standard Operating Plans and Procedures

Center contractors, agencies, and OA/CTS contractors shall:

- a. Establish standard operating procedures (SOPs), as shown in Exhibit 5-1 (Standard Operating Procedures), and submit them to the Regional Office for approval within 90 days of contract award. Updates and revisions shall be submitted as changes occur.
- b. For agency operated centers, provide up-to-date SOPs, as shown in Exhibit 5-1, with annual plans and amendments to SOPs submitted to the Department of Labor (DOL) Regional Office for approval by June 1 for the upcoming program year.
- c. Career Development Services System Plan

Each Job Corps center and each OA/CTS contractor shall:

1. Develop a Career Development Services System (CDSS) plan. The plan shall include:

- (a) An overview of the contractor’s/agency’s role in each phase of CDSS, as appropriate for each contractor/agency.
 - (b) A description of how services will be delivered and coordinated with other partners for Outreach/Admissions, Career Preparation, Career Development and Career Transition Periods.
 - (c) The requirements shown in PRH Chapters 1-4, as applicable.
2. CDSS plans shall be submitted to the Regional Office for approval within 90 days of contract award. Agency centers shall submit the plan for approval when required by the DOL Regional Office. Approval shall be based on a determination that all required parts of the plan are in place and that the plan is consistent with the overall Regional CDSS plan.
 3. CDSS plans shall be kept current. Revisions shall be submitted to the Regional Office for approval prior to implementation.

Strategy:

- Check to see when SOPs were submitted and approved.
- Verify if the CDSS plan includes a description of the operator’s role in each phase of CDSS.
- Review requirements outlined in other sections of the PRH regarding plan content.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Reporting

Center operators, agencies, and OA/CTS contractors shall submit reports in accordance with Exhibit 5-2 (Plan and Report Submission Requirements).

Strategy:

- Using Exhibit 5-2 (Plan and Report Submission Requirements), request documentation of submission of a sample of required reports.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Records and Reports Maintenance

Center operators, agencies, and OA/CTS contractors shall maintain records and reports for three (3) years. Records of disclosures of protected health information shall be kept for six (6) years. Exceptions to this retention period shall be communicated by the National Office of Job Corps on a case-by-case basis.

Strategy:

- Check SOP for this procedure and review process with assigned person. Are records maintained for the required three (3) years?
- Determine how records are secured and student personal information is safeguarded in accordance with personally identifiable information (PII) requirements. Determine if the location of records is secure, safe, and access-controlled.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Required Job Corps elements are in place and functioning at a level that meets students' basic needs.

Strategy:

- Pre-onsite: Review applicable OMS and MIS reports to determine if goals are achieved.
- Review MPO-35, EIS Center OMS Outcomes Projections for OMS-10 Indicators, and the current Contractor Past Effectiveness Report (CPEP).
- Interview community leaders and employers. Do they perceive that the center wants and uses their feedback? Are they eager to give feedback? Do they see it as a burden? What evidence is available to support center incorporation of community and employer feedback into center practices and policies?
- Determine what systems are in place to ensure students fully participate in all phases of CDSS and center life activities that develop and allow practice of skills needed for sustained employment.
- Assess systems in place to ensure training meets the needs of students and the current requirements of the labor market.
- Assess center-wide participation in CDSS. Do CDSS principles and practices permeate center activities? Does center culture support CDSS? How are workplace terminology and employability concepts and standards incorporated into center practices, policies, and procedures? What systems are in place that incorporate workplace expectations into all center programs? Are the systems effective?
- Assess the center's organizational structure. Does it support effective delivery of CDSS functions? Compare the organization chart to the FMS Staff Vacancy Report for both the following year and current month to determine adequacy of staffing.
- Interview the center director and management team. Is there an industry council in place? What role does the council play in defining training program requirements for curriculum and/or course content and changes in career technical training programs?
- **Determine how center management supports WBL. What systems are in place to ensure consistent monitoring of WBL sites? When did management last visit a WBL site? What was the purpose of the visit?**
- Determine if center practices are in accordance with the CDSS plan.
- Determine how management and the general culture of the center support employability and transition to the workplace?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Staff can describe goals, performance expectations, and standards, and articulate how their individual performance contributes to the overall accomplishment of Job Corps goals.

Strategy:

- Interview staff across center. Can they articulate program goals, performance objectives, and standards? How do individual goals contribute to accomplishing program goals? Ask for an example of an individual goal and how that goal has been achieved. Does training contribute to the staff's ability to achieve individual goals? Does each manager have a copy of the center's CDSS plan?
- Interview center managers. How are departmental goals communicated to staff? Elicit examples. Review staff performance appraisals to determine if performance goals are included and measured.
- Interview the center director. How are center goals and objectives communicated to staff and students? How are they connected to staff training and staff evaluation?
- Interview staff or conduct a staff survey to determine the depth of their knowledge relating to program components. Do they know what CDSS is and how it relates to program outcomes? Do they understand the connection between what they do and how the performance statistics are affected? Have they received a copy of the most recent center self-assessment and the regional and/or corporate assessment for their respective program areas?
- Interview a sample of staff or conduct a staff survey to determine the depth of their knowledge relating to OMS and other performance measures. Do they know center standards and goals? Can key staff translate those goals into numbers of students and how they are related to CDSS principles? Do they understand the connection between what they do and how it supports career development? Do the individual staff members have defined goals?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q3. Communication, teamwork, and cooperation are at a level to accomplish routine tasks, assignments, and responsibilities.

Strategy:

- Interview the center director/project director. How is CDSS communicated to all staff? Does the organization have a CDSS plan? How was it developed? Who participated? What role do students play?
- Observe/attend meetings for various departments or work units to observe levels of and effectiveness of collaboration. Are the issues discussed focused on career development? How is the feedback used? Does the organization have a procedure to ensure that these types of meetings take place? Are staff ideas sought and acted upon? Ask for examples.
- Determine if counselors, teachers, instructors, and residential advisors have regular collaborative meetings with two or more departments represented. How often? Or are most meetings intra-departmental? What is a typical agenda of collaborative meetings? Give an example of a collaborative meeting that was called for a specific purpose, such as development of the PCDP format, etc. When was the last meeting that included more than one department that was not an all-center staff meeting?
- Determine if multiple departments are represented in strategy meetings for such things as curriculum integration, CDSS implementation, and other special issues or initiatives. Are both management and line staff present? Interview staff. What special teams or projects have they worked on in the last year? Who else participated? What was the outcome? How did they communicate results to the rest of the center? Did the center director support them in that process?
- Determine if the center or OA/CTS contractor has regularly scheduled meetings for all departments to ensure communication occurs. Are minutes kept for all management, departmental, and staff meetings? What type of published information is provided to all staff (e.g., staff minutes, safety information, human resources concerns)?

- Interview students. Where do they go if they have a concern about their career development? What usually happens? What do they do if they do not get an answer? Does their career technical training instructor know when they are not doing well in academic classes? Do academic and career technical training instructors support student career development plans? Does their counselor know when they have issues in progress toward independent living? If so, how do they know? Do students perceive staff as interactive and working together across departments?
- Interview managers across center. How do they obtain staff input and how does this input affect decisions? How is staff innovation and creativity encouraged? How do managers recognize and reward positive behavior and performance? How is staff morale gauged? How would managers rate staff morale? Why?
- Interview staff members across center. Are they given an opportunity to provide input into decisions? When? Is their opinion valued? How? Are creativity and innovation encouraged? How is their positive behavior and performance rewarded and recognized? How would they rate staff morale? Why?
- Find out how often staff and students interact with the center director. In what context are career development principles discussed (e.g., walking around center, only in formal staff meetings, once per week to review departmental progress)?
- Interview management and departmental staff across center. What formal systems are in place to support communication between departments to ensure career development principles are met? Are systems effective? Ask for examples of forms, written procedures, staff meeting schedules, minutes, and agendas.
- What is an example of a career development challenge that has been addressed recently through a formal process? Does the center director see the formal communication process differently than staff? How?
- Interview staff. How do they access the career development processes? Do all staff receive meeting minutes and meeting agendas? Do they attend all staff meetings and their own departmental meetings? Do they attend the meetings of other departments? Is CDSS the focus of these discussions?
- Interview staff to determine the extent to which center systems are coordinated and how departments interact to support career development. Do interviews suggest turf issues? Ask staff how their departments interact with other departments and when/what problems might exist? Do staff believe their ideas for innovation in career development and student services are welcome and do they feel empowered to implement innovative practices? Is informal communication active and encouraged by management?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q4. Through self-assessments, centers and OA/CTS contractors maintain quality operations by identifying and correcting areas not meeting minimum expectations/outcomes.

Strategy:

- Interview staff. Do supervisors/managers visit their classrooms? Do staff use it to improve their programs?
- Review employee performance appraisals as they relate to appropriate behavior and staff/student interaction.
- Interview management staff to determine what steps have been taken to improve results in their areas as it relates to the CDSS plan. Find out how performance monitoring is tracked. If a program is currently deficient, is there a corrective action plan?
- Review staff performance appraisals to see if CDSS activities are a measurable factor and if the appraisal is appropriately tailored to encourage each staff member to support CDSS. Do staff incentive plans or bonus systems reflect objectives related to CDSS?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.1 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3		Q3	
R4		Q4	
R5			
Average		Average	

5.2 PERSONNEL

PURPOSE

- P1. To recruit, hire, and retain qualified personnel to carry out all program components.
- P2. To ensure that staff work in an environment that is fair and nondiscriminatory.
- P3. To ensure the proper screening, training, and supervision of volunteers.

REQUIREMENTS

R1. Organization and Staffing

- a. Center operators and Outreach and Admissions/Career Transition Services (OA/CTS) contractors shall:
 - 1. Develop and submit a staffing plan (organizational chart) to the Regional Office for approval within 90 days of contract award.
 - 2. Submit current position descriptions for Regional Office approval within 90 days of contract award.
- b. Agency operators shall develop and submit a staffing plan (organizational chart) to the National and Regional Offices annually.

Strategy:

- Obtain copy of staffing plan and check date of approval. Look for approved organizational chart and salary chart.
- Compare the staffing plan with the Financial Management System (FMS) Staff Vacancy Report to determine adequacy of staffing.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Staffing Ratios

Center operators shall comply with the following staffing requirements:

- a. The student-to-teacher ratio for instructional and training activities shall be 15:1, except for career technical training (CTT) programs specifically authorized for

lower ratios as specified in Chapter 3, Exhibit 3-3. Student-to-teacher ratios may not be altered except with the written approval of the National Office. For purposes of defining training slots, one full-time student is equivalent to 2 training slots. Therefore, the 15:1 student-to-teacher ratio translates to a 30:1 slot-to-teacher ratio.

- b. Student-to-staff ratios for nationally contracted training programs shall be in accordance with contract provisions.
- c. Minimum staffing levels for health programs are specified in Chapter 6, Exhibit 6-5 (Center Health Services Staffing Requirements).
- d. All other staffing levels shall be based on center configuration and approved by the Regional Office.

Strategy:

- Compare staffing ratios to OBS. Do they meet requirements?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Personnel Policies

Center operators and OA/CTS contractors shall:

- a. Develop and implement personnel management policies to include staff hiring, supervision, evaluation, conduct, and disciplinary procedures.
- b. Define standards for acceptable and unacceptable behavior between students and staff that protect individuals from exploitative, coercive, and traumatic experiences. Ensure that center rules for acceptable and unacceptable behavior are equally understood and applied to all staff. These rules, which should be included in the employee handbook, should provide a clear explanation and rationale for appropriate and inappropriate behavior, and identify the consequences for unacceptable staff behavior. Staff should know the legal consequences of unacceptable behavior, if applicable.
- c. Establish labor management relations in accordance with agency guidelines for federally operated centers, and in accordance with the provisions of the National Labor Relations Act for contractors. The U.S. Department of Labor shall not undertake conciliation, mediation, or arbitration of organizations, nor may Job

Corps pay legal or other fees generated by such disputes as direct costs against contracts.

- d. Develop and implement volunteer management policies to include volunteer screening, training, and supervision. At a minimum, plans should include: background checks for all volunteers in accordance with state laws, and plans to ensure volunteers are covered by the contractor’s liability insurance while they are performing their assigned tasks.

Strategy:

- Ask for copy of Employee Handbook.
- Ask for copy of volunteer management policies. How are volunteer background checks documented? Are volunteers covered by the contractor’s liability insurance?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Staff Qualifications

- a. Center and OA/CTS contractors shall ensure that all staff hired meet the minimum qualification levels specified in Exhibit 5-3 (Minimum Staff Qualifications).
- b. Center and OA/CTS contractors shall request written approval or waivers from the Regional Director for the following:
 - 1. Hiring of staff who do not meet minimum qualifications as specified in the approved position descriptions, in which a case a professional development plan must be submitted and updated annually
 - 2. Hiring of relatives of current staff members
 - 3. Appointment, continued assignment, or change in employment status of the center director, project director, or senior staff (i.e., all supervisory personnel who report directly to the center director)
 - 4. Where there is a need to pay individuals at rates higher than indicated in the approved salary matrix
- c. Regional Offices shall not grant a waiver if it would negatively impact the center’s eligibility for accreditation or its ability to produce high school graduates.

- d. Agency operators shall advise the Regional Office of changes in employment status of center directors and senior staff.

Strategy:

- Check position descriptions and review staff qualifications; check for waivers and professional development plans; check for nepotism waivers.
- Review the process for waivers of required staff qualifications. Do staff who lack qualifications have a documented plan for achieving them? For instance, are instructors without credentials enrolled in classes to earn them? Are teachers without appropriate certification enrolled in programs to obtain it? Review personnel files of those who were hired with Regional Office waiver of position qualifications. These may include provisional requirements for enrollment in appropriate education or training programs within a certain time period. Ensure those employees are following the required plan.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Staff Coverage

Center operators shall provide for coverage of staff absences for those positions with direct staff/student interaction. Use of students or volunteers for this purpose is prohibited. All substitutes shall be trained in safety procedures.

Strategy:

- Get list of vacancies. Are substitutes trained in safety procedures?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R6. Staff Performance Appraisal

Center operators and OA/CTS contractors shall develop a staff performance appraisal system that allows for documentation of staff competence, to include:

- a. Maintaining staff requirements specified in Exhibit 5-3.
- b. The areas listed in Exhibit 5-4.
- c. Staff’s modeling, mentoring, and monitoring each of the eight (8) Career Success Standards.
- d. Support of students’ career development goals, the zero tolerance policy, and student placement efforts.

Strategy:

- Review employee job descriptions, including required qualifications. Are they appropriate and do they include PRH requirements for specific positions? Are staff regularly evaluated based on performance in the functional areas of their jobs?
- Review performance appraisals. Do they model employability standards, are they consistently administered? Check for gaps in monitoring periods.
- Observe staff in their work environments. Do staff members have a positive attitude and appear to enjoy their jobs? Do you see staff acting as models, mentors, and monitors to fellow staff?
- Observe staff and student interactions. Do you see positive staff and student interactions? Do you see staff acting as models, mentors, and monitors to students?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R7. Equal Opportunity/Civil Rights

Center operators and OA/CTS contractors shall:

- a. Provide equal opportunity for all employees without regard to race, religion, color, national origin, gender, citizenship, disability, political affiliation, or belief. Sexual harassment is prohibited in Job Corps. Discrimination is prohibited in all contracts, grants, and programs funded by the Department of Labor.
- b. Provide prompt, fair, and impartial consideration of discrimination or other civil rights complaints through an established and approved grievance system.
- c. Submit an affirmative action plan to the Regional Office for approval within 90 days of contract award in accordance with Appendix 602 (Civil Rights and Nondiscrimination).
- d. Submit a plan to employ and advance the employment of veterans to the Regional Office for approval within 90 days of contract award in accordance with Public Law 107-228 HR 4015, Section 2. 4215, (priority of service for veterans in Department of Labor job training programs), Part b (Employment of Veterans with Respect to Federal Contracts).

Strategy:

- Review the center EEO plan. Review EEO complaints against staff. Are there many complaints? How has the center responded? Are the same staff involved and how are disciplinary actions handled? Are procedures for filing complaints or grievances clearly posted? Do staff know how to appropriately exercise their civil rights (e.g., are classes on equal opportunity, diversity, and sexual harassment prevention provided as part of staff training)?
- Review the affirmative action plan. Was the plan approved? Did the plan include areas of underrepresentation? Are action plans developed? What is the progress of the action plans?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Staff display appropriate behavior and demonstrate appropriate interpersonal skills and are able to work effectively with applicants, students, employers, co-workers, and the public.

Strategy:

- Review employee performance appraisals as they relate to appropriate behavior and staff/student interaction.
- Observe staff/staff and staff/student interaction and behavior. Visit the classrooms, dorms, cafeteria, and recreational areas to assess interaction with students. Is the interaction professional, appropriate, and respectful? Is employable behavior modeled by staff and expected of students?
- Interview staff. Can staff articulate how their actions affect students’ understanding of workplace expectations (e.g., public displays of affection)? Are expectations for staff consistent with expectations for students?
- Review the staff training plan. Has it been submitted to the Regional Office as required? Was it approved? If not, how has the center adjusted it? Review staff training records. Do they indicate staff are receiving the required training within the timeframes established in the PRH? Is required staff training tracked to ensure all staff meet minimum training requirements established by the PRH? Are new staff provided the required training within the first 180 days? Review the training schedule. Is it flexible enough that all staff can access required training when needed?
- Review staff dress and behavior policies, including sanctions for noncompliance. Review any staff discipline records and determine if policies are followed. Assess the last review concerns and determine if those related to staff dress and behavior were addressed formally.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Students perceive that staff are caring and responsive to their needs.

Strategy:

- Interview students in a focus group. Do students feel that staff treat them appropriately? If not, why? Ask them to give examples of staff behavior that feels supportive and staff behavior that does not.
- Visit the classrooms, dorms, cafeteria, and recreational areas to assess staff interaction with students. Is the interaction professional, appropriate, and respectful?
- Interview managers across center. How is diversity encouraged? (Look for diversity in staff and posters and pictures that reflect the Job Corps population in terms of ethnicity, gender, age, etc.)

Q3. Volunteers are screened, trained, and supervised according to state laws and are appropriately utilized.

Strategy:

- Interview human resources manager. Are there any state laws regarding screening, training, or supervision of volunteers? How are volunteers utilized on center?
- Interview volunteer in a focus group. What types of training do volunteers receive? How are they communicated with on training availability? Who supervises their work on center?
- Review personnel records. How are volunteers recruited? How are volunteers screened?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.2 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3		Q3	
R4			
R5			
R6			
R7			
Average		Average	

5.3 STAFF TRAINING

PURPOSE

- P1. To ensure staff acquire and maintain the skills necessary to perform their job duties and responsibilities and serve as role models for students.
- P2. To allow staff the opportunity for professional growth and upward mobility.

REQUIREMENTS

R1. Staff Training Plan

Centers and OA/CTS contractors shall:

- a. Submit an annual staff-training plan for approval by the Regional Office.
 - 1. Include, at a minimum, the topics and frequencies specified in Exhibit 5-4 (Required Staff Training).
- b. Submit a professional development plan for all staff on waivers.

Strategy:

- Review training plan and check to see if staff are trained according to plan. Are there professional development plans for staff on waivers?
- Review the New Staff Orientation plan/process to determine the adequacy of preparation for staff to assume new job responsibilities.
- Review staff training processes. Do staff training opportunities include CDSS, curriculum development, and curriculum integration, and address different learning styles? Are staff training plans individualized? Are some training activities interdepartmental? For instance, do CTT instructors sometimes participate in curriculum development training in collaboration with academic instructors? How is that process facilitated? Who is responsible for reviewing staff training plans to ensure continuous improvement in instructional delivery? How often are they reviewed? Do they reflect a commitment on the part of center management to implement CDSS?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Staff Training Content

Centers shall include, at a minimum, the following:

- a. Five (5) hours of annual training in adolescent growth and development for all staff. Topics could include: effective communications, anger management, sexuality, suicide prevention, behavior management system, Zero Tolerance Policy, appropriate staff/student boundaries, sexual assault prevention and response, sexual harassment and related social skills training, intervention techniques, and safety issues.
- b. An additional five (5) hours of annual training designed to enhance each employee’s professional development. Such training may include professional seminars, conferences, and classroom training provided on or off center, in-service training, and technology skills training.

Strategy:

- How is training provided and documented in adolescent growth and development and professional development?
- Who provides training and what happens in case of missed training sessions?
- How is training scheduled and provided to cover all shifts (prime, overnight, weekends, etc.)?
- Review the staff training budget to determine if training resources are equitably provided for each department and staff member.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Documentation

Centers and OA/CTS contractors shall maintain up-to-date records of training completed by each employee.

Strategy:

- How is training monitored? How do they ensure training is conducted for any staff that missed scheduled training?
- Review staff training records to determine if staff members receive appropriate training in safety practices. Is the training current?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Staff demonstrate the knowledge and skills necessary to perform their job functions (duties).

Strategy:

- Review teacher/instructor training. Are they participating in any community or local school or college training offerings? Does the center have any training agreements with those entities? Are career technical training instructors involved in state career technical training offerings?
- Interview staff and ask them to describe the last training they attended. Was it effective? Did it assist them in serving students? How long does the average training last? Is it long enough? What kind of training do they feel is most important, and what kind would they like to add to the training plan? What would make training more effective?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Staff interact appropriately with students and serve as positive role models for students and other staff.

Strategy:

- Review standards of conduct for staff to determine if corporate structure advocates disciplinary action for inappropriate behavior or unacceptable interpersonal conduct. Review recent staff disciplinary actions. Was follow-up necessary? Was it done?
- Interview staff. What do they do to support/encourage employability concepts among students? Program completion?
- Observe staff. Do their dress, language, and work habits role model employability skills?
- Interview managers across the center. What employability skills are staff expected to model? How are staff informed of these skills? Does staff training regarding employability and/or workplace professionalism occur? How do managers enforce expectations for modeling employability skills?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.3 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
Average		Average	

5.4 PERSONAL SAFETY AND SECURITY

PURPOSE

- P1. To protect the personal safety and security of students, staff, and property on center at all times.
- P2. To protect students’ rights and guarantee privacy and protection from unreasonable search and seizure.

REQUIREMENTS

R1. Campus

Center operators shall establish rules regulating the entry, exit, and conduct of persons who seek access to the campus.

Strategy:

- Check for sign in/out procedures; review log to ensure closed system.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Cooperation With Local Agencies

Center operators shall develop and maintain written cooperative agreements with federal, state, and local law enforcement agencies regarding management and jurisdiction for illegal activities.

Strategy:

- Check for MOU with local law enforcement agencies. How are incidents investigated? Is there a log? Is there an SOP? Check Student Satisfaction Survey for trends in incidents.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Prohibition of Firearms

Center operators shall prohibit the presence of firearms except in the following circumstances:

- a. For security of student payroll by non-center staff.
- b. For law enforcement personnel conducting routine law enforcement duties. If employed by the center, law enforcement personnel shall not carry firearms in the course of that employment.
- c. Personal firearms kept in on-center staff housing for personal use.

Strategy:

- Are there firearms on center? How are they stored?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Unauthorized Goods

Center operators shall ensure that the following unauthorized goods are not permitted on center:

- a. Firearms and ammunition
- b. Explosives and incendiaries

- c. Knives-with blades longer than two (2) inches
- d. Homemade weapons
- e. All other weapons and instruments for which the primary use is to inflict personal injury
- f. Drugs and drug paraphernalia
- g. Stolen property
- h. Alcohol
- i. Tobacco for minors
- j. Any other items which are illegal under state law

Strategy:

- Review unauthorized goods log. How are items stored? Are all items below included in unauthorized goods log?
- Review the center’s Significant Incident Report (SIR) and Unauthorized Property Listing to determine what items may have been given to local law enforcement.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Student Notification

Center operators shall notify all students of the center’s policies and procedures regarding unauthorized goods, searches, and seizures.

Strategy:

- How are students notified of this policy and procedures? Are presentations made during CPP?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R6. Search and Seizure

Center operators shall conduct searches and seizures only in the following circumstances:

- a. General inspections of dorm rooms, lockers, and other center facilities may be conducted periodically.
- b. Searches for unauthorized goods may be conducted only when the center director believes such goods are being hidden on center. The reasons for the search must be documented.
- c. The scope of search may be no wider than what is necessary to accomplish the specific purpose of the search. Unauthorized goods found as a result of a search must be confiscated.
- d. A search of the person of an entire group of Job Corps enrollees is prohibited when the information in the possession of Job Corps officials indicates that only some members, or less than all members, of the group are in possession of contraband that is prohibited on center property.
- e. Job Corps shall not conduct strip searches of students. If the center director believes a strip search of a student is necessary, local law enforcement authorities must be contacted and requested to perform the search.
- f. Searches for evidence of crime may be conducted for evidence in criminal prosecution. These must always be done by a law enforcement officer with a search warrant, except when delay would endanger the physical well being of students.

Strategy:

- Check to see how many searches and seizures have occurred and how they have been documented.
- Review the center’s SIR log and Unauthorized Property Listing to determine if unauthorized items have been found.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R7. Disposal of Unauthorized Goods

Center operators shall dispose of unauthorized goods as follows:

- a. Stolen property must be returned to its rightful owner.
- b. Narcotics must be stored and disposed of according to agreements negotiated by the center and the appropriate local law enforcement agency.
- c. Confiscated weapons (including firearms) must be reported and disposed of according to agreements negotiated by the center and the appropriate local law enforcement agency. The center must maintain a list of weapons reported to the local law enforcement agency, giving the student’s name and Social Security Number and the serial number, type, make, and model of the weapon.

Strategy:

- Check unauthorized goods log to see how items were stored and disposed of.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R8. Use of Physical Restraint and Isolation

Center operators shall:

- a. Limit use of physical restraint to only those situations that seriously threaten persons or property. Ensure that no student is restrained for more than one (1) hour without at least verbal consultation and approval from a physician. Staff may not use handcuffs, mace, or pepper spray (or any derivatives) on students.
- b. Use on-center isolation facilities for temporary segregation of students from their peers only when behavior constitutes an immediate threat to themselves, other persons, or property.

A student placed in an isolation facility must be observed every 15 minutes and this observation must be documented on a signed log giving the exact time of observation and the signature of the staff member conducting the observation. Isolation may not exceed 12 hours unless accompanied by a statement from the center physician that the isolation is not medically prohibited.

Strategy:

- Does the center have an SOP for use of isolation? What circumstances warrant isolation? Is there an isolation room? Check log for when students enter and exit. If student is in isolation longer than 12 hours, check for approval by RO and/or medical personnel. Make up a chart detailing the number of incidents over the past three (3) months to see if there is a trend.
- Determine how the center isolates students if no isolation room is available.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Documentation of searches, seizures, and isolations reflect complete, thorough, timely, and appropriate actions.

Strategy:

- Review documentation of searches, seizures, and isolations. Does it reflect complete, thorough, timely, and appropriate actions? Are searches limited to only the scope needed based on the incident?

- Interview students concerning the methods the center staff use to search students. How do students view the necessity and manner of search and seizure incidents?
- Review documentation of center searches. Is there evidence of group searches? Review search requests and SIRs to ensure this is not the case.
- Review records of confiscated articles. Are they being disposed of properly as required in PRH Section 5.4, R7? Are there records that document disposal?
- Review the center’s agreement with local law enforcement agencies. Does it include agreements for disposal of narcotics and confiscated weapons? Do records indicate those agreements are followed? Is there also an agreement that provides for local police to do strip searches of students when events indicate a need?
- Find out if law enforcement agencies are aware of the juvenile status of some Job Corps students. If so, do they respond appropriately, as they do with local juveniles, with juvenile system detectives, prosecutors, and community service officers when appropriate?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Cooperative working relationships exist between the center and law enforcement agencies.

Strategy:

- Contact the local law enforcement agencies and ask how their relationship is with the center. Are there written memoranda or agreements? Are local law enforcement agencies represented on the community relations council? Who are the identified key contacts? Under what circumstances will local law enforcement agencies come to the center? Is their response timely? A review of SIR information could give a good indication of the type of assistance given and by whom concerning incidents that occurred on center. Has law enforcement been involved in cases where it appears appropriate that they be notified?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q3. Students and staff display respect for and appropriately safeguard the property of individuals, the center, and the community.

Strategy:

- Talk to students and staff concerning thefts. Is it a problem? Are reported thefts resolved? Are students provided a safe place for storing their valuables (e.g., locked areas in the dorms, lockers with working locks)?
- Review tort files, property, and inventory records. Ensure that human resources policies and the behavior management system address damage to property.
- Observe students and staff. Do they demonstrate appropriate respect for personal and center property?
- Review the student handbook. How is theft addressed? Is there an SOP that provides a procedure for addressing theft?
- Observe dorms. Is there damage in student rooms? Lounge areas?
- Ask a student what happens if they are responsible for destruction of government property?
- Review the center’s maintenance log to determine if requests for repair or removal are due to vandalism or unexplained damages.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q4. Students feel safe and secure on center.

Strategy:

- Review minutes from monthly safety committee meetings. Check for corrective action plans, repeat concerns, and follow-up. How do safety issues model workplace expectations? Do staff and students identify safety concerns and relate them to future workplace opportunities?
- Interview students about staff responsiveness to individual student problems and general student issues. Do students feel their concerns are taken seriously and resolved satisfactorily? Do they have any safety concerns?
- Observe student/student and staff/student interaction. Is there respect? Harassment? Confrontation? Racial or gender-based language? Respect?
- Review the student handbook. Does it address EEO issues? Is it clear regarding where to go, who to go to, and what the process is for EEO complaints? Have there been any complaints in the past 2 (two) years? Review records and determine if they were addressed appropriately.
- Interview students. Do they have access to the center director if they have safety issues? Do they feel safe on center? If they have had safety issues, have they reported them? Do student leaders act as a resource for safety concerns? Are students learning safety in driver education, career technical training, recreation, and during other activities?
- Review the SIR Log to determine if any safety concerns are identified.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.4 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3		Q3	
R4		Q4	
R5			
R6			
R7			
R8			
Average		Average	

5.5 MANAGEMENT AND REPORTING OF SIGNIFICANT INCIDENTS

PURPOSE

- P1. To ensure proper and effective management of serious incidents involving program participants, staff, or facilities.

REQUIREMENTS

R1. Reportable Events

Centers and OA/CTS contractors shall report the following types of significant incidents to the National and Regional Offices:

- a. Death, serious illness, or serious medical injury** (e.g., epidemic, hospitalization, emergency room treatment or surgery, reaction to medication/ immunization)
- b. Physical assault
- c. Inappropriate sexual behavior
- d. Indication that a student is a danger to himself/herself or others
- e. Incident requiring police involvement
- f. Incident involving illegal activity
- g. Arrest of current student or on-duty staff member
- h. Motor vehicle accident involving injuries or damage to a center vehicle
- i. Theft or damage to center, staff, or student property
- j. Incident threatening to close down the center or disrupting the center’s operation
- k. Incident attracting potentially negative media attention

**Please see Appendix 505, Section IX, C2 and C3, for a detailed classification of serious medical injuries.

Strategy:

- Review log; check number and types of SIRs that occurred on center.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Reporting Timeframes and Format

Centers and OA/CTS contractors shall:

- a. Report significant incidents within 24 hours of the center being made aware of the incident (six (6) hours in the case of student or a reportable staff death). In cases of student death, notify the Office of Worker’s Compensation Program (OWCP) immediately and the Office of the Assistant Secretary for Administration and Management (OASAM) within six (6) hours.
- b. In cases of a critical incident (student death, substantial property damage, elected official inquiries), notify the Regional and National Offices immediately by phone.
- c. Submit all Significant Incident Reports (SIRs) through the Web-based SIR system. Contact the National Office or health support contractor if there is confusion or doubt as to whether an SIR should be submitted. Centers must submit SIRs if there is any evidence that a crime or serious injury has occurred, even if a resolution has not yet been determined for the students/staff involved.
- d. Continue to submit monthly supplemental reports until all information has been gathered to close out the report and a final report has been submitted. Until a report is submitted as final, a supplemental report is required every 30 days following the submission of the initial report.
- e. In the event that a student suffers an injury while on duty or on an authorized day pass, record the incident in SHIMS within (seven) 7 calendar days (including weekends) of supervisor notification.

Strategy:

- Review log to see if they were reported within specified timeframes.
- Is correct format used?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. *Username and Passwords*

- a. Each staff member who is responsible for submitting SIRs through the Web-based system is required to have a unique username and password. Upon initial entry into the system, users will be required to change their password to an eight (8) digit alphanumeric password of their choosing, which they will then use for the remainder of the program year. New passwords will be required at the beginning of each program year.

Two types of users are assigned:

- 1. **Advanced Users:** These are users who may enter, approve, and submit an SIR. Each center must have at least two Advanced Users. An Advanced User can enter and submit an SIR to Job Corps National/Regional Offices without approval from the center director or another staff member.
 - 2. **Basic Users:** These are users who may enter information but may not approve/submit an SIR to Job Corps National/Regional Offices.
- b. Regional and corporate staff may be added to the SIR e-mail distribution list by contacting the health support contractor directly.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. *Display of Student Identifying Information*

- a. The SIR system does not accept Social Security numbers as student identifiers. Instead, when entering student data into the SIR system, centers must use the six (6) digit student ID numbers assigned by Job Corps upon entry to the program. Although centers will enter student ID numbers, as well as relating student information in the SIR data-entry fields, the following student identifying information will not be displayed in submitted reports that are e-mailed back to the Advanced User and others who are on the authorized SIR e-mail distribution list:
 - 1. Student first name
 - 2. Student ID number
 - 3. Date of entry
 - 4. Date of birth

- b. To ensure student privacy, centers must not use student first and last names in the “Description of Incident” field in the SIR. Instead, centers should use the terms “Victim 1,” “Victim 2,” “Perpetrator 1,” “Perpetrator 2,” etc., when describing the incident.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Management

Center and OA/CTS contractor management shall:

- a. Investigate each significant incident
- b. Initiate appropriate action to resolve the incident
- c. Identify and implement appropriate procedures to prevent recurrence, to the maximum extent possible

Strategy:

- Is there a procedure for who is in charge? How are issues communicated among appropriate staff?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Center management resolves incidents in a manner that reduces negative impact on students, the community, and the program.

Strategy:

- Review SIRs for completeness and to ensure that appropriate corrective actions have been taken to reduce any negative effect. Did the center respond and report incidents within appropriate timeframes? Does the center have a plan to respond to major crisis situations? Are all senior staff well trained to respond to SIR situations?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Corrective action is taken to reduce or prevent recurrence.

Strategy:

- Review SIRs for appropriate corrective action. If possible, talk to staff and students involved in the incident to determine if the corrective action was appropriate and reduced the negative effect of the incident. How are SIR situations tied into student feelings of being safe at the center and other standards of conduct? Review any negative media articles concerning incidents. Follow up on corrective actions indicated in several of the reports to ensure that the action was taken and reduced any negative effect.
- Interview local community leaders and center neighbors. Review SIRs for complaints from community. Is there evidence that complaints were resolved and corrective action implemented?
- Review the SIR reporting system including the list of required submissions, student disciplinary separations, and medical separation files. Are they appropriate?
- Determine if all negative incidents were reported as required by PRH Section 5.5.
- Review any negative newspaper articles about the center. How does the center address these concerns?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.5 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
R5			
Average		Average	

5.6 PROCUREMENT AND PROPERTY MANAGEMENT

PURPOSE

- P1. To procure property, services, and supplies in a cost-efficient manner in accordance with government policies.
- P2. To provide procedures for receipt and accountability of government-owned property, materials, and supplies.

REQUIREMENTS

R1. Procurement (SEE PROCUREMENT REVIEW GUIDE IN APPENDIX C)

Center operators and OA/CTS contractors shall follow all applicable procurement regulations, to include those contained in the Federal Acquisition Regulation (FAR), Department of Labor Acquisition Standards, OMB Circulars, and Executive Orders.

Strategy:

- Request procurement SOP. Review sample of purchase orders to ensure compliance with bidding requirements.
- Review the center’s system to obtain supplies, materials, equipment, and services. Do procedures ensure timely and cost-effective processing? Is it in compliance with the FAR? Do all departments feel they have the items needed to support the necessary training requirements of CDSS? For example, do health occupation students have needed uniforms to participate in clinical assignments? Do facilities maintenance students have proper tools to perform repair tasks?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Internal Controls

Center operators and OA/CTS contractors shall:

- a. Develop written procedures to procure materials and services on a timely basis and submit these procedures to the contracting officer as part of the standard operating procedures. Agency centers shall use established agency procedures for

procurement of materials and services. (See Exhibit 5-1 Standard Operating Procedures.)

- b. Fully communicate procurement rules and procedures to all staff members involved in the purchase, receipt, custody, oversight, documentation, or inventory of materials and services.
- c. Establish systems for the periodic self-evaluation of procurement activities to ensure integrity, accountability, and prevention of fraud, waste, and abuse.

Strategy:

- Ensure the center maintains separation of duties with regard to ordering, receiving, and payment.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Reporting

Center operators and OA/CTS contractors shall submit subcontracting reports in accordance with the reporting requirements and schedule described in Exhibit 5-2 (Plan and Report Submission Requirements).

Strategy:

- Request a copy of all subcontracts. Pull invoices to check to see if billing concurs with contracted services.
- Is center meeting goals for small disadvantaged business concerns? Check SF 294 Report. Ensure backup is available to support SF 294 entries.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Receipt and Control of Property

- a. Ensure that all supplies and equipment are received and signed into custody by persons other than those who authorize purchases.
- b. Receive material safety data sheets for all potentially hazardous material and distribute them to appropriate departments.
- c. Develop and maintain an inventory system to account for all expendable property in accordance with procedures in ETA 359, ETA Property Management Handbook.
- d. Maintain an inventory system to account for all non-expendable property through the use of the Electronic Property Management System (EPMS).
- e. Conduct a thorough inventory of non-expendable property annually and report the results to the contracting officer.
- f. Conduct a thorough inventory of all expendable property quarterly.

Strategy:

- Check the Property Requirement List (PRL) vs. property inventory. Are inventories conducted? Check results of these inventories. Ask for off-center repair log. Who authorizes repairs?
- Review the last non-expendable property inventory. Is it submitted to the Regional Office on an annual basis? Is it approved?
- Determine who signs supplies and equipment into custody. Ensure that the person who authorizes the purchases does not sign them in. Review records to confirm.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Motor Vehicles

Center operators and OA/CTS contractors shall follow the requirements of ETA Handbook 359 and 48 CFR Chapter 1 Subpart 51.2 regarding acquisition and use of motor vehicles.

Strategy:

- Request list of vehicles. Review accident reports and maintenance log. What is cost of vehicles vs. usage? Create log to determine usage and cost of vehicles.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Supplies, materials, equipment, and services required to support program operation are obtained in a timely and cost-effective manner that is in compliance with FAR requirements.

Strategy:

- Determine if products and services are procured to meet student needs. How are procurement decisions made to keep the career development needs of the students in mind?

- Walk through the center warehouse area. Is it well organized? Are receipts and invoices filed and signed off appropriately?
- Review material safety data sheets. Are they distributed to appropriate departments? Are they posted where all staff can see them?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Expendable and non-expendable property is accounted for accurately.

Strategy:

- Determine if responsible staff across center can explain the system they use to account for expendable and non-expendable property. Interview NTC instructors. Are NTC purchased items inventoried separately from center-purchased items? Are they tagged appropriately?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.6 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
R5			
Average		Average	

5.7 FINANCIAL MANAGEMENT

PURPOSE

- P1. To establish and maintain a financial management system that provides accurate, complete, and current disclosures by each contractor and agency receiving Job Corps funds.
- P2. To maintain sufficient cost data for effective planning, monitoring, and evaluation of program activities.
- P3. To ensure that expenditures of funds are necessary, reasonable, and auditable.

REQUIREMENTS

R1. Budgeting

Center operators and OA/CTS contractors shall assure that budgets are developed, prepared, revised, and submitted in accordance with the requirements contained in Appendices 502 (Financial Reporting) and 503 (Job Corps Outreach/Admissions and Career Transition Services Cost Reporting and Budgeting Requirements).

Strategy:

- Check most recent budget to ensure it ties to the estimated cost of the most recent contract modification. Does management staff develop their own budget?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Financial Reporting (SEE AUDIT GUIDE)

Center operators and OA/CTS contractors shall assure that required monthly reports are prepared and submitted in accordance with the requirements contained in Appendices 502 and 503.

Strategy:

- Review timeframes for submission of ETA 2110/2110S. Reports are due by 20th of the month.

- Pre-onsite: Review the exceptions page of the ETA 2110. Review the explanations and corrective actions. Has the operator conducted internal audits to ensure adequate financial controls and integrity? Was a follow-up plan developed to ensure that any fiscal problems identified continue to be addressed/corrected?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Vouchering (SEE AUDIT GUIDE)

Center operators and OA/CTS contractors shall submit vouchers for the reimbursement of expenses in accordance with the procedures outlined in Appendices 502 and 503.

Strategy:

- Check to see if vouchers are prepared and submitted on the 1st and 16th of the month. Ensure back-up documentation is attached. OA/CTS operators voucher at month end.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Internal Controls

Center operators and OA/CTS contractors shall:

- a. Establish internal controls to provide reasonable assurance that:

1. Management is made aware at an early stage of any situation in which available funding for contracted services is not adequate to secure the delivery of such services.
 2. The integrity of the funds provided by the government has not been comprised.
 3. Assets are properly safeguarded.
- b. Submit written descriptions of control procedures to the contracting officer as part of the standard operating procedures in accordance with the schedule shown in Exhibit 5-1 (Standard Operating Procedures). Control procedures shall include:
1. Separation of duties
 2. Approval requirements
 3. Documentation requirements
- c. Establish procedures to regularly communicate budgetary goals and rates of expenditure to management staff who have responsibility for authorizing expenditures.

Strategy:

- Ask to review policies and procedures. Review departmental budgets and budget reports. Check petty cash procedures and review petty cash records to ensure government is not paying sales tax or losses on student payroll (if these are reimbursable through petty cash).
- Review minutes of financial or budget meetings for senior staff to identify management and planning practices.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Student Benefit Fund

Conduct an annual audit of the student benefit fund at each center to assure that the requirements listed in Section 3.21, R3 (Student Benefit Fund) are met.

Strategy:

- Review the Student Benefit Fund (SBF) to ensure monthly reports are prepared and annual audits are conducted and documented. Determine where income is coming from. Pull last three financial reports. Look at by-laws; do they have approved SBF plan? Check fine revenue for trends. Do disbursement records include check requests, receipts, SGA minutes, and accountability lists? Are monthly bank reconciliations occurring?
- Ask to review the latest student benefit fund. Is there evidence of an annual audit? Ensure that any corrective actions from the last audit are responded to.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R6. Sale of Center-Produced Goods and Services

The sale of goods produced or services rendered by students or at Job Corps centers is prohibited except as follows:

- a. Objects or services may be sold at cost to students or center employees. For Civilian Conservation Centers (CCCs), sales to staff must be in accordance with approved Agency policy.
- b. Objects or services may be sold in the community when both of the following criteria are met:
 1. The sale of such products or services does not represent unfair competition with private sources in the area; and
 2. The center has received approval of the regional office.
- c. Vehicle repair services may be offered only when the additional conditions are met:
 1. Such services are made available to staff and the general public on an equal basis.
 2. Vehicles serviced are selected on a first come, first served basis.
 3. Prior to acceptance for service of any vehicle, the owner signs an agreement relieving Job Corps of any responsibility for damage, and agreeing to pay for all parts and materials.

- 4. Repair services shall not be provided to rebuild vehicles purchased for speculation or resale.
- 5. Repair of vehicles owned by non-center Department of Labor and non-center Federal employees of operating agencies is prohibited.
- d. The proceeds from the sale of goods shall be credited to the cost category for the purchase of the materials.
- e. Students shall not sell arts and crafts objects made with center provided materials for personal profit.
- f. The sale of objects made with materials purchased by the student benefit fund is permitted only if proceeds accrue to the student benefit fund.

Strategy:

- Review SOP. Review practice and determine how the sales are recorded.
- Interview the finance director. Does the center sell any goods or services produced by students? If so, does the center have an SOP regarding the sale of center-produced goods? Review any records of sales for compliance with PRH Section 5.7, R7.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R7. Taxation of Job Corps Contractors by States or Localities

If state or local taxes are levied on a center or OA/CTS contractor, the contractor shall follow the procedures set forth in Appendix 504 (Taxation of Job Corps Contractors by States or Subdivisions Thereof).

Strategy:

- Inquire about the center’s process for not paying tax (tax exempt status).

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Budgeting of expense is accomplished with reasonable accuracy.

Strategy:

- Review student welfare fund documentation to ensure the expenditure of funds is reasonable, appropriate, and follows SGA meeting minutes and approvals. Are all funds accounted for? Do students receive practical experience in workplace skills related to budget planning and fiscal accountability?
- Review the SOP that relates to budget and finance. Review center procedures to ensure they are followed.
- Interview management staff. Are they involved in developing the budget? How much flexibility and input are they given when allocating their department budget? Does the center director communicate budget goals, issues, and expectations to management staff? All staff?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. The program operates within its established budget.

Strategies:

- Pre-on-site: Review the monthly financial submissions. Is the contractor working within the approved budget? Do the documents reviewed reflect compliance with PRH financial guidelines? Are the variance explanations and corrective action plans clear? Do they provide information about what caused the variance and what the center plans do to either eliminate the variance or cover the variance in some other way?
- Interview the management staff. Did managers and staff provide input when the internal budget was being developed? Do managers and supervisors have copies of their budgets and understand how they are developed and monitored? Have they received copies of budget reports that summarize actual expenses versus budgeted expenses? How often do they meet, if at all, to discuss the budget and are minutes of these meetings on file?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.7 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
R5			
R6			
R7			
Average		Average	

5.8 ESTABLISHMENT OF JOB CORPS CENTERS

Not applicable for regional assessments.

5.9 FACILITY STANDARDS

PURPOSE

- P1. To ensure that centers provide adequate facilities to meet student needs and to achieve program goals.

REQUIREMENTS

All persons involved in the design, construction, and rehabilitation of Job Corps centers shall adhere to the following standards:

RI. Legally Mandated Standards

- a. Code of Federal Regulations
 1. Safety and Health OSHACFR Part 1926.62
 2. Historical Preservation.....36 CFR Part 800
 3. A/E Design Requirements.....48 CFR Part 36
 4. Disability/Accessibility.....28 CFR Part 36
 5. Life Safety CodeNFPA-101
- b. Building Codes Used in the United States

Centers shall adhere to the most recent applicable Building Code adopted by the state in which the center is located, as follows:

1. BOCA (National Building Code)
2. UBC (Uniform Building Code)
3. SBC (Standard Building Code)
4. IBC (International Building Code)

Strategy:

- Center safety and/or maintenance staff must have a copy of or access to the above standards. Is the staff familiar with the standards? Ask them for examples of how the standards have been applied at the site.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Job Corps Standards

a. Bathrooms

Bathrooms and showers shall be adequate in number, clean, brightly lit, odor-free, well ventilated, and adequately supplied.

b. Facilities

1. Residential buildings shall provide sleeping rooms, bath and lounge facilities, appropriate administrative spaces, and lockable storage space for student belongings.
2. Counselors shall be provided with private, secured offices with easy student access.
3. Laundry facilities shall be available for student use.
4. Recreational facilities shall include access to a gymnasium, multi-purpose recreation areas, and sports fields.
5. Academic buildings shall have adequate space for classrooms, computer labs, and learning resources.
6. Career training areas shall have classroom and shop space to satisfy the needs of each training program, and resemble the workplace to the extent possible.

c. Dining and Food Preparation

The cafeteria facility shall include a food preparation area, serving area, dining area, and storage areas.

d. Health Services

Medical/dental facilities shall include private medical examining rooms, a nurse's station, separate infirmary space for males and females, dental facilities, secure drug storage area, and consultation office.

e. Administrative Areas

Administrative areas shall include general office and meeting space.

f. Storage Areas

Center facilities shall include adequate, lockable storage to safeguard confidential records, supplies, equipment, and hazardous materials, and to secure excess property.

g. Child Development Centers

Child development centers and residential parent/child programs shall adhere to standards shown in Exhibit 6-9 (Facility Requirements for Child Development Centers and Residential/Parent Child Programs).

h. Furnishings

Furnishings shall be in satisfactory condition, adequate in number, and appropriate for their use.

Strategy:

- Conduct a walk-through of facilities. Are they adequate? Clean? Are they well-maintained? Is there a maintenance schedule? If not, are there plans for renovations?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Job Corps facilities meet all legally mandated standards and state and local building codes.

Strategy:

- Review the last facility survey. For life-safety deficiencies that are funded, observe the work accomplished and review the statement of work in the survey to ensure work done was appropriate.
- Review the operations and maintenance items listed in the last facility survey. Observe that work has either been completed or that there are plans to address the deficiencies using Career Technical Skills Training (CTST), future operations budget, or center-based maintenance workers.

- Observe available storage for confidential records, hazardous materials, etc. Ensure locked facilities are available and used to store items described in PRH Section 5.9, R2.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Job Corps facilities are adequate to support the delivery of the Job Corps services.

Strategy:

- Observe classrooms, shops, dining room, and dorm rooms to see if they appear overcrowded. Consult required staff/student ratios and review latest facility survey for table of allocated space for classrooms, shops, and living and recreation areas. Is there adequate space in the health services waiting areas? Are there enough beds in the sick bays?
- Observe and assess the inside and outside of the outreach and admissions office. Is the office well marked? Is the office clean and orderly? Is the office easily accessible to applicants and community members? Is it located on a bus line? Is it accessible for students with disabilities? If facilities do not meet accessibility standards, what alternative arrangements are made to ensure that applicants or students with disabilities can access services? Do the office hours meet the needs of all students? How are students who can only come to the office only after business hours handled? Are the furnishings and equipment in good condition and suitable for their use? Is the office space sufficient for the services being provided to students?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.9 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
Average		Average	

5.10 FACILITY IMPROVEMENTS

PURPOSE

- P1. To assess conditions and prioritize facility rehabilitation, construction, and maintenance needs.
- P2. To provide funds needed to effect facility improvements.

REQUIREMENTS

R1. Facility Survey

The National Director of Job Corps shall:

- a. Arrange for a facility survey of each Job Corps center on a regularly scheduled basis.
- b. Use the facility survey as the principal document to establish funding requirements and priorities for construction and rehabilitation at Job Corps facilities.

Strategy:

- Review facility survey and determine if funded deficiencies were completed. Review staff/student ratios; are classrooms crowded?
- Review center quarterly Construction-Rehabilitation-Acquisition (CRA) reports for the past year to identify CRA project status.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Design Review

The National Director of Job Corps shall:

- a. Arrange for the engineering support contractor (ESC) to manage the design and construction of identified funded deficiencies.
- b. Depending upon the complexity of the project, arrange for review and approval of plans, specifications, and cost estimates by the ESC at the 30%, 60%, and final stages of design.

- c. For approved construction or rehabilitation projects in which contracting responsibility has been delegated to a center, review and approve the center’s recommendation for award.
- d. Ensure that all capital improvement projects, including CTST projects that involve student labor and cost more than \$25,000, are accomplished in accordance with a set of professionally prepared plans and specifications.
(See Section 3.13, Career Technical Training)

Strategy:

- Interview the facilities manager and the CTST coordinator to determine the extent of regional, national, or CTST projects. Ensure approval of CTST projects that involve major construction.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Construction Requests

- a. Where the contracting responsibility for approved construction or rehabilitation has been delegated to a center, the center shall:
 - 1. Submit a recommendation for award of the construction contract to the National Director of Job Corps. The center’s recommendation package shall include:
 - (a) Results of the bid opening
 - (b) Bid abstract
 - (c) Results of investigation of contractor recommended for award
 - 2. Receive the approval of the Regional Director before awarding the contract.
- b. Before engaging in facility rehabilitation that meets either of the conditions listed below, including CTST projects, centers shall seek and receive approval from the National Director of Job Corps. Requests shall be submitted through Regional Offices (or agency headquarters for CCCs), which shall forward the requests, with

recommendations for modification or approval, to the National Director of Job Corps. Approval must be obtained if the project involves:

1. Changes to any building structural system.
 2. Changes to major mechanical, electrical, plumbing, egress, or fire and safety systems.
- c. Projects to (1) construct new facilities, (2) rehabilitate existing facilities, or (3) repair or replace existing facilities shall be constructed in conformance with professionally prepared plans and specifications, in accordance with 48 CFR Part 36.

Strategy:

- Review quarterly CRA and check to see if projects were completed in a timely fashion. If incomplete, what is the schedule for completion?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Emergency Repairs or Replacement

- a. Centers shall submit requests for emergency facility funding to Regional Offices (or to agency headquarters for CCCs), which shall forward the requests, with recommendations for their modification or approval, to the National Director of Job Corps.
- b. All requests for emergency funding shall include the following information:
 1. Description of the project.
 2. Estimated costs, including any equipment requirements, and the basis for the estimate. For projects exceeding \$25,000, every effort shall be made to obtain three estimates.
 3. Method for accomplishing construction (i.e., subcontract or center staff).
- c. Where the failure to immediately effect a repair would seriously disrupt the program, place other facilities at risk, or jeopardize the health and well being of students, and where it is not possible to contact the National Office staff with

approval authority, Regional Directors may authorize the expenditure of funds to accomplish the repair.

Strategy:

- Review pending emergency funding requests; how many were submitted? Was work conducted in a timely fashion?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Facilities are upgraded, improved, and repaired in a systematic fashion according to long-range plans.

Strategy:

- Review recent and planned CRA renovations in the center’s five (5) year plan. Discuss them with center management. Are CRA plans designed to resemble typical workplace situations? Is the industry council involved in reviewing CRA plans to ensure that they comply with industry standards? Are accessibility standards for workplaces considered so that all students may fully participate?
- Review the center’s five (5) year facility plan. Does it include appropriate facility upgrades? Are priorities identified and designed to coordinate with CTST and modernization requests? Is the plan reflected in the latest facility survey?
- Review the center’s CTST Plan. Does it include facility improvements or rehabilitation projects? Has it been approved by the region? Were any of the projects revised? If so, were approvals received?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Facility improvements are accomplished in an orderly, timely, and cost-effective manner.

Strategies:

- Look at the quarterly construction/rehabilitation report and determine what has been accomplished in completing projects.
- Review the most current CTST Plan. Does it include major changes in building structures? If so, has the center had the plans reviewed by the Job Corps engineering contractor for compliance with state and local construction codes?
- Review emergency funding requests that were approved by the Regional Office. Has the center accurately documented the status of the emergency request? Have projects been completed in a timely manner?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.10 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
Average		Average	

5.11 FACILITY MAINTENANCE AND PROTECTION

PURPOSE

P1. To maintain center facilities in a safe, attractive condition.

REQUIREMENTS

R1. Center Maintenance Program

Center operators shall maintain the buildings, grounds, roads, sidewalks, and equipment for which the center is responsible by implementing a center maintenance program that includes:

- a. Written preventive maintenance procedures, submitted to the Regional Office for approval within 90 days of contract award, in accordance with Exhibit 5-1 (Standard Operating Procedures). Qualified maintenance personnel available or on call 24 hours per day, seven (7) days per week.
- b. A tracking system that documents scheduled maintenance, work orders, and the amount of time taken to complete work.
- c. Procedures for obtaining assistance to handle specialized emergency problems beyond the scope of maintenance personnel.
- d. Procedures for completion of rehabilitation projects by maintenance staff, provided that such projects are not subject to the prevailing wage provisions of the Davis-Bacon Act, or, if subject to the Act, that the requirements of the Act are met. Centers shall document the reasons for classifying projects as not subject to the Act, or, if subject, the actions taken to assure compliance.
- e. Procedures for handling emergency maintenance problems.
- f. Provisions for qualified staff to supervise students performing maintenance work as part of an approved vocational training program or center support program.

Strategy:

- Review preventive maintenance plan and work order system; check log; check maintenance staff schedule (are they on call 24/7?).
- Review any maintenance agreements or subcontracts with local vendors to determine how facility maintenance is accomplished. Are these agreements necessary or warranted? Cost effective?
- Is regular contact/support sought from the National Support Contractor for Facilities?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. *Limitation on Use of Maintenance Funds*

Centers shall not use maintenance funds for capital improvement projects.

Strategy:

- Review SOP. Are there any discrepancies?
- Review financial report for potential over-runs in facility maintenance. Determine if operations funds were used for capital improvements.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. *Inactive Center Facilities*

The National Director of Job Corps shall be responsible for protecting and maintaining a center when it is closed, in accordance with the General Services Administration (GSA) requirements.

Strategy:

- Does the center have inactive facilities? How is the center protecting the facilities?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Center buildings, grounds, roads, sidewalks, and equipment are clean, well maintained, and free of hazards.

Strategies:

- Determine if maintenance includes policing center grounds, roads, and sidewalks.
- Interview staff and students. Do they participate in maintaining the grounds and equipment? Do they display a sense of pride in their workplace facility? Are students involved in a center support program? If so, are they adequately supervised by qualified staff?
- Observe center residential areas: Is there evidence of adequate pest control? Are temperatures appropriate for hot water? Is there a mixing valve for hot/cold water in showers? Are there adequate supplies in bathrooms? Is there evidence of mildew in sleeping areas and inside lockers? Are washers and dryers in working order? Are mattresses clean? Linens? Pillows? Are good hygiene practices evident across the center?
- Review center preventive maintenance procedures. Are they followed? Review records of the center system for requesting maintenance and for tracking requests. Does the process have a method for prioritizing requests so that requests that include safety and health issues receive priority over less important ones? Are requests completed in a timely fashion?
- Review the maintenance staffing and scheduling documentation. Is there someone available 24 hours per day, seven (7) days per week?
- Determine what the center process is for emergency maintenance. Ask to see records for the last emergency request for maintenance to ensure adequate staff responded and addressed the issues.
- Review the budget for facilities staffing to determine cost effectiveness and reasons for overtime or high costs, if applicable.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Facilities, equipment, and systems are maintained in operating condition.

Strategies:

- Conduct a walk-around survey. Check the conditions of the buildings, vehicles, and other equipment. Are they in good repair and do they appear to be well maintained? Are dorm room doors locked, if applicable? Are lockers locked and in good repair?
- Review maintenance work orders to determine if repairs are requested and completed in a timely manner.
- Review the center’s maintenance plan and the system for work requests and repairs. Determine the level of implementation. Is preventive maintenance emphasized? Are work requests completed in a timely manner? Is priority placed on safety and health issues as well as those that have an effect on facilities?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q3. Center facilities provide a safe and attractive living and learning environment for students and staff.

Strategies:

- Observe the offices and training areas across center to see if they are clean and well maintained. Pay particular attention to individual staff desks and areas. Are they neat and organized? Are display materials and posters in good condition, current, and reflective of the Job Corps population?
- Observe the condition of physical facilities. Are classrooms decorated to promote learning? Are teaching materials organized and easy to access? Is cleanliness a priority? What evidence indicates safety is a priority in classroom, career technical training, and residential areas? Is there any evidence of vandalism?
- Interview managers across center. How do they enforce standards for cleanliness and appearance? How are safety hazards prevented and addressed?
- Observe landscaping, lawn care, roads, and sidewalks. Are they attractively maintained?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.11 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3		Q3	
Average		Average	

5.12 ENERGY AND WATER CONSERVATION

PURPOSE

- P1. To promote energy and water conservation at Job Corps centers.
- P2. To reduce overall center operations costs by reducing energy and water use.

REQUIREMENTS

R1. Energy and Water Conservation

Centers shall develop and implement written energy and water conservation procedures that include:

- a. Procedures to reduce building energy and water consumption.
- b. Procedures to reduce energy consumption by motor vehicles.
- c. Assignment of responsibility for energy and water conservation goals to key individuals.

Strategy:

- Check plan; what efforts are in place; who is responsible for this area?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Reporting

Centers shall submit quarterly energy and water consumption reports to the National Office through the Regional Office in accordance with Exhibit 5-2 (Plan and Report Submission Requirements).

Strategy:

- Check to see if reports are submitted in a timely fashion.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Centers demonstrate energy and water conservation awareness.

Strategy:

- Review the center energy conservation plan and quarterly energy reports. Interview students and staff regarding their understanding of energy conservation. When walking on center, observe whether energy conservation practices are being employed, such as closing doors and windows in air conditioned spaces, turning off water in bathrooms, etc.
- Review the center procedures to implement energy and water conservation. Is the center following them? Are there any staff or student incentives for conservation efforts?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Energy and water usage is reduced or contained.

Strategies:

- Review a sample of quarterly energy reports. Is there a trend toward reduction of energy usage?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.12 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
Average		Average	

5.13 FLEET MANAGEMENT

PURPOSE

- P1. To ensure accurate documentation and reporting of all contractor-operated Job Corps fleet information.
- P2. To inform the Job Corps community of the requirements for all contractor-operated Job Corps centers acquiring new or replacement vehicles and for returning General Services Administration (GSA) lease vehicles.

REQUIREMENTS

R1. Goal Achievement

The National Office of Job Corps shall work continuously to reduce petroleum fuel consumption through the following measures:

- a. Increasing the number of alternative fuel vehicles (AFVs) in Job Corps' fleet.
Job Corps centers shall make every effort to attain AFVs when replacing existing fleet or when acquiring new leases.
- b. Maintaining oversight of all new vehicle acquisitions, replacements, and returns.
 - 1. Job Corps centers with a need to acquire or replace a vehicle must justify this need or action to the National Office of Job Corps.
 - (a) To acquire a new or replacement vehicle, the requesting center must submit the "Request to Lease a GSA Vehicle" form to the center's Project Manager (PM) for submission to the National Office of Job Corps (see Appendix 507). Information on AFVs that can be leased directly from GSA can be found at www.GSA.gov in the most current Product Guide for Alternative Fuel Vehicles (AFV). Appendix 506 contains descriptions of alternative fuels and additional AFV resources.

Note: When acquiring new vehicles or renewing existing leases, the agency code "1680" should be used to complete all necessary paperwork.
- c. Reducing the consumption of petroleum fuel through efficient fleet policies.
Center operators shall examine their center's fleet to determine which vehicles are necessary for center operations. Vehicles that are being consistently underutilized (driven less than 800 miles per month) for three (3) consecutive months should be viewed as candidates for return. In order to retain these vehicles, justification must be provided to the National Office of Job Corps, Division of Program Accountability and OA/CTS. **Note:** There are no eligibility requirements for returning a vehicle to GSA.
- d. Establishing fleet standards that will lead to more efficient operations.

Center staff shall acquire vehicles based upon the fleet standards established by the National Office of Job Corps. Replacing high fuel consumption vehicles with fuel-efficient vehicles.

Center operators shall examine which of their vehicles are high fuel-consumption vehicles and replace them with more fuel-efficient vehicles. Although vehicle returns may be made at any time, replacements must meet the eligibility requirements set forth by GSA. Vehicle replacements must follow the process outlined in Chapter 5, Section 5.15, R1.a. and Section 5.15, R1.b.

Vehicle replacement standards are the criteria used to determine whether a GSA-leased vehicle is eligible for replacement. This information is listed in Exhibit 5-5, Minimum Requirements for Replacing Vehicles Leased from the GSA Prior to the End of the Lease.

- e. Providing GSA with annual fleet acquisition requirements.

Upon the announcement of GSA’s annual solicitation for the fleet acquisition requirements for the upcoming fiscal year, each Job Corps center shall prepare its fleet acquisition requirements and send to its Project Manager by August 15th for approval. Acquisition requirements will be forwarded to GSA by the Project Manager. Appendix 508 – GSA Annual Fleet Requirements Spreadsheet should be used by centers to submit this information.

Strategies:

- Pre-on-site: Review online Job Corps fleet database to determine if all vehicles are necessary for center operation.
- Ask for center’s justification if a vehicle is driven less than 800 miles for three (3) consecutive months.
- Review records of newly leased vehicles to ensure the proper procedures are followed.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Standard Operating Forms and Procedures

Center operators shall ensure that:

- a. Centers have standard forms and procedures in place to document the vehicle information that must be reported to the National Office of Job Corps on a monthly basis. The National Office of Job Corps has developed standard forms to assist in the tracking of fleet information. The standard forms include Exhibit 5-6, Vehicle Log, and Exhibit 5-7, Vehicle Maintenance Log.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Reporting

Center operators shall ensure that:

- a. Fleet Managers are entering all vehicle information into the Job Corps Fleet Management System on a monthly basis.
- b. Vehicle information is reported by the 10th day of the current month for the previous month. This information must be recorded in the Job Corps Fleet Management Tracking Tool, which can be accessed through the Job Corps Citrix Portal. The information entered into the system will assist the National Office of Job Corps with its reporting requirements.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Job Corps centers are steadily decreasing their use of petroleum fuel.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q2. Job Corps centers are using their vehicles effectively and efficiently.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q3. Job Corps centers are acquiring only AFVs where possible.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

Q4. Job Corps centers are tracking and reporting all fleet information accurately on a monthly basis.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

PRH 5.13 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3		Q3	
		Q4	
Average		Average	

5.14 INTRODUCTION TO ENVIRONMENTAL SAFETY AND OCCUPATIONAL HEALTH FOR JOB CORPS CENTERS

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. *Governing Regulations and Policy*

Centers must comply with federal, state, and local regulations and Job Corps policy regarding environmental safety and occupational health.

Strategy:

- Interview the center director and the safety officer.
- Do they each have a current copy of PRH Sections 5.14 through 5.20?
- Is the center director aware of the penalty for failure to comply with federal, state, and local safety and occupational health requirements?
- Is the center director directly involved in the implementation and management of the center’s safety and occupational health program?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. *Occupational Safety and Health Plan*

- a. Center operators must develop, implement, and maintain a center-specific occupational safety and health plan, which must be signed by the center director. **Note:** Corporate plans or templates are unacceptable. Plans must be tailored to each center.
- b. Plans must be evaluated annually by the center and revised when:
 - 1. a new or revised PRH or regulatory standard necessitates revision of specific plan;
 - 2. the center introduces a new trade resulting in new potential hazards; or

3. new hazards exist due to changes in equipment or materials.
- c. Plans must contain a revision tracking sheet that lists each component of the plan and documents changes made to the plan (i.e., specific change and date of revision).
 - d. Plans must remain on center when there is a change in center operator. Center operator policies and procedures regarding safety that are considered “proprietary” should not be part of center safety program plans. This information should be maintained separate from the PRH occupational safety and health program requirements.
 - e. Each occupational safety and health plan must consist of the following components at a minimum (where applicable):
 1. Center Safety Orientation
 2. Staff Training
 3. Basic Equipment for Safety Officers
 - f. All center safety officers must possess the following equipment items, at a minimum, to effectively perform their responsibilities. Additional equipment may be required depending on the center’s hazard analysis.
 1. A quality camera
 2. Safety shoes
 3. Safety helmet/hardhat
 4. Safety goggles/glasses
 5. Gloves
 6. Use of computer with word processing, e-mail, Internet capability, and CD-ROM
 7. Flashlight
 8. Electrical circuit tester and ground fault circuit interrupter tester (GFCI)
 - g. The following items should be available when appropriate and necessary to identify and control hazards:
 1. Lockout/tagout kits
 2. Air flow meter (Alnor Velometer® Jr.)
 3. Hearing protection
 4. Swimming pool test kits
 5. Low-volume air sampling pumps
 6. High-volume air sampling pumps
 7. Sound level meter with octave band analyzer
 8. Noise Dosimeters

h. Regulations and Policies

All center operators, center directors, and safety officers must follow and refer to the following policy and regulatory information in performing their safety and health program review activities:

1. National Fire Protection Association (NFPA) 101, Life Safety Code[®] and Handbook
2. Current OSHA Standards (29 CFR 1904, 1910, 1926, and 1960)
3. Department of Labor Manual, Series (DLMS) 4, Chapter 800, DOL Safety and Health Program
4. Job Corps Policy and Requirements Handbook (PRH)
5. NFPA 70, National Electrical Code[®] (NEC)

i. Occupational Safety and Health Committee

1. Overview

Each center must establish an occupational safety and health committee in accordance with 29 CFR 1960.58 to:

- (a) Review reported accidents, injuries, and illnesses.
- (b) Consider the adequacy of action taken to prevent recurrence of such accidents, injuries, or illnesses.
- (c) Plan, promote, and implement DOL and Job Corps occupational safety and health programs.

2. Committee Membership

The center director must actively participate on the occupational safety and health committee. In addition to the center director, committee membership must include:

- (a) The center safety officer (facilitator)
- (b) Manager of residential living
- (c) A maintenance unit supervisor
- (d) A health services supervisor
- (e) A CTT supervisor
- (f) A recreation supervisor
- (g) A food service supervisor
- (h) A minimum of two students, selected by their peers
- (i) Representatives from other organizational units, as appropriate

3. Duties of Committee Members

Committee member duties must include, but not be limited to, the following:

- (a) Assist in safety inspections when requested by the safety officer. Student committee members must participate in safety inspections at least monthly.
- (b) Observe and report infractions of safety rules and regulations.
- (c) Review accident reports to determine if corrective action is necessary or if harmful trends exist.
- (d) Review inspection reports prepared by the center safety officer identifying unsafe/unhealthful conditions, and suggest techniques/strategies for correction/abatement.
- (e) Review all suggestions and concerns submitted by students and staff, and make recommendations for implementation to the center director.
- (f) Develop and implement a safety awards and recognition program.

4. Training for Committee Members

In accordance with 29 CFR 1960.58, safety committee members must complete training commensurate with the scope of their assigned responsibilities within six (6) months of appointment. Such training must include:

- (a) The center's occupational safety and health program (recommend training within 30 days of appointment)
- (b) Section 19 of the OSH Act of 1970
- (c) Executive Order 12196
- (d) General content contained in 29 CFR 1910, 1926, and 1960
- (e) Center procedures for the reporting, evaluation, and abatement of hazards
- (f) Center procedures for reporting and investigating allegations of reprisal, and the recognition of hazardous conditions and environments
- (g) Identification and use of occupational safety and health standards, and other appropriate rules and regulations

5. Occupational Safety and Health Committee Meetings

Meetings must be held monthly and/or when called by the center director or safety officer. Copies of minutes must be maintained at the center for three (3) years and made available upon request.

Strategy:

- Review the center's topic-specific written occupational safety plans per PRH Section 5.20. Are they current?

- Has the center director reviewed and approved the overall center safety program plan?
- Who is responsible for monitoring the overall safety program plan?
- Is the center safety program promoted to staff and students?
- How is the safety program promoted to staff and students?
- Is staff trained in safety work practices and procedures?
- Does the safety officer have access to the regulations and policies listed in PRH Section 5.14, R2.f?
- Is there a safety committee?
- Who is on the committee?
- Is there student representation?
- Is the center director an active member of the safety committee? (Check the meeting minutes.)
- Have the members of the safety committee received the required training?
- Are student members replaced in a timely manner?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Occupational Safety and Health Program

Center operators must establish and operate an occupational safety and health program in accordance with the requirements established in this section. The center’s program must fully comply with current Occupational Safety and Health Administration (OSHA) standards at 29 CFR 1904, 1910, 1926, and 1960, and with U.S. Department of Labor (DOL) regulations, policies, and procedures. It must include, but not be limited by, the following features:

- a. Appointment of a center safety officer who is properly trained in OSHA courses listed in Exhibit 5-4 (Required Staff Training)
- b. Development of an occupational safety and health plan, which is updated as needed or as directed by OSHA or the National Office (see R2 above). Center plans must include the following if applicable. See referenced section below for plan details:

1. Personal Protective Equipment (PPE) Plan (*See Section 5.20, R1*)
 2. Fire Safety and Prevention Plan (*See Section 5.20, R2*)
 3. Emergency Action Plan (*See Section 5.20, R3*)
 4. Hazard Communication Plan (*See Section 5.16, R6*)
 5. Recreational Safety Plan (*See Section 5.20, R5*)
 6. Asbestos Operations and Maintenance Plan (*See Section 5.16, R5*)
 7. Confined Space Entry Plan (*See Section 5.20, R7*)
 8. Bloodborne Pathogens Plan (*See Section 5.20, R8*)
 9. Respiratory Protection Plan (*See Section 5.20, R9*)
 10. Hearing Conservation Plan (*See Section 5.20, R10*)
 11. Lead Exposure Plan (*See Section 5.16, R4*)
 12. Hexavalent Chromium Exposure Plan (*See Section 5.16, R9*)
 13. Lockout/Tagout Plan (*See Section 5.20, R13*)
 14. Powered Industrial Vehicle Plan (*See Section 5.20, R14*)
- c. Investigation and reporting of accidents and injuries
 - d. Enforcement of safety and health rules and regulations
 - e. Conduct of safety inspections and initiation of corrective actions
 - f. Development of a safety recognition program
 - g. Establishment of occupational safety and health committees

Strategy:

- Who is the center safety officer?
- Did he or she complete the required training within 180 days of appointment?
- Does the center occupational safety and health plan include the applicable elements listed in PRH Section 5.14, R3.b?
- Are student and staff occupational injuries and illness investigated?
- Are causal factors identified?
- Who is responsible for ensuring that corrective action is taken to prevent future occurrences?
- How are safety and health rules and regulations enforced?
- Who conducts safety inspections?
- How are unsafe and unhealthy living, working, and training conditions reported?
- Is the safety committee active?
- When was the last regular meeting?

➤ Is there a safety awards program?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Center Occupational Safety and Health Responsibilities and Duties

a. General Responsibilities

The center operator must be responsible for safeguarding the occupational safety and health of all students and staff and ensuring a safe and healthful environment in which to live, work, and train. This responsibility will be inherent in all aspects of the program, whether stated explicitly or implied.

b. Center Operating Contractors and Federal Agencies

Center operating contractors and agencies will:

1. Ensure a training, living, and working environment that is free from recognized hazards.
2. Ensure that the center director is an active participant on the occupational safety and health committee.
3. Appoint a center safety officer and provide necessary training and equipment for the performance of those duties. The center safety officer will report directly to the center director on matters of safety.
4. Ensure that the center director or designee (e.g., safety officer) has the authority to terminate any activity where a hazard exists.
5. Enforce occupational health and safety rules, regulations, and standards.
6. Ensure that personal protective equipment (PPE) is worn in the trade programs to comply with OSHA standards.
7. Report fatalities, injuries, and occupational illnesses to DOL in a timely manner.
8. Instruct students and staff in safe practices and methods of operation.
9. Conduct required occupational health and safety inspections and surveys and take prompt corrective action to deal with hazards identified.

10. Provide medical and dental services and supplies for injured and occupationally ill students.
11. Investigate accidents and complete and submit appropriate reports.
12. Encourage and evaluate student suggestions on safety and health improvements.
13. Develop and implement a safety awards and recognition program.
14. Ensure that safety and health evaluation reports provided by the National Office of Job Corps are responded to within 30 days of receipt and that corrective action is taken to abate hazards noted.

(NOTE: Items c and d, regarding what the Regional Offices and National Office will do, are not included here.)

e. Center Director

The center director will:

1. Ensure that all occupational safety and health requirements are implemented.
2. Provide leadership, direction, enforcement, and accountability for the center safety program.
3. Develop a center occupational safety and health program and plan.
4. Ensure that personal protective equipment (PPE) is worn in the trade programs to comply with OSHA standards.
5. Ensure a training, living, and working environment that is free from recognized hazards. Maintain facilities and grounds in a sanitary and healthful manner.
6. Participate in all occupational safety and health committee meetings.
7. Appoint a center safety officer and provide necessary training and equipment for the performance of those duties. The center safety officer will report directly to the center director on matters of safety.
8. Terminate any activity where a hazard exists; additionally, the authority to terminate any such hazardous activity may be given to a designee (e.g., safety officer).
9. Enforce occupational health and safety rules, regulations, and standards.
10. Report fatalities, injuries, and occupational illnesses to DOL in a timely manner.
11. Instruct students and staff in safe practices and methods of operation.
12. Conduct required occupational health and safety inspections and surveys and take prompt corrective action to deal with hazards identified.
13. Provide medical and dental services and supplies for injured and occupationally ill students.

14. Investigate accidents and complete and submit appropriate reports.
 15. Encourage and evaluate student suggestions on safety and health improvements.
 16. Establish a formal written safety awards and recognition program, and use it to recognize students and staff who make significant contributions toward the prevention of injury or illness.
 17. Review safety awards and recognition programs annually.
 18. Ensure that safety and health evaluation reports provided by the National Office of Job Corps are responded to within 30 days of receipt and that corrective action is taken to abate hazards noted.
- f. Center Safety Officer

The center safety officer will:

1. Assist the center director in preparing the center occupational safety and health plan and implement the plan.
2. Provide orientation and training to students and staff on the center safety and health plan.
3. Promote safety campaigns on center to reduce accidents and injuries.
4. Inspect all center areas for safety and health violations.
5. Ensure that personal protective equipment (PPE) is worn in the trade programs to comply with OSHA standards.
6. Complete all required accident and injury reports in full compliance with the PRH and OSHA regulations.
7. Advise the center director of safety and health concerns.
8. Facilitate required occupational safety and health committee meetings; retain meeting minutes for three (3) years and make them available upon request.
9. Coordinate with other safety and health staff (e.g., nurse, maintenance supervisor, CTT/education instructors, and others) to ensure a safe and healthful environment in which to live, work, and train.
10. Retain exposure monitoring results on center for 30 years in accordance with 29 CFR 1910.1020, *Access to Employee Exposure and Medical Records*.

Strategy:

- Observe safety practices promoted by staff throughout the center, with a particular focus on those areas where students and staff may be exposed to hazardous conditions.
- Interview students. Do they know about and can they describe safety practice for their career technical trade?

- Interview management and other staff to determine whether they are familiar with the center’s safety and health plan as it pertains to their area of operations.
- Do staff support and emphasize safety?
- Who is the center safety officer?
- Does he or she meet the position’s requirements?
- Does the safety officer provide a safety orientation for staff and students that includes training on the center safety and health plan?
- Determine if the center has a safety committee.
- Ask to see a listing of the members. Does it include the required members as described in PRH Section 5.14, R2.g?
- Does the safety officer facilitate regular safety and health meetings?
- Is the center director an active member/chairperson of the committee?
- Review the minutes of those meetings to determine if they focus on ensuring a safe and healthy environment throughout the center.
- Interview students. Are they involved in safety on center?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Center Occupational Safety and Health Orientation Training

In accordance with 29 CFR 1960.58, centers shall provide the appropriate safety and occupational health training to students and staff including specialized training appropriate to the training or work tasks performed. Center safety and health orientation and training shall include the following:

- a. Introduction to Center Life (New Students) - CPP
(See Chapter 2, Section 2.2.)
- b. New Staff Training
(See Exhibit 5-4.)

- c. **Ongoing Staff Training**

The center must provide required occupational safety and health training included as part of the center's annual training plan. Each plan must include anticipated occupational safety and health training needs, such as the anticipated number of staff members to be trained, where and when the training is to be performed, and the estimated cost (see Exhibit 5-4).
- d. **Training Standards and Documentation**

Safety training must be conducted in accordance with current OSHA standards 29 CFR 1904, 1910, 1926, and 1960 and DOL guidance provided by the National Office of Job Corps. Center safety officers must have and maintain these references and regulations on hand at all times. Further, all completed training must be properly documented and maintained on center in the individual's personnel or continuing education file for up to 3 (three) years, and 1 year beyond employment. Training records must be available upon request.
- e. **Minimum Training Requirements for Center Safety Officers**
 - 1. The center human resources manager will implement a professional development program (signed by the center director) for the safety officer that shall include but is not limited to the courses listed in Exhibit 5-4.
 - 2. The safety officer shall complete the Occupational Safety and Health for Other Federal Agencies with expanded segment on accident/incident investigation training (OSHA 600) within the first 180 days of initial assignment.
 - 3.. The safety officer shall complete Asbestos Identification and Handling (competent person) (if applicable) within 90 days of initial assignment.
 - 4. The safety officer shall complete Lead Based Paint Identification and Handling (competent person) (if applicable) within 90 days of initial assignment.
 - 5. The center operator and center director must ensure that the safety officer receives training in the remaining safety-related courses referenced in Exhibit 5-4 within 18-24 months of appointment.
 - 6. In accordance with PRH Chapter 5, Section 5.3, annual advanced or refresher training must be provided to the safety officer after basic required courses are completed.
 - 1. In accordance with DLMS 4, Chapter 800, Paragraph 822, the center director must ensure that a written professional development plan is developed and implemented for the safety officer. Further, all completed files must be properly documented and maintained on center in the individual's personnel or professional development file for the duration of employment, and one (1) year beyond employment. Training records must be available upon request.

Strategy:

- Review staff training records to determine that staff has received required training in accordance with PRH Exhibit 5-4.
- Has the safety officer completed required OSHA 600 training within 180 days of appointment?
- Is there a professional development plan in place for the safety officer?
- Has the safety officer completed required safety training within 18-24 months of initial appointment?
- What arrangements have been made to ensure that delinquent training requirements have been met?
- Who is responsible for student safety training?
- What is the process for handling student failure to follow safety requirements?
- How are accidents related to failure to follow safety and occupational health requirements handled?
- What is the penalty for repeated violation of safety and occupational health policies and procedures?
- Review the most recent National Office of Job Corps OSH Program Review reports. Follow up on the implementation of corrective actions taken to address deficiencies.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding environmental safety and occupational health.
- Q2. Center operators establish and operate an occupational safety and health program.

PRH 5.14 - Summary Rating

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
R5			
Average		Average	

5.15 SAFETY INSPECTIONS, OBSERVATIONS, AND OSH PROGRAM REVIEW

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. *Imminent Danger*

Imminent danger exists when a condition or practice presents a danger that could reasonably be expected to cause death or serious physical harm. If such a situation exists and is observed, the student(s) and staff in danger must be immediately removed from the area and not permitted to return until the problem is corrected. The safety officer must immediately notify the center director of the hazard and recommend corrective action. The center director must take appropriate action(s) to correct the hazard. If the hazard cannot be corrected promptly by the center, the center director must consult the appropriate Regional Office and/or the National Office of Job Corps for advice and assistance in correcting the hazard. The action recommended by the safety officer and the resulting action taken must be documented in writing and maintained on center for a period of three (3) years.

Strategy:

- Does the safety officer know what to do in the event of imminent danger?
- Does the center director know what to do in the event of imminent danger, if the hazard cannot be corrected promptly by the center?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. *Required Inspections and Observations*

- a. All occupational safety and health inspections and observations must be:

1. Conducted by appropriate center staff in accordance with 29 CFR 1960.25 and DLMS 4 Chapter 800, paragraph 825.
 2. Submitted according to Exhibit 5-2, Plan and Report Submission Requirements.
 3. The responsibility of the center safety officer, managers, supervisors, and instructors.
 4. Documented and maintained on center for a period of five (5) years, then destroyed.
- b. Observations on a daily basis, and weekly or monthly inspections are required for all center:
1. Buildings
 2. Facilities
 3. CTT facilities
 4. CTST projects
 5. Academic classrooms
 6. Cafeterias
 7. Dormitories
 8. Health services
 9. Administrative offices
 10. Recreation areas
 11. Gymnasiums
 12. Swimming pools
 13. Child development center facilities, including playgrounds
 14. Equipment
 15. Vehicles used to transport students

Identified deficiencies must be corrected promptly. Weekly and monthly inspections, and hazards identified during daily observations, must be documented. Records of inspections and actions taken to correct deficiencies must be maintained by the center safety officer for three (3) years, and made available upon request.

- c. Daily Observations
1. Food service supervisors must check food preparation and food serving areas of cafeterias.
 2. Residential advisors must check dormitories, snack bars, and canteens and document their findings in a log book.

3. The safety officer, and CTT and academic managers/instructors, must check classrooms/shops (including CTST projects), motor vehicles, and all equipment to be used by students and staff.
 4. Child development supervisors must check the child development center, equipment and toys, and the playground.
 5. Recreation supervisors/staff must check the gymnasium, exercise equipment, and other frequently used recreation areas.
- d. Weekly Inspections
- The center safety officer must inspect:
1. All food service facilities, including cafeterias, culinary arts facilities, snack bars, and canteens.
 2. Gymnasiums, exercise equipment, and swimming pools during times of operation.
 3. CTT facilities and CTST projects.
- e. Monthly Inspections
- The center safety officer must inspect:
1. Dormitories
 2. Child development center
 3. CTT facilities and CTST projects (see Chapter 3, Section 3.2)
 4. Academic classrooms
 5. Health services
 6. Administrative offices, warehouses, and other buildings occupied by students and staff
- f. Quarterly Inspections
- Centers must arrange for quarterly environmental health inspections by qualified non-center personnel in the following areas:
1. Food service facilities
 2. Residential facilities
 3. Training facilities
 4. Educational facilities, including offices, classrooms, recreational facilities, and wellness center
 5. Water supply and distribution facilities, when not a part of municipal systems
 6. Wastewater treatment facilities, except for septic systems, which must be inspected annually, and municipal sewer systems, which are exempt from this requirement

7. Child development center, where appropriate

Centers must submit quarterly environmental health reports and necessary corrective action, simultaneously, to the Regional Office and the National Office of Job Corps within seven (7) days of receipt. (See Exhibit 5-2, Plan and Report Submission Requirements.)

g. CTST and Other Projects

The center safety officer and appropriate instructor must inspect all CTST projects daily. The center safety officer must inspect and approve all final CTST projects, on and off center, before site occupancy and project completion. Inspection checklists, photographs, and associated corrective actions must be maintained on center indefinitely and made available upon request.

Strategy:

- Review inspection logs. What is the average number of safety and health hazards cited during inspections by the center’s safety officer during daily and monthly inspections?
- The number of safety and health deficiencies identified during the quarterly environmental inspections?
- How many deficiencies were identified previously during the daily, monthly, and quarterly inspections?
- Determine if the center submitted necessary corrective action plans in response to the Regional Office and the National Office within seven (7) days of receipt.
- Did they implement corrections immediately to the violations considered serious?
- Interview the safety officer to determine his or her awareness of any violation of local and state building codes and standards. If any exist, what action has the center taken to resolve them?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Annual Occupational Safety and Health (OSH) Program Reviews

- a. The annual occupational safety and health (OSH) program review is conducted in accordance with Executive Order 12196, Title 29 Code of Federal Regulations (CFR) part 1960, Department of Labor Manual Series (DLMS) 4, Chapter 800,

and the Job Corps Policy and Requirements Handbook (PRH). The review verifies that each center has implemented the occupational safety and health program outlined in the PRH and identifies any outstanding occupational health and safety deficiencies.

- b. The review is conducted using the Job Corps Program Assessment Guide (PAG), Chapter 5, Sections 5.14-5.20. The PAG is a companion to the PRH. It provides a standardized approach and framework for the review and evaluation to which contractors/operators deliver services as specified in the PRH. The review consists of an on-site visit including opening and closing conferences, walk-through of facilities, document verification, and student/staff interviews.
- c. The review process is designed to determine the extent to which program operations meet the Government's requirements and expected outcomes. The PRH requirements and quality indicators set benchmarks for the Government's expectations. Job Corps uses an adjectival rating system to assign ratings to each requirement, quality indicator, and overall program component. The adjectival rating system uses five adjectives, as recommended by the Office of Federal Procurement Policy, to define the degree to which expectations are met. Adjectival ratings are defined as follows:

Exceptional

Programs, procedures, and systems are well organized, clearly communicated, and administered to ensure quality delivery of all requirements and achievement of quality indicators. Innovative approaches result in program enhancements and improved outcomes. Through rigorous self-assessments and quality assurance, the operator safeguards program assets and maintains the integrity of program data.

Very Good

Programs, procedures, and systems are consistently in place to ensure delivery of requirements and achievement of quality indicators. Some innovative approaches are employed to promote continuous improvement. A viable quality assurance plan ensures integrity and accountability of program assets and data.

Satisfactory

Requirements and quality indicators are generally evident in applicable program areas with minor exceptions. A quality assurance plan is in place that demonstrates adequate controls to ensure integrity and accountability of program assets and data.

Marginal

Requirements and/or quality indicators are missing or minimally evident in applicable program areas. Quality assurance is minimal resulting in inconsistencies in accountability and integrity of program assets and data.

Unsatisfactory

Critical requirements are missing or minimally evident. Quality indicators are not achieved. The program lacks procedures and controls necessary to ensure compliance, quality, and data integrity.

- d. For the purpose of the OSH program review, the adjectival ratings definitions are designed to assist evaluators in assigning scores for each requirement and quality indicator by describing what is expected for each adjectival level.

The ratings are made against a 10-point scale, as shown below.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	

- e. At the end of each PAG section, the ratings for each requirement and quality indicator are averaged. The average compliance and quality ratings for all sections 5.14-5.20 are then averaged to produce final ratings. The final compliance and quality ratings constitute the final OSH program review score.

- f. Documentation Examined During Review

Documentation is critical. Reviewers will assess only the documentation provided to them while they are on center. Should the required documentation not be presented, the center will not be credited with the associated item. The reviewer will give the center safety officer (or designee) an opportunity to present any omitted documentation before the end of the review. Documentation that is created during or after the opening day of the review, however, will not be considered. OSH Program Review rebuttals based upon missing or unaccepted documentation at the time of the review will be rejected and the final score will not be changed.

- g. Interviews During the Review

The strategies outlined in the PAG necessitate interviews with the center director, staff members, and students to determine knowledge and involvement. In cases where verbal statements and documentation conflict, reviewers will use their professional judgment in deciding whether to award credit. Rebuttals or scoring changes based upon discussions with the reviewer that are not substantiated by the rationale for rating or other documentation will be rejected and the final score will not be changed.

- h. Documentation of Deficiencies and Abatement Activities

National Office OSH program reviewers are required to document deficiencies in the Abatement Tracking System (ATS) Web site. Job Corps centers are required to document and post deficiencies manually on the DOL Form DL1-2029. Blank forms can be obtained from the Job Corps Community website. Center abatement activities must be documented in ATS. The ATS website can be accessed at: <http://ats.dol.gov/>.

Strategy:

- Does the safety officer have copies of the current PRH Sections 5.14-5.20 and all applicable policy directives?
- Does the safety officer update the center safety plan as needed?
- Does the safety officer understand the OSH Program Review process?
- Does the safety officer know how to prepare for the annual review?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Occupational Safety and Health Facility Survey (Pre-Occupancy)

- a. An occupational safety and health environmental facility survey (pre-occupancy) must be conducted before moving students into:
 1. a new center, dormitory, or classroom; or
 2. a facility that has been renovated so as to change any building structural system or major mechanical, electrical, plumbing, egress, or fire and safety system.
- b. Centers must contact the Regional Office (RO) project manager to schedule a pre-occupancy survey 30 days prior to project completion.
- c. The pre-occupancy survey must be coordinated through the RO and conducted by the center safety officer and/ or the National Office of Job Corps (NO). The NO will determine who will conduct the pre-occupancy inspection.
- d. Major deficiencies must be corrected before occupancy.
- e. The survey report will be distributed prior to occupancy, and it will be maintained by the NO, RO, and the center.

Strategy:

- Does the center understand the requirements for planning and funding construction, renovation, and demolition projects on center?
- Has the center received Regional Office approval for construction projects?
- Has the center coordinated with the Regional Office to schedule a pre-occupancy inspection?

- Has the National Office of Job Corps given the center permission to occupy the new building?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Monitoring of Work-Based Learning Sites

Centers are responsible for ensuring that students are placed in safe and healthful working conditions at work-based learning locations. However, Job Corps’ responsibility will not extend to reviewing or inspecting private employer businesses for compliance with OSHA standards because this authority rests only with OSHA.

To ensure the occupational safety and health of students at private employer work sites, appropriate career development staff and/or the center safety officer must:

- a. Visually survey the work site for potential hazards and discuss safety and health requirements with the employer.
- b. Ensure the employer signs a written agreement that specifically states that employer will provide students with safety and health protection which shall be at least as effective as that which is required under the Occupational Safety and Health Act of 1970 (29 U.S.C.) and 29 CFR parts 1910, 1926, and 1960.
- c. Monitor active work sites on a regular basis. If hazards are noted, the employer shall be requested to take corrective action. Students should be removed from work sites where hazards exist that could cause personal injury or impairment of the health of students.
- d. Document the injuries of students who are injured on work-based learning sites in the Safety and Health Information Management System (SHIMS), as they are covered by the Federal Employees’ Compensation Act (FECA).

Strategy:

- Has the center visually surveyed WBL sites and discussed safety hazards with the employer prior to students reporting for training?
- How often does the safety officer visit WBL sites?
- Is there a signed agreement between the center and WBL ensuring student safety and occupational health protection in accordance with the OSHA act?

- Interview students. Do they know how to report unsafe and/or unhealthy working conditions?
- Are they provided the proper personal protective equipment and task-specific safety training upon reporting for training?
- Do they know how to report injuries?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R6. Abatement Plans for Violations Identified in Annual Occupational Safety and Health (OSH) Program Review

a. Abatement Procedures and Timeframes

The following procedures shall be followed by centers and Regional Offices (ROs) in responding to safety and health violations cited during annual safety and health reviews:

1. As part of the OSH program review, the center will receive a detailed verbal briefing regarding all hazards identified. The center must immediately begin to address those concerns. A log of the corrected item(s) must be maintained, indicating what action was taken, by whom, and the date of action.
2. The center and the RO will receive a formal OSH program review report from the National Office of Job Corps (NO) within 60 days of a review. Violations must be documented manually on Form DL1-2029, Notice of Unsafe or Unhealthful Condition, which is to be created by the center. The violations documented on the DL1-2029 are the same as those documented in the Abatement Tracking System (ATS), which is the Web-based system designed to facilitate an information exchange between the reviewer, the RO, and the center, and to allow the NO to monitor case status to ensure prompt and timely hazard abatement.
3. The roles of each ATS user are as follows:
 - (a) At the national level, the NO inputs DL1-2029 center violation data into ATS and transmits the data to the RO to initiate tracking.

- (b) At the regional level, both the Job Corps Regional Director and the center's project manager are authorized to access ATS to view new cases transmitted from the NO and centers' abatement responses. Either individual in the RO can transmit the DL1-2029 in ATS to the Job Corps center. The RO can edit the center response and can close out the case only after all violations have been abated.
- (c) At the center level, the center director and the safety officer are authorized to access ATS to view new cases transmitted from the RO and can respond to violations. Most violations should be abated within 30 days. If abatement is not completed, an abatement plan is required. Centers can indicate in ATS whether the response is a corrective action or an abatement plan. Funding requests can also be indicated. After the center transmits the response electronically to the RO, the RO will determine whether to accept the abatement response in part or in whole.

Note: ATS is not capable of providing users e-mail notification, so the system should be checked frequently.

b. Posting Requirements

Official response to violations noted during the occupational safety and health review occurs via ATS. A copy of the paper DL1-2029, which must be created by the center, is to be posted by the center at or near each place where an unsafe or unhealthful condition is referred to in the notice. It must remain posted until all violations cited are abated, or for three (3) training days, whichever is longer.

Strategy:

- Does the center begin to abate identified hazards immediately after the OSH Program Review?
- Does the safety officer have an electronic copy of the DL1-2029?
- Does the safety officer post a DL1-2029 at or near each place where an unsafe or unhealthful condition was identified during the review?
- Does the safety officer have access to the Abatement Tracking System (ATS)?
- Does the safety officer update the ATS in a timely manner?
- Did the center post the DL 1-2029, Notice of Unsafe or Unhealthful Condition, for the last OSH program review? Request filed DL 1-2029.
- Has the center completed abatement of hazards identified during the last OSH program review? Check the Abatement Tracking System (ATS) to verify.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding environmental safety and occupational health.
- Q2. Residential and dining facilities are clean and neat in appearance.
- Q3. Few safety and health hazards are cited during inspections by the safety officer, during annual occupational safety and health (OSH) program reviews, and during environmental inspections.

PRH 5.15 Summary Rating:

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3		Q3	
R4			
R5			
R6			
Average		Average	

5.16 ENVIRONMENTAL HAZARDS

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. Hazardous Materials Management

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding hazardous waste generation, storage, and disposal.
 1. Centers that ship hazardous materials off center must comply with pre-transportation regulations per 49 CFR 262 Subpart C.
 2. Centers that store or handle hazardous materials, such as flammable/combustible materials, acids, caustics, compressed gases, oxidizers, etc., must comply with OSHA 1910 Subpart Z and all applicable substance-specific standards.
 3. Centers that use hazardous or toxic chemicals must comply with the regulations of the Emergency Planning and Community Right-to-Know Act (EPCRA) of 1986.
 4. Centers must notify the Environmental Protection Agency (EPA), the Job Corps Regional Director, and the National Office of Job Corps safety team leader when a release of hazardous substance occurs. A release includes any discharge, spill, or leak into the air, water, or land, as stipulated in 40 CFR 302.
 5. Emergency response to a spill or leak of hazardous materials must be performed by the local hazardous materials response team or licensed contractor.
 6. Chemical-specific information such as material safety data sheets (MSDSs) must be readily accessible to emergency response personnel.

Strategy:

- Review hazardous waste shipping manifests, containers, and container labels. Are centers complying with applicable federal regulations?
- Are hazardous materials stored in NFPA-approved storage containers and/or cabinets?
- Has the center experienced a hazardous material spill, leak, or release?
- How was the situation handled?
- Were necessary corrective actions taken to prevent future incidents?
- Has the center provided the local fire department and/or hazardous materials response team with copies of MSDS for all hazardous materials used on center?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Polychlorinated Biphenyls (PCBs)

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding polychlorinated biphenyls (PCBs) in electrical transformers.
 - 1. Centers that are using electrical equipment known to contain PCBs must register with the EPA’s Transformer Registration and PCB Activity Database. A copy of the registration certificate can be obtained from EPA and must be maintained on center indefinitely, and must be available for review upon request.
 - 2. Centers must prepare an inventory of all center equipment, including transformers, capacitors, fluorescent lights and ballasts, and hydraulic oils that may contain PCBs. The inventory shall include the following:
 - (a) Type of equipment, installation date, and manufacturer
 - (b) Overall condition
 - (c) Contact information for nearest PCB waste hauler

Strategy:

- Has the center completed an inventory of all equipment that may contain PCBs?
- Does the equipment show signs of deterioration or damage that may result in a spill or release of PCBs? (Spillage will look like oily, dirty water. Soil and grass will appear discolored or slick.)
- Does the inventory include the type of equipment, installation date, and manufacturer’s contact information?
- Does the inventory include the overall condition of the equipment?
- Does the center have the name and contact information for the nearest PCB waste hauler?
- Does the center have an EPA Transformer and PCB Activity registration certificate?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. *Underground Storage Tanks (USTs)/ Aboveground Storage Tanks (ASTs)*

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding underground storage tanks (USTs) and aboveground storage tanks (ASTs). Each center operator, center director, and safety officer must coordinate to ensure that all ASTs and USTs comply with 40 CFR Parts 112 and 280, and all applicable state requirements.

Strategy:

- Interview the safety officer. Do the tanks meet current federal and state requirements?
- Is the aboveground tank surrounded by a containment system that would prevent environmental contamination if the tank were overfilled or began to leak?
- Are there signs of leaking fuel oil or other hazardous materials?
- Has the center experienced a UST/AST leak, spill, or release?
- How was the situation handled?
- Were necessary corrective actions taken to prevent future incidents?
- How often are the tanks inspected?
- Who performs the inspection?
- Were deficiencies identified and how were they corrected?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Lead

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding lead-containing building materials.

Lead was a common paint additive used until 1978. Due to the age of many Job Corps center facilities, it is assumed that lead-based paint is present in buildings constructed prior to 1978 unless testing has proven otherwise. Centers that plan to disturb a surface that may contain lead must perform dust, air, and/or water sampling to determine the potential for exposure to lead. Centers in which there is a potential exposure to lead by students, staff, or young children (in child development or residential facilities) must develop a written lead-based paint compliance program in conformance with 29 CFR 1926.62 that includes the following:

1. Designation and training of a competent person, capable of identifying existing and predictable lead hazards in the surroundings or working areas and having the authority to take prompt corrective action.
2. Procedures to ensure that all CTST projects involving construction work will be tested for lead prior to initiation. No student or staff may be exposed to lead at concentrations greater than fifty micrograms per cubic meter of air (50 ug/m^3) averaged over an eight (8) hour period.
3. Procedures for notifying staff and students of the health hazards of lead-based paint. Inventory documentation must be maintained on center and with the National Office of Job Corps and Regional Office project manager.
4. Appropriate hazard warning will be posted in all regulated areas.
5. Annual student and staff awareness training will be provided in accordance with the minimum requirements of 29 CFR 1926.62.

Strategy:

- Does the center have buildings with lead-based paint?
- Are there signs posted in these areas?
- Are staff and students aware of lead-based paint hazards on center?
- Who is the lead-based paint coordinator/competent person?
- Are licensed contractors used to sample and remove lead-based paint prior to the start of CTST projects?
- Is there a lead-based paint inventory available?
- Who maintains the inventory?
- Is it current?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Asbestos Operations and Maintenance

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding asbestos-containing building materials (ACBM).
- b. ACBM not immediately removed must be managed as part of an Asbestos Operations and Maintenance (O&M) Program, in conformance with 29 CFR 1910.1001 and 40 CFR Part 763. Centers in which there are buildings containing ACBM must have an O&M program that includes the following:
 - 1. Documentation, including copies of the initial asbestos survey report, subsequent ACBM surveys or inspection reports, and all asbestos abatement records, and laboratory analysis and exposure monitoring results must be maintained on center in a centralized asbestos record depository indefinitely, and made available upon request.
 - 2. Designation of an Asbestos Coordinator who must be responsible for ensuring compliance with all asbestos regulations and policies. The designated Asbestos Coordinator must receive initial training in asbestos O&M within 1 month of appointment. Training must consist of a minimum of 16 hours of both classroom and practical asbestos O&M training provided by an EPA-accredited training provider.
 - 3. Provide annual asbestos awareness training for all employees (including custodial and maintenance employees) and contract employees. Initial training must consist of a minimum of two (2) hours of training in accordance with 29 CFR 1910.1001(j) within one (1) week of hire.
 - 4. Annual refresher training for the Asbestos Coordinator and all custodial/maintenance employees. Documentation of training must be maintained in the central asbestos record depository as well as the individual’s personnel file.
 - 5. Notification of the presence of asbestos within center buildings to all students and employees at least annually through a written notice or posting of a statement in the common areas of all buildings containing asbestos. The notice must contain a brief description of the location and

type of ACBM, and the name and contact information for the designated Asbestos Coordinator.

6. Posting of asbestos warning signs in all mechanical rooms, crawlspaces, custodial closets, or other work areas where maintenance or custodial employees may come into contact with ACBM. Warning signs must meet the requirements specified in 29 CFR 1910.1001, and must be posted so as to be visible immediately upon entering the room or workspace.
7. Include employees and contract employees working in areas where ACBM is present in the center's respiratory protection program and medical surveillance program.
8. Inspection of all ACBM in center buildings at least twice each year to verify the physical condition and identify any significant damage. Evidence of significant damage and/or other deterioration in physical condition that presents a potential health hazard must be reported to the National Office of Job Corps and Regional Office via the Significant Incident Reporting (SIR) system.
9. Repair or abatement of ACBM must be performed by licensed asbestos abatement contractors. Clean-up of damaged ACBM by Job Corps personnel is strictly prohibited.
10. Review and documentation of all CTST or center-managed renovation projects by the Asbestos Coordinator to ensure that no ACBM will be affected by the proposed project. The center's Asbestos Coordinator will ensure that the proper warning signs are posted in the work area per 29 CFR 1910.1001.

Strategy:

- Does the center have buildings with asbestos?
- Are signs posted in these areas?
- Is staff informed about areas where building materials containing asbestos are located?
- Who is the asbestos coordinator?
- Who coordinates asbestos removal?
- Does he or she review Career Technical Skills Training projects for asbestos exposure?
- How do the CTST coordinator and this individual ensure that students are not involved in asbestos abatement?
- Is there an asbestos operations and maintenance plan?
- Who maintains the plan?
- Is it current?
- Are licensed contractors used to sample and remove asbestos-containing building materials prior to the start of CTST projects?

- Are staff members trained to do small-scale asbestos abatement activities, i.e., glove-bag techniques used to remove pipe insulation?

- Identify the staff person who coordinates asbestos removal.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R6. Hazard Communication

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding chemical hazard communication. Each center operator, center director, and center safety officer must coordinate and ensure that hazards associated with the use of all chemicals produced or imported by chemical manufacturers or importers, and used by Job Corps students/staff, are evaluated. Such information concerning chemical hazards must be communicated to affected students and staff via a comprehensive written hazard communication program in accordance with 29 CFR 1910.1200. The center director must ensure that the safety officer or other designee structures the hazard communication program to include:
 1. A complete chemical inventory or master list of chemical products used on center and a process to keep the inventory current. The inventory must include the name of the product and the location(s) where it is used. Ensure that students and staff know the location of the chemical inventory.
 2. Organization and ongoing maintenance of Material Safety Data Sheets (MSDSs) for all chemical products purchased by or used at the center. MSDSs for chemical products used in a given area must be available to and easily accessible by all staff and students. MSDSs can be stored in a three-ring binder or be accessible via computer.
 3. Clearly readable identifying labels securely placed on all incoming containers of hazardous chemical products, and such labels are not removed or defaced. Chemicals transferred to other approved containers must be labeled accordingly as well. Labels must contain at least:
 - (a) Product identification

- (b) Hazard warning showing what parts of the body could be affected (HMIS or NFPA system)
 - (c) Name and address of the manufacturer or supplier
4. Supervisor/instructor maintenance of up-to-date MSDS file for each hazardous chemical product used within their respective areas.
5. Proper training and instruction delivered to all users of hazardous chemical products, including:
 - (a) Identification of such products
 - (b) The specific hazards associated with such products
 - (c) Measures that users can take to protect themselves (including PPE requirements)
 - (d) Methods and observations that may be used to detect the presence or release of hazardous chemicals
 - (e) Potential physical health effects of chemicals used in the workplace
6. Proper communication of chemical hazards associated with non-routine tasks.
7. An established and approved chemical products purchase list. MSDSs must be reviewed by the safety officer before the products are used in the workplace.

Strategy:

- Has the center conducted an inventory of all chemical products currently used on center?
- Does the center have a current MSDS for all chemical products currently used on center?
- Does the center properly dispose of chemical products currently not in use?
- Is there an inventory or list of chemical products no longer used on center?
- Is there an MSDS for chemical products no longer in use?
- What type of labeling system is used on center, NFPA (diamond) or HMIS (rectangle)?
- Who is responsible for managing the hazard communication program?
- Does the safety officer review the MSDS for chemicals before the products are used on center?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R7. Mercury

- a. Centers must comply with EPA standards, 40 CFR Part 261, Hazardous Waste Identification Regulations, 40 CFR Part 273, Universal Waste Regulations, as well as state and local regulations and Job Corps policy regarding mercury in fluorescent lamps and thermometers.
 - 1. Each center operator, center director, and safety officer must coordinate to ensure that all sources of mercury have been identified and are properly disposed of in accordance with the local/state health department or department of the environment regulations.
 - 2. All mercury-containing paints, batteries, thermometers, blood pressure meters, thermostats, light ballasts, etc., currently in use should be replaced when it is fiscally possible. Center students/staff are strictly prohibited from attempting to clean up spills or releases. Clean-up must be performed by the local fire department, hazmat team, or a licensed contractor.

Strategy:

- Has the center properly disposed of and replaced mercury-containing paints, batteries, blood pressure meters, thermostats, light ballasts, etc.?
- What is the center’s procedure for responding to mercury spills or releases?
- Interview students and staff. Are students and staff aware of mercury hazards on center?
- Do they know what to do if there is a spill or release?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R8. Freon 113 and Other Ozone-Depleting Chemicals

- a. Centers must comply with federal, state, and local regulations and Job Corps policy regarding Freon 113 and other ozone-depleting chemicals in the replacement and disposal of air conditioning and refrigerator units.
- b. Air conditioning and refrigeration units installed before 1995 that may contain ozone-depleting chemicals must be disposed of in accordance with federal and state hazardous materials regulations.

Strategy:

- Does the center have air conditioning and/or refrigeration units built and installed before 1995?
- Is the center planning to replace these units when it is fiscally possible?
- Is the center using EPA-certified technicians to service and maintain pre-1995 air conditioning and/or refrigeration units?
- Is the center participating in the EPA refrigerant recycling program?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R9. Hexavalent Chromium

- a. Centers must comply with OSHA standard 29 CFR 1910.1026 and Job Corps policy regarding hexavalent chromium (Cr(VI)).

1. Centers that offer trades that may potentially expose students/staff to hexavalent chromium (Cr(VI)) must develop, implement, and maintain an exposure control plan that contains the following minimum requirements:
 - (a) Trade(s) or center functions that may result in exposure
 - (b) Exposure-monitoring results for the affected trade(s) or center functions
 - (c) Engineering controls used to maintain Cr(VI) concentrations below the permissible exposure limit (PEL) and action level
 - (d) Personal protective equipment (PPE) required during performance of training or center function
 - (e) Method(s) of communicating hazards associated with Cr(VI) (See hazard communication training, Section 5.16, R6.)
2. Centers offering the welding trade must perform one round of initial and confirmation exposure monitoring no matter how often welding of stainless steel occurs. No additional monitoring is necessary if both the initial and confirmation sample results are below the PEL of $5.0 \mu\text{g}/\text{m}^3$ and the action level of $2.5 \mu\text{g}/\text{m}^3$ calculated as 8-hour time-weighted averages (TWAs).
3. Centers must maintain exposure monitoring results, and product MSDS on center for 30 years in accordance with 29 CFR 1910.1200 and 29 CFR 1910.1020.

Strategy:

- Does the center offer trades that may potentially expose students/staff to Cr(VI)?
- Has the center completed the required exposure monitoring?
- Does the center have an approved Cr(VI) exposure control plan?
- Are students and staff aware of the health hazards associated with exposure to Cr(VI)?
- Has the center performed an MSDS review to identify products that contain Cr(VI)?
- Does the center have an exemption from compliance requirements issued by the National Office of Job Corps?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding environmental hazards.

PRH 5.16 Summary Rating:

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2			
R3			
R4			
R5			
R6			
R7			
R8			
R9			
Average		Average	

5.17 FOOD HANDLING AND STORAGE, PEST CONTROL, UNSANITARY CONDITIONS, AND WATER TREATMENT

PURPOSE

- P1. To ensure that students and staff work and live in environmentally healthy surroundings.
- P2. To provide a training, living, and working environment that ensures the occupational safety and health of students and staff.

REQUIREMENTS

R1. Food Handling

Centers must ensure that food handling practices comply with the state, local, or U.S. Public Health Service Food Code, whichever is more stringent. Centers must develop and implement a Hazard Analysis and Critical Control Point (HACCP) program as outlined in Annex 4 of the U.S. Public Health Service Food Code. All meat products must meet U.S. Department of Agriculture standards.

Strategy:

- Observe food service practices for the following:
 - food service workers wearing hair nets, gloves, and aprons;
 - food items stored properly;
 - ice filters on automatic ice machines;
 - dishware storage in upright position;
 - lack of pests in food services and culinary arts areas (frequent pest control service utilized and documented);
 - fly fans at entrances to food service area; and
 - proper hot water temperature for dishwashers.
- Review quarterly environmental health inspections, annual DOL safety inspections, and the center's weekly safety and health inspection reports. Are there building code violations?
- Are the corrective actions designed to prevent future occurrences?
- Review the most recent local health inspection reports. Are there violations?
- If so, how did the center address them?
- Review previous reports and determine if the center has a history of compliance or non-compliance with local requirements.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Food Storage

Centers must ensure that storage of food complies with the state, local, or U.S. Public Health Service Food Code, whichever is more stringent, and does the following:

- a. Storage areas protect food from the elements, fire, rodents, insects, organisms, and other causes of spoilage.
- b. Chemicals, soaps, and poisons are properly labeled in accordance with Hazard Communication Standard (29 CFR Part 1910.1200) and stored separately from food.
- c. Storerooms are well ventilated and food items are stored a minimum of six (6) inches above the floor in a manner that protects the food from splash, dust, and other contamination and permits easy cleaning of the area. Exceptions are:
 - 1. Metal pressurized beverage containers and cased food packaged in cans, glass, or other waterproof containers, and milk containers in plastic crates.
 - 2. Containers stored on dollies, racks, or pallets, provided such equipment is easily moveable.
- d. Storerooms are free of exposed or unprotected sewer lines, water lines (except automatic fire protection sprinkler heads), uninsulated steam lines, water heaters, refrigeration condensing units, or other heat-producing devices.
- e. All refrigeration equipment (refrigerators and freezers) must be monitored to ensure proper temperature ranges are maintained at all times.
- f. Open food containers, cooked and fresh, are covered, labeled, and dated to ensure proper usage.

Strategy:

- Visit food storage areas. How is food stored?
- Are MSDS sheets available?
- Is there the potential for cross contamination of meats and vegetables?
- Are cleaning materials properly stored?

- Are refrigerators and freezers maintained at the proper temperature?
- Are the dry goods storage areas properly ventilated?
- Are the dry goods placed on racks or pallets off the floor?
- Are there signs of rodents and other pests?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Pest Control

Centers must:

- a. Take adequate measures to control insects and rodents in all areas. Only pesticides that are safe for use in food service areas shall be used in food service facilities.
- b. Ensure that pesticides are applied only by a licensed professional pest control contractor in food service, residential, and education facilities. The following information must be obtained from the contractor and kept on file for at least three (3) years:
 1. Name/type of chemicals used
 2. Amount of chemical applied
 3. Areas where applied and amount specific to location
 4. Date when applied
 5. MSDSs for the chemicals used
- c. Ensure that pesticides are not stored for usage on centers except those that are approved by EPA for use in landscaping and gardening projects. Proper training on storage, use, and application of these chemicals must be provided to staff and students.

Strategy:

- Check pest control plan; how often does the center arrange for pest control services?
- Who performs the pest control application?
- Check MSDS sheets for pesticides used.

- Is staff properly trained in the safe application of pesticides?
- Are staff members provided with appropriate PPE for use during pesticide application?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Unsanitary Conditions

In accordance with Section 5(a) of the Occupational Safety and Health Act of 1970, centers must ensure that staff and students are not required or permitted to reside, work, be trained, or receive services in buildings or surroundings that are unsanitary, hazardous, or lack proper ventilation.

Strategy:

- When walking through facilities, check for cleanliness of areas. Are signs posted in hazardous areas? Is there a plan to remediate any pending issues?
- Observe the state of cleanliness of residential and dining areas at various times during the day and evening. Are students actively involved in the care of the facilities?
- Is maintaining cleanliness a priority?
- Interview students and staff to determine the usual practices for maintaining a healthy living environment.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R5. Water Treatment

Centers must ensure that when non-municipal water and waste treatment facilities are used, the following requirements are met:

- a. Water supplies meet center needs and satisfy National Primary Drinking Water Regulations (40 CFR 142).
- b. Prior to construction or renovation, the standards or regulations of federal, state, and local health authorities are consulted. Renovation/building plans and specifications are sent to the National Office of Job Corps, with a copy to the Regional Office, for review.
- c. Records are maintained showing the amount of water treated, amount of chlorine used, daily free chlorine residual, and other data pertaining to water treatment.
- d. All required bacterial and chemical tests are performed by state or local health authorities, with the exception of the daily routine residual chlorine test that is to be conducted by center staff.
- e. The center complies with the water quality and related standards of the state and with the standards established by the Federal Water Pollution Control Act 33 U.S.C. 1251 et seq.
- f. Records are maintained documenting the water/waste water treatment pursuant to standards set by the EPA and local authorities and should be maintained on center indefinitely. Waste treatment problems are brought to the attention of the appropriate EPA coordinator and the Regional Office.
- g. Records of influent and effluent monitoring data are maintained as required by the plant's effluent discharge permit and other data pertaining to waste water treatment.
- h. The analysis of all influent and effluent, as required by the discharge permit, is performed by a certified laboratory.

Strategy:

- Review the center's SOPs or maintenance plan to ensure that it includes the listed systems.
- Is there public water or well water?
- How is well water maintained?
- Are plans for construction or renovation of water treatment facilities sent to the National Office of Job Corps with a copy to the Regional Office for review?
- Are water treatment records properly maintained?
- Are bacterial and chemical tests performed by state or local health authorities?
- Are records of tests performed by state and local health authorities properly maintained?
- Are influent and effluent records as required by the center's effluent discharge permit properly maintained?
- Is the required analysis of influent and effluent performed by a certified laboratory?

- Are analysis results properly maintained?
- How are water treatment deficiencies discovered through testing and analysis resolved?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding food sanitation and water treatment standards.
- Q2. Residential and dining facilities are clean and neat in appearance.

PRH 5.17 Summary Rating:

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
R5			
Average		Average	

5.18 STUDENT AND STAFF INJURY REPORTS AND RECORDKEEPING

PURPOSE

- P1. To ensure documentation of compliance with required elements of the center's occupational safety and health program and ensure compliance with OSHA and all other applicable statutes.
- P2. To notify appropriate officials that an injury, occupational illness/disease, or death has occurred.
- P3. To record hazards identified and corrective actions taken, indicate trends, and provide a basis for formulating future plans.
- P4. To permit an evaluation of progress being made in preventing accidents.
- P5. To document incidents for assurance of proper medical treatment and potential processing of claims.

REQUIREMENTS

R1. Student Injury, Occupational Illness/Disease, and Fatality Recordkeeping

Note: Occupational illness/disease in this context is defined as illness or disease acquired from/due to the Job Corps training and/or living environment (e.g., hearing loss, coronary/vascular condition, asbestos-related illness, carpal tunnel syndrome, etc.).

Student injuries and occupational illnesses/diseases must be documented in the Department of Labor's Safety and Health Information Management System (SHIMS). SHIMS is an electronic database that assists the Department in meeting the reporting requirements of both the Occupational Safety and Health Administration (OSHA) and the Office of Workers' Compensation Programs (OWCP). The only injuries and occupational illnesses/diseases that should not be documented in SHIMS are those that occur while the student is:

- at home on pass or leave;
- engaged in leisure time employment; or
- AWOL.

Regardless of the severity of the injury or occupational illness/disease, an incident will minimally require the submission, in SHIMS, of the two documents below:

- the OSHA 301, Injury and Illness Incident Report; and
- one of the forms below:
 1. OWCP CA-1, Notice of Traumatic Injury and Claim for Compensation
 2. OWCP CA-2, Notice of Occupational Disease and Claim for Compensation. The CA-2 submission is rarely used; if you think a CA-2 is warranted, contact the National Office.

Student fatalities are not documented in SHIMS. These incidents should be reported to the National Office of Job Corps immediately. Centers are required to complete the OWCP CA-6 manual form. The National Office will complete any other recordkeeping requirement.

A complete list of the OSHA and OWCP forms, and a description of their use, are below. Please note that all occupational safety and health records must be maintained for a 5-year period, unless otherwise indicated by a specific OSHA standard, the Department of Labor Manual Series (DLMS), or the PRH.

Electronic Forms Submitted in SHIMS

- a. **OSHA 301, Injury and Illness Incident Report**, is completed in SHIMS for each student injury or occupational illness in accordance with 29 CFR 1904. The OSHA form is required to be retained for 5 years.
- b. **OSHA 300, Log of Work-Related Injuries and Illnesses:** For OSHA 301 Incident Reports that are **work-related** (see definition in criterion 1, below), centers must maintain a single current log in SHIMS, known as the OSHA 300 Log. For an incident to be entered in the OSHA 300 Log, it must meet each of the three OSHA-recordable criteria below:
 1. The injury or occupational illness is work-related. For Job Corps purposes, this means that the injury or occupational illness occurred while the student was involved in training or educational activities;
 2. The injury or occupational illness represents a new case in the system; and
 3. The injury or occupational illness results in one or more of the following:
 - (a) Days away from work (training or educational activities)
 - (b) Restricted work or transfer to another job
 - (c) Medical treatment beyond first aid
 - (d) Loss of consciousness
 - (e) A significant injury or illness diagnosed by a physician or other licensed health care professional
 - (f) A needlestick or sharp injury exposing the student to another person's blood or potentially infection material
 - (g) A Standard Threshold Shift (STS) in hearing in one or both ears where the employee's total hearing level is at least 25 decibels above audiometric zero in the same ear(s) as the STS
 - (h) Exposure to persons with a case of active tuberculosis (TB), where the student subsequently develops a TB infection.

Student injuries resulting from horseplay while engaged in training or educational activities must be recorded as well. For example: Two students, while participating in welding instruction, engage in playful teasing and pushing. One student becomes angry and the teasing escalates to a fight. One student is injured,

resulting in medical treatment beyond first aid. The student injury must be recorded in the OSHA 300 Log in SHIMS.

The OSHA 300 Log is required to be retained for 5 years.

- c. **CA-1, Notice of Traumatic Injury and Claim for Compensation**, is completed in SHIMS within 7 calendar days of supervisor notification.

In the event that an injury requires separation from Job Corps, center staff must obtain National Office approval prior to forwarding a CA-1 to OWCP. When the CA-1 is filed with OWCP at separation, a CA-16 manual form, Authorization for Examination and/or Medical Treatment, and an OWCP-1500 manual form, the Health Insurance Claim Form, are sent to the provider. If the injury is not severe enough to cause separation, the CA-1 should be completed, electronically filed in SHIMS within 7 calendar days of supervisor notification, printed, signed by the student, and filed in the student's health folder.

- d. **CA-2, Notice of Occupational Disease and Claim for Compensation**, is rarely used in Job Corps because there are very few cases of occupational disease or illness related to enrollment in Job Corps. If such a situation does occur, contact the National Office of Job Corps before filing a CA-2.

Manual Forms

- e. **CA-6, Official Supervisor's Report of Employee's Death**, is filed with the OWCP district office if a student dies as a result of an illness/injury incurred while in performance of duty. In the event of a student fatality, the center director should notify OWCP immediately by telephone or fax and mail the CA-6 to the OWCP district office. Do not document student fatalities in SHIMS.

The center director must report student fatalities to the National and Regional Offices within 6 hours of the event via Significant Incident Report (SIR).

- f. **CA-7, Claim for Compensation Due to Traumatic Injury or Occupational Disease:** Unlike other federal employees, Job Corps students are not eligible for continuation of pay for 45 days. However, they may submit a CA-7 after medical separation to receive compensation for injury or illness. The center should complete the CA-7 and have the student sign and date Section 7 of the form. In the event that the student is unable to sign the CA-7, the center director may sign as his or her authorized representative.

Upon National Office approval to forward a CA-1 or CA-2 to OWCP in SHIMS, the center should fax or e-mail a copy of the completed CA-7 to the National Office for submission to OWCP. The National Office must file the copy sent to them by the center with OWCP within 5 days of the student's signature.

The original CA-7, signed by the student, should be filed in the student's health folder.

- g. **CA-16, Authorization for Examination and/or Treatment:** Whenever a student separates from Job Corps and needs examination and/or treatment as a

result of traumatic injury, the center director should issue a CA-16 to the physician or medical facility. This form authorizes the injured student's examination and/or treatment from a physician or medical facility. When a CA-2 is electronically submitted to OWCP in cases of separation because of work-related illness or disease, a CA-16 is issued only if prior approval is obtained from OWCP. If a CA-16 is submitted, do not submit a CA-20.

This form provides OWCP with an initial medical report and the physician or medical facility with a billing form for emergency treatment. Issuance of the CA-16 authorizes OWCP to pay medical expenses incurred.

Part A is completed by the student's supervisor and submitted to the physician or medical facility within 48 hours of examination and/or treatment. Part B is completed by the attending physician as promptly as possible after initial examination and sent to the appropriate OWCP district office.

When there is a need for medical follow-up for the work-related injury by a second health care provider, the center should mail the name and address of that provider to OWCP or instruct the student (in writing) to do so.

- h. **OWCP-1500 (also known as HCFA-1500)—Health Insurance Claim Form:** This form accompanies the CA-16 to all medical care providers, except hospitals. It is issued by health care providers to bill the OWCP district office for services rendered.
- i. **CA-20, Attending Physician's Report:** This report provides medical support of claims for compensation. It is submitted to OWCP upon completion of the medical examination and treatment. It is also used to provide additional medical information regarding the claim. If a CA-20 is submitted, do not submit a CA-16.

Strategy:

- Have injuries to staff and/or students occurred?
- Is there an established process for reporting student injuries to the SHIMS recordkeeper, i.e., student→staff→SHIMS recordkeeper?
- Interview SHIMS recordkeeper. What is the process for reporting a student injury?
- Is the center documenting student injuries in SHIMS? Verify by identifying CA-1s (from SHIMS) filed in student medical folders and/or check SHIMS for filed cases.
- Are SHIMS entries appropriate? Verify that the center is filing SHIMS for injuries and not diseases/illnesses or incidents in which there was no injury.
- What type of injuries are students sustaining, and is there a pattern?
- If so, has the center implemented any new policies to address it?
- Are injuries reported as required via the Significant Incident Report (SIR) system?

- Did the center forward CA-1s for students medically separated due to injury, and complete and submit the CA-16 and CA-7 as required? Verify by checking SHIMS and the student’s medical folder.
- Did the center complete the CA-6 in the event of a student death?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Definitions and Procedures for Handling Job Corps Student Injuries

a. Job Corps Injuries Designated “First Aid”

1. First aid is defined as any one-time treatment, and any follow-up visit for the purpose of observation, of minor scratches, cuts, burns, or splinters, which does not ordinarily require medical care. Such one-time treatment and follow-up visits are considered first aid even if they are provided by a physician or other registered professional personnel.
2. First aid injuries must be documented in SHIMS.
3. The following procedures are generally considered first aid treatment (e.g., one-time treatment and subsequent observation of minor injuries):
 - (a) Application of antiseptics during initial visit to medical personnel
 - (b) Treatment of first degree burn(s)
 - (c) Application of bandage(s) during any visit to medical personnel
 - (d) Use of elastic bandage(s) during initial visit to medical personnel
 - (e) Removal of foreign bodies from wound if procedure is uncomplicated (e.g., by tweezers or other simple technique)
 - (f) Use of nonprescription medications and administration of single dose of prescription medication on initial visit for minor injury or discomfort
 - (g) Soaking therapy on initial visit to medical personnel or removal of bandages by soaking

- (h) Application of hot or cold compress(es) during first visit to medical personnel
 - (i) Application of ointments to abrasions to prevent drying or cracking
 - (j) Application of heat therapy during first visit to medical personnel
 - (k) Negative x-ray diagnosis
 - (l) Observation of injury during visit to medical personnel
4. The administration of a tetanus shot or booster by itself is not considered medical treatment. However, these shots are often given in conjunction with more serious injuries; consequently, injuries requiring these shots may be filed in SHIMS for other reasons.

b. More Serious Injuries Not Resulting in Student's Separation

1. This category includes injuries that result in medical treatment beyond first aid, but do not require a medical separation but are serious enough to need a specialized referral.
2. An example of this type of injury would be: a student sustained a strain or sprain, but is able to continue training with restrictions.
3. These injuries must be documented in SHIMS.

Some examples of this category of injury are:

- (a) Fractures
- (b) Head injuries with loss of consciousness
- (c) Positive x-ray diagnosis
- (d) Lacerations with nerve or tendon damage
- (e) Injuries needing sutures/SteriStrips/adhesive butterfly
- (f) Foreign body embedded in the eye
- (g) Jaw fractures/dental damage
- (h) Treatment of infection
- (i) Treatment of 2nd or 3rd degree burns
- (j) Food poisoning
- (k) Dislocated shoulder

c. Injuries Resulting in Separation From Job Corps

1. This category includes injuries resulting in the student's death or serious injuries that result in the student's separation from Job Corps.
2. An example of this type of injury would be: a student sustained a traumatic injury in the performance of duty that requires surgery, additional medical treatment that can not be provided on center, or the student can no longer perform in the program.

3. These injuries must be documented in SHIMS.
4. Section 8143 of the Federal Employees’ Compensation Act (FECA) states that while students are enrolled in Job Corps, students are considered employees of the federal government for purposes of medical coverage under FECA. The “performance of duty” does not include an act of an enrollee while absent from his or her assigned post of duty, except while participating in an activity (including an activity while on pass or during travel to or from the post of duty) authorized by or under the direction and supervision of Job Corps.

Strategy:

- Are student injuries appropriately classified as “first aid,” “not medically separated,” and “medically separated”?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Staff Injury, Occupational Illness/Disease, and Fatality Recordkeeping

Note: Staff is defined as all contractors, federal employees, and temporary employees who work at a Job Corps center.

All work-related staff injuries and occupational illnesses must be documented in the Department of Labor’s Safety and Health Information Management System (SHIMS) in accordance with 29 CFR 1960 Subpart I and 29 CFR 1904. These regulations require that a single OSHA 300 Log be maintained for each federal agency establishment; each Job Corps center is classified as an establishment. As such, all work-related injuries and occupational illnesses suffered by federal employees and contractors at the establishment must be captured on the same OSHA 300 Log. This requirement has no bearing on the requirements of the corporate office or other federal agency.

Centers are only required to report the death of a staff member if the fatality occurs while in duty status on or off center. The center director must report staff deaths to the National and Regional Offices within 6 hours of the event via Significant Incident Report (SIR).

A CA-1 or CA-2 is never completed for staff in the Department of Labor’s SHIMS.

- a. **OSHA 301, Injury and Illness Incident Report**, is completed in SHIMS for each staff injury or occupational illness in accordance with 29 CFR 1904. The OSHA form is required to be retained for 5 years.
- b. **OSHA 300, Log of Work-Related Injuries and Illnesses:** All centers must maintain a single current log in SHIMS of all **work-related** accidents, injuries, and occupational illnesses incurred by students and staff in accordance with 29 CFR 1904. The OSHA 300 Log is required to be retained for 5 years.

Staff injuries resulting from horseplay while engaged in work-related tasks or activities must be recorded as well. For example: Two staff members engage in playful teasing and pushing while repairing a piece of equipment. One staff member becomes angry and the teasing escalates to a fight. One staff member is injured, resulting in medical treatment beyond first aid. The staff injury must be recorded in SHIMS.

Strategy:

- Are staff injuries documented in SHIMS?
- Are staff injuries recorded to the center’s OSHA 300 Log, which is maintained in SHIMS?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. OSHA Form 300A, Summary of Work-Related Injuries and Illnesses

Each year, Job Corps centers are required to post OSHA Form 300A, also called the OSHA 300A Summary, from February 1 through April 30 in accordance with 29 CFR 1904.32. OSHA Form 300A summarizes data contained in the OSHA 300 Log, which is maintained electronically in SHIMS, for the calendar year just prior to posting for the purpose of notifying students and staff of the injuries that have occurred on center. This report may be generated through SHIMS reports.

Following the required 3-month posting period, the OSHA 300A must be retained for 5 years.

Strategy:

- Does the center generate the OSHA Form 300A each year and post it from February 1 through April 30?
- Does the center retain the OSHA 300A for 5 years?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Centers document student and staff injuries and occupational illnesses in accordance with federal, state, and local regulations and Job Corps policy.
- Q2. Centers report all staff and student injuries and fatalities within the time frames required by federal standards and Job Corps policy.

PRH 5.18 Summary Rating:

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2		Q2	
R3			
R4			
Average		Average	

5.19 VEHICLE SAFETY AND ACCIDENT RECORD KEEPING

PURPOSE

- P1. To ensure student and staff safety while traveling in government vehicles on and off center.
- P2. To ensure documentation of accidents involving government vehicles.

REQUIREMENTS

R1. Overview of Center Director Responsibilities

Each center director must be responsible for:

- a. Administration of the motor vehicle safety program.
- b. A program for training, testing, and licensing students.
- c. A comprehensive vehicle maintenance and inspection program.
- d. Promotion and incentive awards programs to encourage traffic safety.
- e. Compliance with state and local motor vehicle laws.
- f. An effective accident investigation and analysis system.
- g. An on-center system of traffic control to include appropriate signs and lines.

Strategy:

- Is the center director actively involved in managing the center's motor vehicle safety program?
- Does the center have a program for training, testing, and licensing students?
- Is there a comprehensive vehicle maintenance and inspection program?
- Are vehicles that do not pass the vehicle inspection taken out of service for repair?
- Is there an incentive awards program to encourage and promote traffic safety?
- Are center drivers complying with state and local motor vehicle laws?
- Who is responsible for paying fines and penalties for parking and/or moving violations incurred while driving center vehicles?
- What disciplinary action(s) are taken against center staff for parking and/or moving violations while operating center vehicles?
- Is there a motor vehicle accident investigation and analysis program in place?
- Is there an on-center system of traffic control, including appropriate signs and lines?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Overview of Requirements

- a. Government-owned or leased vehicles (collectively, GOV) shall be operated by individuals meeting the following qualifications:
 - 1. Drivers must possess a valid state driver’s license.
 - 2. Drivers must possess a valid federal employee identification or Job Corps identification.
- b. Student operation of GOV must be authorized by the center director and limited to driver’s training only.
- c. All over-the-road vehicles must be equipped with fire extinguishers, emergency warning lights, and well-maintained first aid kits.
- d. In GOV, all drivers and passengers must wear seat belts in all over-the-road vehicles (except buses). When infants and/or children are being transported, restraints must meet applicable state requirements.
- e. Drivers shall not engage in text messaging when operating GOV, or when driving privately-owned vehicles (POV) while on official Government business, or when using electronic equipment supplied by the Government while driving.
- f. No vehicle will be loaded (with personnel or materials) beyond the vehicle’s rated capacity.
- g. Students will not be transported in the back bed of a pickup truck or other open-bed vehicle unless such vehicle has been equipped with appropriately designed and constructed seating and safety restraints.
- h. If a bus has an auxiliary gas tank that powers the air conditioner, the vehicle must have that tank properly guarded.
- i. Aisles in buses and vans must be kept free of luggage, tools, and equipment.
- j. No bus transporting students or staff shall have the emergency door locked or constricted.
- k. All vehicles that are driven by staff and students on center must meet appropriate federal and state safety requirements.

1. All 15-passenger vans currently leased or owned by Job Corps contractors and agencies are modified and operated in a manner that decreases known risks associated with operating the vehicles. Job Corps contractors and agencies are permitted to retain 15-passenger vans that are currently in their GSA fleet inventory in accordance with the guidelines and restrictions detailed below; however, additional 15-passenger vans may not be purchased, leased, or rented.
 1. All 15-passenger vans will carry a maximum of 10 passengers, including the driver. If there is need to transport more than 10 passengers, it must be done using a higher capacity vehicle, or by using multiple smaller vehicles.
 2. Center directors will implement a program for drivers of 15-passenger vans that will provide training, an operational test, and a written test that will target the safety, operational, and maintenance requirements of these vans. This program is required in addition to the driver’s license.
 3. Roof racks must be removed, except those that carry only light loads (e.g., ladder rack, rowing oars, etc.). No loads over 60 pounds should be placed on the roof.
 4. Rear seats must be removed.

Strategy:

- Are center students authorized to operate government-owned or -leased vehicles for activities other than driver training?
- What is the center’s policy regarding student use of center vehicles?
- Is center staff aware of the Executive Order banning texting while operating government-owned or -leased vehicles?
- Are signs posted reminding staff and students of the ban on text messaging while operating government-owned or -leased vehicles?
- Does the center own or operate 15-passenger vans?
- Does the center have a training program for drivers of 15-passenger vans?
- Do the 15-passenger vans have rear seats?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Vehicle Accident Record Keeping

a. SF-91, Operator’s Report of Motor Vehicle Accident

The operator of any government vehicle involved in an accident will complete an SF-91 form at the scene of the accident, if possible. The center will develop procedures to ensure that copies of the SF-91, and other applicable forms, are available in each vehicle, including privately owned vehicles, rentals, and GSA vehicles used for official business.

b. SF-91A, Investigation Report of Motor Vehicle Accident

This report is used for motor vehicle accidents resulting in vehicle and/or property damage over \$500, or disabling work injuries including fatalities caused by a motor vehicle accident.

Strategy:

- Are there procedures in place to ensure that SF-91s and other applicable forms are available in all center vehicles?
- Are there procedures in place for reporting and investigating accidents involving center motor vehicles?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Centers comply with federal, state, and local regulations and Job Corps policy regarding vehicle safety and recordkeeping.

PRH 5.19 Summary Rating:

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2			
R3			
Average		Average	

5.20 OCCUPATIONAL SAFETY AND HEALTH (OSH) PROGRAM AND WRITTEN PLANS

PURPOSE

- P1. To develop, implement, and evaluate a safety and occupational health program that includes written plans in accordance with 29 CFR 1960, the OSHA Act of 1970, Executive Order 12196, and Job Corps policy.
- P2. To develop and document all of the plans described in the following requirements, if applicable.

REQUIREMENTS

R1. *Personal Protective Equipment (PPE) Plan*

In accordance with 29 CFR 1910.132, centers are required to develop, implement, and maintain a written PPE plan and program that includes at least the following:

- a. Perform hazard assessments for all trades and/or work areas to assess the need for personal protective equipment (PPE). Maintain hazard assessment records that identify hazards and risks, and document the type of PPE required. Develop procedures to notify the safety officer when new processes are introduced or when existing processes change.

Note: If a new trade is introduced, a hazard assessment must be performed to determine PPE needs according to training activities. Hazard assessment based upon other trades and activities cannot be the bases of the PPE requirements for a new trade.

- b. Select PPE based on hazard assessments by the trade supervisor in conjunction with the safety officer. Methods for selecting PPE are well-documented, appropriate, and properly implemented.
- c. Develop a PPE training program that will address student and staff needs. The written training program includes:
 1. When PPE use is necessary
 2. What PPE is necessary
 3. How to properly don (put on), doff (remove), adjust, and wear PPE
 4. The proper care, maintenance, useful life, and disposal of PPE
- d. Maintain PPE training records for students and staff for three (3) years. Additional retention requirements are as follows:
 1. Retain student training records for one (1) year following completion of training or termination of enrollment.
 2. Retain staff training records for one (1) year following resignation or termination of employment.

- e. Establish procedures to inspect, clean, and maintain PPE. Ensure that supervisors, staff, and students are trained in these procedures and follow the established criteria.
- f. Establish procedures to remove damaged equipment from service.

Strategy:

- Does the center have a written PPE program?
- Does the plan include the following elements?
 1. When PPE use is necessary
 2. What PPE is necessary
 3. How to properly don (put on), doff (remove), adjust, and wear PPE
 4. The proper care, maintenance, useful life, and disposal of PPE
- Has the center performed a hazard assessment to determine the need for PPE?
- Are supervisors, managers, and career technical trade instructors involved in the hazard assessment?
- Are the results of the hazard assessment documented?
- Interview students: Are students knowledgeable about the PPE required for their career technical trade?
- Are the students able to demonstrate how to properly don (put on), doff (remove), adjust, and wear PPE?
- What are the procedures for removing damaged PPE from service?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R2. Fire Safety and Prevention Plan

All centers must develop and implement a fire safety and prevention plan that addresses the National Fire Protection Association (NFPA) Life Safety Code 101 requirements as referenced in 29 CFR 1910.39 and 1910.157.

Centers will establish a policy, based upon the proximity to emergency response personnel (i.e., fire and/or hazardous materials response teams) that specifies full evacuation or incipient stage fire suppression by staff in response to a fire alarm.

a. Fire Prevention Plan

The center safety office will perform the following activities to ensure that students and staff are familiar with all center fire alarms and evacuation procedures:

1. Center safety officers will perform and log monthly inspections of:
 - (a) Fire alarm systems
 - (b) Sprinkler systems
 - (c) Illuminated exit signs
 - (d) Emergency lighting
 - (e) Fire extinguishers
2. Centers will conduct monthly fire drills during high student/staff activity levels and when students are in the dormitories. Center safety officers will document the accountability and timeliness of fire drills.
3. Centers will establish and implement a fire watch plan, included as part of the fire prevention plan, to be implemented when there is a nonfunctional alarm system. The fire watch plan will include the following:
 - (a) Establish fire warden and security staff duties and responsibilities
 - (b) Establish minimum required equipment for security staff
 - (c) Establish process for reporting fires and notifying building occupants

b. Fire Safety Plan Elements

The safety officer must ensure that at least the following elements are included in the fire safety plan:

1. List of major fire hazards and proper handling and storage procedures for hazardous materials
2. List of all potential ignition sources, control procedures, and the type of fire protection equipment or suppression system used to control a fire
3. List of staff responsible for maintaining fire protection equipment or systems to prevent or control ignition fires
4. List of staff responsible for control of fuel source hazards
5. List of staff responsible for sounding alarms and contacting local fire department or other appropriate officials
6. Evacuation and accountability procedures, including the posting of evacuation maps, assembly areas, and maintaining safe distance from affected buildings until areas are cleared for occupancy

7. Emergency notification telephone numbers
8. List of temporary shelters and contacts
9. List of staff responsible for assessing damage to center and coordinating re-entry to center or affected buildings
10. List of staff responsible for communications with local media, Regional Office, and National Office of Job Corps

c. Training

All centers must provide ongoing fire prevention and fire extinguisher training for staff and students according to their roles and responsibilities within the fire prevention plan. Training resources include state or local fire marshals, insurance companies, universities, or the Occupational Safety and Health Administration (OSHA). Training programs must be tailored to center location, offerings, and programs, and must include the following elements, as appropriate:

1. Fire wardens and security staff
 - (a) Fire classes and the appropriate extinguishing agent
 - (b) Proper maintenance and use of fire extinguishers
 - (c) Evacuation and accountability procedures, as defined by NFPA Life Safety Code
 - (d) Proper use of warning equipment/alarm systems
 - (e) Fire watch system and alternative warning systems
 - (f) Fire warden responsibilities
 - (g) Fire safety inspections, including housekeeping practices, flammable and combustible waste materials accumulation, and inspection and maintenance of fire equipment or systems
2. Students
 - (a) Assigned evacuation routes and assembly areas
 - (b) Procedures for reporting a fire or potential for fire
 - (c) Procedures for disposal of combustible and flammable materials
 - (d) Location of smoking areas and receptacles
3. Staff
 - (a) Proper use of fire extinguishers
 - (b) Assigned evacuation routes and assembly areas
 - (c) Procedures for reporting a fire or potential for fire
 - (d) Procedures for disposal of combustible and flammable materials
 - (e) Location of smoking areas and receptacles

d. Documentation

Documentation of fire safety training, drills, and inspections must be maintained on center for three (3) years and made available for review upon request.

- e. Incipient Fire Suppression and Portable Fire Extinguishers
1. OSHA defines “incipient fire” as a fire in the initial or beginning stage that can be controlled or extinguished using a portable fire extinguisher, Class II standpipe, or small hose system without the need for protective clothing or equipment (e.g., breathing apparatus). OSHA requires centers to provide fire extinguishing equipment for incipient fire. However, OSHA allows centers to address incipient fires and building evacuation in two ways:
 - (a) evacuation of all or most of the building’s occupants to a safe area without attempting to fight the fire; or
 - (b) evacuation of all building occupants except those who are properly trained and designated to use portable fire extinguishers.
 2. Fire prevention plans must comply with 1910.157, Portable Fire Extinguishers, according to the center’s established policy concerning incipient fires.
 3. Incipient fire fighting should be based upon a thorough hazard assessment, and proximity and response time of local fire department or emergency response team.

Strategy:

- Does the center have a fire prevention plan that includes monthly inspections of fire alarms, sprinkler systems, illuminated exit signs, emergency lighting, and fire extinguishers?
- Are monthly fire drills conducted?
- Are the results of the fire drills documented?
- Are procedures in place to make changes to improve fire drill evacuation times?
- Does the center have a written fire watch plan?
- Does the center have a written fire prevention plan that includes the following elements?
 1. List of major fire hazards and proper handling and storage procedures for hazardous materials
 2. List of all potential ignition sources, control procedures, and the type of fire protection equipment or suppression system used to control a fire
 3. List of staff responsible for maintaining fire protection equipment or systems to prevent or control ignition fires
 4. List of staff responsible for control of fuel source hazards
 5. List of staff responsible for sounding alarms and contacting local fire department or other appropriate officials

6. Evacuation and accountability procedures, including the posting of evacuation maps and assembly areas, and maintaining safe distance from affected buildings until areas are cleared for occupancy
7. Emergency notification telephone numbers
8. List of temporary shelters and contacts
9. List of staff responsible for assessing damage to center and coordinating re-entry to center or affected buildings
10. List of staff responsible for communications with local media, Regional Office, and National Office of Job Corps

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R3. Emergency Action Plan

Centers are required to develop an emergency action plan (EAP) in accordance with 29 CFR 1910.38 if fire extinguishers are located in each building and students and staff are required to evacuate the building in the event of fire or other emergency.

- a. Emergency Action Plan (EAP) Elements
 1. Procedures to handle hazards and threats including:
 - (a) Natural disasters typical for the geographic area in which the center is located; e.g., earthquakes, hurricanes, tornadoes, severe/extreme weather, blackouts, utility failures, and weather-related conditions.
 - (b) Criminal activity including arson/fire, bomb threats, suspicious packages, vandalism, civil disturbance, and weapons on center.
 - (c) Terrorist threats including radioactive, biological, or cyber attacks.
 - (d) Medical emergencies, such as pandemic influenza or food poisoning (*E. coli* or *Salmonella*) outbreaks.
 - (e) Other hazards specific to the surrounding area, such as hazardous materials spills or explosion.

2. A list of emergency personnel and contact information. The center director or his or her designee shall act as the responsible official during the emergency.
3. The center director or his or her designee must ensure that an emergency coordinator and area/floor monitors are identified, and ensure that assistance is available for the physically challenged.
4. Procedures for emergency situations that require centers to shelter-in-place, evacuate, and provide for mass care for students and staff.
5. Identification of assembly areas on and off center for students and staff to relocate depending upon the nature of the emergency.
6. Evacuation route maps indicating emergency exits, primary and secondary evacuation routes, location of fire extinguishers and fire alarm pull stations, and assembly points must be posted in all center buildings, including but not limited to:
 - (a) Residential facilities
 - (b) Child development centers, if applicable
 - (c) Academic facilities
 - (d) Food service facilities
 - (e) CTT facilities and classrooms
 - (f) Recreation areas
 - (g) Warehouse(s)
 - (h) Center maintenance
 - (i) Administration facilities
7. Procedures for staff required to remain on center after an evacuation to perform critical activities (e.g., shut down utilities) and secure the center.
8. Procedures to account for students and staff after evacuation to assembly areas on and off center, including students training or working off center at the time of the emergency.
9. Procedures for transporting students and staff to off-center assembly areas, including students training or working off center.
10. Procedures for staff and students responsible for providing medical assistance. The plan should also provide for instances when individuals responsible for providing medical assistance are not available.
11. An alarm system must be implemented that provides a distinctive sound or tone for each purpose (type of emergency and procedure) in accordance with 29 CFR 1910.165.
12. Procedures for returning the center to normal operations following an emergency. Procedures should be emergency-specific.

- b. Emergency Response Drills
 1. Centers must perform fire drills on a monthly basis. The drills should be performed during normal business hours and after hours.
 2. Centers shall participate in federal, state, and local emergency preparedness drills, including terrorist attack and pandemic outbreak response, when possible.
 3. Centers shall establish and maintain contact with federal, state, and local emergency response coordinators to ensure that current information regarding emergency response procedures is maintained.
 4. All drill and post-drill activities designed to improve student and staff performance during drills must be documented and kept on file in the safety officer's office and made available upon request.
 5. Copies of drill performance and improvement reports must be maintained on the center for year (3) years and made available for review upon request.
 6. Centers shall coordinate with the local emergency management authority, local health department, and local fire department to participate in federal, state, or local emergency response drills.

Strategy:

- Does the center have a written emergency action plan that includes the following elements?
1. Procedures to handle hazards and threats, including:
 - (a) Natural disasters typical for the geographic area in which the center is located; e.g., earthquakes, hurricanes, tornadoes, severe/extreme weather, blackouts, utility failures, and weather-related conditions.
 - (b) Criminal activity including arson/fire, bomb threats, suspicious packages, vandalism, civil disturbance, and weapons on center.
 - (c) Terrorist threats including radioactive, biological, or cyber attacks.
 - (d) Medical emergencies, such as pandemic influenza or food poisoning (*E. coli* or *Salmonella*) outbreaks.
 - (e) Other hazards specific to the surrounding area, such as hazardous materials spills or explosion.
 2. A list of emergency personnel and contact information. The center director or his or her designee shall act as the responsible official during the emergency.
 3. The center director or his or her designee must ensure that an emergency coordinator and area/floor monitors are identified, and ensure that assistance is available for the physically challenged.

4. Procedures for emergency situations that require centers to shelter-in-place, evacuate, and provide for mass care for students and staff.
 5. Identification of assembly areas on and off center for students and staff to relocate depending upon the nature of the emergency.
 6. Evacuation route maps indicating emergency exits, primary and secondary evacuation routes, location of fire extinguishers and fire alarm pull stations, and assembly points must be posted in all center buildings, including but not limited to:
 - (a) Residential facilities
 - (b) Child development centers, if applicable
 - (c) Academic facilities
 - (d) Food service facilities
 - (e) CTT facilities and classrooms
 - (f) Recreation areas
 - (g) Warehouse(s)
 - (h) Center maintenance
 - (i) Administration facilities
 7. Procedures for staff required to remain on center after an evacuation to perform critical activities (e.g., shut down utilities) and secure the center.
 8. Procedures to account for students and staff after evacuation to assembly areas on and off center, including students training or working off center at the time of the emergency.
 9. Procedures for transporting students and staff to off-center assembly areas, including students training or working off center.
 10. Procedures for staff and students responsible for providing medical assistance. The plan should also provide for instances when individuals responsible for providing medical assistance are not available.
 11. An alarm system must be implemented that provides a distinctive sound or tone for each purpose (type of emergency and procedure) in accordance with 29 CFR 1910.165.
 12. Procedures for returning the center to normal operations following an emergency. Procedures should be emergency-specific.
- Does the center perform hazard-specific emergency response drills?
 - Are the results of the drills documented?
 - Are procedures in place to make changes to improve emergency response drill evacuation times?
 - Does the center participate in federal, state, and local emergency response planning committees?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R4. Hazard Communication Plan

(See PAG Section 5.16, R6.)

R5. Recreational Safety Plan

- a. Water Safety (See Chapter 3, Section 3.18, R5.)
 - 1. Job Corps centers operating swimming pools shall incorporate the Centers for Disease Control and Prevention (CDC) chlorine disinfection timetable for killing common germs.
 - 2. Cleaning and disinfecting procedures shall also include the area surrounding the pool, including chairs, towels, floors, etc., to prevent the onset of recreational water-related illnesses.
 - 3. Provide staff and students with awareness training on the prevention of recreational water-related illnesses.
 - 4. Ensure that swimming pool areas are secured after hours to prohibit unauthorized access.
 - 5. Post proper warning signs, safety rules, and emergency response procedures.
 - 6. Ensure that necessary rescue equipment is maintained in good working order and easily accessible.
- b. General Recreational Safety

The center director must:

 - 1. Ensure that students receive adequate training prior to engaging in recreational activities such as weight lifting, basketball, arts and crafts, etc.
 - 2. Provide supervision during recreational activities to ensure that students follow proper techniques and are fit for the activity, thereby not placing the participant’s safety at above-normal risk and reducing the risk of injury.

3. Advise students that “horseplay” is not tolerated during recreational activities.
 4. Ensure that all recreational facilities and equipment are of safe design and free of known hazards.
 5. Ensure that recreational and athletic equipment purchases meet safety guidelines established by agencies nationally recognized by the Consumer Product Safety Commission (CPSC).
- c. Gymnasium and Recreational Equipment
1. Gym equipment must be positioned to allow for an unrestricted route of egress from the area during an emergency.
 2. Personal protective equipment such as helmets, padding, wrap-around eye protection, and gloves must be provided for students involved in recreational activities such as:
 - (a) Bicycling
 - (b) Skateboarding
 - (c) Rollerblading
 - (d) Racquet ball
 3. Recreational facilities and equipment must be inspected daily. Damaged equipment must be immediately removed from use and repaired or replaced as soon as fiscally possible.
- d. Competitive Sports
- To ensure student and staff safety and security during on- and off-center events, centers are encouraged to prepare plans that contain the following elements, at minimum:
1. Consider limiting participants and spectators to current Job Corps students and staff.
 2. Ensure that there is sufficient supervision for off-center games and events. The recommended ratio is one (1) staff member for every five (5) students.
 3. Coordinate security arrangements between visiting and host centers in advance of each activity. Visiting centers shall provide a list of team members, Job Corps spectators, and player family members at least one (1) week prior to the event. Limit entry into events to pre-approved spectators with proper identification.
 4. Host centers are encouraged to arrange for additional security through local law enforcement when there is a history of past serious incidents.
 5. Communicate safety and security procedures to athletes, staff, and spectators prior to the event.

Strategy:

- Does the center have a swimming pool?
- Is the CDC chlorine disinfection timetable for killing common germs part of the pool maintenance plan?
- Is the pool area properly secured to prohibit unauthorized access after hours?
- Are the proper warning signs, safety rules, and emergency response procedures posted?
- Is the necessary rescue equipment properly maintained and easily accessible?
- Observe recreational activities: Are students properly trained on weight room equipment?
- Are the recreational activities adequately supervised?
- Does the recreational and athletic equipment meet Consumer Product Safety Council minimum safety guidelines?
- Are gymnasium and/or indoor pool emergency exits easily accessible?
- Are students provided with the appropriate PPE for the sport or activity?
- Does the center have a plan to address student safety and security during on- and off-center competitive sports events?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal			Satisfactory		Very Good		Exceptional
Rationale for Rating:									

R6. Asbestos Operations and Maintenance Plan

(See PAG Section 5.16, R5.)

R7. Confined Space Entry Plan

a. Overview

A confined space is one that is large enough and configured in a manner that would allow a person to enter the space to perform work. The space has limited or restricted means of entry or exit and is not designed for continuous human occupancy. Hazards may also exist in the space, such as combustible gases, toxic materials, or mechanical or electrical hazards, or the space may be oxygen deficient.

A confined space entry plan is not necessary if:

1. there are no confined spaces on center; or

2. students and staff are prohibited from entering or performing work in any confined space.
- b. Confined Space Inventory
1. Centers must conduct a survey to identify and label all confined spaces located on center. Each space must be identified as “non-permit required” or “permit required.”
 - (a) A permit-required confined space is one that contains one or more of the following characteristics:
 - (1) Contains or has the potential to contain a hazardous atmosphere
 - (2) Contains a material that has the potential for engulfment or entrapment
 - (3) Has an internal configuration such that an entrant could be trapped or asphyxiated
 - (4) Contains any other serious safety hazard
 - (b) Non-permit required confined space does not contain or have the potential to contain a hazardous atmosphere or any other hazard capable of causing death or serious physical harm.
 - (c) Re-evaluate all confined spaces annually and maintain documentation.
 - (d) Permit-required confined spaces are marked as such with appropriate signage.
 - (e) Ensure that permit-required confined spaces are locked or blocked to deter access (if possible).
 2. Centers that require students, staff, or contractors to perform work in confined spaces are required to develop, implement, and maintain a confined space entry program in accordance with 29 CFR 1910.146. The plan must consist of the following elements:
 - (a) Designated confined space entry coordinator
 - (b) Entrant and supervisor responsibilities
 - (c) Non-permit required confined space entry procedures
 - (d) Location-specific, permit-required confined space entry procedures
 - (e) List of center departments and/or career technical training trades that require confined space entry
 - (f) Emergency procedures
 - (g) Training and documentation of training
 3. Maintain confined-space-entry training records for students and staff for three (3) years. Additional retention requirements are as follows:

- (a) Retain student training records for one (1) year following completion of training or termination of enrollment.
 - (b) Retain staff training records for one (1) year following resignation or termination of employment.
4. Maintain cancelled entry permits for one (1) year.

Strategy:

- Does the center have a confined space inventory?
- Are the center’s confined spaces properly labeled?
- Does the center require staff and/or students to perform work in confined spaces?
- Does the center have a confined space entry plan that includes the following elements:
 - (a) Designated confined space entry coordinator
 - (b) Entrant and supervisor responsibilities
 - (c) Non-permit-required confined space entry procedures
 - (d) Location-specific, permit-required confined space entry procedures
 - (e) List of center departments and/or career technical training trades that require confined space entry
 - (f) Emergency procedures
 - (g) Training and documentation of training
- Are training records for staff and students properly maintained?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R8. Bloodborne Pathogens Plan

- a. Centers must develop, implement, and maintain a Bloodborne Pathogens Control Plan that is in compliance with the OSHA Occupational Exposure to Bloodborne Pathogens; Needlestick and Other Sharp Injuries; Final Rule (29 CFR 1910.1030). The plan, which is submitted to the Regional Office, must be reviewed and approved by the regional health consultant. Once the plan has been approved, the plan should not be submitted again until at least one of the following occurs:

1. New or revised PRH or regulatory standards necessitate revision of the plan;
 2. Center introduces a new trade resulting in new potential exposure to bloodborne pathogens; or
 3. New engineering controls, including safer equipment or procedures, are introduced.
- b. The plan must contain the following minimum requirements:
1. Identification of job classifications where there is high, medium, or low risk of exposure to blood or other potentially infectious materials.
 2. Explanation of the protective measures in effect to prevent occupational exposure to blood or other potentially infectious materials and a schedule and methods of compliance to be implemented.
 3. Schedule and method of implementation for administering Hepatitis B vaccination and conducting post-exposure evaluation and follow-up.
 - a. Job classifications with high risk of exposure shall be provided the Hepatitis B vaccine.
 - b. Job classifications with medium risk of exposure should be offered the vaccine or administered the vaccine as needed (i.e., post-exposure vaccine).
 - (1) Staff trained in CPR and first aid and required to render aid in an emergency as part of their job duties must be offered the Hepatitis B vaccine or administered the vaccine as stated above.
 - c. Job classifications with low risk of exposure should be administered the vaccine as needed (i.e., post-exposure vaccine).
 4. Schedule and method of implementation for communicating hazards to employees.
 5. Schedule and method of implementation for record keeping.
 6. Procedures for evaluating the circumstances of an exposure incident.

Note: Regardless of job classification, individuals who decline the Hepatitis B vaccine must sign a declination form in accordance with 29 CFR 1910.1030 Appendix A.

Strategy:

- Has the center developed a bloodborne pathogens plan that contains the following elements?
1. Identification of job classifications where there is high, medium, or low risk of exposure to blood or other potentially infectious materials.
 2. Explanation of the protective measures in effect to prevent occupational exposure to blood or other potentially infectious materials, and a schedule and methods of compliance to be implemented.

3. Schedule and method of implementation for administering Hepatitis B vaccination and conducting post-exposure evaluation and follow-up.
 - a. Job classifications with high risk of exposure shall be provided the Hepatitis B vaccine.
 - b. Job classifications with medium risk of exposure should be offered the vaccine or administered the vaccine as needed (i.e., post-exposure vaccine).
 - (1) Staff trained in CPR and first aid and required to render aid in an emergency as part of their job duties must be offered the Hepatitis B vaccine or administered the vaccine as stated above.
 - c. Job classifications with low risk of exposure should be administered the vaccine as needed (i.e., post-exposure vaccine).

Note: Regardless of job classification, individuals who decline the Hepatitis B vaccine must sign a declination form in accordance with 29 CFR 1910.1030 Appendix A.

4. Schedule and method of implementation for communicating hazards to employees.
5. Schedule and method of implementation for record keeping.
6. Procedures for evaluating the circumstances of an exposure incident.

- Does the center require CPR and first aid trained staff to render aid in an emergency?
- Are these staff members offered the Hepatitis B vaccine?
- Are they included in the center’s bloodborne pathogens plan?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R9. Respiratory Protection Plan

- a. Centers must develop and implement a respiratory protection program, including a written plan in accordance with 29 CFR 1910.134, if any of the following conditions exist:

1. center offers trades that could potentially expose students or staff to airborne contaminants that meet or exceed the OSHA eight (8) hour permissible exposure limits (PELs) or action levels for known respiratory hazards;
 2. asbestos-containing building materials (ACBMs) are present and may be disturbed during routine maintenance, housekeeping, renovation, or demolition activities;
 3. lead-based paint or other materials are present and may be disturbed during renovation and demolition activities; or
 4. students and staff are exposed or may be potentially exposed to airborne contaminants and disease through contact with individual(s) engaged in providing student and staff health services or engaged in allied health training.
- b. Centers are not required to implement a written respiratory protection program if filtering face piece respirators (i.e., dust masks) are used on a voluntary basis and there is no potential for airborne particulate levels to meet or exceed the OSHA eight (8) hour PEL or action levels.
- Note:** Voluntary use of tight-fitting, negative pressure air-purifying or powered air-purifying respirators requires a written plan, in accordance with 29 CFR 1910.134, Appendix D.
- c. Centers must identify and evaluate respiratory hazards in the workplace through:
1. air sampling and exposure monitoring;
 2. NIOSH trade-specific data regarding airborne contaminants; or
 3. general or construction industry accepted best practices.
- d. The respiratory protection program must contain worksite-specific procedures and elements for required respirator use.
- e. Center director or his or her designee must select a respiratory protection program coordinator to manage the center's respiratory protection program.
- f. The written respiratory protection plan must contain the following elements:
1. respirator selection procedures and criteria that ensure that exposure to hazardous substances occurs at or below maximum use concentrations
 2. medical surveillance for staff and students required to wear respirators
 3. fit-testing procedures for tight-fitting respirators
 4. procedures for the proper use of respirators in routine and emergency situations
 5. procedures and timelines for cleaning, disinfecting, storing, inspecting, repairing, discarding, and general maintenance of respirators
 6. procedures for ensuring air quality, quantity, and flow of breathing air for atmosphere-supplying respirators if applicable

7. Student and staff initial and annual refresher training that includes:
 - (a) potential respiratory hazards during routine or emergency situations
 - (b) proper use, donning, removal of respirators
 - (c) limitations of respirator use
 - (d) regular maintenance of respirators
8. Procedures for evaluating the effectiveness of the program
9. Medical evaluations conducted by a licensed health care professional in accordance with 29 CFR 1910.134(e)(1) through (e)(7)(iv)
10. Maintenance of respiratory protection training records for students and staff for three (3) years. Additional retention requirements are as follows:
 - (a) Retain student training records for one (1) year following completion of training or termination of enrollment.
 - (b) Retain staff training records for one (1) year following resignation or termination of employment.
- g. Centers must establish a cartridge change-out schedule in accordance with OSHA and manufacturers' recommendations to ensure cartridge effectiveness.
- h. Qualitative and quantitative fit-testing of tight-fitting respirators shall be done in accordance with 29 CFR 1910.134 Appendix A, Fit Testing Procedures (Mandatory). Fit-testing of respirators used to protect against asbestos or lead exposure shall be done in accordance with the appropriate OSHA standards.

Strategy:

- Does any one of the following conditions exist on center?
 1. Center offers trades that could potentially expose students or staff to airborne contaminants that meet or exceed the OSHA eight (8) hour permissible exposure limits (PELs) or action levels for known respiratory hazards.
 2. Asbestos-containing building materials (ACBMs) are present and may be disturbed during routine maintenance, housekeeping, renovation, or demolition activities.
 3. Lead-based paint or other materials are present and may be disturbed during renovation and demolition activities.
 4. Students and staff are exposed or may be potentially exposed to airborne contaminants and disease through contact with individual(s) engaged in providing student and staff health services or engaged in allied health training.
- Does the center have a respiratory protection plan?
- Has the center developed a respiratory protection plan that contains the following elements?

1. Respirator selection procedures and criteria that ensure that exposure to hazardous substances occurs at or below maximum use concentrations
2. Medical surveillance for staff and students required to wear respirators
3. Fit-testing procedures for tight-fitting respirators
4. Procedures for the proper use of respirators in routine and emergency situations
5. Procedures and timelines for cleaning, disinfecting, storing, inspecting, repairing, discarding, and general maintenance of respirators
6. Procedures for ensuring air quality, quantity, and flow of breathing air for atmosphere-supplying respirators if applicable
7. Student and staff initial and annual refresher training that includes:
 - (a) Potential respiratory hazards during routine or emergency situations
 - (b) Proper use, donning, removal of respirators
 - (c) Limitations of respirator use
 - (d) Regular maintenance of respirators
8. Procedures for evaluating the effectiveness of the program
9. Medical evaluations conducted by a licensed health care professional in accordance with 29 CFR 1910.134(e)(1) through (e)(7)(iv)

- Are training records properly maintained?
- Are medical evaluations and exposure monitoring results properly maintained?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R10. Hearing Conservation Plan

- a. Centers must conduct noise monitoring at least every other year to identify potential sources of hazardous noise or whenever new noise sources are introduced into the working or training environment.

- b. Centers must identify hazardous noise areas with warning signs or markings to ensure that hearing protection is used in those areas.
- c. Centers must develop and implement a hearing conservation program in accordance with 29 CFR 1910.95 if the following conditions exist:
 1. Results of noise measurements have identified hazardous noise sources that may result in staff or student exposures that exceed 85dB (decibels).
 2. Exposure monitoring indicates that student and staff noise exposures equal or exceed an eight (8) hour time weighted average (TWA) of 85dB measured on the A-scale (slow response) or fifty percent (50%) dose.
- d. The hearing conservation program (HCP) must consist of the following elements:
 1. Monitoring program that identifies students and/or staff for inclusion in the HCP and to facilitate selection of appropriate hearing protectors.
 2. Audiometric testing to monitor staff and students whose exposures equal or exceed an eight (8) hour TWA of 85dB, including:
 - (a) Baseline audiogram to be administered within six (6) months of the initial exposure equal to or in excess of 85dB to be compared against subsequent audiograms.
 - (b) Audiograms administered at least annually following the baseline audiogram.
 - (c) Audiogram evaluation.
 - (d) Purchase of audiometric testing equipment is not required. However, if the center conducts audiometric testing, equipment and the testing environment must meet the requirements set forth in 29 CFR 1910.95, Appendices C and D.

If the center does not conduct audiometric testing, the center must ensure that individuals included in the hearing conservation program are administered audiograms in accordance with the OSHA standard.
 - (e) Audiometric testing must be performed by a licensed or certified audiologist, otolaryngologist, or other physician, or by a technician certified by the Council of Accreditation in Occupational Hearing Conservation, or who has demonstrated competence in administering audiometric examinations, obtaining valid audiograms, and properly using, maintaining, and checking calibration and proper function of the audiometers being used.

A technician who performs audiometric tests using a microprocessor audiometer does not need to be certified but must be responsible to an audiologist, otolaryngologist, or physician.
 - (f) Centers located in rural areas that are not equipped to conduct audiometric testing on center or find it difficult to locate audiometric testing centers must contact the Job Corps Regional

Office project manager who will contact the National Office of Job Corps safety representative.

3. Hearing protector evaluation for specific hazardous noise environments to ensure attenuation to below 85dB. Evaluation methods should be conducted in accordance with 29 CFR 1910.95 Appendix B, "Methods for Estimating the Adequacy of Hearing Protection Attenuation."
4. Selection and distribution of hearing protectors.
 - (a) Hearing protectors must be provided at no cost to staff or students.
 - (b) The hearing protectors selected should be appropriate for the task and provide the required noise attenuation.
 - (c) Students and staff who have not yet had a baseline audiogram should be issued hearing protection.
 - (d) Students or staff who have experienced a standard threshold shift must be issued hearing protectors.
5. Training that will be administered annually that includes but is not limited to the following:
 - (a) Effects of noise on hearing
 - (b) Purpose of hearing protectors
 - (c) Disadvantages, attenuation of various types of hearing protectors
 - (d) Instructions on selection, fitting, use, and care of hearing protectors
 - (e) Purpose of audiometric testing and an explanation of the test procedures
6. Staff and students, or their representatives, must have access to monitoring results, audiometric test results, and training materials in accordance with 29 CFR 1910.95.
7. Centers must maintain records as follows:
 - (a) Exposure monitoring results are maintained for two (2) years.
 - (b) Audiometric testing results are maintained for the duration of the student's enrollment and the duration of staff employment.
 - (c) Student and staff hearing protection attenuation and selection, and training records are maintained for two (2) years.
8. Centers must retain all records associated with the hearing conservation program, upon transfer of center operations to another operator.

Strategy:

- Has the center conducted noise monitoring in the last 24 months?
- Are warning signs or markings in place to identify hazardous noise areas?

- Interview safety officer. Are center staff and/or students exposed to noise levels that meet or exceed 85dB?
- Does the center have a hearing conservation program that includes the following elements:
 1. Monitoring program that identifies students and/or staff for inclusion in the HCP and to facilitate selection of appropriate hearing protectors.
 2. Audiometric testing to monitor staff and students whose exposures equal or exceed an eight (8) hour TWA of 85dB, including:
 - (a) Baseline audiogram to be administered within 6 months of the initial exposure equal to or in excess of 85dB, to be compared against subsequent audiograms.
 - (b) Audiograms administered at least annually following the baseline audiogram.
 - (c) Audiogram evaluation.
 - (d) Purchase of audiometric testing equipment is not required. However, if the center conducts audiometric testing, equipment and the testing environment must meet the requirements set forth in 29 CFR 1910.95, Appendices C and D.

If the center does not conduct audiometric testing, the center must ensure that individuals included in the hearing conservation program are administered audiograms in accordance with the OSHA standard.
 - (e) Audiometric testing must be performed by a licensed or certified audiologist, otolaryngologist, or other physician, or by a technician certified by the Council of Accreditation in Occupational Hearing Conservation, or who has demonstrated competence in administering audiometric examinations, obtaining valid audiograms, and properly using, maintaining, and checking calibration and proper function of the audiometers being used.

A technician who performs audiometric tests using a microprocessor audiometer does not need to be certified, but must be responsible to an audiologist, otolaryngologist, or physician.
 - (f) Centers located in rural areas that are not equipped to conduct audiometric testing on center or find it difficult to locate audiometric testing centers must contact the Job Corps Regional Office project manager who will contact the National Office of Job Corps safety representative.
 3. Hearing protector evaluation for specific hazardous noise environments to ensure attenuation to below 85dB. Evaluation methods should be done in accordance with 29 CFR 1910.95 Appendix B, "Methods for Estimating the Adequacy of Hearing Protection Attenuation."
 4. Selection and distribution of hearing protectors.

- (a) Hearing protectors must be provided at no cost to staff or students.
 - (b) The hearing protectors selected should be appropriate for the task and provide the required noise attenuation.
 - (c) Students and staff who have not yet had a baseline audiogram should be issued hearing protection.
 - (d) Students or staff who have experienced a standard threshold shift must be issued hearing protectors.
5. Training that will be administered annually that includes, but is not limited to, the following:
- (a) Effects of noise on hearing
 - (b) Purpose of hearing protectors
 - (c) Disadvantages, attenuation of various types of hearing protectors
 - (d) Instructions on selection, fitting, use, and care of hearing protectors
 - (e) Purpose of audiometric testing and an explanation of the test procedures
6. Staff and students, or their representatives, must have access to monitoring results, audiometric test results, and training materials in accordance with 29 CFR 1910.95.
7. Centers must maintain records as follows:
- (a) Exposure monitoring results are maintained for two (2) years.
 - (b) Audiometric testing results are maintained for the duration of the student’s enrollment and the duration of staff employment.
 - (c) Student and staff hearing protection attenuation and selection, and training records, are maintained for two (2) years.
8. Centers must retain all records associated with the hearing conservation program, upon transfer of center operations to another operator.

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

R11. Lead Exposure Plan

(See PAG Section 5.16, R4.)

R12. Hexavalent Chromium Exposure Plan

(See PAG Section 5.16, R9.)

R13. Lockout/Tagout Plan

- a. Centers must develop written procedures for the control of hazardous energy in accordance with 29 CFR 1910.147 if students and staff are responsible for servicing or performing maintenance of machines or equipment.
- b. A lockout/tagout plan is not required when:
 1. servicing equipment that is powered by plugging into an electrical outlet and is under complete control of the individual performing the work; or
 2. making normal adjustments, including minor tool changes and other minor servicing activities that take place during normal production operations which are routine, repetitive, and integral to the use of that production equipment, as long as workers are effectively protected by alternative measures that provide effective machine safeguarding protection.
- c. When a written lockout/tagout plan is required, the program must include the following minimum elements:
 1. Name of the machines or equipment and purpose of the procedure
 2. Compliance requirements (policy)
 3. Type of compliance enforcement for violation of policy
 4. Name of students or staff affected and method of communication
 5. Name of students or staff authorized to perform lockout/tagout
 6. Type and magnitude of energy, its hazards, and the methods to control the energy
 7. Type and location of machine or equipment operating controls
 8. Type and location of energy isolating devices; lockout/tagout devices are sufficient in number, uniform, legible, understandable, and durable
 9. Types of stored energy—methods to dissipate or restrain
 10. Methods of verifying the isolation of the equipment
 11. Training for affected and authorized students and staff
 12. Method for evaluating lockout/tagout procedures at least annually and documenting results
 13. Procedures for removing locks/tags when the owner of the lock or tag is not available
 14. Plan is updated when changes in process, equipment, procedures, or audit warrants revision

Strategy:

- Are staff and students responsible for servicing or performing maintenance of machines or equipment?
- Is the serviced equipment or machine powered by plugging into an electrical outlet and is it under complete control of the individual performing the work? (If yes, a plan is not required.)
- Does the service include normal tool changes or adjustments that are part of normal production operations? (If yes, a plan is not required.)
- Does the center have a lockout/tagout plan that includes the following elements:
 1. Name of the machines or equipment and purpose of the procedure
 2. Compliance requirements (policy)
 3. Type of compliance enforcement for violation of policy
 4. Name of students or staff affected and method of communication
 5. Name of students or staff authorized to perform lockout/tagout
 6. Type and magnitude of energy, its hazards, and the methods to control the energy
 7. Type and location of machine or equipment operating controls
 8. Type and location of energy isolating devices; lockout/tagout devices are sufficient in number, uniform, legible, understandable, and durable
 9. Types of stored energy—methods to dissipate or restrain
 10. Methods of verifying the isolation of the equipment
 11. Training for affected and authorized students and staff
 12. Method for evaluating lockout/tagout procedures at least annually and documenting results
 13. Procedures for removing locks/tags when the owner of the lock or tag is not available
 14. Plan is updated when changes in process, equipment, procedures, or audit warrants revision

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	

Rationale for Rating:

R14. Powered Industrial Vehicle Plan

- a. Centers that own or provide access to gas-powered or electric-powered fork trucks, tractors, platform lift trucks, motorized hand trucks (pallet jacks) or other specialized vehicles must develop a written powered industrial vehicle plan.
- b. The plan must address the requirements outlined in 29 CFR 1910.178.
- c. The plan must also include:
 1. Complete list of covered vehicles
 2. Fuel handling and storage procedures (if applicable)
 3. Battery charging, changing, and storage procedures (if applicable)
 4. Spill response procedures and fire prevention
 5. Areas where trucks are used
 6. Operator training
 7. Daily inspection process
 8. Process for removing vehicles from service
- d. Powered industrial truck operators must be at least 18 years of age in accordance with the Fair Labor Standards Act.
- e. Operator training must be conducted by a certified trainer and the training must be in accordance with 29 CFR 1910.178(l).

Strategy:

- Does the center own or provide staff and/or student access to gas-powered or electric-powered fork trucks, tractors, platform lift trucks, motorized hand trucks (pallet jacks), or other specialized vehicles?
- Does the plan include the following elements:
 1. Complete list of covered vehicles
 2. Fuel handling and storage procedures (if applicable)
 3. Battery charging, changing, and storage procedures (if applicable)
 4. Spill response procedures and fire prevention

- 5. Areas where trucks are used
 - 6. Operator training
 - 7. Daily inspection process
 - 8. Process for removing vehicles from service
- Are student operators at least 18 years of age?
 - Is powered industrial truck training conducted by certified trainer?

0	1	2	3	4	5	6	7	8	9
Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
Rationale for Rating:									

QUALITY INDICATOR(S)

- Q1. Center management fully implements all required occupational safety and health plans and actively promotes and maintains a safe and healthy living and working environment on center for students and staff.

PRH 5.20 Summary Rating:

Requirement	Rating	Quality Indicator	Rating
R1		Q1	
R2			
R3			
R4			
R5			
R6			
R7			
R8			
R9			
R10			
R11			
R12			
R13			
R14			
Average		Average	

Sample Consolidated Rating Matrix

As noted in the PAG Preamble, Regional Offices have flexibility in weighting the scores of OA, Center, and CTS assessments based on a variety of factors. OA, Center, and CTS contracts all require assessment of the Management sections, but to varying extents.

Regional Directors and/or Division Chiefs should develop the matrix prior to the assessment so that the review team understands what areas need to be reviewed and how the ratings are to be established.

Below is a sample matrix for use on OA/CTS Assessments.

SAMPLE OA/CTS CONTRACT MATRIX

Management Job Corps Center	Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
	0	1	2	3	4	5	6	7	8	9
Program Compliance Rating	Rating Based Upon PRH Requirements									
5.1 Program Management										
5.2 Personnel										
5.3 Staff Training										
5.5 Management of SIRs										
5.6 Procurement & Property Management										
5.7 Financial Management										
5.11 Facilities Maintenance & Protection										
5.14 Introduction to Environmental Safety and Occupational Health										
5.15 Safety Inspections, Observations, and OSH Program Review										
5.16 Environmental Hazards										
5.17 Food Handling and Storage, Pest Control, Unsanitary Conditions, and Water Treatment										
5.18 Student and Staff Injury Reports and Record Keeping										
5.19 Vehicle Safety and Accident Record Keeping										
5.20 OSH Program and Written Plans										
Average Compliance Rating										
Program Quality Rating	Rating Based Upon PRH Quality Indicators									
5.1 Program Management										
5.2 Personnel										
5.3 Staff Training										
5.5 Management of SIRs										
5.6 Procurement & Property Management										
5.7 Financial Management										
5.11 Facilities Maintenance & Protection										

5.14 Introduction to Environmental Safety and Occupational Health										
5.15 Safety Inspections, Observations, and OSH Program Review										
5.16 Environmental Hazards										
5.17 Food Handling and Storage, Pest Control, Unsanitary Conditions, and Water Treatment										
5.18 Student and Staff Injury Reports and Record Keeping										
5.19 Vehicle Safety and Accident Record Keeping										
5.20 OSH Program and Written Plans										
Average Quality Rating										

The matrix above does not provide for any additional emphasis on specific PRH requirements or Quality Indicators. Regions have the flexibility to add specific requirements or Quality Indicators that they would like to emphasize as part of the assessment process.

Below is a sample matrix for use on Job Corps Center Assessments.

SAMPLE JOB CORPS CENTER CONTRACT MATRIX

Management Job Corps Center	Unsatisfactory		Marginal		Satisfactory		Very Good		Exceptional	
	0	1	2	3	4	5	6	7	8	9
Program Compliance Rating	Rating Based Upon PRH Requirements									
5.1 Program Management										
5.2 Personnel										
5.3 Staff Training										
5.4 Personal Safety & Security										
5.5 Management of SIRs										
5.6 Procurement & Property Management										
5.7 Financial Management										
5.9 Facility Standards										
5.10 Facility Improvements										
5.11 Facilities Maintenance & Protection										
5.12 Energy and Water Conservation										
5.13 Fleet Management										
5.14 Introduction to Environmental Safety and Occupational Health										
5.15 Safety Inspections, Observations, and OSH Program Review										
5.16 Environmental Hazards										
5.17 Food Handling and Storage, Pest Control, Unsanitary Conditions, and Water Treatment										
5.18 Student and Staff Injury Reports and Record Keeping										
5.19 Vehicle Safety and Accident Record Keeping										
5.20 OSH Program and Written Plans										
Average Compliance Rating										
Program Quality Rating	Rating Based Upon PRH Quality Indicators									
5.1 Program Management										
5.2 Personnel										
5.3 Staff Training										
5.4 Personal Safety & Security										
5.5 Management of SIRs										
5.6 Procurement & Property Management										
5.7 Financial Management										
5.9 Facility Standards										
5.10 Facility Improvements										
5.11 Facilities Maintenance & Protection										
5.12 Energy and Water Conservation										
5.13 Fleet Management										

5.14 Introduction to Environmental Safety and Occupational Health										
5.15 Safety Inspections, Observations, and OSH Program Review										
5.16 Environmental Hazards										
5.17 Food Handling and Storage, Pest Control, Unsanitary Conditions, and Water Treatment										
5.18 Student and Staff Injury Reports and Record Keeping										
5.19 Vehicle Safety and Accident Record Keeping										
5.20 OSH Program and Written Plans										
Average Quality Rating										

The sample center matrix gives each functional area similar weight. PRH 5.8 is not included as it is not intended for regional assessments. Regions may want to separate procurement and property functions, and consolidate facility and safety functions.