

# RECOMMENDATIONS

## The Timely Manner of Completion



There are several locations throughout the Process Safety Management (PSM) standard where recommendations could be established. Each instance requires facility management to understand the intricacies of the requirements. When asked where recommendations could be made, most will think Process Hazard Analysis (PHA) and Compliance Audits. But overwhelmingly overlooked are Management of Change, Pre-Startup Safety Review, and Incident Investigation.

### PROCESS HAZARD ANALYSIS

Typically understood are the requirements for addressing PHA recommendations [1910.119(e)(5) & (7)]. A facility is required to do the following:

- establish a system to promptly address the PHA team's findings and recommendations;
- assure that the recommendations are resolved in a timely manner and that the resolution is documented;
- document what actions are to be taken;
- complete actions as soon as possible;
- develop a written schedule of when these actions are to be completed;
- communicate the actions to operating, maintenance and other employees whose work assignments may be affected by the recommendations or actions; and
- retain the resolution of recommendations for the life of the process.

As implied with the use of words like “promptly”, “timely manner”, and “as soon as possible,” OSHA is requiring a relatively quick turnaround on addressing recommendations. However, there are facilities that will allow recommendations to go unaddressed indefinitely. This has led the California Office of Emergency Services (OES) to revise the California Accidental Release Prevention (CalARP) Program regulation, requiring PHA/Hazard Review recommendations be completed within two and a half (2.5) years of performing the PHA/Hazard Review [Sections 2755.2(e)/ 2760.2(e)].

In addition, this list of recommendations must also accompany a written schedule of completion. Once completed, the resolution of completion needs to be documented. This could mean attaching copies of invoices, work orders, pictures, etc., or referencing the location where the proof of completion can be found. Although not specifically spelled out in the PSM regulation, actual completion dates should be documented as well. Finally, like the actual PHA report itself, this file comprising of the recommendation list, schedule, resolutions, and supporting evidence of completion must be kept for the life of the process.

### COMPLIANCE AUDITS

Similarly, the OSHA requirements under Compliance Audits [1910.119(o)(4)] require the facility to promptly determine and document an appropriate response to each of the findings of the compliance audit, and document that deficiencies have been corrected. And like the PHA recommendations going unnoticed, OES has modified the CalARP regulation to require these audit findings to be addressed not later than one and a half (1.5) years after performing the compliance audit [Sections 2755.6(d)/2760.8(d)].

Unlike the PHA which requires the resolution to be maintained for the life of the process, documentation for Compliance Audits is only needed to be maintained for the two most recent audits.

### MANAGEMENT OF CHANGE

Facilities are required to review the impact of a change on safety and health as part of the Management of Change process. Depending on the significance of the change, the existing PHA may be reviewed and updated as part of assessing the impact to health and safety. Recommendations resulting from these

reviews are often overlooked as the main focus is typically on meeting project deadlines to startup the modified process. When the project is completed, the MOC paperwork is filed away and the recommendations are forgotten. The PSM regulation does not specifically call out the resolution of recommendations resulting from the MOC process. However, it can be implied that recommendations resulting from PHA reviews and updates should be addressed in accordance with the PHA requirements listed above. To ensure the recommendations do not go unnoticed, facilities are encouraged to include a verification within the MOC paperwork that the recommendations have been resolved. And similar to initial PHAs and five year revalidations, the revised/updated PHA report resulting from the MOC, as well as the recommendation list, schedule, resolutions, and supporting evidence of completion, should be kept for the life of the process.

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### PRE-STARTUP SAFETY REVIEW

Typically not realized is the requirement under OSHA's Pre-Startup Safety Review [1910.119(i)(2)(iii)] for new facilities. In the process of developing a PSM for a new site, an initial PHA is conducted and recommendations are generated. The key item that facilities fail to realize is that the PSSR takes the PHA requirement for a prompt resolution of recommendations one step further, specifying that the recommendations must be resolved or implemented prior to startup. In fact, PSSR is the only element within the PSM regulation in which OSHA actually spells out a timeline for addressing recommendations.

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### INCIDENT INVESTIGATION

Most understand that in the event of a chemical release, an incident investigation is conducted including a determination of how to prevent the event from occurring again, thereby resulting in the development of recommendations. Again, under the PSM Incident Investigation requirement [1910.119(m)(5)], a facility must establish a system to promptly address and resolve the incident report findings and recommendations, and resolutions and corrective actions are be documented. Just like recommendations from PHA's and Compliance Audits, incident investigation recommendations are easily overlooked. As such, the newly-revised CalARP regulation now includes a timeline for addressing incident investigation findings and recommendations in that they must be resolved within one and a half years (1.5) of the date of completion of the investigation OR two (2) years of the date of the incident [Sections 2755.7(d) & 2760.9(e)]. Recommendations and documentation of the resolution of these recommendations need to be maintained for the past five years, along with the incident investigation report.

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As recommendations are developed during the life of your PSM Program, keep the following in mind:

- Address the recommendations as soon as possible.
    - For new facilities, recommendations should be resolved prior to startup.
  - Document the resolution of the recommendations.
  - Maintain the documentation per the time period required by OSHA:
    - PHA – life of the process
    - Compliance Audit – two most recent audits
    - PHA review/update resulting from Management of Change – life of the process
    - Pre-Startup Safety Review – life of the process
    - Incident Investigation – five years
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