

**EDEN CITY COUNCIL  
REGULAR MEETING AGENDA  
January 18, 2022 at 6 p.m.  
Council Chambers**

**Join the meeting via Zoom here:**

<https://us06web.zoom.us/j/97958306765?pwd=UGRTQ2t3VjgwaUNFSUZldFBNTkNFUT09>

passcode: Council21

or by calling 877-853-5257

webinar ID: 979 5830 6765; passcode: 224372140

1. Meeting called to order by: Neville Hall, Mayor
2. Invocation: Pastor Kevin Dunovant, First Wesleyan Church
3. Pledge of Allegiance: Led by Todd Harden, Fire Chief
4. Proclamations & Recognitions:
  - a. Proclamation: Black History Month
5. Roll Call
6. Set Meeting Agenda
7. Audit Report: Presentation of the 2020-2021 Audit by Rouse, Rouse, Rouse & Gardner
8. Public Hearings
9. Requests and Petitions of Citizens
10. Unfinished Business:
  - a. Board and Commissions Appointments. **Kelly Stultz, Director of Planning & Community Development**
  - b. Consideration of Uptown Eden Improvements.  
**Kelly Stultz, Director of Planning & Community Development; Paul Dishmon, Director of Public Works;  
Tammy Amos, Director of Transportation Engineering**
  - c. Informational – Affirmative Maintenance Program update.  
**Kelly Stultz, Director of Planning & Community Development**
  - d. Technical review report on proposed tubing program.  
**Jon Mendenhall, City Manager**
11. New Business:
  - a. Consideration of a recommendation to sell property located at 886 Morgan Road.  
**Kelly Stultz, Director of Planning & Community Development**
  - b. Consideration and adoption of a resolution for calendar year 2022 transportation priorities.  
**Jon Mendenhall, City Manager**
12. Reports from Staff:
  - a. City Manager’s Report. **Jon Mendenhall, City Manager**
  - b. Report on advisory committee proceedings:
    - (1) Strategic Planning Commission. **Staff Advisor Cindy Adams**
    - (2) Planning Organization Boards. **Staff Advisor Kelly Stultz**
    - (3) Parks Commission. **Staff Advisor Terry Vernon**

13. Consent Agenda:
  - a. Approval and adoption of the December 21, 2021 regular meeting minutes. **Deanna Hunt, City Clerk**
  - b. Approval and adoption of new safety policies (bloodborne pathogen exposure control plan, asbestos program, and respirable silica exposure control plan) as recommended by the Safety Committee. **Clint Simpson, Assistant City Manager & Police Chief**
14. Announcements
15. Closed Session:
  - a. Closed session pursuant to North Carolina General Statute 143-318.11 (a) (5) Acquisition of Real Property.



## NOTICE

### **Electronic attendance available for January 18:**

In order to maintain the safety of City residents, staff and the Council, the regularly scheduled January 18 Eden City Council meeting will be available to join by Zoom.

You can *join* the meeting via Zoom two ways beginning at 5:30 p.m. on Tuesday, January 18:

**Click the link:** [January 18 Regular Meeting](#)

Passcode: Council21

**Or dial in by phone:**

877-853-5257

Webinar ID: 979 5830 6765

Passcode: 224372140



## **BLACK HISTORY MONTH PROCLAMATION**

**WHEREAS**, during Black History Month, we celebrate the many achievements and contributions made by African Americans to our economic, cultural, spiritual, and political development; and

**WHEREAS**, this annual observance is an opportunity to remember the challenges of our past, but also to honor countless African American heroes who inspire us to shape our country's future, and

**WHEREAS**, we remember and celebrate the lives of Rosa Parks, Sojourner Truth, Frederick Douglass, George Washington Carver, Harriet Tubman, and countless other African Americans who triumphed over ignorance, oppression, and injustice to make indelible contributions to our American history. They are an integral part of our Nation's story. We are indebted to the individual and collective perseverance and patriotism of these outstanding men and women;

**WHEREAS**, during Black History Month, we recommit to being a community of opportunity and hope for every citizen;

**NOW, THEREFORE**, I, Neville Hall, Mayor of the City of Eden, do hereby proclaim the month of February 2022 to be

### **BLACK HISTORY MONTH**

in the City of Eden and encourage all City of Eden residents to join me in celebrating the collective ingenuity, creativity, cultures and traditions of African Americans and commit ourselves to raise awareness and appreciation of Black History Month by participating in educational events honoring the contributions of Black Americans.

Presented this 18th day of January, 2022.

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Neville Hall  
Mayor

ATTEST:

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Deanna Hunt  
City Clerk



# Planning and Community Development Department

308 East Stadium Drive, Eden, North Carolina 27288 Phone: (336) 623-2110 Fax: (336) 623-4057

## MEMO

**To:** Honorable Mayor and City Council  
**Thru:** Jon Mendenhall, City Manager  
**From:** Debbie Galloway  
**Subject:** **2022 Boards and Commissions Appointments**  
**Date:** January 7, 2021

The following seats on the City Boards and Commissions are up for appointment or reappointment in 2022. When making appointments, please consider whether these persons have the time or the ability (for whatever reason) to attend regular meetings and participate in the activities of the board or commission.

If you have questions, please do not hesitate to call.

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### **Ward 3 Councilman Kirkman**

Barney Walker – Board of Adjustment (term expired)

### **Ward 5 Councilman Underwood**

Max Kirks – Tree Board (term expired)

Community Appearance Commission (vacancy left by Cathy Carter)

### **ETJ – Planning Board (Must be appointed by City Council and approved by County Commissioners)**

Vacant (seat formerly held by Matt Smith)



# Planning and Community Development Department

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P. O. Box 70, 308 E Stadium Drive, Eden NC 27289-0070/Telephone 336-623-2110/Fax 336-623-4057

## MEMO

To: Honorable Mayor and City Council  
Thru: Jon Mendenhall, City Manager  
From: Kelly Stultz, Planning and Community Development Director  
Re: Updates for Uptown Eden Improvements  
Date: January 10, 2022

The Internal Technical Review met on January 10 and discussed the above referenced improvements. The following are our recommendations:

**A. Bridge Street Parking Lot – Wall and Tree Removal**

After discussions at the staff level, we decided to engage Scott Flanagan of Cirrus Construction who is a structural engineer, to determine the best way forward. The ITRC is in favor of taking down the trees, taking down the wall and following Mr. Flanagan's report to stabilize the area on which the wall is removed. We anticipate the need to patch some asphalt in the parking lot of 600 Washington. Erin Gilley is preparing an agreement between the City and Mr. Emerine. Once that agreement is signed, our force account will do the work for the project. A copy of Mr. Flanagan's report is attached for your review.

**B. Emerine Parking Lot Lease – 600 Washington Street**

After much consideration, we do not believe the City should negotiate a lease of the Emerine parking lot. We do plan to realign the spaces in our existing Bridge Street parking lot. This will involve a coating of the lot and some new paint.

**C. Potential for Additional Parking Spaces Behind the buildings on the South Side of Washington Street.**

This has been completed.

**D. Henry Street Parking Lot**

There has been an application done by Randy Hunt to install a charging station for electric vehicles.

We did not receive this grant.

**E. Henry Street Waterline Replacement and Patrick Street Sewer Manhole and Line Replacement.**

This has been completed.

**F. Hotel/Ray Commons sidewalk at the corner of Monroe and Washington Streets**

This project has been completed.

**G. Alley Behind Ray Commons Building – Monroe Street**

This alley is to be re-paved. There are some drainage issues that will be handled by our City forces. The drainage issue will be dealt with shortly and the paving will be done as part of the Monroe Street resurfacing project.

**H. Monroe Street – Resurfacing**

This will be undertaken after the sidewalks are replaced.

**I. Monroe Street Parking Lot – Resurfacing**

This will be undertaken as part of the Monroe Street resurfacing project.

**J. Monroe Street Parking Lot Drainage Improvements**

These repairs are now underway.

**K. Washington Street Crosswalk Installation**

In the mid 2000's, the City of Eden undertook a streetscape project in what is now called Uptown Eden. The sidewalks were replaced on Washington Street and new lights and decorative crosswalks were installed. At the time of installation, we were told by NCDOT that when the street was repaved, the City would have to replace the crosswalks if we wanted decorative crosswalks. We have reached out to NCDOT and others to find an average cost for the replacement.

Based upon recent information, the price of this project has gone up. We will provide information when we get final numbers.

The Eden Downtown Development Corporation and the Uptown Merchants have reviewed samples from the supplier. They recommend a yellow/gold color be used. For the original project, a color similar to the brick used in the buildings was chosen.

**L. Monroe Street Sidewalk**

The sidewalks on both the east and west sides of Monroe Street need to be replaced. Paul Dishmon has the sidewalk and drainage work on his schedule. This will be done as a part of our maintenance program and by City forces.

Copies of the three concepts proposed in the most recent draft of the Uptown Small Area Plan are attached for your review. The EDDI and the merchants support making Monroe Street one way going north toward Jay Street. We are asking you to approve \$20,000 to \$30,000 to have construction and design plans done for the sidewalks, potential bump outs, curb and gutter and landscaping. Concept 1 (Preferred Alternative) is the concept that has been recommended. The plans will contain accommodations for outdoor dining.

If you have any questions, please contact me.





LICENSED: NC #P•1164, SC #4808, VA #0413000457

October 25, 2021

Ms. Kelly Stultz  
Director of Planning and Inspections Department  
City of Eden - Planning & Inspections  
308 E. Stadium Drive  
Eden, NC 27288-3299  
Phone: (336) 623-2110 ; 2

Re: Evaluation of Retaining Wall at City Parking Lot  
Washington-Bridge St. Behind Holland Associates

Dear Ms. Stultz:

At your request, I met with Tammy Amos at the city parking lot noted above. The purpose of this visit was to visually observe and evaluate the wood retaining wall for structural integrity.

### **Observations**

My observations are limited to a visual observation of existing conditions readily visible above ground. Excavation, testing, sampling, etc. was not performed.

1. Fig. 1: The retaining wall is constructed using round timbers, similar in size and shape to utility poles. These timbers appear to have been treated with a preservative such as creosote. Vertical pole sections are embedded in the ground to serve as lateral supports. The existing timbers of the retaining wall are severely degraded. The timbers are completely rotted through, with little or no structural capacity remaining. This wall should be replaced, since almost none of the materials are salvageable.
2. Figs. 2 - 6: The height of the wall varies from 0 feet to approximately 4 feet at the highest. The upper level is for an asphalt parking lot. The lower level has about a 12'-15' wide sloping soil bank before the lower asphalt parking lot begins. The lower soil bank has several plantings and trees along its length and is covered with mulch in most areas. Some trees have been removed by cutting but the stumps remain.
3. Fig 9: There is a concrete dumpster pad at the tall end of the wall.
4. Figs. 7 - 10: There are several utility poles and utilities visible along the length and base of the retaining wall. The wall appears to have settled and is leaning outward which could place lateral pressure on the utility poles.
5. Figs. 7 - 9: The asphalt of the upper parking lot is damaged for a distance of about 3'-4' back from the face of the wall. There are cracks and holes in the asphalt which can let water seep through to the sub-base below which can cause erosion and damage of the sub-base. The asphalt should be repaired once a new retaining wall is installed.

6. A portion of the upper parking lot surface slopes towards the wall, which can allow stormwater to flow over the face of, or behind, the wall. This can cause erosion or damage to the soil behind the wall.

### **Recommendations**

1. I recommend replacing the timber retaining wall. Here are two options to consider for replacing the wall:
  - a. As we discussed, the installation of a new masonry Segmented Retaining Wall (SRW) is an option. A wall of this type will work if correctly designed and installed by an experienced contractor. Constructing the SRW will require cutting into the upper parking lot in order to properly place and compact the soil and fabric behind the wall.
  - b. An alternative would be to remove the old wall, cut the asphalt of the upper parking lot back to where the asphalt is sound, then place compacted engineered fill to stabilize the soil below the parking lot edge, and the soil bank. The bank would be sloped similar to the existing. As Tammy and I discussed on site, this work would consist mainly of moving and compacting soil, which should be well within the capabilities of the City's existing equipment and manpower. The sloped bank can be stabilized with sod, mulch, surge stone, etc.
2. Whichever method is used will require excavation along the wall length, which might create issues with the utility poles and underground utilities not visible. The local utility services should be contacted and consulted. An underground utility location should be performed.
3. The damaged asphalt on the upper parking lot should be repaired or replaced. As part of this work, a raised asphalt curb along the edge of the parking lot should be installed to prevent stormwater from going over the face of the wall or the embankment. This curb will divert surface stormwater to the southwest where it can flow to the existing stormwater inlet in the lower parking lot.
4. Remove the trees in the sloped embankment where the wall is constructed. This is to prevent damage to the bank or the SRW from root growth.
5. Safety measures should be placed on the upper lot to warn/prevent motorists from driving over the embankment or retaining wall. Reflective parking signs, wheel stops, fencing, etc. can be considered.

**Disclaimer**

This structural report is limited to the review of the items specifically addressed above and is not to be interpreted as an approval of any other portion of the site not mentioned. My opinion is based on visual examination only of structural elements that are exposed and readily accessible at the time of the inspection and does not involve testing or sampling of any nature. Property owners should frequently inspect and monitor their properties to detect changing conditions that may require repairs or corrections. Timely maintenance, including regular treatments and inspections for wood destroying insects, settlement, damage, etc. is imperative to the safety and future performance of the home.

Please contact me if I may be of further service, or if you have any questions.

Regards,

*{;. ftr, 4, J*

C. Scott Flanagan, P.E.  
NC Professional Engineer #16767

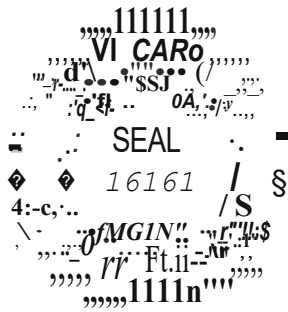




Figure 1 Looking northeast along the retaining wall, at high end.



Figure 3: Upper parking lot looking southwest.



Figure 2: Looking northwest at end of wall near dumpster pad. This is the high end of wall.



Figure 4: Retaining wall near dumpster pad.



Figure 5: Retaining wall height varies along length.





Figure 6: Upper end of both parking lots. No retaining wall.



Figure 9: **Damaged asphalt on upper parking lot.**



Figure 7: Utility poles and phone service at base of retaining wall near dumpster.



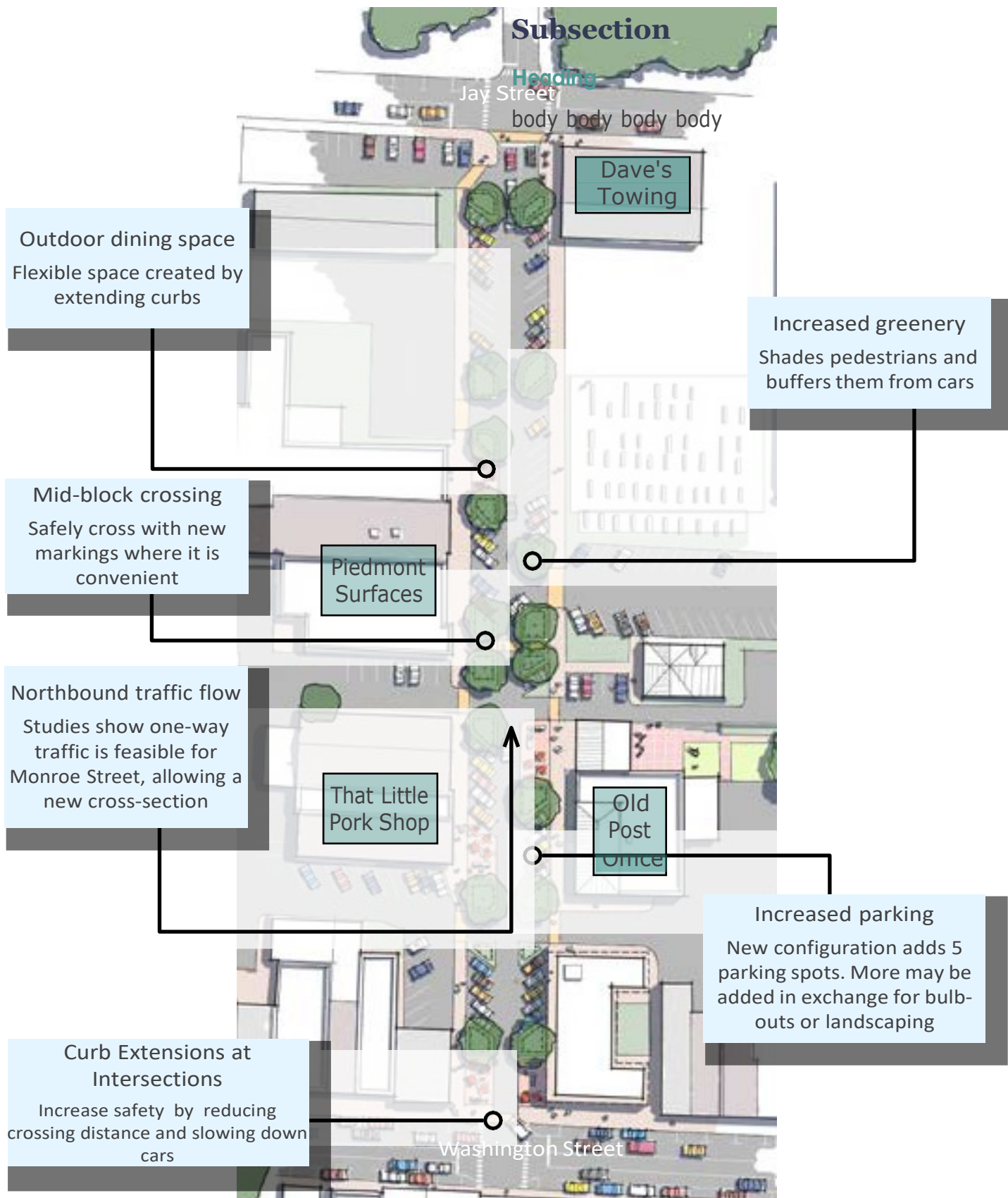
Figure 8: Active utility pole at base of retaining wall.



Figure 10: Utility poles located along length of retaining wall.



# Concept 1 (Preferred Alternative) - One-Way Northbound with Enhanced Patio Dining



## Concept 2

### One-way north bound

This concept identifies vehicle traffic moving northbound. The maximum number of parking is shown in this layout while providing ROW access from all adjacent properties.

This concept includes enhanced landscaping, angled parking and improved pedestrian crossings at Jay Street and Washington Street that reduces the crossing distance.



## Concept 3

### Two-Way

This concept identifies vehicle traffic moving north and southbound. The maximum number of parking is shown in this layout while providing ROW access from all adjacent properties. This concept includes enhanced landscaping and angled parking where feasible.





## Planning and Community Development Department

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P. O. Box 70, 308 E Stadium Drive, Eden NC 27289-0070/Telephone 336-623-2110/Fax 336-623-4057

### MEMO

**TO:** Honorable Mayor and City Council  
**THRU:** Jon Mendenhall, City Manager  
**FROM:** Kelly K. Stultz, AICP, Director  
**SUBJECT:** **Affirmative Maintenance**  
**DATE:** January 7, 2022

Community development in the 21st century is a comprehensive program that includes stopping the tide of residents that live in substandard housing, seeking grant funds from any resource available to the City for any type of project, restoring community pride, taking steps to provide quality and variety in housing types, encouraging small businesses to thrive, improving community appearance, providing recreational opportunities for our citizens, seeking industry to come to Eden, providing the necessary infrastructure and preserving both our historic resources and Eden's environment.

#### **Affirmative Maintenance.**

As to local code enforcement, Minimum Housing Ordinance, the Non-Residential Maintenance Ordinance, the Nuisance Ordinance and the Junk and Abandoned Vehicle Ordinance are a part of our Unified Development Ordinance.

In an effort to see local code enforcement improve its effectiveness, it was decided in early 2021 to reshape the program into **Affirmative Maintenance**. **We are making this proactive change in earnest in February 2022.**

That means that we use all of the tools provided by the General Statutes and the Eden



City Council to improve the building stock of Eden, to deal with lack of maintenance and to improve our citizen's quality of life.

### **Land Banking**

The need to re-purpose properties that have experienced local code actions is common to most communities across our nation. NC does not have specific enabling legislation for this activity; however, we already engage in these activities. When we are forced to demolish structures or if we repair them, we often end up owning the property. Our department handles advertisement and sale of property acquired by the City through local code enforcement. We intend to increase our efforts to reach out to potential buyers through social media, communication with real estate professionals in our area.

Below is a list of the properties that we currently own through abatement. We plan to increase our efforts in the sale and adaptive reuse of these properties and the ones that arise from our stepped-up Affirmative Maintenance efforts. We propose putting signs on the properties and do more advertising.

**131 Greenwood Street**

**631 Grove Street**

**429 Monroe Street**

**1001 Sharpe Avenue**

**Lot 105, Indian Hills**

**Lot 106, Indian Hills**

**Lot 8, Section F, Conover Drive**

**Lot 9, Section F, Conover Drive**

**We own 886 Morgan Road but it is on the January Agenda for the City Council to accept a bid and sell it this month.**

If you have any questions, please let me know.



# Planning and Community Development Department

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P. O. Box 70, 308 E Stadium Drive, Eden NC 27289-0070/Telephone 336-623-2110/Fax 336-623-4057

## MEMO

To: Honorable Mayor and City Council  
Thru: Jon Mendenhall, City Manager  
From: Kelly Stultz, Planning and Community Development Director  
Re: River Tubing Program  
Date: January 10, 2022

At the November meeting of the Eden City Council, the Strategic Planning Commission asked the City Council to approve a tubing program for the City of Eden. Across our country and our state, tubing is an extremely popular leisure activity. Many of our marketing efforts focus on the rivers and we hear from citizens that we need more access to both the Smith and the Dan Rivers.

At the December Council meeting, a series of questions were raised. The Internal Technical Review met on January 10 and discussed the questions about the above referenced program. Jason Wood from the Rescue Squad and Tim Biggs, President of the Board of Directors of the Eden Rescue Squad, were present to assist in the answers. In addition, the Rescue Squad and City Staff have recommended collaboration in the planning and implementation of this program. Bi weekly meetings with the two entities will be held following City Council approval until implementation of the program. In addition, the meeting will continue during the implementation in order to address any response and user safety.

The following are our responses and recommendations:

**1. Who will make the ultimate decision the river is safe for the tubers?**

The Program Director or the Parks and Recreation Director. The decision will be made after a morning kayak trip to assess conditions (river and weather) and the Director will complete a daily checklist.

**2. Will proper training be provided to employees who will make sure the life jackets**

**are the proper size?**

At the site of the intake and the Smith River Greenway, there will be staff present. The staff will be trained to size the life vests. There will also be a training video that the tubers are required to view. The video will include a map of the route, footage of the takeout, life vest safety, instructions on how to get past obstructions (strainers) and we are contacting Roy Sawyers about his assistance with the video. Jason will work with city staff to prepare an emergency response plan. The Rescue Squad and city staff plan to have bi-weekly meetings even after the program is underway. We will be developing a daily check list that will include checking the weather, river conditions, the life vest and all equipment.

In addition, a waiver for the tuber to sign will state that the participant has been advised that life vests are mandatory. This waiver will be required. It is being crafted by the City Attorney.

**3. Who will monitor that there is no alcohol use while floating the river?**

City staff will monitor evidence of alcohol use prior to the person going in the water.

**4. If unexpected thunderstorm or dangerous weather condition arises, how will the tubers position on the river be determined and how will they be notified and where will they be extracted from the river?**

We have reviewed the plans for other jurisdictions and for Three Rivers Outfitters. The plan is for staff to check the weather forecast for 3 hours from the time of launch. There will be direction given at the outset of the activity during the safety video as to what to do and who to contact when there is a problem on the river. After consultation with the Rescue Squad, there will be a number to call for operational issues (a delay in pickup, etc to the City Program Staff) and a 911 call will be advised for any life- threatening issues. This will be detailed in an Emergency Response Plan drafted in coordination with the Rescue Squad.

**5. Who will monitor the wearing of life jackets at all times?**

Like other jurisdictions, we can provide the life jackets and have wearing them a part of the waiver that the tuber signs prior to entering the river.

**6. How will downed trees or other hazards be removed from the river to allow safe passage?**

The predominate place for downed trees and debris on this route would be at the Kings Highway Bridge. Most of the time the NCDOT and the Dan River Basin Association will handle removing what the Rescue Squad and the Fire Department refer to as “strainers”. Staff is looking for contractors if the City has to hire someone to remove obstructions. The debris and “strainers” will be evaluated by the City Staff employee who assesses the river conditions each morning before trips are allowed. If dangerous conditions, including strainers and debris, are observed on this trip, the daily tubing activities will be cancelled until the debris can be safely removed or maneuvered around.

**7. Will the route be inspected daily for hazards, debris, or fallen trees? If so, who will do the inspection? -The same person who determines the river is safe? What will be used to make this survey? Boat? Jet ski?**

A City employee will put in at the Smith River Greenway access and travel the route by kayak and be met at the Boat Landing site on the Dan River. This person will determine if there are issues with the river. If there are problems, no tours will take place until the situations either dissipate or are remedied.

**8. There is no readily available on-site rescue personnel or equipment.**

Jason Woods is comfortable with starting the program before the Fire Department training is complete. The head of the Rescue Squad has offered to train the Fire Staff and potentially Police Officers in the skills necessary to make/assist in rescue operations. Jason Wood, Chief of the Rescue Squad, and Todd Harden, Fire Chief, will schedule a meeting for this training before the program begins. City Staff looks at this cross training as an opportunity for our emergency personnel and as a response to the recent safety issues.

**9. The rescue of the individuals is dependent upon a volunteer organization who may be committed to another emergency call. Assistance in water rescue operations will be coming from the west and south side of the county if Eden Rescue is unavailable**

**or lack of manpower.**

As in question 8, City staff will partner with the local organizations.

**10. How will accountability be maintained?**

Recreation Department staff.

**11. The rivers are sometimes unpredictable with changing weather conditions upstream which can lead to unexpected water level and current speed. How will the situation be monitored? How will the tubers be notified of potential danger and where will they be extracted and by who?**

The tubers that are on the river will not be able to be removed mid-trip. This is similar to other programs. Tubers that have completed the trip will notify the City staff via cell phone while on the river or will call 911 if there are life threatening issues on the river. Tubers will be advised of this during the safety training at the outset of the activity. They can also inform staff that picks them up at the out take point and this information will be relayed to the staff at the intake.

**12. On the route proposed there is no extraction points all rescue operations will have to be conducted from one access (the boat landing).**

This question is very similar to question 11 and the answer is the same.

According to Jason Wood, if an incident occurs on the Smith River, a raft that has been purchased by the Eden Rescue Squad will be launched from the Island Ford Landing. If an incident on the Dan River, then a motor boat will be launched from the Wildlife Access “boat landing.”

**13. People with little to no experience on the river maybe be lulled into a false sense of security that no dangers on the river exists may lower their situational awareness due to it being a City sponsored activity.**

Participants in the City program will be required to watch the video that will educate tubers of the river conditions and its dangers. One purpose of this program will be to

increase river awareness by members of the community. In addition, the waiver will also list inherent dangers on the river and participants will be required to acknowledge that they were advised and educated.

**14. With the exit point being a state wildlife owned boat ramp, will conflicts between the tubers and fishermen using the boat access become a problem?**

According to rescue staff and other observation there are very few fishermen at this spot in the river. The most use is by people taking a dip in the River.

During the ITRC meeting this morning, some other issues were raised and discussed:

**1. What do we do when the Smith River is low at the access point?**

Three Rivers Outfitters uses a rule of thumb that if the water is below the steps at the access then no trips on the Smith are taken.

**2. Rescue Squad requires anyone within 10 feet of the River have on a life preserver.**

The ITRC recommends that our program have the same requirement, including all staff.

**3. The issue of adequate signage on the rivers came up. The ITRC recommends that we confirm signage put up by Duke Energy and install some of our own if deemed necessary. A large sign that said dam ahead and a sign about the portage.**

The ITRC recommends these precautions.

Overall the ITRC and our guests, are in favor of the tubing program. Jason Wood of the Rescue Squad said that an organized program would provide better safety to all tubers and not just the ones using our program.

If you have any questions, please let me know.



# Planning and Community Development Department

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P. O. Box 70, 308 E Stadium Drive, Eden NC 27289-0070/Telephone 336-623-2110/Fax 336-623-4057

## MEMO

**TO:** Honorable Mayor and City Council  
**THRU:** Jon Mendenhall, City Manager  
**FROM:** Kelly K. Stultz, AICP, Director  
**SUBJECT:** **Sale of 886 Morgan Road**  
**DATE:** January 4, 2022

The City has received a bid on the vacant lot located at 886 Morgan Road in the amount of \$4,500.00 from Andrew Arnett. The tax value of the property is \$2,994.00.

An advertisement for the bid ran in the Rockingham Now on December 15, 2021. No upset bids have been received.

There are not any unpaid property taxes due on this property.

In my opinion, our best outcome is to sell the property and encourage the owner to build a single-family dwelling on the property.

Based upon the foregoing information and the fact that we continue to have to mow and maintain the property, I recommend that the City Council accept the bid.

If you need any further information, please let me know.

CITY OF EDEN  
OFFICE OF CITY MANAGER

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MEMORANDUM

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TO: Honorable Mayor Neville Hall, and Members of the City Council

FROM: Jon M. Mendenhall, City Manager

SUBJECT: Calendar Year 2022 Transportation Priorities

DATE: 1/10/22

ENCL: Rural Planning Organizations (RPOs) Summary  
NC 14/87 Feasibility Study  
Resolution on Traffic Circle Study  
Resolution on Calendar Year 2022 Transportation Priorities

CC: File

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The City of Eden is represented on the Piedmont Triad Rural Planning Organization (RPO) by a staff member administratively appointed on the Technical Coordinator Committee (TCC) and by one municipal representative appointed from all the municipal leaders of Rockingham County to represent the municipalities on the Technical Advisory Committee (TAC).

For calendar year 2022, the City Administration requests that the City Council establish transportation priorities in order to provide a template for City staff and municipal representation to know the priorities of the City of Eden in the calendar year. With this knowledge both TCC and TAC members can inform the transportation prioritization process, make requests of NCDOT, and advocate for the City of Eden based on City Council adopted priorities.

Suggested Transportation Priorities 2022:

1. Feasibility study of US 311 widening to state-line.
2. Update existing NC 14/87 feasibility study to align with I-73 in Virginia (and bridge work that is planned on NC 14 in Eden).
  - a. Current feasibility study attached.
3. Advocacy for transportation connection related to NC 14/87 and US 311 corridors and respective improvements in the Commonwealth of Virginia on Virginia Route 87 and US 311 by NCDOT and other State partners in order to achieve interstate cooperation.
4. Study intersection management at Washington Street/Bridge Street/King's Highway/Boone Road.
  - a. Previous Resolution attached.



5. Rails to Trails conversion of the Norfolk & Western corridor from Church Street to Pervie Bolick Street.
  - a. Will continue to work with railroad on right-of-way.
  - b. Will also work to program in transportation alternative funding (Fixing America's Surface Transportation [FAST] Act funding, Parks & Recreation Trust Fund [PART-F] or similar).

If agreeable to the suggested priorities outlined above, a resolution has been provided for consideration to forward to State and Federal agencies and departments as situations may warrant throughout the calendar year.

## **Rural Planning Organizations (RPO)**

In 2000, the State of North Carolina recognized the need for more coordinated transportation planning in rural North Carolina areas not within an MPO by enacting Chapter 136, Article 17, Section 136-210-213 of the General Statutes. This provided for the development of **Rural Transportation Planning Organizations (RPO)**. There are 20 Rural Planning Organizations in the State.

Although organized and tasked in a manner very similar to MPO's, RPOs are grounded in state law rather than federal, and are intended to address and improve rural area transportation planning processes. RPOs assist the North Carolina Department of Transportation by carrying the following four core duties:

- Develop, in cooperation with the NCDOT, comprehensive transportation plans.
- Provide a forum for public participation in the transportation planning process.
- Develop and prioritize suggestions for projects that the organization believes should be included in the State's Transportation Improvement Program.
- Provide transportation-related information to local governments and other interested organizations and persons.

A **Lead Planning Agency** is designated for each RPO as staff from the COG (Council of Government), County, City or other entity to provide staff support for RPO functions. The LPA develops the draft documents, prepares Transportation Advisory Committee and Technical Coordinating Committee meeting materials, schedules meetings, administers the distribution of state transportation planning funds to member governments, and carries out the directives of the TAC and TCC.

The **Transportation Advisory Committee (TAC)** is the governing policy board for the RPO. The TAC's membership includes elected officials, members of the local governments, the area's representative on the Board of Transportation and other members as may be designated. The Transportation Advisory Committee provides policy direction for the planning process, facilitates communication and coordination among the member jurisdictions, and guides the development of a comprehensive multi-modal transportation program for the rural area.

The **Technical Coordinating Committee's (TCC)** role is to support and advise the TAC. It is comprised of staff representatives of the various member governments, NCDOT, transit providers, and other agencies with an interest in transportation planning. The TCC has the responsibility of supervising and coordinating the four core duties by making technical recommendations to the Transportation Advisory Committee on decisions pertaining to that process. The TCC, in conjunction with the Transportation Planning Branch, is responsible for providing guidance to the development, review, and recommendation for approval and changes to the Prospectus, Planning Work Program, and the Comprehensive Transportation Plan; for planning citizen participation; and for reviewing transportation study documents. .

**FEASIBILITY STUDY**

**Eden**

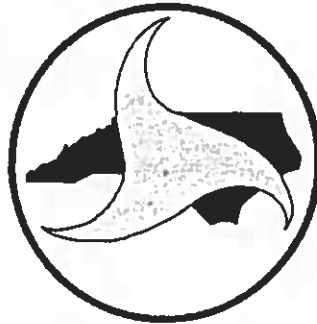
**NC 14-87**

**From NC 700-770 (Meadow Road) in Eden  
To the Virginia State Line**

**Rockingham County**

**Division 7**

**FS-9907C**



Prepared by the  
Programming and TIP Branch  
Division of Highways  
N. C. Department of Transportation

*Derrick W Lewis*

Derrick W. Lewis, P.E.  
Acting Head of Feasibility Studies

*2/14/2000*  
Date

Eden

NC14-87

From NC 700-770 (Meadow Road) in Eden  
to the Virginia State Line

Rockingham County

FS-9907C

### I. General Description

This feasibility study describes the recommended improvements to NC 14-87 in Rockingham County. It is recommended that NC 14-87 be widened from NC 700-770 (Meadow Road), in Eden, to the Virginia State Line. The recommended cross-section is a five-lane shoulder section with two 12-foot (3.6-m) travel lanes in each direction, a 12-foot (3.6 m) wide two-way-left-turn-lane, and 10-foot (3.0-m) wide shoulders of which 4-foot (1.2-m) is paved. The project location is shown in Figure 1.

Along with the proposed widening, this project also includes the following improvements:

1. Replace Bridge # 108 at the NC 700-770 interchange and convert the existing interchange into a diamond interchange.
2. Replace Bridge # 176 at the SR 1700 interchange and convert the existing interchange into a diamond interchange.
3. Relocate a segment of Virginia Street - Roosevelt Street from approximately 0.3 miles (0.5 km) south of SR 1714 (Aiken Road) to SR 1714.
4. Replace Bridge # 155 over the Carolina and Northwestern Railroad.
5. Replace Bridge # 168 over the Smith River.

A combination of symmetrical and asymmetrical widening should be utilized to improve the horizontal curvature of this facility. It is anticipated that the existing 150-foot (45.7-m) of right-of-way is sufficient to accommodate the proposed widening, but some additional right-of-way will be required for the utility adjustments and interchange modifications. It is estimated that there will be 12 residences and 1 business relocated due to this project. The total cost of the project, including construction and right-of-way, is estimated to be \$25,900,000.00.

|                   |                      |
|-------------------|----------------------|
| Construction..... | \$ 23,900,000        |
| Right-of-way..... | \$ 1,900,000         |
| Total Cost .....  | <u>\$ 25,800,000</u> |

This study is the initial step in the planning and design process for this project and is not the product of exhaustive environmental or design

investigations. The purpose of this study is to describe the proposed project including costs, and to identify potential problems that may require consideration in the planning and design phases.

## II. Need for Project

The purpose of this project is to improve the traffic carrying capacity of NC 14-87 from Eden to the Virginia State Line. This project was requested by the Rockingham County Economic Development Commission.

This segment of NC 14-87 is designated a principal arterial on the North Carolina Statewide Functional Classification System. It is designated a major thoroughfare on the City of Eden Thoroughfare Plan.

Between NC 700-770 to SR 1700, the development along NC 14-87 is primarily residential along both sides of the roadway with concentrations of commercial development around the intersections. North of SR 1700, NC 14-87 is generally undeveloped farmlands and woodlands intermixed with some residences. There is a public park located on the west side of the roadway immediately north of the Smith River.

NC 14-87 is currently a 2-lane rural shoulder section with 12-foot (3.6-m) wide travel lanes, 4-foot (1.2-m) wide paved shoulders, and 4-foot (1.2-m) wide soil shoulders.

There are four existing structures and two interchanges located along the studied segment of NC 14-87. The structures and interchanges are described as follows:

1. Bridge # 108 carries NC 700-770 over NC 14-87 and is an integral part of an interchange at this location. The interchange is a non-typical partial clover interchange with ramps in the southeast, northeast, and northwest quadrants. The bridge was built in 1957, is 159 feet (48.5 m) long and has a clear roadway width of 68.4 feet (20.8 m) under the bridge. It has a sufficiency rating of 48.6 out of 100 possible points.
2. Bridge # 155 is located approximately 0.4 mile (0.6 km) north of NC 700-770 and carries NC 14-87 over the Carolina and Northwestern Railroad. The bridge was built in 1966, is 149 feet (45.4 m) long, and has a clear deck width of 36 feet (11 m). It has a sufficiency rating of 81.7 out of 100 possible points.
3. Bridge # 168 carries NC 14-87 over the Smith River. It was built in 1966, is 525 feet (160.0 m) long, has a clear deck width of 34.2 feet (10.4 m), and has a sufficiency rating of 84.3 out of 100 possible points.

4. Bridge # 176 carries SR 1700 over NC 14-87 and is an integral part of an interchange at this location. The interchange is a one quad ramp interchange with a two-way ramp in the northeast quadrant. The bridge was built in 1966, is 137 feet (41.8 m) long, has a clear roadway width of 44.7 feet (13.6 m) under the bridge, and has a sufficiency rating of 73.3 out of 100 possible points.

In addition to the interchanges noted in items 1 and 4 above, there are also two at-grade intersections along the project route. The SR 1714 (Aiken Road) intersection is at grade and is controlled by a traffic signal. The Old NC 87 intersection is at grade and is stop sign controlled and traffic is channeled by way of raised islands.

The current year Average Daily Traffic (ADT), within the project limits, was estimated to range from approximately 12,300 vehicles per day (vpd) near NC 700-770 to approximately 9,500 vpd near the Virginia state line. The design year (2020) estimates are 21,600 vpd and 15,800 vpd respectively.

The current estimated Level of Service is Level E and it is anticipated that without improvements, this level will remain constant to the design year. With the recommended improvements, the Level of Service should improve to Level A, which should prevail through the design year.

During the period from October 1, 1995, through September 30, 1998, there were 88 accidents reported on NC 14 within the project terminals. This resulted in an accident rate of 169 accidents per 100 million vehicle miles (Acc/100MVM), compared to a statewide average of 221Acc/100 MVM for all rural NC routes during the period from 1995 through 1997. There was one fatality reported during the period, and 34 of the accidents resulted in non-fatal injuries. The most prevalent accident type was "rear end (32%)". The wider cross section with center turn lane will reduce the potential for these types of accidents.

### **III. Recommendations**

It is recommended that NC 14-87 be widened from NC 700-770 (Meadow Road), in Eden, to the Virginia State Line. The recommended cross-section is a five-lane shoulder section with two 12-foot (3.6-m) travel lanes in each direction, a 12-foot (3.6-m) wide two-way-left-turn-lane, 4-foot (1.2-m) wide paved shoulders, and 6-foot (1.8-m) wide soil shoulders. The project location is shown in Figure 1.

In addition to the proposed widening, this project should also include the following improvements:

1. Replace Bridge # 108 at the NC 700-770 interchange and convert the existing interchange into a diamond interchange.
2. Replace Bridge # 176 at the SR 1700 interchange and convert the existing interchange into a diamond interchange.
3. Relocate a segment of Virginia Street-Roosevelt Street from approximately 0.3 miles (0.5 km) south of SR 1714 (Aiken Road) to SR 1714.
4. Replace Bridge # 155 over the Carolina and Northwestern Railroad.
5. Replace Bridge # 168 over the Smith River.

A combination of symmetrical and asymmetrical widening will be utilized in order to improve the horizontal curvature of this roadway. It is anticipated that the existing 150-foot (45.7-m) of right of way is sufficient to accommodate the proposed widening, but some additional right-of-way will be required for the utility adjustments and interchange modifications. It is estimated that there will be 12 residences and 1 business relocated due to this project. The total cost of the project, including construction and right-of-way, is estimated to be \$25,900,000.00.

|                   |               |
|-------------------|---------------|
| Construction..... | \$ 23,900,000 |
| Right-of-way..... | \$ 1,900,000  |
| Total Cost .....  | \$ 25,800,000 |

#### IV. Additional Comments

An environmental screening was not conducted for this study.

Based on maps at the Department of Environment, Health & Natural Resources and Natural Heritage Section, no threatened or endangered species were identified in the project corridor and no historic properties are anticipated.

Due to the potential for construction in the area of the Smith River, wetland permits and mitigation may be required. The estimates included in this study do not include any costs for wetland mitigation.

A transportation benefit analysis was also completed for this project. For the period between the current year and the 2020 design year, it is estimated that the total transportation benefits for the project are \$37,800,000, which is an average of \$1,890,000.00 per year. The total benefits include accident cost savings, time cost savings, and operating cost savings.

SSR 1544



END PROJECT

VIRGINIA STATE LINE

OLD NC 87  
NC 14-87

BRIDGE #176

SR 1700

BRIDGE #168

NC 14-87

BRIDGE #108

SMITH RIVER

BRIDGE #155

CAROLINA AND NORTHWESTERN RAILROAD

SR 174 (AKEN RD)

VIRGINIA ST

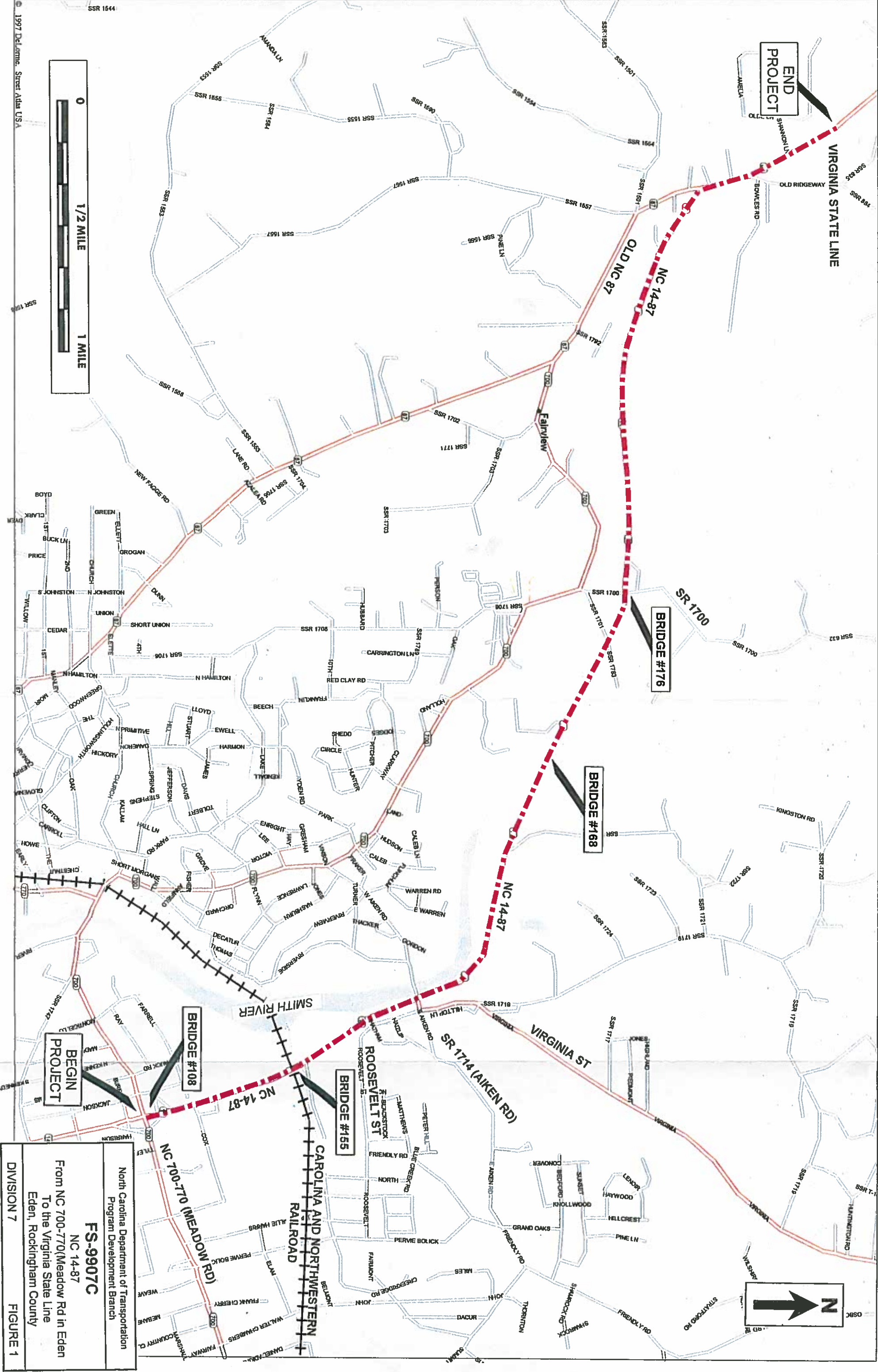
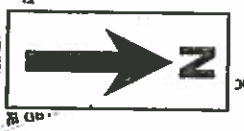
FS-9907C

NC 14-87

From NC 700-770 (Meadow Rd) in Eden  
To the Virginia State Line  
Eden, Rockingham County

North Carolina Department of Transportation  
Program Development Branch

DIVISION 7  
FIGURE 1







**Resolution of support for a roundabout to replace the  
Bridge Street, Boone Road and Washington Street intersection**

**WHEREAS**, Eden's historic downtown area, founded in 1797, has undergone an unprecedented revitalization from 2019-2021; and

**WHEREAS**, this downtown area has added nine new businesses and 40 new residents since 2020; and

**WHEREAS**, Washington Street continues to be a major thoroughfare, connecting western Eden residents to the central area of the City, and more than 11,000 vehicles traverse the Bridge Street, Boone Road and Washington Street intersection daily; and

**WHEREAS**, it is of utmost importance to move traffic efficiently and safely in this important section of the Eden community; and

**WHEREAS**, Eden residents have navigated two existing roundabouts for decades and are familiar with their traffic patterns; and

**WHEREAS**, the proposed roundabout will enable traffic to move more fluidly at this intersection and not include the cost of additional signalization;

**NOW, THEREFORE, BE IT RESOLVED**, that the Eden City Council does hereby endorse this resolution in support of the proposed roundabout for the benefit of Eden motorists, and to encourage additional downtown revitalization

This the 17th day of August, 2021

  
\_\_\_\_\_  
Neville Hall, Mayor (SEAL)

ATTEST:

  
\_\_\_\_\_  
Deanna Hunt, City Clerk

**RESOLUTION TO ADOPT TRANSPORTATION PRIORITIES FOR THE CITY OF  
EDEN FOR 2022**

**WHEREAS**, in order to provide for the coordinated, efficient, and well-planned extension of highways to serve the traveling public; and

**WHEREAS**, the City of Eden desires to set priorities to benefit the traveling public, create jobs, expand the tax base, and generally protect the public health, safety, and welfare of the citizens of the City of Eden as well as the traveling public, and

**WHEREAS**, from time to time it is necessary for the City of Eden to formally adopt plans, priorities, or programs of public improvement and policies related thereto.

**NOW, THEREFORE, BE IT RESOLVED**, by the City Council for the City of Eden that officers, employees, delegates, and representatives of the City of Eden be presented with the formal transportation priorities of the Eden City Council for the 2022 calendar year enumerated below:

1. Feasibility study of US 311 widening to state-line.
2. Update existing NC 14/87 feasibility study to align with I-73 in Virginia (and bridge work that is planned on NC 14 in Eden).
3. Advocacy for transportation connection related to NC 14/87 and US 311 corridors and respective improvements in the Commonwealth of Virginia on Virginia Route 87 and US 311 by NCDOT and other State partners in order to achieve interstate cooperation.
4. Study intersection management at Washington Street/Bridge Street/King's Highway/Boone Road.
5. Rails to Trails conversion of the Norfolk & Western corridor from Church Street to Pervie Bolick Street.

APPROVED, ADOPTED AND EFFECTIVE this 18<sup>th</sup> day of January, 2021.

CITY OF EDEN

By: \_\_\_\_\_  
Neville Hall, Mayor

ATTEST:

\_\_\_\_\_  
Deanna Hunt, City Clerk



**City Manager's Report**  
**January 2022**  
City Manager Jon Mendenhall

**ADMINISTRATION**

***Division of Design & Construction***

**Water Main Projects Update**

A crew from Haymes Brothers, Inc. began installing a 16-inch diameter water main in an unopened right-of-way on Knott Street, east of a proposed bore under nearby railroad tracks. The crew was able to install approximately 1,820 linear feet of pipe by the end of the month, stopping west of a wet weather ditch near the New Street sewer pump station. The crew is scheduled to work on two bores under railroad tracks during January and possibly make a wet tap on the 24" water main along the east side of S. Edgewood Road. A subcontractor was able to complete the asphalt patching along N. Rickman Street on December 15.

**PARKS AND RECREATION**

**Bridge Street & Mill Avenue Recreation Centers**

These two facilities are open Mondays from 1 to 9 p.m., Tuesdays, Wednesdays and Thursdays from 12 to 8 p.m., and on Fridays from 10 a.m. to 6 p.m. Those attending may participate in basketball, track walking, cornhole, or the playground. The Bridge Street center offers tennis courts while Mill Avenue center offers a baseball field.

Bridge Street Recreation Center: basketball games for ages 4 through 7 are being held on Tuesday and Thursday afternoons. A new cornhole league started January 6. The senior center is hosting exercise classes at the center on Monday, Wednesday, and Friday mornings. Meals on Wheels continues to operate out of the nutrition center each weekday.

Mill Avenue Recreation Center: basketball games for ages 8 through 10 are being held on Mondays and Wednesdays at 5 p.m.; games for ages 11 through 12 are being held on Tuesdays and Thursdays at 5 p.m.; and games for ages 13 through 15 are being held on Mondays and Wednesdays at 5 p.m. Pickleball is played on Monday, Wednesday, and Friday mornings at 8 a.m. with games being played on Tuesday and Thursday evenings at 5:30 p.m. Women's winter volleyball starts January 10 with games being played at 7 p.m.

**Freedom Park**

Open daily from dawn to dusk, this park offers a walking track, nature trail, skateboard park, basketball courts, playground, dog park, picnic shelters, and an amphitheater.

### **Garden of Eden Senior Center**

The Garden of Eden Senior Center is open weekdays from 8 a.m. to 4:30 p.m. and offers paint classes, mahjonn, pickleball (mornings and evenings offsite), exercise classes, cornhole, knit and crochet, strength and balance, legal aid, quilt guild, Friends Club, bingo, watercolor classes, craft classes, senior technology classes, and card games, along with assistance and referral for seniors. The center hosted a class, titled “What Do I Eat?” to help prepare participants for the holidays. It also offered a virtual class in collaboration with Brookdale of Eden. Participants took part in special events such as ‘Bingo and Breakfast’ and a trip to the Natural Science Center to view ‘Winter Wonderlights.’ They also conducted a successful food drive for Salvation Army.

## **PLANNING & COMMUNITY DEVELOPMENT**

### **Collections**

Payments received for code enforcement fees during the month of December consisted of \$6,667.73.

### **Grants**

Three applications were received for the CDBG-COVID grant; two have been submitted to the consultant for review and staff is waiting on remaining documents to be turned in for the third application.

### **Historic Preservation Commission**

Submitted annual Certified Local Government program report to the State Historic Preservation Office.

### **Inspections and Permits**

Total Inspections Performed-December: 100 (not including fire inspections)

Total Permits Issued-December 157

### **Spray Cotton Mill Local Landmark**

Staff is working on the landmark designation report for Spray Cotton Mill.

### **Tree Board**

Submitted Tree City USA annual report and application.

## **POLICE**

All police vehicles purchased under the Police Department’s vehicle capital outlay have been delivered. Parts for the animal control truck have been ordered and are awaiting installation.

The department’s contract with Axon Enterprises has been signed with a rush order placed for implementation of the body worn cameras. The rush order will hopefully put the department in full operation of the body worn cameras by the middle of January followed shortly by the tasers and in-car cameras.

The department is currently conducting its second field test of the Tait TP9600 handheld radio system. The department purchased and installed four Tait TM9400 mobile radios to replace unserviceable systems in the patrol fleet. At the present time, the TM9400 systems have proven to be reliable. Therefore, the

department foresees Tait radios as being a viable option for the agency as they move towards the July 1, 2025 Time Division Multiple Access compliance date.

CITY OF EDEN, N.C.

The regular meeting of the City Council, City of Eden, was held on Tuesday, December 21, 2021 at 6 p.m. in the Council Chambers, 308 E. Stadium Drive. Those present for the meeting were as follows:

|                  |                                |
|------------------|--------------------------------|
| Mayor:           | Neville Hall                   |
| Council Members: | Gerald Ellis                   |
|                  | Jerry Epps                     |
|                  | Phillip Hunnicutt              |
|                  | Kenny Kirkman                  |
|                  | Bernie Moore                   |
|                  | Bruce Nooe                     |
|                  | Tommy Underwood                |
| City Manager:    | Jon Mendenhall                 |
| City Attorney:   | Erin Gilley                    |
| City Clerk:      | Deanna Hunt                    |
| Media:           | Roy Sawyers, Rockingham Update |

MEETING CONVENED:

Mayor Hall called the regular meeting of the Eden City Council to order and welcomed those in attendance. Pastor Lem Hardison of North Spray Christian Church gave an invocation followed by the Pledge of Allegiance led by Fire Chief Todd Harden.

Mayor Hall stated that Mike Moore of Mike Moore Media faced some health concerns and could not be in attendance but wished everyone the best and a Merry Christmas. He welcomed elected officials Sheriff Sam Page, District Attorney Jason Ramey, County Commissioner Charlie Hall, and N.C. House Member Reece Pyrtle who were in attendance.

PROCLAMATIONS AND RECOGNITIONS:

- a. Recognition: Outgoing Council Members Darryl Carter and Angela Hampton

Mayor Hall stated that Council Member Carter was not in attendance. He had unselfishly given 16 years of his life to the betterment of the City, beyond what he did when he worked for the City. He was a huge asset to Council. It took a big commitment to serve as a member for 16 years and he wished him the best.

Mayor Hall asked Council Member Hampton to come forward. He stated that she served eight years on the City Council and had missed only two meetings. She was very active in The Boulevard community and saw the turn being made in that area, which was in large part due to the things Council Member Hampton had done. He hated to see her go but wished her and her family the best. He presented her with a gift from the City.

Council Member Hampton thanked everyone for what they had done for her and for electing her for two terms. She thanked God for her husband who stood by her side. She stated that she missed two meetings out of the eight years; once when her dog passed away and the other when she had surgery. She thanked everyone and asked for their continued prayers. She stated she would continue to work for the City, just not as part of Council.

- b. Proclamation: Martin Luther King Jr. Day

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

Mayor Hall asked Ms. Hampton to stay at the podium as he read the Martin Luther King Jr. Day proclamation, noting that she was the first female African-American to serve on Council. She was a barrier breaker in many ways.

Proclamation  
Martin Luther King, Jr. Day

WHEREAS, January 17 marks the observance of the federal legal holiday to honor the birthday of the Reverend Dr. Martin Luther King, Jr., and

WHEREAS, Dr. King dedicated his life to a vision: that all Americans would live free from injustice and enjoy equal opportunity. His peaceful and lifelong crusade against segregation and discrimination brought our communities closer to the founding ideals set forth in the Declaration of Independence and the Constitution; and

WHEREAS, as we honor Dr. King, we know that our community is stronger, more just, and more free because of his life and work; and

WHEREAS, in paying tribute, we are reminded that the call lies with each of us to fulfill Dr. King's work. Let us use our time, talents, and resources to give back and help those less fortunate. Let us not forget Dr. King's own tireless spirit and efforts as we work, celebrate, and pray alongside each other.

NOW, THEREFORE, BE IT PROCLAIMED that I, Neville Hall, Mayor of the City of Eden, hereby designate January 17, 2022 be set aside as

Martin Luther King, Jr. Day

in the City of Eden and urge all citizens to join with me this day to apply Dr. King's life and teachings of community service.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 21st day of December, 2021.

CITY OF EDEN

BY: Neville Hall, Mayor

ATTEST: Deanna Hunt, City Clerk

OATHS OF OFFICE:

a. Introduction of the Honorable Judge Ed Wilson

Mayor Hall introduced the Honorable Edwin G. Wilson, Jr., Superior Court Judge, who was present to administer the oath of office to the newly elected Mayor and City Council Members.

b. Swearing in of newly elected Mayor Neville Hall.

Mayor Hall was sworn in by Judge Wilson.

c. Swearing in of newly elected Council Member Kenny Kirkman – Ward 3

Council Member Kirkman was sworn in by Judge Wilson.

d. Swearing in of newly elected Council Member Jerry Epps – Ward 4

Council Member Epps was sworn in by Judge Wilson.

e. Swearing in of newly elected Council Member Tommy Underwood – Ward 5

Council Member Underwood was sworn in by Judge Wilson.

Council Member Underwood thanked the Lord. It had been a long year. He thanked his wife and family for standing behind him. He was looking forward to serving the citizens of Eden for the next four years and then some, he hoped. He also thanked Elretha Perkins and Ms. Brown, who could not be in attendance, because they had been a tremendous help to him. He ended by thanking his campaign committee, stating they were the best and that without them, he could not have done it.

SELECTION OF MAYOR PRO TEM

Council Member Nooe made a motion to nominate Council Member Moore to serve as Mayor Pro Tem. Council Member Ellis seconded the motion. All members voted in favor. The motion carried, 7-0.

MAYORAL APPOINTMENTS:

- a. ABC Board

Mayor Hall reappointed Tommy Flynt to the ABC Board.

- b. ABC Board Chair

Mayor Hall reappointed Tommy Flynt as chair on the ABC Board.

- c. Rockingham County Solid Waste Committee

Mayor Hall reappointed Council Member Moore to the Rockingham County Solid Waste Committee.

- d. Piedmont Triad Regional Council

Mayor Hall appointed Council Member Hunnicutt to serve on the Piedmont Triad Regional Council.

- e. Rural Planning Organization Technical Advisory Committee

Mayor Hall appointed Council Member Hunnicutt to serve on the Rural Planning Organization Technical Advisory Committee.

SET MEETING AGENDA:

Council Member Hunnicutt requested to add item 12(a) First Responders on Tubing Program to Unfinished Business. A motion was made by Council Member Ellis to set the meeting agenda as amended. Council Member Moore seconded the motion. All members voted in favor. The motion carried, 7-0.

PUBLIC HEARINGS:

- a. Consideration and adoption of an ordinance to close an alley on the east side of Bridge Street.

Mayor Hall declared the public hearing open and called on Director of Planning and Community Development Kelly Stultz.

Ms. Stultz said an application was received to close a paper street between Scotty's Carpet and Oriental



Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

Rug Cleaning and the vacant lot next to it on Bridge Street. Staff had not received any negative information from the utility companies or the City; therefore, at the present time, staff recommended the alley be closed.

As there was no further discussion, Mayor Hall declared the public hearing closed.

Council Member Epps made a motion to adopt an ordinance to close an alley on the east side of Bridge Street. Council Member Moore seconded the motion. All members voted in favor. The motion carried, 7-0.

AN ORDINANCE AND ORDER TO CLOSE AN ALLEY ON THE EAST SIDE OF BRIDGE STREET

WHEREAS, on the 17th day of September, 2021, Robert G. Shropshire and wife, Kim S. Shropshire filed a petition, by the terms of which they requested that an alley on the east side of Bridge Street be closed pursuant to the provisions of Chapter 13, Division 3 of the Eden City Code and North Carolina General Statutes §160A-299; and

WHEREAS, the City Council of the City of Eden, did on the 16th day of November, 2021, at its regular monthly meeting adopt a Resolution of Intent to Close An Alley on the East side of Bridge Street calling for a public hearing to be held; and

WHEREAS, the City Council of the City of Eden, did on the 16th day of November, 2021, at its regular monthly meeting, schedule a public hearing to be held on the 21st day of December, 2021, and requested a recommendation of the Planning Board on said closing; and

WHEREAS, the required legal notice was published in the Eden News on the 24th day of November, 2021, and on the 1st, 8th and 15th day of December, 2021, and copies were sent to the property owners as required by law on the 3rd day of December, 2021, and copies were posted on the 6th day of December, 2021, as required by law; and

WHEREAS, the Planning Board at its regular meeting on October 26, 2021, recommended to the City Council that said alley on the east side of Bridge Street be closed; and

WHEREAS, the public hearing was held at the regular monthly meeting of the City Council on the 21st day of December, 2021; and

WHEREAS, the evidence offered at the public hearing did not establish that the closing would be detrimental to the public interest or would deprive an individual or entity owning property in the vicinity thereof of reasonable means of ingress and regress to and from his property; and

WHEREAS, it appears to the satisfaction of and it is determined by the City Council of the City of Eden from the Petition and other evidence submitted at said hearing that: Robert G. Shropshire and wife, Kim S. Shropshire are the owners of the property on each side of the alley on the east side of Bridge Street which is to be closed.

That said alley is not under the control or supervision of the Department of Transportation.

That the closing of an alley on the east side of Bridge Street is not contrary to the public interest and that no individual or entity owning property in the vicinity thereof will thereby be deprived of reasonable means of ingress and regress to or from his property.

That upon the closing of said alley on the east side of Bridge Street, all right, title and interest therein shall be conclusively presumed to be vested in Robert G. Shropshire and wife, Kim S. Shropshire, the owners of the lot or parcel of land adjacent thereto.

That it appears that the provisions of the Eden City Code and the North Carolina General Statutes have been complied with fully in this matter.

That said alley on the east side of Bridge Street should be closed as requested.

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

NOW, THEREFORE, BE IT ORDAINED by the City Council of the City of Eden, that the following described alley on the east side of Bridge Street in the City of Eden be and the same is hereby closed, said alley on the east side of Bridge Street being more particularly described as follows:

Being all of that alley located on the east side of Bridge Street at its intersection with Boone Road and Washington Street referenced in Deed Book 1959, page 1961 and Deed Book 661, page 729, a copy of a survey showing a portion of the alley being recorded with the Deed in Book 661, page 729. This alley is surrounded on three sides by the property described in Deed Book 1959, page 1961, Tax PIN 7979-07-68-2808, Parcel Number 173480Z1 and as shown on the attached GIS map which is attached hereto for reference.

IT IS FURTHER ORDERED that in the event there is no appeal from the adoption of this Ordinance and Order within thirty (30) days of the date hereof as provided by law, a certified copy of this Ordinance and Order shall be recorded in the Office of the Register of Deeds of Rockingham County, North Carolina.

APPROVED, ADOPTED AND EFFECTIVE, this 21st day of December, 2021.

CITY OF EDEN

BY: Neville A. Hall, Mayor

ATTEST: Deanna Hunt, City Clerk

#### REQUESTS AND PETITIONS OF CITIZENS:

Scottie Eanes of 644 Summit Road in Eden said he met several people at Holmes Middle School over the past few months who walked late at night because they were not able to walk at Freedom Park. Freedom Park was unique because it offered an RV park within its parameters. He asked for Council to look into the options of leaving the park open for the walking track and adding four lights, one on each end and two in the center, similar to the walking track at Holmes Middle School that was lit up during the evening where one could see all the way around it. The walking track at Holmes Middle School was also open 24 hours a day. The RV component of Freedom Park forced the gates to stay open. He already spoke to the police chief, a couple of council members, and Facilities and Grounds Superintendent Ray Thomas. It was up to the City what was done with it but he felt it would be beneficial for the park to stay open, especially the walking track. Once the new plant opened, it would be a place for employees to get their exercise before or after work.

Mayor Hall said that was something previously discussed at various budget retreats and it was a matter of funding to install the proper lighting. He agreed it would be a huge improvement to the property and said the City would give it consideration.

#### UNFINISHED BUSINESS:

- a. First Responders on Tubing Program

Mayor Hall called on Council Member Hunnicutt.

Council Member Hunnicutt said he wanted to address the public safety issue for the recently approved tubing initiative. It was a concern for him that Council did not hear from any of the City's first responders, such as the Police Department, Fire Department, and even the Parks and Recreation Department in the proposal that was presented and approved at the November City Council meeting. He recalled when Council Member Underwood was fire chief, he requested more full-time firefighters. Unfortunately, the City had not been able to approve that request due to the lack of available funding. However, more responsibility was being added to the Fire Department and first responders, which was a concern. Because they were not part of the presentation, he requested the program be paused for 30 days and the request be sent back to City staff. He would like for the Internal Technical Review Committee (iTRC) to meet with all of the first responders, including the Eden Rescue Squad, in an effort to obtain their endorsement before moving

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

forward. He had a concern that an additional burden was being put on a group that was already understaffed; therefore, he felt it was a prudent move to give them the opportunity to share their input.

Council Member Hunnicutt made a motion to postpone the tubing program initiative for 30 days so as to allow the proposal to be taken back to the city manager and iTRC for assessment and recommendation. He noted that the Eden Rescue Squad was not part of City operation, but he hoped they would be part of the conversation for input. Council Member Underwood seconded the motion.

Mayor Hall said to his knowledge, several of the issues were vetted out through the Strategic Planning Commission and the iTRC. For brevity reasons, those details were not disclosed at the time of the presentation. He acknowledged that every question may not have been asked but hoped those answers could be obtained to satisfy everything. He did not believe it was done haphazardly, but if more detail was needed, it could be looked at again.

Council Member Epps stated he believed it was a work in progress.

Council Member Ellis said since the program involved the river, he felt the Eden Rescue Squad would automatically be involved.

Council Member Hunnicutt said the Eden Rescue Squad was not a City function.

Council Member Ellis said he understood that but felt they would be part of the function since they would be called upon if emergency services were needed.

City Attorney Erin Gilley asked if the motion was for 30 days or until the next regular scheduled City Council meeting.

Mayor Hall replied the next regular scheduled City Council meeting in January.

Council Member Hunnicutt asked if Council had a budget retreat and a City Council meeting in January.

Ms. Gilley said the budget retreat was scheduled after the January City Council meeting. She advised to state the next regular City Council meeting in the motion made.

Council Member Hunnicutt asked City Manager Jon Mendenhall if he would rather discuss it at the budget retreat as it did not make a difference to him.

Mr. Mendenhall said he did not see a logistical problem either way. The iTRC met when needed and the easiest thing to do would be to contact the Eden Rescue Squad to see when they would be available to meet in order to have a report ready for Council at the next regular City Council meeting. It could be done at the budget retreat if desired.

Council Member Hunnicutt instructed Ms. Gilley to word the motion as being no later than the next regular City Council meeting in January.

Council Member Underwood said Chief Jason Woods of the Eden Rescue Squad was in attendance if Council wanted to ask him any questions.

Mayor Hall said he did not know of any questions that needed to be asked.

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

Council Member Hunnicutt's motion to postpone the tubing program initiative until the next regular scheduled City Council meeting in January to allow the proposal to be taken back to the city manager and iTRC for assessment and recommendation was seconded by Council Member Underwood. All members voted in favor. The motion carried, 7-0.

Council Member Underwood stated he had a list of questions he had been asked regarding the tubing program that he wished to share with Council and Mr. Mendenhall.

NEW BUSINESS:

a. Boards and Commissions Appointments.

Mayor Hall called on Ms. Stultz.

Ms. Stultz said notice was sent to members who needed to either reappoint members or appoint new members to the various boards and commissions. She received Council Member Hunnicutt's list by email. He asked to reappoint Charles Yarborough to the Historic Preservation Commission, reappoint Jerry Holland to the Planning Board, appoint Martha Corum to the Community Appearance Commission, and reappoint Ed Wilson to the Parks and Recreation Commission.

Council Member Moore nominated Joan Moore to continue on the Board of Adjustment and Susan Cunningham to continue on the Community Appearance Commission.

Council Member Nooe nominated Will Flynt to serve another term on the Board of Adjustment.

Council Member Kirkman did not have a recommendation for the Board of Adjustment. He nominated Chad Simpson for the Parks and Recreation Commission.

Council Member Epps nominated Paul Dishmon to continue on the Tree Board and Faye Shelton to continue on the Community Appearance Commission.

Council Member Underwood said he would have his nominations next month.

Council Member Hunnicutt said Ms. Stultz covered his nominations.

Council Member Ellis nominated Debbie Ellis to continue on the Community Appearance Commission and Rick Willis to continue on the Historic Preservation Commission.

Mayor Hall nominated Julie Talbert to continue on the Community Appearance Commission, Blanche Hailey on the Historic Preservation Commission, and Carol Helms on the Planning Board. He asked Ms. Stultz if anyone had mentioned to her any recommendations for the vacant seat on the ETJ.

Ms. Stultz said there had been some interest and she would share those names with Council.

Council Member Kirkman said Barry Carter had expressed interest in the position.

Council Member Moore made a motion to approve the nominees for appointments to the boards and commissions. Council Member Ellis seconded the motion. All members voted in favor. The motion carried, 7-0.

REPORTS FROM STAFF:

a. City Manager's Report

Mayor Hall called on Mr. Mendenhall.

Mr. Mendenhall said he would be happy to answer any questions regarding the City Manager's report. He wished Council, staff and the public a Merry Christmas and Happy New Year. He looked forward to 2022.

Mayor Hall stated that he had extra copies of the report available for anyone wishing to have one and added that it was printed in Eden's Own Journal. He wished Mr. Mendenhall a Merry Christmas as well.

City Manager's Report:  
December 2021  
City Manager Jon Mendenhall

ADMINISTRATION

*Division of Design & Construction*

FY 2021-22 Street Resurfacing Contract, No. 2

The FY 2021-22 Street Resurfacing Contract, No. 2 is scheduled for the spring of 2022. The preliminary street resurfacing schedule includes sections of: Prospect Street, Cedar Street, Harmon Drive, Hamlin Street, Delaware Avenue, and possibly Monroe Street.

Northridge Mobile Home Park – Roadway Construction

Lambeth Asphalt paved the new roadways of Northridge Mobile Home Park in November. The shoulder construction is scheduled to be completed during December.

Proposed Crosswalk – Morgan Road

Staff hopes to obtain an estimated cost for the pedestrian lighting and wheel chair ramps for the crosswalk on Morgan Road (Cook Block) in December.

Stamped Asphalt Decorative Crosswalks – Washington Street

Staff is currently working on the bid package for the stamped asphalt crosswalks on Washington Street in Uptown Eden. The bid package is scheduled to be released in January.

*Marketing Office*

Christmas Parade Thank You

The City would like to thank Peggy Good, Leaksville Night-time Christmas Parade organizer, and O.T. Coleman, Draper Children's Christmas Parade organizer! They both worked very hard fielding hundreds of phone calls, preparing line-ups, and making sure everything ran smoothly on the day of the events. Awesome job! We appreciate everything both of these organizers do to help create special Christmas memories for everyone!

Draper Tree Lighting Thank You

A huge thank you to Tim & Diana Biggs, as well as the Draper Merchants Association, for a very special Draper Tree Lighting on November 30 where City Manager Jon Mendenhall had the honor of lighting the tree. The tree was full of sparkling lights, the hot chocolate and other treats were delicious, and the Christmas Spirit was amongst everyone! This event always has a sweet hometown Christmas feeling that we cherish! Thank you!

Hike with Santa

Join us on December 18 at 10 a.m. for *Hike with Santa* on the Children's Interactive Trail along the Smith River Greenway located at 301 S. Kennedy Street here in Eden. Enjoy a storybook reading with Santa's sister, hot chocolate, and cookies! Children will also receive a free children's book to take home. So much fun!

PARKS AND RECREATION

Bridge Street & Mill Avenue Recreation Centers

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

These two facilities are open Mondays 1 to 9 p.m., Tuesdays, Wednesdays and Thursdays from 12 to 8 p.m., and on Fridays from 10 a.m. to 6 p.m. Those attending may participate in basketball, pickleball, track walking, cornhole, or the playground. The Bridge Street recreation center offers tennis courts while Mill Avenue recreation center offers a baseball field.

Bridge Street Recreation Center: basketball practice for ages 4 through 7 is being held on Tuesday and Thursday afternoons. A city-employee corn hole league is being played on Monday evenings at 6:30 p.m. A beginner's class for pickleball is now being offered in the mornings while games are played on Tuesday and Thursday evenings at 5:30 p.m. The senior center is hosting exercise classes at the center on Monday, Wednesday, and Friday mornings.

Mill Avenue Recreation Center: basketball practice for ages 8 through 10 is being held on Mondays and Wednesdays at 4:30 p.m.; practice for ages 11 through 12 is being held on Tuesdays and Thursdays at 4:30 p.m.; and practice for ages 13 through 15 is being held on Mondays and Wednesdays at 5:30 p.m. The open cornhole league is playing on Tuesday evenings at 6:30 p.m. Pickleball is played on Monday, Wednesday, and Friday mornings at 8 a.m.

Freedom Park

Open daily from dawn to dusk, this park offers a walking track, nature trail, skateboard park, basketball courts, playground, dog park, picnic shelters, and an amphitheater.

Garden of Eden Senior Center

The Garden of Eden Senior Center is open weekdays from 10 a.m. – 6 p.m. and offers paint classes, mahjongg, pickleball (mornings and evenings offsite), exercise classes, cornhole, knit and crochet, strength and balance, legal aid, quilt guild, Friends Club, bingo, watercolor classes, craft classes, senior technology classes, and card games, along with assistance and referral for seniors. The center prepared 30 baskets to donate to Hospice of Rockingham County and collected canned food for the Salvation Army as well during the month of November. The center also conducted a program on senior health insurance information that enabled participants to meet with advisors to help them decide which plan was best suited for them. Hand and Rehab Specialists provided a balance screening to participants and Eden Drug conducted a virtual and in-person class on blood pressure.

PLANNING & COMMUNITY DEVELOPMENT

Collections

Payments received for code enforcement fees during the month of November consisted of \$600.

Community Appearance Commission

Pink Poppi was chosen to receive the community appearance award for the month of November. The commission agreed to help with identifying neighborhoods in which to install public art, such as murals. The commission also expressed interest in restarting the fire hydrant painting project.

Grants

The City received the Release of Funds from the N.C. Department of Commerce for the CDBG-COVID grant. Applications were released to the public on November 30.

The Draper Neighborhood Revitalization Grant is ready to begin.

Historic Preservation Commission

The commission seemed optimistic about reinitiating the historic marker project from several years ago. The commission also agreed to assist the Community Appearance Commission with identifying neighborhoods in which to install public art, such as murals.

Inspections and Permits

|                                       |                                      |
|---------------------------------------|--------------------------------------|
| Total Inspections Performed-November: | 145 (not including fire inspections) |
| Total Permits Issued-November         | 77                                   |

Spray Cotton Mill Local Landmark

Staff is working on the landmark designation report for Spray Cotton Mill.

Tree Board

Staff prepared the Tree City USA application for recertification as a Tree City.

*Downtown and Economic Development Activities*

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

The Boulevard

The new owner of 246 The Boulevard has begun renovations of the downstairs storefront, as well as the upstairs apartment.

Draper

A concrete pad was poured for the State Employees Credit Union ATM.

Uptown

Duke Energy Downtown Revitalization Grant applications were distributed and collected. A committee was formed to review the applications from the Eden Downtown Development Inc. officers. Sidewalk improvements are scheduled for December. A new bakery is planned for Henry Street.

POLICE

All police vehicles purchased under the Police Department's vehicle capital outlay have been delivered. Parts for the animal control truck have been ordered and are awaiting installation.

The department's contract with Axon Enterprises has been signed with a rush order placed for implementation of the body worn cameras. The rush order will hopefully put the department in full operation of the body worn cameras by the middle of January, 2022, followed shortly by the tasers and in-car cameras.

Two new officers were recently hired, Sonya Crabtree and Robbie Deel. The department was currently accepting applications for two vacant positions.

b. Report on advisory committee proceedings.

(1) Strategic Planning Commission.

There was no report.

(2) Planning Organization Boards.

There was no report.

(3) Parks Commission

Mayor Hall called on Staff Advisor Terry Vernon.

Mr. Vernon said the Commission met December 7 and discussed some old business. The commission was instructed to come up with some ideas to bring to the budget retreat in January, in which they did. They were interested in the carbide trail in the Spray section of town and the riverwalk from Spray to the Pervie Bolick area, which would have to go through a government process as it involved rails-to-trails. The fastest growing sport the City currently offered was pickleball. The commission hoped to convert some of the tennis courts at Bridge Street to pickleball courts. The participants were still playing outside in spite of the cold weather and had even created a league on Sundays. They also discussed the unification of recreation within the city. Mr. Vernon spoke with the Boys and Girls Club but they were not too positive about the City taking over their athletic programs, which he understood. However, they were intent on having a meeting with any baseball enthusiasts in the area on January 11 at City Hall at 6 p.m. if anyone was interested. The intention was to discuss coming together on the same page with all of the organizations and utilizing the City's facilities and fields to help promote baseball and unification with everyone. The intent was not to put anyone out of business but to do what was best for the kids in Eden, which was something they had been trying to do for a long time. He was not sure they could make it happen but he was certainly going to try. The commission was also very interested in a bike trail at the New Street property and using Tony McGhee as an advisor to help promote and design the trail. The commission

Minutes of the December 21, 2021 meeting of the City Council, City of Eden:

expressed interest in putting a frisbee disc golf course at one of the City's greenways. Mr. Vernon reached out to someone in regards to the sport but had not heard back. He felt it was a good, healthy sport as it encouraged physical activity between throwing the frisbee and walking throughout the course. It was very inexpensive and something he felt was a good idea.

Council Member Moore asked what time the baseball meeting was scheduled for on January 11.

Mr. Vernon replied 6 p.m. at City Hall.

Council Member Ellis asked what the main reason was for the baseball meeting.

Mr. Vernon said the intent of the meeting was to get everyone on the same page. The commission was interested in getting several of the travel teams involved to hopefully utilize some of the baseball fields at Spray and Draper that were not being used. They hoped to promote baseball and any other sport.

Council Member Ellis said he appreciated that because he felt it was very important to maintain the city's surroundings with area teams that had that within their city.

Mr. Vernon said Eden was home and always had been. Sometimes there were parents coming through the program for three to four years with their children and even though the City tried to improve things all along, they hoped it would prove to be advantageous.

#### CONSENT AGENDA:

- a. Approval and adoption of the November 16, 2021 regular meeting minutes.

A motion was made by Council Member Epps to approve the Consent Agenda. Council Member Ellis seconded the motion. All members voted in favor. The motion carried, 7-0.

#### ANNOUNCEMENTS:

Mayor Hall said WinterFest was a huge success in Grogan Park and he thanked Ms. Adams for organizing the event and for all the City staff that assisted with it.

Council Member Ellis wished all the citizens and City employees a Merry Christmas. He thanked all the retirees leaving the City at the end of the year. He also thanked Council Members Kirkman, Underwood, and Epps for taking seats on the Council. He looked forward to working together in the upcoming year. He thanked everyone for their prayers over the last few weeks regarding his hip surgery and noted that it felt good to be walking normal again.

Council Member Epps said he appreciated the confidence the citizens had in him to elect him for another term and he wished everyone a Merry Christmas.

Mayor Hall apologized for the late notice to staff members and their families who were invited to the traditional gathering at the mayor's house following the meeting, but after consulting with medical personnel, he was advised to not be in close quarters together with a big group. It might be rescheduled when the virus calmed back down. He wished everyone a Merry Christmas.

#### ADJOURNMENT:

As there was no further business to discuss, a motion was made by unanimous consent to adjourn.



Respectfully submitted,

---

Deanna Hunt  
City Clerk

ATTEST:

---

Neville Hall  
Mayor



***Eden Police Department***  
**308 B East Stadium Drive**  
**Eden, North Carolina 27288**

**Memorandum**

**To: The Honorable Mayor and City Council**  
**From: Clint Simpson, Police Chief/Assistant City Manager of Public Safety**  
**Subject: Safety and Loss Control – Safety Manual**  
**Date: January 5, 2022**

The Safety and Loss Control Committee has been reviewing the safety manual in an effort to make updates to stay in compliance all local, state and federal regulations.

At a special meeting held on December 15, 2021, the Committee voted to recommend to the City Council that (1) SLC-K Bloodborne Pathogen Exposure Control Plan as amended; (2) SLC-AA Asbestos Program; and (3) SLC-AB Respirable Silica Exposure Control Plan be approved, adopted and made a part of the City of Eden Safety & Loss Control Manual.

|   |                                  |                |   |                  |   |
|---|----------------------------------|----------------|---|------------------|---|
|  | SAFETY & LOSS CONTROL MANUAL     |                | Subject:<br>Bloodborne Pathogen Exposure Control Plan |                  |  |
|   | Section:<br>SLC-K                | Revision:<br>3 | Effective Date:<br>December 15, 2021                  | Page:<br>1 of 40 |   |
|   | Supersedes:<br>February 21, 2012 |                |   |                  |   |

SLC-K consists completely and solely of section APP- 24 of the Administrative Policies & Procedures Manual, “Bloodborne Pathogen Exposure Control Plan.”

GA-18.0 Authority:

This plan was approved by the City Council.

GA-18.1 Purpose:

To provide a bloodborne/airborne pathogen and infection exposure control plan to help protect employees who may be at risk to exposure to blood and other potentially infectious materials.

GA-18.2 Application:

All City of Eden departments and employees are affected by this policy. The specific department and employees who are subject to participation in this program are listed and attached to this regulation. All employees who are exposed to blood and other potentially infectious materials should also refer to OSHA Bloodborne Pathogens Standard 29 CFR 1910.1030.

GA-18.3 Introduction:

This plan, and the planned inoculation series for Level I exposure employees (public safety) are now required under new OSHA regulations.

The plan was prepared for the city by the Piedmont Triad Council of Governments in September of 1992, and their staff has also assisted in presentation of the required classes for Level I and Level II exposure employees. This training had to be completed by January 1, 1993 for the city to be in compliance with the new OSHA regulations.

This plan was reviewed by the City of Eden Safety Committee in October 2020. A few revisions have been made to reflect the City's current stance.

During the performance of assigned duties, some City of Eden personnel are at risk for exposure to blood and other potentially infectious materials. The purpose of this document is to provide guidelines and procedures that will minimize the risk of occupational exposure to communicable and infectious diseases.

It is the intent of the City of Eden to provide all personnel the proper training, information, and protective equipment so that they might recognize when they may be at an increased risk, and protect themselves accordingly. While the City of Eden is committed to providing a safe and healthy work environment for all staff, it is up to each employee to follow these policies and procedures to ensure that these goals are achieved.

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## **I. Introduction**

During the performance of assigned duties, some City of Eden personnel are at risk for exposure to blood and other potentially infectious materials. The purpose of this document is to provide guidelines and procedures that will minimize the risk of occupational exposure to communicable and infectious diseases.

It is the intent of the City of Eden to provide all personnel the proper training, information, and protective equipment so that they might recognize when they may be at an increased risk, and protect themselves accordingly. While the City of Eden is committed to providing a safe and healthy work environment for all staff, it is up to each employee to follow these policies and procedures to ensure that these goals are achieved.

## **II. Policy**

The City of Eden complies with 29 CFR 1910.1030, the OSHA Bloodborne Pathogens Standard and relevant sections of the North Carolina communicable disease law and rules.

The policy outlines steps to prevent occupational exposure and specific procedures to be followed if an inadvertent exposure occurs.

The policy and procedures shall be reviewed and updated at least annually and whenever necessary to reflect new job descriptions and modified tasks and procedures that affect occupational exposure. Employees are encouraged to provide input on procedures that will improve employee safety.

## **III. Definitions**

Bloodborne Pathogens: Pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, hepatitis B virus (HBV) and human immunodeficiency virus (HIV).

Other Potentially Infectious Materials: Includes the following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, and any bodily fluid that is visibly contaminated with blood. All body fluids including vomitus, urine, etc., should be treated as potentially infectious.

Occupational Exposure: Actual or potential parenteral, skin, eye, or mucous membrane contact with blood or other potentially infectious materials that may result from the performance of an employee's duties. (Exposure is defined as coming into contact with, but not necessarily being infected by, a disease causing agent.)

Universal Blood and Body Fluid Precautions: An approach to infection control. According to the concept of universal precautions, all human blood; body components including serum; other body fluids containing visible blood; semen; vaginal secretions;

tissues; and cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids are treated as if they are infectious for HIV, HBV, and other bloodborne pathogens.

#### **IV. Employees Affected**

All full-time employees who have occupational exposure to bloodborne pathogens are covered by this policy and its standard operating procedures.

City of Eden contract employees are required to have current hepatitis B immunization to perform jobs involving exposure to bloodborne pathogens. The City of Eden does not provide the initial hepatitis B vaccination series to contract employees. With this exception, all other aspects of this policy and its standard operating procedures apply to contract employees. Part-time and seasonal employees, as well as volunteers, that fall into one of these categories are subject to this policy. Once they are hired, they should be questioned as to whether or not they have had the Hepatitis B series. If they have not, they will have to sign a waiver showing that they understand the risk involved and that if they come into contact with any potential contaminants, they will wait for assistance so that they do not risk exposure. If they have had the series, they will be asked to have a titer test administered to see if the series was good. If they do not agree, they can again sign the waiver.

The City of Eden has made a determination of all job classifications in which employees have occupational exposure to bloodborne pathogens. All job tasks and procedures are classified into one of two categories to facilitate exposure determination.

**Category I:** Normal work routine tasks that involve potential for mucous membrane or skin contact with blood, body fluids, or tissues, or potential for spills or splashes of them. The classifications in this category are as follows:

- Animal Control Officer
- Facilities and Grounds
- Collection and Distribution
- Fleet Maintenance
- Lifeguard
- Pool Manager
- Solid Waste
- Streets
- Water Resources
- Wastewater Treatment
- All Sworn Police Officers
- All Full and Part time Firemen

Job tasks and procedures in which occupational exposure occurs:

- Cleaning up potentially infectious materials
- Cardiopulmonary resuscitation (CPR)
- First aid procedures



Laundering contaminated linens  
Replacing pumps and repairing sewer collection lines  
Performing hemorrhage control  
Cleaning equipment contaminated with blood or body fluids  
Sustaining cuts at wreck scenes where surfaces could be contaminated with blood  
Searches of prisoner (i.e., accidental needle sticks from prisoner's clothing) Controlling combative persons

**Category II:** Normal work routine involves no exposure to blood, body fluids, or tissues, but employment may require performing unplanned Category I tasks. The classifications in this category are as follows:

Athletic Director  
Assistant Center Director  
Center Director  
Engineering  
Finance  
Planning and Inspections  
Foreman - Recreation  
Laborer I - Recreation  
Laborer II - Recreation  
Program Supervisor (Recreation)  
Recreation Director  
Water Treatment

Category II personnel may be occasionally involved in activities where exposure may occur. Those activities, in addition to those listed in category I above, are possible needle sticks from picking up garbage and cleaning up possible infectious materials and fluids from bathrooms or other City facilities.

**Category III:** Tasks that involve no exposure to blood, body fluids, or tissues, and Category I tasks are not a condition of employment.

The City of Eden establishes, maintains, and enforces work practices and standard operating procedures to eliminate or minimize contact with blood or other potentially infectious materials.

The City of Eden's employees are required to follow standard operating procedures while performing job duties classified as Category I.

## **V. Education and Training**

All City of Eden personnel at risk for exposure (Category I personnel) are required to complete an infectious disease training program. This training program must be completed prior to assignment of job duties that may result in exposure to infectious diseases.

Training will also be provided to Category II personnel on this plan and other infection control matters.

The City of Eden offers information to new employees prior to beginning employment about Bloodborne Pathogen Safety, as well as annual training, to all City employees. It is the responsibility of the Division/Department Head to determine if the new employee needs to begin the series for vaccination or be checked with a Titer test. The City also offers training for new or modified procedures to all employees who perform Category I tasks.

The training will include at minimum the following topics:

- A. Description of regulatory standards (29 CFR 1910.1030) and how a copy may be obtained for review.
- B. A general explanation about bloodborne diseases covering epidemiology, symptoms, modes of transmission, and prevention of diseases, including but not limited to, meningitis, childhood communicable diseases, herpes viruses, hepatitis A, hepatitis B, other hepatitis, tuberculosis, scabies, and lice.
- C. A review of this infection control plan. A copy will be issued to all personnel.
- D. How to recognize tasks or other activities that may result in exposure to blood and other potentially infectious materials.
- E. Work practices and other controls designed to prevent or reduce exposure. This will include the proper use, limitations, and basis for selection of personal protective equipment (PPE).
- F. Information on the sterilization, disinfection, or disposal of contaminated materials and equipment.
- G. Information on the hepatitis B vaccine, including efficacy, safety, method of administration, and that it is offered free of charge.
- H. Procedures for reporting exposures and post exposure medical follow-up that is available, including employer requirements.
- I. OSHA requirements for signs, labels, and color coding of infectious materials as outlined by 29 CFR 1910.1030.
- J. An opportunity for interactive questions and answers with the person conducting the training session.

Documentation of training will follow the standard procedure of the City of Eden, and training records will be maintained by the City's Safety Officer or designee. Employees are entitled access to training records and any reference material used in training upon request.

## **VI. Immunizations**

The hepatitis B vaccine will be offered to all Category I and II employees at no charge. Employees must receive information on the vaccination, including its safety, method of administration, and that it is given at no cost to the employee prior to its administration. Employees receiving the vaccination must first sign a consent form which is to be maintained by Occupational Health, with a copy maintained by the City.

Personnel electing to decline the vaccine must read and sign the Hepatitis B Vaccine Declination Form (a copy of which is included in the Appendix), and have the option of taking the vaccine at a later date upon request.

The first dose of vaccine is to be made available to full time employees within 10 working days of initial assignment. Subsequent doses are to be administered according to current Centers for Disease Control recommendations. If the employee has already received a vaccine, they will be sent for a Titer test to make sure that they have been properly vaccinated, unless they can provide the records showing that they are positive for the vaccine.

The City also recommends a follow-up Titer Test, within 6 – 8 weeks of the final shot for best results, to determine if the vaccine took effect in the employee after receiving the series. If the test comes back positive, nothing further is needed. If the Titer Test shows that the vaccine did not take (is negative), it is recommended that they repeat the series. If it comes back positive this time, nothing further is needed. If it comes back negative a second time, the employee is considered to be a “non-convertor” and nothing else can be done. The employee needs to be aware of the potential hazards in case of future exposure since their results are not consistent with immunity.

This vaccine lasts for life. The only time an employee would have to be tested again or receive a booster shot is if they have been exposed to potentially hazardous material. This is explained further in Section XV, Post-Exposure Evaluation and Follow-up.

## **VII. Cleaning and Decontamination**

Employees are required to clean equipment, environmental and work surfaces and decontaminate them immediately after contact with blood or other body fluids using an EPA-approved disinfectant, such as phenolic or quaternary ammonium germicidal detergent solution or a 1:10 to a 1:100 dilution of sodium hypochlorite.

## **VIII. Recordkeeping**

The City of Eden has established and maintains a recordkeeping system that consists of medical and training records.

- A. A confidential medical record is kept for each employee and maintained for the duration of employment plus 30 years. This medical record will be kept by the City's Human Resources Director and will include the following minimum information:

1. name and social security number;
  2. immunization status, including hepatitis B vaccination;
  3. results from any post-exposure medical follow-up and testing.
- B. All medical records will be considered confidential and available only to the subject employee, anyone with written consent of the employee, OSHA, and the health care professional conducting post-exposure medical follow-up or examinations. This record is not available to any other person.
- C. Training records will be maintained for three years from the date the training occurred, and will include the following information:
1. Dates of instruction;
  2. Instructional content summary;
  3. Names of instructors;
  4. Instructor's qualifications
  5. Names and Division/Department of all persons attending sessions.

## **IX. Universal Precautions**

- A. The premise of universal precautions is that personal protective measures must be precautions apply to contact with blood, semen, vaginal secretions, human tissues, and all other body fluids.
- B. Skin and handwashing is considered a critical aspect of preventing the spread of diseases. Hands should be washed before and after each contact with potentially infectious materials or after contact with a potentially contaminated surface. Hands must be washed even if gloves have been worn. Hands should not be washed in sinks used for food preparation. The following handwashing procedure is recommended:
1. Use warm, running water and antiseptic soap.
  2. Work up a lather using friction for 15 seconds.
  3. Rinse with flowing water and dry with a paper towel.
  4. Use paper towel to turn off the faucet.
- C. If skin or mucous membrane contact with potentially infectious fluids should occur, the area must be thoroughly washed immediately using water or saline for mucosal membranes and soap and running water for skin surfaces. If soap and water are not immediately available, an alcohol based skin cleaning agent may be used until appropriate washing facilities are available. All Category I employees shall have immediate access to an alcohol based skin cleaning agent, and employees will be trained in its use and location.
- D. In any situation that requires the use of personal protective equipment to prevent or reduce exposure risk (such as wearing gloves) or in any situation when an employee is

contaminated with blood or body fluids (such as soiled clothing), the employee shall not eat, drink, smoke, apply cosmetics or lip balm, or handle contact lenses.

## **X. Personal Protective Equipment (PPE)**

All personnel are required to use the appropriate personal protective equipment when carrying out job duties that may result in infectious disease exposure. The City will make PPE available to all Category I and II personnel free of charge. Employees should notify his/her supervisor immediately if the required personal protective equipment is not available or is defective.

In some rare and extraordinary circumstances, an employee may determine that use of personal protective equipment may prevent the delivery of care or create a greater safety hazard. OSHA requires that whenever personal safety equipment to prevent an infectious disease exposure was indicated but not used, an Incident Report Form must be completed and submitted to the supervisor prior to completing the tour of duty. The form must be forwarded to the department's safety team member with a copy of the form being submitted to the City's Human Resources for filing. The incident must be investigated by the safety team to determine if changes can be instituted to prevent such occurrences in the future.

Gloves and barrier clothing will be provided by the City and shall be used when the employee may come in contact with blood or body fluids. Safety glasses are available for any procedure where splashing and spraying of body fluids may occur.

Protective equipment shall be provided, used, and maintained in a sanitary and reliable condition wherever there is potential for exposure. Waterless hand cleaners are available where handwashing facilities are not convenient. The following personal protective equipment will be provided and must be used as indicated:

### **A. Medical examination gloves.**

1. Medical exam gloves will be provided. The gloves are for single use, disposable, and meet the requirements of ASTM D 3578, Standard Specification for Nitrile Examination Gloves (non-sterile). Gloves will be available in a variety of sizes to provide proper fit.
2. Exam gloves should be worn in any situation that may result in contact with blood or body fluids, mucous membranes, or abraded or non-intact skin. Exam gloves should be changed as soon as possible after becoming soiled.
3. No glove shall be used if it is punctured, torn, cracked, or discolored. Gloves will be immediately replaced when deterioration is noted.
4. Hands must be washed after removal of exam gloves.

### **B. Protective Clothing.** The use of a fluid proof or fluid resistant garment is required when splashes of body fluids are anticipated. The garment may be a gown, apron, lab coat, or

other garment which protects exposed skin and clothing. The garment should allow safe, uninhibited performance of the task.

- C. Masks and Eye Protection. Masks and eye protection are required when splashes or aerosolization of blood or body fluids to the eyes, nose, or mouth are a possibility.
- D. A CPR protective mask with one-way valve will be made available to Category I employees, and training will be provided for its proper use.

## **XI. Housekeeping**

The following procedures will be used for cleaning and disinfecting equipment. Equipment must be cleaned in a utility sink, not in a food preparation area.

- A. Walls, floors, and other surfaces should be cleaned when contaminated. Cleaning and removal of contamination should be done routinely. Wear cleaning gloves when doing general cleaning in areas where blood and body fluid spills are likely.
- B. Spills of blood or body fluids should be cleaned up quickly using an approved disinfectant. Gloves must be worn. If splashing is anticipated during clean up, protective eye wear and a gown or fluid proof apron should also be worn.
- C. Several disinfectants may be used to clean blood and body fluid spills. These include:
  - 1. Chemical germicides approved for use as hospital disinfectants. These agents shall be tuberculocidal when used as indicated by the manufacturer.
  - 2. Products designated by the EPA as effective against HIV. This information must be on the label.
  - 3. Solutions of sodium hypochlorite (household bleach) and water. Dilutions from 1:10 to 1:100 are acceptable. The solution of sodium hypochlorite needs to be mixed at the time of use.
  - 4. The procedure for cleaning a blood or body fluid spill is as follows:
    - a) Assemble cleaning supplies which include cleaning gloves, a trash bag, paper towels, and disinfectant.
    - b) Put on gloves. To assure the effectiveness of the disinfection process, first thoroughly clean surface of all visible soil. Visible blood, tissue, or body fluid should be wiped up with paper towels. Place the paper towels into the trash bag.
    - c) Spray the contaminated area with the disinfectant; wipe up the solution with paper towels. Discard paper towels into the trash bag.

- d) Knot the trash bag and place it into a trash receptacle (this is considered pre-treated waste).
- e) The employee should wash his/her hands thoroughly.

## **XII. Hazard Communication**

- A. In areas where employees may be exposed to hazardous or potentially hazardous conditions, equipment or operations shall be identified by tags until the identified hazard is eliminated or the operation is completed.
- B. Tags shall contain a "signal word" such as BIOHAZARD or the biological symbol. A message that indicates the specific hazardous condition or safety instructions for the worker must accompany the "signal word" or symbol.
- C. Bags or other receptacles containing contaminated articles must be tagged or otherwise identified.
- D. All employees shall be informed of the meaning of the various tags used throughout the workplace. Instruction will be provided to the employees on the necessary precautions related to each tag.

## **XIII. Standard Operating Procedures for Employee Exposure to Bloodborne Pathogens**

- A. When an inadvertent exposure to blood or other potential infectious materials occurs, employees are required to:
  - 1. Remove contaminated personal protective equipment and place it in a red or biohazard labeled bag.
  - 2. Wash exposed areas (hands and other skin surfaces) with soap and water. Immediately flush exposed mucous membranes with water, and, if exposed, flush eyes with large amounts of water or eye wash solutions.
  - 3. Immediately report exposure incident to the immediate supervisor and the department's safety team member. If the exposure occurs after 5:00 p.m. or on a weekend or holiday, the employee should immediately notify the immediate supervisor on an emergency basis.
  - 4. If there is a spill, immediately arrange for decontamination with an EPA-approved disinfectant, such as phenolic or quaternary ammonium germicidal detergent solution or a 1:10 to a 1:100 dilution of sodium hypochlorite.
  - 5. Seek medical care if first aid is needed or if signs of infection, such as redness or swelling, occur.

6. Obtain an Incident Report Form from the supervisor. Complete and return it to the supervisor within 24 hours. (See Appendix B)
- B. When an employee reports an inadvertent exposure to blood or other potentially infectious materials, the supervisor is required to:
1. Immediately arrange or conduct exposure follow-up.
  2. Review standard operating procedures and methods to prevent future exposures with the employee.
  3. Provide employee with the Incident Report Form.
- C. When an employee or supervisor reports an inadvertent exposure to blood or other potentially infectious materials, the designated worker's compensation physician is required to:
1. Assess the employee's exposure, his/her hepatitis B vaccination and vaccine response status, whether the source of the infectious material is available, and the source's HIV and HBV status. This is done by interviewing the employee; reviewing the completed Incident Report Form, the employee's confidential medical record, and the source's record; contacting the source's physician; and talking with other employees, as indicated.
  2. Individualize post-exposure management and treatment of exposed employee(s) on a case by case basis, following current communicable disease rules.
  3. Make arrangements for HIV and HBV testing and counseling of source person, if known, according to the communicable disease rules [15A NCAC .0202(4)(a)(i) and .203(b)(3)(A)], unless already known to be infected.
  4. Conduct HIV and HBV pre-test counseling prior to obtaining laboratory tests from the exposed employee. Obtain consent for confidential HIV testing from the employee.
    - a) If the employee consents to a baseline blood specimen collection, but does not give consent at that time for HIV serologic testing, the serum sample must be stored by freezing at -20°C, for 90 days (if stored longer, must be frozen at -70°C).
    - b) If within 90 days of the exposure incident, the employee elects to have the baseline sample tested, such testing shall be done as soon as possible.



#### **XIV. Occupational Exposure Reporting Procedure**

- A. Employees and volunteers who think they have had a significant exposure are to report the incident as soon as possible to his/her supervisor. The details of the incident are to be documented in writing, using the Report of Exposure Form (See Appendix). The report should include:
1. the suspected disease;
  2. the date and time of the exposure;
  3. type of exposure, i.e., blood, body fluid, or secretion;
  4. details of exposure to include the area of contact;
  5. conditions of the exposure, i.e., location, confined space;
  6. the name, social security number, address, telephone number, and attending physician of the source, if known;
  7. employees are to have Worker's Compensation Form 19 completed and sent to his/her department head or designee;
  8. personal protective equipment being used at the time of exposure;
  9. any failure of personal protective equipment being used; and
  10. a detailed explanation if personal protective equipment was not being used.

The circumstances of each incident of exposure will be reviewed by the employee's department head and the City's safety team to determine if any changes in engineering controls or work practices could prevent a reoccurrence of exposure. It is the responsibility of each employee to know and to use work practices that will prevent occupational exposure to blood and body fluids. It is the responsibility of supervisory personnel to ensure that employees maintain safe work practices and use personal protective equipment.

In all cases the department head or designee will receive the Report of Exposure Form from the employee within 24 hours of the incident. The employee will be referred to the designated physician at Occupational Health for medical evaluation and follow-up.

#### **XV. Post-Exposure Evaluation and Follow-up**

When possible, testing and follow up will be provided by the designated physician at Occupational Health. When this is not feasible, a physician referral will be made. Specific protocols follow which indicate the course of treatment for different types of exposures. Exposures to diseases not covered by one of these protocols will be followed up as prescribed by the attending physician.

- A. HIV Exposure Treatment Protocol. When employees have a significant exposure to blood or body fluids that pose a significant risk of HIV transmission, the following shall apply:
1. When the source person is known:
    - a) the attending physician or occupational health care provider responsible for the exposed person, if other than the attending physician of the person

whose blood or body fluids is the source of the exposure, shall notify the attending physician of the source that an exposure has occurred. The attending physician of the source person shall discuss the exposure with the source and shall test the source for HIV infection unless the source is already known to be infected. The attending physician of the exposed person shall be notified of the infection status of the source;

b) the attending physician of the exposed person shall inform the exposed person about the infection status of the source, offer testing for HIV infection as soon as possible after exposure and at reasonable intervals up to one year to determine whether transmission occurred, and, if the source person was HIV infected, give the exposed person the control measures listed in this section. The attending physician of the exposed person shall instruct the exposed person regarding the necessity for protecting confidentiality.

2. When the source person is unknown, the attending physician of the exposed person shall inform the exposed person of the risk of transmission and offer testing for HIV infection as soon as possible after exposure and at reasonable intervals up to one year to determine whether transmission occurred.

3. A health care facility may release the name of the attending physician of a source person upon request of the attending physician of an exposed person.

B. Hepatitis B Exposure Treatment Protocol. When an employee has a significant exposure to blood or body fluids that pose a significant risk of hepatitis B transmission, the following shall apply:

1. When the source is known, the source person shall be tested for hepatitis B infection, unless already known to be infected.

2. When the source is infected with hepatitis B and the exposed person is:

a) vaccinated, the exposed person shall be tested for anti-HBs and given hepatitis B immune globulin immediately and a single dose of hepatitis B vaccine within seven days;

b) not vaccinated, the exposed person shall be given hepatitis B immune globulin immediately if requested, and, if at high risk for future exposure, begin vaccination with hepatitis B vaccine within seven days.

3. When the source is unknown and the exposed person is vaccinated, no intervention is necessary; if exposed person is not vaccinated, begin vaccination if requested with hepatitis B vaccine within seven days if at high risk for future exposure.

## **XVI. Quality Assurance Compliance Monitoring**

Supervisors are expected to routinely monitor compliance of the infection control policy for all employees. Corrective action should be taken immediately to prevent any potentially dangerous deviation from the established standards, and the incident should be documented and reported. Compliance with the infection control policy should be reflected in the daily and annual performance evaluations.

## APPENDIX A

### UNIVERSAL PRECAUTIONS

Universal precautions were developed by the Centers for Disease Control to limit the transmission of HIV. The concept stresses that all patients should be assumed to be infectious for HIV and other bloodborne pathogens. Universal precautions shall be followed when personnel are exposed to blood, amniotic fluid, pericardial fluid, peritoneal fluid, synovial fluid, cerebrospinal fluid, pleural fluid, semen, vaginal secretions, feces, urine, vomitus, sputum, saliva and any other body fluid visibly contaminated with blood.

Exposure means any contact with blood or body fluids (listed above) through percutaneous inoculation (needle stick injury or cut from contaminated material), contact with an open wound, non-intact skin or mucous membrane while on the job.

These are the guidelines of universal precautions:

1. Wash hands between patients (waterless hand cleaner is available in each work area where water for handwashing is not present).
2. Wear gloves when coming into contact with blood or body fluids of any patient.
3. Wash hands immediately after removing gloves (waterless hand cleaner is available in the work area).
4. Wash hands if they become contaminated with blood or other body fluids.
5. Do not recap, bend, cut or break needles, but place them into a puncture-proof container. Containers shall be labeled with a BIOHAZARD tag or symbol. Replace the container when it reaches the maximum full level. (Containers are in each work area for this purpose.)
6. Wear gowns if soiling of your clothes with blood or body fluids is likely. Water-impermeable aprons are available when heavy soiling is anticipated.
7. Use other protective barriers (e.g., masks, goggles, glasses, bag valve masks, etc.) appropriate for the procedure being performed and the type of exposure anticipated.
8. Put damp or dry linen in regular linen bags. All potentially contaminated linen shall be double-bagged in plastic bags marked with the BIOHAZARD tag or symbol. Used linen should be bagged immediately in the area where it is generated. Handle soiled linen as little as possible. Put the plastic bags into a regular linen bag and send it to the laundry.
9. Trash is to be bagged and discarded. Discard liquid waste at the hospital.
10. Report any exposure (i.e., needle stick, splash of fluid into mucous membrane, etc.) to your supervisor.
11. Personal protective equipment and resuscitation equipment will be available in all work areas where its use is anticipated.

**APPENDIX B**

**REPORT OF EXPOSURE**

**(Workers' Compensation Form 19 should be completed and attached to this form.)  
This form should be completed and submitted to the Department Head within 24 hours of incident.**

Employee: \_\_\_\_\_ Department: \_\_\_\_\_

Date of Exposure: \_\_\_\_\_ Time of Exposure: \_\_\_\_\_ am/pm

Type of Exposure; Via what route? (blood, body fluid or secretion):  
\_\_\_\_\_

---

Describe how the incident occurred (include activity taking place): \_\_\_\_\_

---

Conditions of Exposure (location, confined space): \_\_\_\_\_

---

**SOURCE INFORMATION**

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

---

Receiving Hospital: \_\_\_\_\_ Attending Physician: \_\_\_\_\_

Preliminary instructions to the employee (appointment date with Public Health Department):  
\_\_\_\_\_

---

Follow-up protocol followed: \_\_\_\_\_

---

Personal protective equipment used at time of exposure: \_\_\_\_\_

---

Any failure of personal protective equipment being used: \_\_\_\_\_

---

Detailed explanation if personal protective equipment was not being used: \_\_\_\_\_

---

Names of other potentially exposed people involved in this incident:

Name: \_\_\_\_\_ Home Telephone #: \_\_\_\_\_

Name: \_\_\_\_\_ Home Telephone #: \_\_\_\_\_

## APPENDIX C

### EXAMPLES OF RECOMMENDED PERSONAL PROTECTIVE EQUIPMENT FOR WORKER PROTECTION AGAINST HIV AND HBV TRANSMISSION<sup>1</sup> IN PREHOSPITAL<sup>2</sup> SETTINGS

| <u>Task or Activity</u>  | <u>Disposable<br/>Gloves</u> | <u>Gown</u>                  | <u>Protective Mask<sup>3</sup></u> | <u>Eyewear</u>                 |
|--|------------------------------|------------------------------|------------------------------------|--------------------------------|
| Bleeding control with spurting blood                           | Yes                          | Yes                          | Yes                                | Yes                            |
| Bleeding control with minimal bleeding                         | Yes                          | No                           | No                                 | No                             |
| Emergency childbirth   | Yes                          | Yes                          | Yes, if splashing is likely        | Yes, if splashing is likely    |
| Oral/nasal suctioning manually cleaning airway <sup>4</sup>    | Yes                          | No                           | No, unless splashing is likely     | No, unless splashing is likely |
| Handling and cleaning instruments with microbial contamination | Yes                          | No, unless soiling is likely | No                                 | No                             |
| Measuring blood pressure                                       | No                           | No                           | No                                 | No                             |
| Measuring temperature  | No                           | No                           | No                                 | No                             |

---

<sup>1</sup> The examples provided in this table are based on application of universal precautions. Universal precautions are intended to supplement, rather than replace recommendations for routine infection control, such as handwashing and using gloves to prevent gross microbial contamination of hands (e.g., contact with urine or feces).

<sup>2</sup> Defined as setting where delivery of emergency health care takes place away from a hospital or other health-care facility.

<sup>3</sup> Refers to protective masks to prevent exposure of mucous membranes to blood or other potentially contaminated body fluids.

<sup>4</sup> While not clearly necessary to prevent HIV or HBV transmission, unless blood is present, gloves are recommended to prevent transmission of other agents (e.g., Herpes simplex).





**APPENDIX D**

**WAIVER FOR HEPATITIS B VACCINE**

**Hepatitis B Vaccine Declination**

I understand that due to my occupational exposure to blood or other potentially infectious materials. I may be at risk of acquiring Hepatitis B Virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine at no charge to myself. However, I decline Hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future, I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.

I \_\_\_\_\_ have read, or have had explained to me, information about Hepatitis B and Hepatitis B vaccine. I have had a chance to ask questions which were answered to my satisfaction.

I understand that the execution of my responsibilities on the job could expose me to blood and body fluids; and, therefore, to Hepatitis B Virus.

I believe I understand the risks of Hepatitis B, and the benefits and risks of Hepatitis B vaccine.

I choose not to receive the Hepatitis B vaccine.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

NOTE: Attach important information about Hepatitis B and Hepatitis B vaccine to waiver.



**APPENDIX E**

**WAIVER TO: SUBMIT TO FOLLOW-UP PROCEDURES AFTER POSSIBLE EXPOSURE TO INFECTIOUS DISEASE**

I \_\_\_\_\_, have had explained to me the need for follow-up testing to evaluate my exposure to \_\_\_\_\_ understand that the testing is medically indicated.

I have had a chance to ask questions which were answered to my satisfaction, and I believe that I understand the risks of my possible exposure and the benefits of follow-up testing.

I understand that no adverse action can be taken on the ground that I refused testing and follow-up since the procedures are designed for my benefit.

I understand that Workers' Compensation may deny claims for which initial testing and follow-up were refused.

I choose not to receive my testing or follow-up.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

Type of Exposure: \_\_\_\_\_

Date of Exposure: \_\_\_\_\_



**APPENDIX F**

**INFORMED CONSENT TO PERFORM TESTS  
AND TO RECORD TEST RESULTS**

Name of Employee: \_\_\_\_\_ Date: \_\_\_\_\_

Tests to be performed:

I, \_\_\_\_\_, have had explained to me the procedures for performing the above tests. I understand the need for these tests. I have had a chance to ask questions which were answered to my satisfaction.

I understand that the test result(s) will be part of my personal medical record. I understand that my test results and my medical records are strictly confidential and will be shared only with health-care providers directly involved in my care and follow-up.

I understand the benefits and risks of the test(s). I agree to have the test(s) done and the results recorded in my medical records.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date



**APPENDIX G**

**EXPOSURE INCIDENT INVESTIGATION FORM**

Date of Incident: \_\_\_\_\_ Time of Incident: \_\_\_\_\_

Location: \_\_\_\_\_

Potentially Infectious Materials Involved:

Type: \_\_\_\_\_ Source: \_\_\_\_\_

\_\_\_\_\_

Circumstances (work being performed, etc.): \_\_\_\_\_

\_\_\_\_\_

How Incident was Caused: \_\_\_\_\_

\_\_\_\_\_

Personal Protective Equipment Begin Used: \_\_\_\_\_

\_\_\_\_\_

Actions Taken (decontamination, clean-up, reporting, etc.): \_\_\_\_\_

\_\_\_\_\_

Recommendations for Avoiding Repetition: \_\_\_\_\_

\_\_\_\_\_





## APPENDIX H

### POST-EXPOSURE EVALUATION AND FOLLOW-UP CHECKLIST

The following steps must be taken, and information transmitted, in the case of an employee's exposure to Bloodborne Pathogens:

| Activity  | <u>Completion Date</u> |
|---|------------------------|
| <ul style="list-style-type: none"> <li>Employee furnished with documentation regarding exposure incident.</li> </ul>  |                        |
| <ul style="list-style-type: none"> <li>Source individual identified.<br/>( _____ )<br/>Source Individual</li> </ul>   |                        |
| <ul style="list-style-type: none"> <li>Source individual's blood tested and results given to exposed employee.<br/>_____ Consent has not been able to be obtained.</li> </ul>   |                        |
| <ul style="list-style-type: none"> <li>Exposed employee's blood collected and tested.</li> </ul>  |                        |
| <ul style="list-style-type: none"> <li>Appointment arranged for employee with health-care professional.<br/>( _____ )<br/>Professional's Name</li> </ul>  |                        |
| <ul style="list-style-type: none"> <li>Documentation forwarded to health-care professional.<br/><br/>_____ Bloodborne Pathogens Standard.<br/>_____ Description of exposed employee's duties.<br/>_____ Description of exposure incident, including routes of exposure.<br/>_____ Result of source individual's blood testing.<br/>_____ Employee's medical records.</li> </ul> |                        |



APPENDIX I



Name: \_\_\_\_\_

Date of Exposure: \_\_\_\_\_

Source: \_\_\_\_\_

If Known Lab Work Completed: \_\_\_\_\_ Yes \_\_\_\_\_ No

Comments: \_\_\_\_\_  
\_\_\_\_\_

|       |          |   |
|-------|----------|---|
| LABS: | Baseline | HIV _____<br>Hep B Ab _____<br>Booster Given _____<br>Series Started _____<br>Hep C _____ |
|       | 6 Weeks  | HIV _____<br>Hep C _____  |
|       | 3 Months | HIV _____<br>Hep C _____  |
|       | 6 Months | HIV _____<br>Hep C _____  |
|       | 1 Year   | HIV _____<br>Hep C _____  |



APPENDIX J



POST EXPOSURE FOLLOW UP----6 Weeks      3 Months      6 Months      1 Year

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date of Exposure: \_\_\_\_\_

Since your last visit have you had or do you have any of the following signs or symptoms?  
Please initial any that apply.

- \_\_\_\_\_ Fever/Chills
- \_\_\_\_\_ Swollen Glands
- \_\_\_\_\_ Night Sweats
- \_\_\_\_\_ Joint/Muscle Pain
- \_\_\_\_\_ Easily Fatigue
- \_\_\_\_\_ Unexplained Weight Loss
- \_\_\_\_\_ Loss of Appetite
- \_\_\_\_\_ No Symptoms
- \_\_\_\_\_ Other Please List: \_\_\_\_\_

Any concerns or comments:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Next Scheduled Follow Up: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**APPENDIX K**

|  |                |
|--|----------------|
| CITY OF EDEN   | PATIENT: _____ |
| INFORMED CONSENT TO DO AIDS VIRUS (HIV) ANTIDOBY TEST<br>AND TO RECORD RESULTS |                |

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

The HIV antibody test detects the presence of antibodies to the AIDS virus. These antibodies are substances in the blood produced by the body following infection with the AIDS virus. This is NOT a test for AIDS. The test will not tell you if you have AIDS or an AIDS-related condition. It does show whether you have been infected with the virus that can cause AIDS.

I have been informed about the HIV antibody test. I have read or have had read to me the contents of this form. I have had a chance to ask questions which were answered to my satisfaction.

I understand that my medical treatment may be changed if my test is positive and that this change in treatment may be beneficial to me. I also understand that letting others know about my test results could cause me problems in employment or insurance.

I understand that this test result will be part of my medical record. I understand that both my test results and my medical record are confidential and will be shared only with health care providers directly involved in my care.

I may request that my test results or any other part of my medical record be withheld at the time I give consent for release of that record. I understand that omissions may be obvious and lead to further inquiries, but no information will be released without my permission.

I understand the benefits and risks of the test. I agree to have this test done and the result recorded in my medical record.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Patient's Signature/Responsible party

\_\_\_\_\_  
Witness Signature

Revised: 06/05, 3/18

Consent for Aids Testing 1068







## APPENDIX L

### IMPORTANT INFORMATION ON THE HIV ANTIBODY TEST

- A. This test will not tell you:  
-if you have AIDS OR ARC (AIDS RELATED COMPLEX);  
-if you will develop AIDS or ARC;  
-if you are immune to AIDS or ARC;  
-if you are healthy.
- B. A negative test result indicates that the antibody has not been found in your blood. If you test negative, there are two possible explanations.  
-you have not been infected with the virus; or  
-you have been infected by the virus but have not yet produced antibodies.
- Research indicates most people produce antibodies within 2-8 weeks after infection. Some people will not produce antibodies for six months or more. A very small number of people will never produce antibodies.
- A negative result does not mean:  
-that you are immune to the virus;  
-that you have not been infected with the virus. You may have been infected and have not yet produced antibodies
- C. A positive test result indicates that you have probably been infected with the AIDS virus and your body has produced antibodies. Researchers have shown that most people with AIDS antibodies have active virus in their bodies. You should therefore assume you are contagious and capable of passing the virus on to others. A positive result does not mean:  
-that you have AIDS or ARC;  
-that you will get AIDS or ARC;  
-that you are immune to AIDS.
- D. Not everybody infected with the virus will develop AIDS.
1. Some infected people will develop antibodies to the virus but remain healthy. They will have no symptoms of AIDS.
  2. Some people who have antibodies will develop some of the symptoms of AIDS virus infection. These people are diagnosed as having ARC (AIDS related complex).
  3. It is estimated that 20-30% of infected people will develop AIDS within five years of becoming infected. A diagnosis of AIDS is made only after finding specific life-threatening infections or malignancies that do not normally occur in healthy people.
- E. NOTE ABOUT CONFIDENTIALITY - People taking the test should be aware that there may be some risk associated with letting others know about their test results. Test results have been used to discriminate against persons in employment and insurance. Those who need to know that someone has tested positive include that person's health care providers (doctors and dentists), sex partners, and anyone with whom that person has shared needles or syringes.

Give this paper to the patient.



|   |                              |             |                           |              |   |
|---|------------------------------|-------------|---------------------------|--------------|---|
|  | SAFETY & LOSS CONTROL MANUAL |             | Subject: Asbestos Program |              |  |
|   | Section: SLC-AA              | Revision: 1 | Effective Date:           | Page: 1 of 6 |   |
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## Asbestos Awareness and Management Program

The purpose of this program is to provide guidelines for awareness and management of asbestos on City property and facilities.

Asbestos-Containing Material (ACM) has been identified on City property at various times. The City personnel will manage the ACM in place, as recommended by the United States Environmental Protection Agency (EPA), until it is removed due to renovation or demolition. This asbestos awareness and management program provides guidance to manage ACM's.

### **Frequently Asked Questions:**

- **What is asbestos?**

Asbestos is a group of naturally occurring fibrous minerals that are mined from the earth. Asbestos deposits are found throughout the world. Asbestos has been used for over 2,000 years. The word asbestos comes from the ancient Greek, meaning "inextinguishable". The Greeks admired asbestos because of its softness and flexibility, as well as its ability to withstand heat. The Greeks used asbestos much like cotton, spinning and weaving it into cloth. The non-flammable quality of asbestos and its flexibility made it useful for several ancient products. Ancient Greeks used asbestos for lamp wicks and blacksmith gloves. Ancient Egyptians used asbestos cloth to prepare bodies for burial. Romans collected ashes of the dead by wrapping bodies in asbestos before cremation. The unique characteristics of asbestos made it perfect for use in machinery during the industrial revolution. Asbestos was not widely available until the late 1800s, when major deposits were found in Canada. Thereafter, asbestos was used to make thermal insulation for boilers, pipes, and other high temperature applications. It was also used as a fireproofing and product-strengthening material. During World Wars I and II, the military used asbestos extensively in ships and other applications. Commercial usages of asbestos in buildings increased greatly thereafter. Half of all multi-story buildings built in the U.S. from 1950-1970 contain some form of asbestos such as cement products, plaster, fireproofing, wallboard, ceiling tile, floor tile, and pipe insulation. Currently the primary sites of commercial asbestos production are Canada, Russia, and South Africa.

- Asbestos fibers are virtually indestructible. They are resistant to chemicals and heat, and are very stable in the environment. They do not evaporate into the air or dissolve in water, and they do not break down over time. Asbestos is probably the best insulator known to man.
- Due to the many useful properties of asbestos, it has been used in over 3,000 different products.
- When asbestos is damaged or disturbed, it breaks down into smaller and smaller fibers. These individual fibers are so small they must be identified using a microscope. Some fibers may be up to 700 times smaller than a human hair. Asbestos fibers are so small, once released into the air, they may stay suspended for hours or even days. What materials contain asbestos? Asbestos may be found in many different products and many different places. Examples of products that may contain asbestos are:
  - Sprayed-on fire proofing for structural steel pipe and boiler insulation
  - Drywall and joint compounds, including textured and decorative applications
  - Plaster, including acoustical and decorative types
  - Wall and ceiling insulation
  - Ceiling tiles
  - Vinyl floor tile and linoleum including the adhesives
  - Cement products including pipes, panels, and roof and siding shingles
  - Roofing
  - Fireproofing material such as blankets, fire curtains, lab counter tops, gloves,
  - Electrical wiring insulation,
  - Cloth, and structural insulation Felts, caulking, putties, and adhesives
  - Brake linings, clutch pads and gaskets
  - Fire doors!

**When is asbestos dangerous? health.**

- People most at risk for exposure are maintenance and construction workers who work on, and disturb, asbestos in buildings. It is important to recognize that the majority of people who have developed diseases because of asbestos exposure worked in occupations where asbestos was used. These workers were frequently exposed to high levels of asbestos fibers each working day, with little or no protection.

People may be exposed to asbestos in the workplace, communities, or homes. If products containing asbestos are disturbed, tiny asbestos fibers are released into the air. When asbestos fibers are breathed in, they may get trapped in the lungs and remain there for a long time.

Over time, these fibers can accumulate and cause scarring and inflammation, a type of progressive fibrosis called asbestosis. Asbestos has also been shown to cause cancer. Studies have shown that exposure to asbestos may increase the

risk of lung cancer and mesothelioma (a relatively rare cancer of the thin membranes that line the chest and abdomen). Although rare, mesothelioma is the most common form of cancer associated with asbestos exposure.

### **Who is at risk for an asbestos-related disease?**

Everyone is exposed to asbestos at some time during his or her life. There are no known truly unexposed groups of people in the world. Low levels of asbestos are present in the air, water, and soil. However, most people do not become ill from their exposure. People who become ill from asbestos are usually those who are exposed to it on a regular basis, most often in a job where they work directly with the material or through substantial environmental contact. Since the early 1940s, millions of American workers have been exposed to asbestos. Health hazards from asbestos fibers have been recognized in workers exposed in the shipbuilding trades, asbestos mining and milling, manufacturing of asbestos textiles and other asbestos products, insulation work in the construction and building trades, and a variety of other trades. Demolition workers, drywall removers, asbestos removal workers, firefighters, and automobile workers also may be exposed to asbestos fibers. As a result of government regulations and improved work practices, today's workers (those without previous exposure) are likely to face smaller risks than did those exposed in the past. Although it is clear that the health risks from asbestos exposure increase with heavier exposure and longer exposure time, investigators have found asbestos-related diseases in individuals with only brief exposure. Generally, those who develop asbestos-related diseases show no signs of illness for a long time after their first exposure. It can take from 10 to 40 years or more for symptoms of an asbestos related condition to appear.

### **What factors affect the risk of developing an asbestos-related disease? Several factors can help to determine how asbestos exposure affects an individual, including:**

- Dose (how much asbestos an individual was exposed to).
- Duration (how long an individual was exposed).
- Size, shape, and chemical makeup of the asbestos fibers.
- Individual risk factors, such as smoking and pre-existing lung disease. Although all forms of asbestos are considered hazardous, different types of asbestos fibers may be associated with different health risks.

### **How does smoking affect risk?**

Many studies have shown that the combination of smoking and asbestos exposure is particularly hazardous. Smokers who are also exposed to asbestos have a risk of developing lung cancer that is greater than the individual risks from asbestos and smoking added together. There is evidence that quitting smoking will reduce the risk of lung cancer among asbestos-exposed workers. Smoking combined with asbestos exposure does not appear to increase the risk of mesothelioma.

However, people who were exposed to asbestos on the job at any time during their life or who suspect they may have been exposed should not smoke. If you work with asbestos or have been exposed to it, the first thing you should do to reduce your chances of developing cancer is to stop smoking. Organizations that may offer programs, support, or information to help people stop smoking are:

- National Cancer Institute (1-800-4-CANCER)
- American Heart Association (1-800-242-8721)
- American Lung Association (1-800-586-4872)

### **How do I avoid exposure?**

- DO NOT ASSUME MATERIALS DO NOT CONTAIN ASBESTOS. Any work at City facilities or sites initiating work activities that will disturb a building material (i.e. floor tile during a carpet replacement, new ceiling installation, etc.) must first contact the City Asbestos Coordinator to determine if asbestos-containing materials are present.
- If you have other questions or need help ask your Supervisor or the facility manager. Activities that will disturb building materials (e.g., carpet replacement, new ceiling installation, etc.) by hiring vendors on their own, or using their own staff, must coordinate with Facilities and City of Eden Management Personnel to determine if ACM will be affected. Contact the City Asbestos Coordinator as soon as possible in the planning stages of work activities that have the potential to disturb ACM, or if it is unknown whether or not the material contains asbestos. NEVER ASSUME MATERIALS DO NOT CONTAIN ASBESTOS. Doing so could expose building occupants to airborne asbestos fibers. When applicable, vendors and contractors working in the buildings are to be informed as to the presence of ACM. If you believe there is damaged or deteriorated ACM in your area, immediately contact your Supervisor or the City Asbestos Coordinator.

### **Inventory;**

An inventory of all known asbestos materials is maintained by the City Asbestos Coordinator. This inventory is reviewed before conducting maintenance work on or near ACM. It is also used for delineating ACM locations when planning for renovation or demolition. Where no surveys exist or the status of a material is in question, as a best management practice it is assumed to contain asbestos until sampling and laboratory analysis proves otherwise. The City Asbestos Coordinator will sample the material to determine if it contains asbestos. Buildings that contain ACM are subject to monitoring and periodic inspections until all the ACM has been removed.

## **Operations & Maintenance;**

A City-wide Asbestos exposure inventory is maintained by the City. Operations and Maintenance, or in-place management, is the primary method of managing asbestos containing materials. When day-to-day repairs or maintenance will impact an ACM, City crew members will remove the small amounts of asbestos involved in a planned and controlled manner. Work practices will be used to protect both building occupants and crew personnel. Abatement Procedures for Asbestos removal for larger projects beyond the scope of City employees is often required in occupied buildings. This is acceptable and safeguards are used to protect building occupants. Only qualified and trained contractors are hired for removal of ACM. The contractors must follow strict regulations when performing asbestos abatement to ensure that asbestos fibers do not migrate to areas outside the abatement area.

### **Some of these safeguards include:**

- Establishing containment by separating the abatement area from the occupied areas using plastic sheeting.
- Posting warning signs.
- Using fans with high efficiency filters to exhaust air from the work area to the outdoors.
- Minimizing dust formation by wetting ACM during removal.
- Using specialized equipment and respirators to protect abatement workers.
- Use of trained supervisors and workers who are certified in asbestos abatement procedures.
- Performing work during weekends and nights when possible. To ensure all the asbestos is removed and the abatement area is safe for re-occupancy, each asbestos removal project is conducted under the direction of Trained personnel from the City whose responsibilities include:
  - Developing project specific technical plans.
  - Continuous visual on-site monitoring of the contractors' activities to ensure all safety practices are followed during the abatement.
  - Collecting air samples in areas adjacent to and outside of the abatement areas to confirm no fibers are escaping the containment system and exposing building occupants.
  - Performing a final visual inspection to ensure all asbestos has been removed.
  - Performing final air sampling tests to ensure no airborne fibers remain in the abated area.

Given these precautions, building occupants and other people outside of the abatement area are not at risk of exposure to asbestos.

### **Removal of Asbestos Roofing Material;**

- All suspect roofing materials shall be sampled for asbestos content.

- Roofing material shall be removed where ACM is likely to be disturbed by trained and equipped by employees or contractors who are trained annually in specific work practices and engineering controls related to that activity. Training for employees performing maintenance and custodial activities, during which the employees may contact but do not disturb ACM, includes information concerning the locations of ACM and how to recognize damaged or deteriorated ACM. Both groups are trained in the health effects associated with asbestos exposure.



### **Insurance and Contracting;**

The contract manager shall:

- (1) Prior to issuing any abatement contract, which shall be based on specifications prepared by an asbestos consultant, the contracting agency shall verify that the asbestos contractor has liability insurance with a pollution endorsement against claims or claim expenses arising from any abatement project.
- (2) In the event such liability insurance ceases to be available to asbestos contractors, the asbestos contractor shall post a surety bond or letter of credit.

December 20, 2020  
Two Rivers Consulting



|   |                              |                |   |                  |   |
|---|------------------------------|----------------|---|------------------|---|
|  | SAFETY & LOSS CONTROL MANUAL |                | Subject:<br>Respirable Silica Exposure Control Plan (ECP) |                  |  |
|   | Section:<br>SLC-AB           | Revision:<br>1 | Effective Date:   | Page:<br>1 of 42 |   |
|   | Supersedes:                  |                |   |                  |   |

Cutting concrete without proper dust controls can generate high levels of silica-containing dust. Breathing in this fine dust can cause a serious lung disease called silicosis, which is characterized by scarring and thickening of the lungs, and can ultimately result in death.

***Control methods for cutting, drilling, grinding, chipping, jackhammering and polishing of stone, concrete, concrete block, and asphalt***

**13.1 Health hazards from silica exposure**

Long-term exposure to airborne crystalline silica (e.g., quartz) can cause a disabling, sometimes fatal lung disease called silicosis.

When the dust is inhaled deep into the lungs, microscopic particles of silica can cause scar tissue to form in the lung tissue, which restricts the lungs' ability to extract oxygen from the air. This damage is permanent, but symptoms of the disease may not appear for many years.

The disease initially causes fatigue and shortness of breath. If exposure continues, it can lead to chest pain, heart problems (difficulty breathing can strain the heart), and respiratory failure.

**13.2 Purpose and responsibilities**

We have a duty to protect our workers from silica exposure during concrete cutting, grinding and drilling. Studies show that work tasks involving the cutting, grinding, and drilling of concrete generate airborne silica levels well in excess of safe levels. Effective controls are available to protect workers from harmful exposure.

A combination of control measures will be required to achieve this objective. We commit to being diligent in our efforts to select the most effective control technologies available, and to ensure that the best practices, as described in this exposure control plan (ECP), are followed at our worksites.

The work procedures we establish for cutting, drilling, grinding, chipping or jackhammering of concrete will protect not only our workers but also any other workers on-site who are not involved in these operations.

### **13.3 THE CITY OF EDEN is responsible for the following:**

- Ensure that the materials, tools, equipment, personal protective equipment and other resources (i.e. worker training) required to fully implement and maintain this ECP are readily available where and when they are required
- Ensure that supervisors and workers are educated and trained to an acceptable level of competency in the hazards of silica exposure and trained to work safety with silica
- Maintain records of training, fit-test results, crew talks, and inspections (for equipment, **PPE**, and work methods and practices)
- Conduct an annual review (or more often if conditions change) of the effectiveness of the ECP. This includes a review of available dust control technologies to ensure these are selected and used when practical
- Coordinate the work with the prime contractor and other employers to ensure a safe work environment

#### **13.3.1 Superintendents are responsible for the following:**

- Provide adequate instruction to workers on the hazards associated with the cutting, drilling, grinding, chipping or jackhammering of concrete, concrete block, cutting fibre cement board or cutting, grinding or polishing of stone
- Select and implement the appropriate control measures
- Ensure that workers using respirators have been properly fit-tested and that the results are recorded and maintained
- Ensure that work is conducted in a manner that ensures the risk to workers and others is minimized and adequately controlled. This includes ensuring that workers use appropriate engineering controls and wear the necessary PPE.

#### **13.3.2 Workers are responsible for the following:**

- Use the assigned protective equipment in an effective and safe manner within the scope of their training
- Follow established work procedures as directed by the supervisor
- Report any unsafe conditions or acts to the supervisor
- Report any exposure incidents or any signs or symptoms of silica illness

### **13.4 Risk identification and assessment**

- Concrete and products made of concrete or containing concrete can contain a high percentage of silica
- Cutting, drilling, grinding, chipping or jackhammering without the use of proper dust controls and PPE can expose workers to levels of airborne respirable crystalline silica that are above the exposure limit listed in the Occupational Health and Safety Administration Standards.

- Work locations where workers or other persons are exposed to the hazards of silica will be identified with signs, placards, or barrier tape

### 13.5 Exposure limits

- The occupational exposure limit (OEL) for respirable crystalline silica (including quartz) is .025 milligrams per cubic meter (mg/m<sup>3</sup>).
- Because crystalline silica is linked to lung cancer, workplace exposures must be reduced to levels that are **As Low As Reasonably Achievable (ALARA)** below the OEL.

#### 13.6.1 Silica dust control

- The Regulation requires employers to select silica dust controls based on the following hierarchy:
  - o Engineering
  - o Administrative controls
  - o Personal protective equipment (PPE)
- Use of respirators as a primary control is not acceptable when other methods are available and practical
- Respirators will be used in conjunction with other controls such as wet cutting, grinding, and drilling to reduce worker exposure to silica, unless air monitoring information suggests otherwise
- Wet cutting, grinding, and drilling or the use of local exhaust ventilation (LEV) are the preferred engineering methods and will be used when practicable
- Dry cutting, grinding, and drilling will be avoided unless additional respiratory protection and other controls are used
- Dry cutting or grinding methods might be required for certain applications or work locations. If this is the case, dry work will be isolated from other work areas. Effective LEV will be used in order to control the dust. A HEPA vacuum will be used for cleanup and decontamination
- Air discharged from an LEV system will not be re-circulated into the work area

#### 13.6.2 EXPOSURE CONTROL METHODS

- **Specified exposure control methods.**

For each employee engaged in a task identified on Table 1, the employer shall fully and properly implement the engineering controls, work practices, and respiratory protection specified for the task on Table 1, unless the employer assesses and limits the exposure of the employee to respirable crystalline silica in accordance with paragraph (d) of this section.

**(NOTE: In some exposure situations in Table 1 NO respiratory protection is required when all engineering controls and work practices are in use as per the specific task in the Table)**

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task   | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                             |
|--|---|--|-----------------------------|
|  |   | ≤ 4 hours /shift   | > 4 hours /shift            |
| (i) Stationary masonry saws  | <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>   | None   | None                        |
| (ii) Handheld power saws (any blade diameter)  | <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <ul style="list-style-type: none"> <li>– When used outdoors.</li> <li>– When used indoors or in an enclosed area.</li> </ul>                                    | <p>None</p> <p>APF 10</p>  | <p>APF 10</p> <p>APF 10</p> |
| (iii) Handheld power saws for cutting fiber-cement board (with blade diameter of 8 inches or less) | <p>For tasks performed outdoors only:</p> <p>Use saw equipped with commercially available dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide the air flow recommended by the tool manufacturer, or greater, and have a filter with 99% or greater efficiency.</p> | None   | None                        |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task                     | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                    |
|--------------------------------------|---|--|--------------------|
|                                      |   | ≤ 4 hours /shift   | > 4 hours /shift   |
| (iv) Walk-behind saws                | <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <ul style="list-style-type: none"> <li>– When used outdoors.<br/>APF 10</li> <li>– When used indoors or in an enclosed area.</li> </ul> | None<br><br>APF 10   | None<br><br>APF 10 |
| (v) Drivable saws                    | <p>For tasks performed outdoors only:</p> <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>  | None   | None               |
| (vi) Rig-mounted core saws or drills | <p>Use tool equipped with integrated water delivery system that supplies water to cutting surface.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>  | None   | None               |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task  | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|---|---|--|------------------|
|   |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (vii) Handheld and stand-mounted drills (including impact and rotary hammer drills) | <p>Use drill equipped with commercially available shroud or cowling with dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide the air flow recommended by the tool manufacturer, or greater, and have a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>Use a HEPA-filtered vacuum when cleaning holes.</p> | None   | None             |
| (viii) Dowel drilling rigs for concrete   | <p>For tasks performed outdoors only:</p> <p>Use shroud around drill bit with a dust collection system. Dust collector must have a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>Use a HEPA-filtered vacuum when cleaning holes.</p>  | APF<br>10  | APF<br>10        |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task   | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|--|---|--|------------------|
|  |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (ix) Vehicle-mounted drilling rigs for rock and concrete   | Use dust collection system with close capture hood or shroud around drill bit with a low-flow water spray to wet the dust at the discharge point from the dust collector. | None   | None             |
|  | OR<br><br>Operate from within an enclosed cab and use water for dust suppression on drill bit.  | None   | None             |
| (x) Jackhammers and handheld powered chipping tools  | Use tool with water delivery system that supplies a continuous stream or spray of water at the point of impact.   |  |                  |
|  | – When used outdoors.   | None   | APF 10           |
|  | – When used indoors or in an enclosed area.   | APF 10   | APF 10           |
|  | OR<br><br>Use tool equipped with commercially available shroud and dust collection system.  |  |                  |
| Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.   |   |  |                  |
| Dust collector must provide the air flow recommended by the tool manufacturer, or greater, and have a filter with 99% or greater efficiency and a filter-cleaning mechanism. |   |  |                  |
| – When used outdoors.  | None  | APF 10   |                  |
| – When used indoors or in an enclosed area.  | APF 10  | APF 10   |                  |





**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task                                       | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|--|---|--|------------------|
|  |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (xiii) Walk-behind milling machines and floor grinders | <p>Use machine equipped with integrated water delivery system that continuously feeds water to the cutting surface.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>OR</p> <p>Use machine equipped with dust collection system recommended by the manufacturer.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide the air flow recommended by the manufacturer, or greater, and have a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>When used indoors or in an enclosed area, use a HEPA-filtered vacuum to remove loose dust in between passes.</p> | None   | None             |
|  |   | None   | None             |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task  | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|---|---|--|------------------|
|   |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (xiv) Small drivable milling machines (less than half-lane) | <p>Use a machine equipped with supplemental water sprays designed to suppress dust. Water must be combined with a surfactant.</p> <p>Operate and maintain machine to minimize dust emissions.</p>   | None   | None             |
| (xv) Large drivable milling machines (half-lane and larger) | <p>For cuts of any depth on asphalt only:</p> <p>Use machine equipped with exhaust ventilation on drum enclosure and supplemental water sprays designed to suppress dust.</p> <p>Operate and maintain machine to minimize dust emissions.</p>                     | None   | None             |
|   | <p>For cuts of four inches in depth or less on any substrate:</p> <p>Use machine equipped with exhaust ventilation on drum enclosure and supplemental water sprays designed to suppress dust.</p> <p>Operate and maintain machine to minimize dust emissions.</p> | None   | None             |
|   | <p>OR</p> <p>Use a machine equipped with supplemental water spray designed to suppress dust. Water must be combined with a surfactant.</p> <p>Operate and maintain machine to minimize dust emissions.</p>  | None   | None             |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task  | Engineering and Work Practice Control Methods  | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|---|--|--|------------------|
|   |  | ≤ 4 hours /shift   | > 4 hours /shift |
| (xvi) Crushing machines   | <p>Use equipment designed to deliver water spray or mist for dust suppression at crusher and other points where dust is generated (e.g. hoppers, conveyers, sieves/sizing or vibrating components, and discharge points).</p> <p>Operate and maintain machine in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Use a ventilated booth that provides fresh, climate-controlled air to the operator, or a remote-control station.</p> | None   | None             |
| (xvii) Heavy equipment and utility vehicles used to abrade or fracture silica- containing materials (e.g. hoe-ramming, rock ripping) or used during demolition activities involving silica-containing materials | <p>Operate equipment from within an enclosed cab.</p> <p>When employees outside of the cab are engaged in the task, apply water and/or dust suppressants as necessary to minimize dust emissions.</p>  | None   | None             |
| (xviii) Heavy equipment and utility vehicles for tasks such as grading and excavating but not including: demolishing, abrading, or fracturing silica-containing materials                                       | <p>Apply water and/or dust suppressants as necessary to minimize dust emissions.</p> <p>OR</p> <p>When the equipment operator is the only employee engaged in the task, operate equipment from within an enclosed cab.</p>   | None   | None             |

### 13.6.6 Safe Work Planning

1. Select one or more of the methods described in the table above
2. Establish a barrier around the work zone to restrict access by unprotected workers
3. Inspect all dust control equipment and tools to make sure they are in good working order
4. Use and maintain all tools as specified by the manufacturer
5. When working off-site, provide the contractor with a copy of the silica exposure control plan and safe work procedures
6. Ensure that workers inspect their respirators before start-up
7. Monitor dust release from equipment during use. When tools and equipment are working properly, very little dust should be visible in the air. Stop work if excessive dust is observed

### 13.7 Respiratory protective equipment

- 1 **Each worker who has occupational exposure to respirable silica, will be fit-tested and trained on the proper selection, use, care and maintenance of respirators**  
All COV employees required to wear a respirator will follow **THE CITY OF EDEN** Respirator Protection Program.

### 13.8 Other personal protective equipment and hygiene

Workers will wear approved safety glasses and hearing protection when cutting, drilling, grinding, chipping or jackhammering concrete. This equipment will not interfere with the fit of the worker's respirator.

Workers must remove dust covered coveralls or protective clothing before eating lunch.

Workers who launder clothing contaminated with silica should be informed of the hazards of silica and the precautions required for handling the clothing.

Disposable coveralls will be used in full enclosure systems.

### 13.9 Housekeeping procedures

- Dry sweeping and the use of compressed air are **prohibited** for removing dust and debris containing silica.
- Work areas and equipment covered by dust will be cleaned at the end of every shift using a HEPA filter vacuum.
- Wet cleanup may also be used to remove dust.
- Waste material will be placed in a dumpster and will be removed at least weekly. The location and method used to store waste will not allow silica-containing dust to re-enter the workplace.
- Any slurry generated by wet control methods should be cleaned up when the work is completed to avoid secondary dust exposure hazard.

- Filter cloth will be used in catch basins to collect dust and prevent silica dust from collecting in underground areas.
- Supervisors are responsible for ensuring that work areas are free from dust at the end of each shift.

### **13.10 Worker training for silica dust exposure**

- Training will be performed by the employer or the employer's designate
- Records of attendance, dates of training, and training material will be documented and retained by the supervisor.
- Additional training or reference material on silica dust exposure will be made available to employees upon request.

#### **13.10.1 Training topics**

1. Health hazards of silica dust exposure (including signs and symptoms of silica related disease)
2. Operations and materials that can produce silica dust exposures
3. Engineering controls and safe work practices used to protect workers
4. The importance of proper equipment control and maintenance
5. Housekeeping procedures
6. Proper use of respirators and the respirator program
7. Personal hygiene procedures to reduce exposures
8. How smoking increases the risk of developing silicosis and other lung damage
9. The details of the exposure control program for silica dust

### **13.11 Health surveillance**

Workers who are regularly exposed to silica dust should receive regular medical examinations from their family physicians. These examinations should include chest x-rays and lung function testing. Workers will report any symptoms of silica exposure health related illness to the employer for tracking and investigation.

### **13.12 Annual review**

This exposure control program will be reviewed at least annually and updated as necessary by the employer, in consultation with the workplace health and safety committee or the worker health and safety representative.

Unless the employer assesses and limits the exposure of the employee to respirable crystalline silica in accordance with paragraph (d) of this section.

**(NOTE: In some exposure situations in Table 1 NO respiratory protection is required when all engineering controls and work practices are in use as per the specific task in the Table)**

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task   | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                             |
|--|---|--|-----------------------------|
|  |   | ≤ 4 hours /shift   | > 4 hours /shift            |
| (i) Stationary masonry saws  | <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>   | None   | None                        |
| (ii) Handheld power saws (any blade diameter)  | <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <ul style="list-style-type: none"> <li>– When used outdoors.</li> <li>– When used indoors or in an enclosed area.</li> </ul>                                    | <p>None</p> <p>APF 10</p>  | <p>APF 10</p> <p>APF 10</p> |
| (iii) Handheld power saws for cutting fiber-cement board (with blade diameter of 8 inches or less) | <p>For tasks performed outdoors only:</p> <p>Use saw equipped with commercially available dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide the air flow recommended by the tool manufacturer, or greater, and have a filter with 99% or greater efficiency.</p> | None   | None                        |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task                     | Engineering and Work Practice Control Methods  | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                    |
|--------------------------------------|--|--|--------------------|
|                                      |  | ≤ 4 hours /shift   | > 4 hours /shift   |
| (iv) Walk-behind saws                | <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <ul style="list-style-type: none"> <li>– When used outdoors.<br/>APF 10</li> <li>– When used indoors or in an enclosed area</li> </ul> | None<br><br>APF 10   | None<br><br>APF 10 |
| (v) Drivable saws                    | <p>For tasks performed outdoors only:</p> <p>Use saw equipped with integrated water delivery system that continuously feeds water to the blade</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>   | None   | None               |
| (vi) Rig-mounted core saws or drills | <p>Use tool equipped with integrated water delivery system that supplies water to cutting surface.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p>   | None   | None               |



**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task  | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|---|---|--|------------------|
|   |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (vii) Handheld and stand-mounted drills (including impact and rotary hammer drills) | <p>Use drill equipped with commercially available shroud or cowling with dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide the air flow recommended by the tool manufacturer, or greater, and have a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>Use a HEPA-filtered vacuum when cleaning holes.</p> | None   | None             |
| (viii) Dowel drilling rigs for concrete   | <p>For tasks performed outdoors only:</p> <p>Use shroud around drill bit with a dust collection system. Dust collector must have a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>Use a HEPA-filtered vacuum when cleaning holes.</p>  | APF 10   | APF 10           |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task   | Engineering and Work Practice Control Methods  | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|--|--|--|------------------|
|  |  | ≤ 4 hours /shift   | > 4 hours /shift |
| (ix) Vehicle-mounted drilling rigs for rock and concrete | Use dust collection system with close capture hood or shroud around drill bit with a low-flow water spray to wet the dust at the discharge point from the dust collector.    | None   | None             |
|  | OR<br><br>Operate from within an enclosed cab and use water for dust suppression on drill bit.   | None   | None             |
| (x) Jackhammers and handheld powered chipping tools      | Use tool with water delivery system that supplies a continuous stream or spray of water at the point of impact.  |  |                  |
|  | – When used outdoors.  | None   | APF 10           |
|  | – When used indoors or in an enclosed area.  | APF 10   | APF 10           |
|  | OR   |  |                  |
|  | Use tool equipped with commercially available shroud and dust collection system.   |  |                  |
|  | Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.   |  |                  |
|  | Dust collector must provide the air flow recommended by the tool manufacturer, or greater, and have a filter with 99% or greater efficiency and a filter-cleaning mechanism. |  |                  |
|  | – When used outdoors.  | None   | APF 10           |
|  | – When used indoors or in an enclosed area.  | APF 10   | APF 10           |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task   | Engineering and Work Practice Control Methods  | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|--|--|--|------------------|
|  |  | ≤ 4 hours /shift   | > 4 hours /shift |
| (xi) Handheld grinders for mortar removal (i.e., tuckpointing) | <p>Use grinder equipped with commercially available shroud and dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide 25 cubic feet per minute (cfm) or greater of airflow per inch of wheel diameter and have a filter with 99% or greater efficiency and a cyclonic pre- separator or filter-cleaning mechanism.</p>   | APF<br>10  | APF<br>25        |
| (xii) Handheld grinders for uses other than mortar removal     | <p>For tasks performed outdoors only:</p> <p>Use grinder equipped with integrated water delivery system that continuously feeds water to the grinding surface.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>OR</p> <p>Use grinder equipped with commercially available shroud and dust collection system.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide 25 cubic feet per minute (cfm) or greater of airflow per inch of wheel diameter and have a filter with 99% or greater efficiency and a cyclonic pre- separator or filter-cleaning mechanism.</p> <ul style="list-style-type: none"> <li>- When used outdoors.</li> <li>- When used indoors or in an enclosed area.</li> </ul> | None   | None             |
|  |  | None   | None             |
|  |  | None   | None             |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task                                       | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|--|---|--|------------------|
|  |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (xiii) Walk-behind milling machines and floor grinders | <p>Use machine equipped with integrated water delivery system that continuously feeds water to the cutting surface.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>OR</p> <p>Use machine equipped with dust collection system recommended by the manufacturer.</p> <p>Operate and maintain tool in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Dust collector must provide the air flow recommended by the manufacturer, or greater, and have a filter with 99% or greater efficiency and a filter-cleaning mechanism.</p> <p>When used indoors or in an enclosed area, use a HEPA-filtered vacuum to remove loose dust in between passes.</p> | None   | None             |
|  |   | None   | None             |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task  | Engineering and Work Practice Control Methods   | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|---|---|--|------------------|
|   |   | ≤ 4 hours /shift   | > 4 hours /shift |
| (xiv) Small drivable milling machines (less than half-lane) | <p>Use a machine equipped with supplemental water sprays designed to suppress dust. Water must be combined with a surfactant.</p> <p>Operate and maintain machine to minimize dust emissions.</p>   | None   | None             |
| (xv) Large drivable milling machines (half-lane and larger) | <p>For cuts of any depth on asphalt only:</p> <p>Use machine equipped with exhaust ventilation on drum enclosure and supplemental water sprays designed to suppress dust.</p> <p>Operate and maintain machine to minimize dust emissions.</p>                     | None   | None             |
|   | <p>For cuts of four inches in depth or less on any substrate:</p> <p>Use machine equipped with exhaust ventilation on drum enclosure and supplemental water sprays designed to suppress dust.</p> <p>Operate and maintain machine to minimize dust emissions.</p> | None   | None             |
|   | <p>OR</p> <p>Use a machine equipped with supplemental water spray designed to suppress dust. Water must be combined with a surfactant.</p> <p>Operate and maintain machine to minimize dust emissions.</p>  | None   | None             |

**TABLE 1: SPECIFIED EXPOSURE CONTROL METHODS  
WHEN WORKING WITH MATERIALS CONTAINING CRYSTALLINE SILICA**

| Equipment / Task  | Engineering and Work Practice Control Methods  | Required Respiratory Protection and Minimum Assigned Protection Factor (APF) |                  |
|---|--|--|------------------|
|   |  | ≤ 4 hours /shift   | > 4 hours /shift |
| (xvi) Crushing machines   | <p>Use equipment designed to deliver water spray or mist for dust suppression at crusher and other points where dust is generated (e.g. hoppers, conveyers, sieves/sizing or vibrating components, and discharge points).</p> <p>Operate and maintain machine in accordance with manufacturer's instructions to minimize dust emissions.</p> <p>Use a ventilated booth that provides fresh, climate-controlled air to the operator, or a remote-control station.</p> | None   | None             |
| (xvii) Heavy equipment and utility vehicles used to abrade or fracture silica- containing materials (e.g. hoe-ramming, rock ripping) or used during demolition activities involving silica-containing materials | <p>Operate equipment from within an enclosed cab.</p> <p>When employees outside of the cab are engaged in the task, apply water and/or dust suppressants as necessary to minimize dust emissions.</p>  | None   | None             |
| (xviii) Heavy equipment and utility vehicles for tasks such as grading and excavating but not including: demolishing, abrading, or fracturing silica-containing materials                                       | <p>Apply water and/or dust suppressants as necessary to minimize dust emissions.</p> <p>OR</p> <p>When the equipment operator is the only employee engaged in the task, operate equipment from within an enclosed cab.</p>   | None   | None             |

**Note: Any "EQUIPMENT/TASK" that may be identified that are not addressed in Table 1 as written, shall be added to Table 1 with "Engineering and Work Practice Control Methods" addressed as well as "Required Respiratory Protection and Minimum Assigned Protection Factor" (APF) being addressed using the same format as above.**

**When implementing the control measures specified in Table 1, each employer shall:**

**Safe Work Planning**

- Select one or more of the methods described in the table above
- Establish a barrier around the work zone to restrict access by unprotected workers
- Inspect all dust control equipment and tools to make sure they are in good working order
- Use and maintain all tools as specified by the manufacturer
- When working off-site, provide the contractor with a copy of the silica exposure control plan and safe work procedures
- Ensure that workers inspect their respirators before start-up
- Monitor dust release from equipment during use. When tools and equipment are working properly, very little dust should be visible in the air. Stop work if excessive dust is observed

**Exposures to Crystalline Silica**

**The following describes the NIOSH policy for respiratory protection against Respiratory protective equipment**

- Each worker who has occupational exposure to respirable silica, will be fit-tested and trained on the proper selection, use, care and maintenance of respirators

All employees required to wear a respirator will follow THE CITY OF EDEN Respirator Protection Program and meet all requirements of 1926.1153. If "**NONE**" is indicated (with acceptable use of engineering and work practice controls) in Table 1 for the Task as described the use of **N95 Dust Respirators is allowed as voluntary use respirators as requested by the employee.**

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**NIOSH Policy Statement Respiratory Protection Recommendations for Airborne exposures to crystalline silica.**

Recommendation: **NIOSH recommends the use of half-face piece particulate respirators with N95 or better filters for airborne exposures to crystalline silica at concentrations less than or equal to 0.5 mg/m<sup>3</sup>.** The Occupational Safety and Health Administration (OSHA) also specifies the use of at least a 95-rated filter efficiency [29 Code of Federal Regulations (CFR) 1910.134]. The recommendation for a 95-rated filter efficiency reflects the improved filter

efficiency of N95 filters over the earlier dust and mist (DM) filters. A comprehensive respirator program must be instituted prior to the use of 42 CFR 84 respirators. The requirements for a comprehensive respirator program may be found in the OSHA respiratory protection standard (29 CFR 1910.134).



## **Other personal protective equipment and hygiene**

- Workers will wear approved safety glasses and hearing protection when cutting, drilling, grinding, chipping or jackhammering concrete. This equipment will not interfere with the fit of the worker's respirator.
- Workers must remove dust covered coveralls or protective clothing before eating lunch.
- Workers who launder clothing contaminated with silica should be informed of the hazards of silica and the precautions required for handling the clothing.
- Disposable coveralls will be used in full enclosure systems.

## **Housekeeping procedures**

- Dry sweeping and the use of compressed air are prohibited for removing dust and debris containing silica.
- Work areas and equipment covered by dust will be cleaned at the end of every shift using a HEPA filter vacuum.
- Wet cleanup may also be used to remove dust.
- Waste material will be placed in a dumpster and will be removed at least weekly. The location and method used to store waste will not allow silica-containing dust to re-enter the workplace.
- Any slurry generated by wet control methods should be cleaned up when the work is completed to avoid secondary dust exposure hazard.
- Filter cloth will be used in catch basins to collect dust and prevent silica dust from collecting in underground areas.
- Supervisors are responsible for ensuring that work areas are free from dust at the end of each shift.

## **Worker training for silica dust exposure**

- Training will be performed by the employer or the employer's designate
- Records of attendance, dates of training, and training material will be documented and retained by the supervisor.
- Additional training or reference material on silica dust exposure will be made available to employees upon request.

## **Training topics**

10. Health hazards of silica dust exposure (including signs and symptoms of silica related disease)
11. Operations and materials that can produce silica dust exposures
12. Engineering controls and safe work practices used to protect workers
13. The importance of proper equipment control and maintenance
14. Housekeeping procedures
15. Proper use of respirators and the respirator program
16. Personal hygiene procedures to reduce exposures
17. How smoking increases the risk of developing silicosis and other lung damage
18. The details of the exposure control program for silica dust

## **Health surveillance**

Workers who are regularly exposed to silica dust should receive regular medical examinations from a medical provider approved by the employer. These examinations should include all required tests and examinations as required by the Respirator Program as well as requirements spelled out in 1926.1153. A form will be provided by the medical provider that gives approval that includes the positive affirmation that the employee is physically able and qualified to use the respirator designated for use by the employer based on the requirements of this program. These requirements will be based on Table 1 of this program. This approval document shall be maintained as a medical record in the employees file. Respirators shall be provided, training provided, and fit testing passed only on respirators approved by the medical provider for the employee.

## **Annual review**

This exposure control program will be reviewed at least annually and updated as necessary by the employer, in consultation with the workplace health and safety committee or the worker health and safety representative.

**Appendix C to Sec. 1910.134: OSHA Respirator Medical Evaluation Questionnaire (Mandatory)**

To the employer: Answers to questions in Section 1, and to question 9 in Section 2 of Part A, do not require a medical examination.

To the employee:

Your employer must allow you to answer this questionnaire during normal working hours, or at a time and place that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

Part A. Section 1. (Mandatory) The following information must be provided by every employee who has been selected to use any type of respirator (please print).

1. Today's date: \_\_\_\_\_
2. Your name: \_\_\_\_\_
3. Your age (to nearest year): \_\_\_\_\_
4. Sex (circle one): Male/Female
5. Your height: \_\_\_\_\_ ft. \_\_\_\_\_ in.
6. Your weight: \_\_\_\_\_ lbs.
7. Your job title: \_\_\_\_\_
8. A phone number where you can be reached by the health care professional who reviews this questionnaire (include the Area Code): \_\_\_\_\_
9. The best time to phone you at this number: \_\_\_\_\_
10. Has your employer told you how to contact the health care professional who will review this questionnaire (circle one): Yes/No
11. Check the type of respirator you will use (you can check more than one category):
  - a. N, R, or P disposable respirator (filter-mask, non-cartridge type only).
  - b. Other type (for example, half- or full-face piece type, powered-air purifying, supplied-air, self-contained breathing apparatus).

# OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

12. Have you worn a respirator (circle one): Yes/No?

If "yes," what type(s): \_\_\_\_\_  
\_\_\_\_\_

Part A. Section 2. (Mandatory) Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no").

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month: Yes/No

2. Have you ever had any of the following conditions?

a. Seizures: Yes/No

b. Diabetes (sugar disease): Yes/No

c. Allergic reactions that interfere with your breathing: Yes/No

d. Claustrophobia (fear of closed-in places): Yes/No

e. Trouble smelling odors: Yes/No

3. Have you ever had any of the following pulmonary or lung problems?

a. Asbestosis: Yes/No

b. Asthma: Yes/No

c. Chronic bronchitis: Yes/No

d. Emphysema: Yes/No

e. Pneumonia: Yes/No

f. Tuberculosis: Yes/No

g. Silicosis: Yes/No

h. Pneumothorax (collapsed lung): Yes/No

i. Lung cancer: Yes/No

j. Broken ribs: Yes/No

k. Any chest injuries or surgeries: Yes/No

l. Any other lung problem that you've been told about: Yes/No

## OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

4. Do you currently have any of the following symptoms of pulmonary or lung illness?
  - a. Shortness of breath: Yes/No
  - b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes/No
  - c. Shortness of breath when walking with other people at an ordinary pace on level ground: Yes/No
  - d. Have to stop for breath when walking at your own pace on level ground: Yes/No
  - e. Shortness of breath when washing or dressing yourself: Yes/No
  - f. Shortness of breath that interferes with your job: Yes/No
  - g. Coughing that produces phlegm (thick sputum): Yes/No
  - h. Coughing that wakes you early in the morning: Yes/No
  - i. Coughing that occurs mostly when you are lying down: Yes/No
  - j. Coughing up blood in the last month: Yes/No
  - k. Wheezing: Yes/No
  - l. Wheezing that interferes with your job: Yes/No
  - m. Chest pain when you breathe deeply: Yes/No
  - n. Any other symptoms that you think may be related to lung problems: Yes/No
5. Have you ever had any of the following cardiovascular or heart problems?
  - a. Heart attack: Yes/No
  - b. Stroke: Yes/No
  - c. Angina: Yes/No
  - d. Heart failure: Yes/No
  - e. Swelling in your legs or feet (not caused by walking): Yes/No
  - f. Heart arrhythmia (heart beating irregularly): Yes/No
  - g. High blood pressure: Yes/No
  - h. Any other heart problem that you've been told about Yes/No

## OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

6. Have you ever had any of the following cardiovascular or heart symptoms?
  - a. Frequent pain or tightness in your chest: Yes/No
  - b. Pain or tightness in your chest during physical activity: Yes/No
  - c. Pain or tightness in your chest that interferes with your job: Yes/No
  - d. In the past two years, have you noticed your heart skipping or missing a beat Yes/No
  - e. Heartburn or indigestion that is not related to eating: Yes/No
  - f. Any other symptoms that you think may be related to heart or circulation problems: Yes/No
  
7. Do you currently take medication for any of the following problems?
  - a. Breathing or lung problems: Yes/No
  - b. Heart trouble: Yes/No
  - c. Blood pressure: Yes/No
  - d. Seizures: Yes/No
  
8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator, check the following space and go to question 9:)
  - a. Eye irritation: Yes/No
  - b. Skin allergies or rashes: Yes/No
  - c. Anxiety: Yes/No
  - d. General weakness or fatigue: Yes/No
  - e. Any other problem that interferes with your use of a respirator: Yes/No

# OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

9. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire: Yes/No

Questions 10 to 15 below must be answered by every employee who has been selected to use either a full- face piece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary.

10. Have you ever lost vision in either eye (temporarily or permanently): Yes/No

11. Do you currently have any of the following vision problems?

- a. Wear contact lenses: Yes/No
- b. Wear glasses: Yes/No
- c. Color blind: Yes/No
- d. Any other eye or vision problem: Yes/No

12. Have you ever had an injury to your ears, including a broken ear drum: Yes/No

13. Do you *currently* have any of the following hearing problems?

- a. Difficulty hearing: Yes/No
- b. Wear a hearing aid: Yes/No
- c. Any other hearing or ear problem: Yes/No

14. Have you *ever had* a back injury: Yes/No?

15. Do you *currently* have any of the following musculoskeletal problems?

- a. Weakness in any of your arms, hands, legs, or feet Yes/No
- b. Back pain: Yes/No
- c. Difficulty fully moving your arms and legs: Yes/No
- d. Pain or stiffness when you lean forward or backward at the waist Yes/No
- e. Difficulty fully moving your head up or down: Yes/No
- f. Difficulty fully moving your head side to side: Yes/No
- g. Difficulty bending at your knees: Yes/No
- h. Difficulty squatting to the ground: Yes/No

# OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

- i. Climbing a flight of stairs or a ladder carrying more than 25 lbs: Yes/No
- j. Any other muscle or skeletal problem that interferes with using a respirator: Yes/No

Part B Any of the following questions, and other questions not listed, may be added to the questionnaire at the discretion of the health care professional who will review the questionnaire.

1. In your present job, are you working at high altitudes (over 5,000 feet) or in a place that has lower than normal amounts of oxygen: Yes/No

If "yes," do you have feelings of dizziness, shortness of breath, pounding in your chest, or other symptoms when you're working under these conditions: Yes/No

2. At work or at home, have you ever been exposed to hazardous solvents, hazardous airborne chemicals (e.g., gases, fumes, or dust), or have you come into skin contact with hazardous chemicals: Yes/No

If "yes," name the chemicals if you know them: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you ever worked with any of the materials, or under any of the conditions, listed below?

- a. Asbestos: Yes/No
- b. Silica (e.g., in sandblasting): Yes/No
- c. Tungsten/cobalt (e.g., grinding or welding this material): Yes/No
- d. Beryllium: Yes/No
- e. Aluminum: Yes/No
- f. Coal (for example, mining): Yes/No
- g. Iron: Yes/No
- h. Tin: Yes/No
- i. Dusty environments: Yes/No
- j. Any other hazardous exposures: Yes/No

If "yes," describe these exposures: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

4. List any second jobs or side businesses you have: \_\_\_\_\_  
\_\_\_\_\_

5. List your previous occupations: \_\_\_\_\_  
\_\_\_\_\_

6. List your current and previous hobbies: \_\_\_\_\_  
\_\_\_\_\_

7. Have you been in the military services? Yes/No

If "yes," were you exposed to biological or chemical agents (either in training or combat):  
Yes/No

8. Have you ever worked on a HAZMAT team? Yes/No

9. Other than medications for breathing and lung problems, heart trouble, blood pressure, and seizures mentioned earlier in this questionnaire, are you taking any other medications for any reason (including over-the-counter medications): Yes/No

If "yes," name the medications if you know them: \_\_\_\_\_

10. Will you be using any of the following items with your respirator(s)?

a. HEPA Filters: Yes/No

b. Canisters (for example, gas masks): Yes/No

c. Cartridges: Yes/No

11. How often are you expected to use the respirator(s) (circle "yes" or "no" for all answers that apply to you)?

a. Escape only (no rescue): Yes/No

b. Emergency rescue only: Yes/No

c. Less than 5 hours *per week*: Yes/No

d. Less than 2 hours *per day*: Yes/No

e. 2 to 4 hours per day: Yes/No

f. Over 4 hours per day: Yes/No

# OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

12. During the period you are using the respirator(s), is your work effort:

a. *Light* (less than 200 kcal per hour): Yes/No

If "yes," how long does this period last during the average shift: \_\_\_\_\_hrs. \_\_\_mins.

Examples of a light work effort are *sitting* while writing, typing, drafting, or performing light assembly work; or *standing* while operating a drill press (1-3 lbs.) or controlling machines.

b. *Moderate* (200 to 350 kcal per hour): Yes/No

If "yes," how long does this period last during the average shift: \_\_\_\_\_hrs. \_\_\_mins.

Examples of moderate work effort are *sitting* while nailing or filing; *driving* a truck or bus in urban traffic; *standing* while drilling, nailing, performing assembly work, or transferring a moderate load (about 35 lbs.) at trunk level; *walking* on a level surface about 2 mph or down a 5-degree grade about 3 mph; or *pushing* a wheelbarrow with a heavy load (about 100 lbs.) on a level surface. c. *Heavy* (above 350 kcal per hour): Yes/No

If "yes," how long does this period last during the average shift: \_\_\_\_\_hrs. \_\_\_\_\_mins.

# OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

Examples of heavy work are *lifting* a heavy load (about 50 lbs.) from the floor to your waist or shoulder; working on a loading dock; *shoveling*; *standing* while bricklaying or chipping castings; *walking* up an 8-degree grade about 2 mph; climbing stairs with a heavy load (about 50 lbs.).

13. Will you be wearing protective clothing and/or equipment (other than the respirator) when you're using your respirator: Yes/No

If "yes," describe this protective clothing and/or equipment: \_\_\_\_\_

14. Will you be working under hot conditions (temperature exceeding 77 deg. F): Yes/No

15. Will you be working under humid conditions: Yes/No?

16. Describe the work you'll be doing while you're using your respirator(s):

17. Describe any special or hazardous conditions you might encounter when you're using your respirator(s) (for example, confined spaces, life-threatening gases):

18. Provide the following information, if you know it, for each toxic substance that you'll be exposed to when you're using your respirator(s):

Name of the first toxic substance: \_\_\_\_\_

Estimated maximum exposure level per shift: \_\_\_\_\_

Duration of exposure per shift: \_\_\_\_\_

Name of the second toxic substance: \_\_\_\_\_

Estimated maximum exposure level per shift: \_\_\_\_\_

Duration of exposure per shift: \_\_\_\_\_

Name of the third toxic substance: \_\_\_\_\_

Estimated maximum exposure level per shift: \_\_\_\_\_

Duration of exposure per shift: \_\_\_\_\_

The name of any other toxic substances that you'll be exposed to while using your respirator:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## OSHA Respirator Medical Evaluation Questionnaire (Mandatory)

19. Describe any special responsibilities you'll have while using your respirator(s) that may affect the safety and well-being of others (for example, rescue, security):

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[63 FR 1152, Jan. 8, 1998; 63 FR 20098, April 23, 1998; 76 FR 33607, June 8, 2011; 77 FR 46949, Aug. 7, 2012]

THE CITY OF EDEN

RESPIRATOR USERS MEDICAL EVALUATION

Medical Provider \_\_\_\_\_

Date of Evaluation \_\_\_\_\_

The Occupational Safety and Health Administration (OSHA) requires that the following information be provided by every employee who has been selected to use any type of respirator (please print).

Employee Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Company Name: \_\_\_\_\_

Daytime phone, if different: \_\_\_\_\_

Company Address: \_\_\_\_\_

Best time to call: \_\_\_\_\_

Date \_\_\_\_\_

Sex: \_\_\_ Male \_\_\_ Female

Check the type of respirator Employee cleared to use (you can check more than one category):

- checkbox N, R, or P disposable respirator (filter-mask, non-cartridge type only). (<11b)
checkbox air-purifying, half mask (< 1 lb)
checkbox air-purifying, full mask (1-3 lbs)
checkbox powered air-purifying hood (<4 - 12lbs)
checkbox powered air-purifying, tight fitting (< 5 lbs)
checkbox supplied air, hood (<3 lbs)
checkbox supplied air, tight fitting (2 -4 lbs)
checkbox Self-Contained Breathing Apparatus (SCBA) (24 lbs)
checkbox Other: \_\_\_\_\_
Use is checkbox Required checkbox Voluntary

PAPR or N-

Please indicate the level of work effort the Employee is allowed while using the respirator, indicating the amount of time they may use the respirator at each level in a day:

Table with 3 columns: Level of Effort, hours, Examples. Rows include light, moderate, and heavy effort levels with corresponding examples like typing, nailing, and heavy lifting.

For Medical Provider use only:

Medically approved for checkbox All air-purifying respirators checkbox Supplied Air Respirators checkbox SCBA

Other: \_\_\_\_\_

Restrictions: checkbox Employee may decline respirator-requiring assignments for temporary health-related Difficulties checkbox Other: \_\_\_\_\_

Effective through, \_\_\_\_\_ OR checkbox Complete brief questionnaire at time of annual training (Required users only) Employee has been provided with a copy of this written recommendation: checkbox Yes checkbox No

Signature of Physician or Other Licensed Health Care Professional: \_\_\_\_\_

Medical Provider \_\_\_\_\_

Address \_\_\_\_\_

## **Irritant Smoke Fit Test Procedure**

- (1) The person being fit tested shall don the respirator without assistance, and perform the required user seal check(s).
- (2) The test subject shall be instructed to keep his/her eyes closed.
- (3) The test operator shall direct the stream of irritant smoke from the smoke tube toward the face seal area of the test subject, using the low flow pump or the squeeze bulb. The test operator shall begin at least 12 inches from the facepiece and move the smoke stream around the whole perimeter of the mask. The operator shall gradually make two more passes around the perimeter of the mask, moving to within six inches of the respirator.
- (4) If the person being tested has not had an involuntary response and/or detected the irritant smoke, proceed with the test exercises.
- (5) The exercises identified in section I.A. 14. of this appendix shall be performed by the test subject while the respirator seal is being continually challenged by the smoke, directed around the perimeter of the respirator at a distance of six inches.
- (6) If the person being fit tested reports detecting the irritant smoke at any time, the test is failed. The person being retested must repeat the entire sensitivity check and fit test procedure.
- (7) Each test subject passing the irritant smoke test without evidence of a response (involuntary cough, irritation) shall be given a second sensitivity screening check, with the smoke from the same smoke tube used during the fit test, once the respirator has been removed, to determine whether he/she still reacts to the smoke. Failure to evoke a response shall void the fit test.
- (8) If a response is produced during this second sensitivity check, then the fit test is passed.

## **Fit Test Exercises**

(a) Employers must perform the following test exercises for all fit testing methods prescribed in this appendix, except for the CNP quantitative fit testing protocol and the CNP REDON quantitative fit testing protocol. For these two protocols, employers must ensure that the test subjects (*i.e.*, employees) perform the exercise procedure specified in Part I.C.4(b) of this appendix for the CNP quantitative fit testing protocol, or the exercise procedure described in Part I.C.S(b) of this appendix for the CNP REDON quantitative fit-testing protocol. For the remaining fit testing methods, employers must ensure that employees perform the test exercises in the appropriate test environment in the following manner:

- (1) Normal breathing. In a normal standing position, without talking, the subject shall breathe normally.
- (2) Deep breathing. In a normal standing position, the subject shall breathe slowly and deeply, taking caution so as not to hyperventilate.

(3) Turning head side to side. Standing in place, the subject shall slowly turn his/her head from side to side between the extreme positions on each side. The head shall be held at each extreme momentarily so the subject can inhale at each side.

(4) Moving head up and down. Standing in place, the subject shall slowly move his/her head up and down. The subject shall be instructed to inhale in the up position (i.e., when looking toward the ceiling).

(5) Talking. The subject shall talk out loud slowly and loud enough so as to be heard clearly by the test conductor. The subject can read from a prepared text such as the Rainbow Passage, count backward from 100, or recite a memorized poem or song.

### ***Rainbow Passage***

When the sunlight strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond reach, his friends say he is looking for the pot of gold at the end of the rainbow.

(6) Grimace. The test subject shall grimace by smiling or frowning. (This applies only to QNFT testing; it is not performed for QLFT)

(7) Bending over. The test subject shall bend at the waist as if he/she were to touch his/her toes. Jogging in place shall be substituted for this exercise in those test environments such as shroud type QNFT or QLFT units that do not permit bending over at the waist.

(8) Normal breathing. Same as exercise (1).

(b) Each test exercise shall be performed for one minute except for the grimace exercise which shall be performed for 15 seconds. The test subject shall be questioned by the test conductor regarding the comfort of the respirator upon completion of the protocol. If it has become unacceptable, another model of respirator shall be tried. The respirator shall not be adjusted once the fit test exercises begin. Any adjustment voids the test, and the fit test must be repeated.

# THE CITY OF EDEN

## Respirator Fit Test Form

This is a qualitative fit test. The respirator you are wearing should remove the test agent from the air. If you cannot detect the odor, you will have a good fit.

Name of Person fit tested: \_\_\_\_\_

Date fitted: \_\_\_\_\_

Type of Respirator being fitted:

- \_\_\_ 3M Model 9211
- \_\_\_ 3M Model 9210
- \_\_\_ Tecno Fluidshield PFR95
- \_\_\_ 3M Model 1860
- \_\_\_ Other \_\_\_\_\_
- \_\_\_ Other \_\_\_\_\_

Conditions that could affect respirator fit:

- \_\_\_ Clean-shaven
- \_\_\_ 1-2 day beard growth
- \_\_\_ 2+ day beard growth
- \_\_\_ Moustache
- \_\_\_ Facial scar
- \_\_\_ Dentures absent
- \_\_\_ Glasses

Employee passed "exercises" outlined in the Fit Test Procedure: Yes \_\_\_\_\_ No \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

Person performing fit test: \_\_\_\_\_

I have read the material issued to me on how to clean, store, and inspect the respirator, and I am familiar with the conditions under which it should be used. I am familiar with the applicable OSHA standards, such as 29 CFR 1910.134 and others as appropriate. Since conditions vary greatly situation to situation, I will become informed about the contaminants that may be encountered which will require the use of my respirator.

\_\_\_\_\_  
Signature of Person Fit Tested

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Supervisor

\_\_\_\_\_  
Date



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