Control of Hazardous Energy Program
(Lockout/Tagout)

Berryessa Union School District
1376 Piedmont Road, San Jose CA 95132
408-923-1800

Updated February 2018
The Control of Hazardous Energy (Lockout/Tagout) Program

1910.147

The following lockout/tagout program is provided to assist employees in complying with the requirements of 29 Code of Federal Regulations (CFR) 1910.147, as well as to provide other helpful information.
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OBJECTIVE

The objective of this procedure is to establish a means of positive control to prevent the accidental starting or activating of machinery or systems while they are being repaired, cleaned and/or serviced. This program serves to:

A. Establish a safe and positive means of shutting down machinery, equipment and systems.
B. Prohibit unauthorized personnel or remote control systems from starting machinery or equipment while it is being serviced.
C. Provide a secondary control system (tagout) when it is impossible to positively lockout the machinery or equipment.
D. Establish responsibility for implementing and controlling lockout/tagout procedures.
E. Ensure that only approved locks, standardized tags and fastening devices provided by the company will be utilized in the lockout/tagout procedures.

ASSIGNMENT OF RESPONSIBILITY

A. Miguel Cruz, Director of MOT, will be responsible for implementing the lockout/tagout program.
B. Miguel Cruz, Director of MOT, is responsible for enforcing the program and insuring compliance with the procedures in the MOT departments.
C. Miguel Cruz, Director of MOT, will conduct the annual inspection and certification of the authorized employees.
D. Authorized employees are responsible for following established lockout/tagout procedures. An authorized employee is defined as a person who locks out or tags out machines or equipment in order to perform servicing or maintenance on that machine or equipment. An affected employee becomes an authorized employee when that employee's duties include performing servicing or maintenance covered under 1910.147, The Control of Hazardous Energy (lockout/tagout).
E. Affected employees (all other employees in the facility) are responsible for insuring they do not attempt to restart or re-energize machines or equipment that are locked out or tagged out. An affected employee is defined as a person whose job requires him/her to operate or use a machine or equipment on which servicing or maintenance is being performed under lockout or tagout, or whose job requires him/her to work in an area in which such servicing or maintenance is being performed.

PROCEDURES

The ensuing items are to be followed to ensure both compliance with the OSHA Control of Hazardous Energy Standard and the safety of our employees.

A. Preparation for Lockout or Tagout

Employees who are required to utilize the lockout/tagout procedure must be knowledgeable of the different energy sources and the proper sequence of shutting off or disconnecting energy means. The four types of energy sources are:

1. electrical (most common form);
2. hydraulic or pneumatic;
3. fluids and gases; and
4. mechanical (including gravity).

More than one energy source may be utilized on some equipment and the proper procedure must be followed in order to identify energy sources and lockout/tagout accordingly. See Attachment F for specific procedure format.
B. Electrical

1. Shut off power at machine and disconnect.
2. Disconnecting means must be locked or tagged.
3. Press start button to see that correct systems are locked out.
4. All controls must be returned to their safest position.
5. Points to remember:
   a. If a machine or piece of equipment contains capacitors, they must be drained of stored energy.
   b. Possible disconnecting means include the power cord, power panels (look for primary and secondary voltage), breakers, the operator's station, motor circuit, relays, limit switches, and electrical interlocks.
   c. Some equipment may have a motor isolating shut-off and a control isolating shut-off.
   d. If the electrical energy is disconnected by simply unplugging the power cord, the cord must be kept under the control of the authorized employee or the plug end of the cord must be locked out or tagged out.

C. Hydraulic/Pneumatic

1. Shut off all energy sources (pumps and compressors). If the pumps and compressors supply energy to more than one piece of equipment, lockout or tagout the valve supplying energy to the piece of equipment being serviced.
2. Stored pressure from hydraulic/pneumatic lines shall be drained/bled when release of stored energy could cause injury to employees.
3. Make sure controls are returned to their safest position (off, stop, standby, inch, jog, etc.).

D. Fluids and Gases

1. Identify the type of fluid or gas and the necessary personal protective equipment.
2. Close valves to prevent flow, and lockout/tagout.
3. Determine the isolating device, then close and lockout/tagout.
4. Drain and bleed lines to zero energy state.
5. Some systems may have electrically controlled valves. If so, they must be shut off and locked/tagged out.
6. Check for zero energy state at the equipment.

E. Mechanical Energy

Mechanical energy includes gravity activation, energy stored in springs, etc.

1. Block out or use die ram safety chain.
2. Lockout or tagout safety device.
3. Shut off, lockout or tagout electrical system.
4. Check for zero energy state.
5. Return controls to safest position.

F. Release from Lockout/Tagout

1. Inspection: Make certain the work is completed and inventory the tools and equipment that were used.
2. Clean-up: Remove all towels, rags, work-aids, etc.
3. Replace guards: Replace all guards possible. Sometimes a particular guard may have to be left off until the start sequence is over due to possible adjustments. However, all other guards should be put back into place.

4. Check controls: All controls should be in their safest position.

5. The work area shall be checked to ensure that all employees have been safely positioned or removed and notified that the lockout/tagout devices are being removed.

6. Remove locks/tags. Remove only your lock or tag.

G. Service or Maintenance Involving More than One Person

When servicing and/or maintenance is performed by more than one person, each authorized employee shall place his own lock or tag on the energy isolating source. This shall be done by utilizing a multiple lock scissors clamp if the equipment is capable of being locked out. If the equipment cannot be locked out, then each authorized employee must place his tag on the equipment.

H. Removal of an Authorized Employee’s Lockout/Tagout by Berryessa Union School District

Each location must follow the written emergency procedures that comply with 1910.147(e)(3) to be utilized at that location. Emergency procedures for removing lockout/tagout should include the following:

1. Verification by employer that the authorized employee who applied the device is not in the facility.
2. Make reasonable efforts to advise the employee that his/her device has been removed. (This can be done when he/she returns to the facility).
3. Ensure that the authorized employee has this knowledge before he/she resumes work at the facility.

I. Shift or Personnel Changes

Each facility must follow the written procedures based on specific needs and capabilities. Each procedure must specify how the continuity of lockout or tagout protection will be ensured at all times. See 1910.147(f)(4).

J. Procedures for Outside Personnel/Contractors

Outside personnel/contractors shall be advised that Berryessa Union School District has and enforces the use of lockout/tagout procedures. They will be informed of the use of locks and tags and notified about the prohibition of attempts to restart or re-energize machines or equipment that are locked out or tagged out.

The Berryessa Union School District will obtain information from the outside personnel/contractor about their lockout/tagout procedures and advise affected employees of this information.

The outside personnel/contractor will be required to sign a certification form. If outside personnel/contractor has previously signed a certification that is on file, additional signed certification is not necessary.

K. Training and Communication

Each authorized employee who will be utilizing the lockout/tagout procedure will be trained in the recognition of applicable hazardous energy sources, type and magnitude of energy available in the work place, and the methods and means necessary for energy isolation and control.

Each affected employee (all employees other than authorized employees utilizing the lockout/tagout procedure) shall be instructed in the purpose and use of the lockout/tagout procedure, and the prohibition of attempts to restart or re-energize machines or equipment that are locked out or tagged out.
Training will be certified by a training acknowledgement form stating the employee attended and understood the material presented. The certifications will be retained in the employee personnel files.

**L. Periodic Inspection**

A periodic inspection (at least annually) will be conducted of each authorized employee under the lockout/tagout procedure. This inspection shall be performed by Miguel Cruz, Director of MOT. If Miguel Cruz, Director of MOT is also using the energy control procedure being inspected, then another party shall perform the inspection.

The inspection will include a review between the inspector and each authorized employee of that employee's responsibilities under the energy control (lockout/tagout) procedure. The inspection will also consist of a physical inspection of the authorized employee while performing work under the procedures.

Miguel Cruz, Director of MOT shall certify in writing that the inspection has been performed. The written certification shall be retained in the individual's personnel file.
ATTACHMENT A

List of Authorized Personnel for Lockout/Tagout Procedures

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ATTACHMENT B

Lock Out – Tag Out Annual Training

Certification of Training

I certify that I received training as an authorized employer under Berryessa Union School District Lockout/Tagout program. I further certify that I understand the procedures and will abide by those procedures.

________________________________________________                       __________________
AUTHORIZED EMPLOYEE SIGNATURE                                                DATE
ATTACHMENT C

Certification of Training
(Affected Personnel)

I certify that I received training as an Affected Employee under the Berryessa Union School District Lockout/Tagout Program. I further certify and understand that I am prohibited from attempting to restart or re-energize machines or equipment that are locked out or tagged out.

________________________________________________                       __________________
AUTHORIZED EMPLOYEE SIGNATURE                                                DATE
ATTACHMENT D

Lockout/Tagout Inspection Certification

I certify that ________________(equipment) was inspected on this date utilizing lockout/tagout procedures. The inspection was performed while working on _________________(equipment).

________________________________________________                       __________________
AUTHORIZED EMPLOYEE SIGNATURE                                                DATE

________________________________________________                       __________________
INSPECTOR SIGNATURE                                                                  DATE
ATTACHMENT E

Outside Personnel/Contractor Certification

I certify that ___________________________ and ___________________________ (outside personnel/contractor) have informed each other of our respective lockout/tagout procedures.

________________________________________________                       __________________
AUTHORIZED EMPLOYEE SIGNATURE                                                DATE

________________________________________________                       __________________
INSPECTOR SIGNATURE                                                                  DATE
Machine Identification

General Description:

________________________________________

________________________________________

Manufacturer:

________________________________________

________________________________________

Model Number: __________________________

Serial Number:* __________________________

________________________________________

* If more than one piece of same equipment, list all serial numbers.

Location of equipment:

________________________________________

________________________________________

Operator Controls

The types of controls available to the operator need to be determined. This should help identify energy sources and lockout capacity for the equipment.

List types of operator controls:

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________
Energy Sources

The energy sources, such as electrical, steam, hydraulic, pneumatic, natural gas, stored energy, etc.) present on this equipment are:

<table>
<thead>
<tr>
<th>ENERGY SOURCE</th>
<th>LOCATION</th>
<th>Lockable</th>
<th>Type lock or block needed</th>
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<tr>
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Shutdown Procedures

List the steps in order necessary to shut down and de-energize the equipment. Be specific. For stored energy, be specific about how the energy will be dissipated or restrained.

Procedure:

_____________________________________________________
_____________________________________________________
_____________________________________________________

Lock Type & Location:

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

How Will De-energized State Be Verified?

_____________________________________________________________________________________________
_____________________________________________________________________________________________
_____________________________________________________________________________________________

NOTIFY ALL AFFECTED EMPLOYEES WHEN THIS PROCEDURE IS IN APPLICATION.
Start Up Procedures
List the steps in order necessary to reactivate (energize) the equipment. Be specific.

Procedure:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Energy Source Activated:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

*NOTIFY ALL AFFECTED EMPLOYEES WHEN THIS PROCEDURE IS IN APPLICATION.*

Procedures For Operations and Service/Maintenance

List those operations where the procedures above do not apply [See 29 CFR 1910.147 (a)(2)]. Alternate measures which provide effective protection must be developed for these operations. Job Safety Analysis is one method of determining appropriate measures.

Operation Name:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
Affected and Authorized Employees

List each person affected by this procedure and those authorized to use this procedure.

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<tbody>
<tr>
<td><strong>AFFECTED EMPLOYEES</strong></td>
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|                              |                |
| **AUTHORIZED EMPLOYEES**     |                |
| Name                        | Job Title      |
|                              |                |
|                              |                |
|                              |                |
|                              |                |
|                              |                |

Approved by ____________________________  Date ________________

Approved by ____________________________  Date ________________

*Lock Out Tag Out plan approved by the Safety Committee on*

*Updated on 2/2018 and approved through BUSD Safety Committee on 3/2018*