**Voluntary Protection Programs-Process Safety Management Program**

**(VPP-PSM) Supplement B**

**Calendar Year 2017**

**Instructions**

Below are the questions that comprise the VPP PSM Supplement B for calendar year 2017. Please respond to each question (sub-question) with separate responses. If the question relates to ammonia refrigeration, and you have no ammonia refrigeration, then you do not need to respond to that question. If the questions relate to contractors and you do not employ contractors or are not a contractor at a PSM site, then you do not need to respond to those questions. If you are a contractor at a PSM site then please respond to the contractor questions. Providing a response of “Not Applicable” will result in the questions will be returned to you for an appropriate response.

You are asked again this year for a list of metrics you collect. This information will be compared to the list of metrics you provided last year and will be used to identify leading indicators that best relate to how you evaluate the confidence of your PSM and associated safety and health programs. If the importance you assign to the types of collected metrics has changed from last year, please respond accordingly. If the list has not changed, please provide responses…Do not leave this section blank.

In response to the final question, we ask you to compare the responses from 2016 to those you provided in 2015; and ask you to provide information on continuous improvement of your SHMS as it relates to your PSM programs for 2017. Please use any of your response information from 2015 and 2016 as well as, from the metrics analysis results to provide your response.

1. **Program Information**
2. *Management of Change (MOC)Tracking*
3. What is the frequency with which the MOCs are audited? Is it annually or some other period, please indicate the period?

 **Response**:

1. Describe your process for auditing them?

**Response:**

1. How do you track open action items on MOC’s?

**Response:**

* What is the oldest open action item?

**Response:**

* Are all action items properly closed?

**Response:**

1. Are all action items assigned to someone to complete?

**Response:**

1. For the oldest open action item, what is the number of months between this report and the last time a status update was given for it, (for Example: today is 12/2015 and the last update on the action item was 1/2014, your answer would be 24 months)

**Response:**

1. *Relief Valves/Systems*
2. How do you determine the design and design basis for every relief valve at your site that is in highly hazardous chemical (HHC) service?

**Response:**

1. Is it electronically kept or on paper or a combination of both?

**Response:**

1. Have you conducted a relief study to ensure that your flare system can adequately protect your facility/processes?

**Response:**

1. Did that relief study accurately consider current operating conditions?

**Response:**

1. When inspecting a relief valve do you have a procedure for documenting the condition the valve was in prior to repairs being made?

**Response:**

1. Do you perform an investigation when damage is found during its inspection?

**Response:**

1. If yes, please describe the process and indicate how long this level of investigation has been going on, include who is responsible for that investigation and keeping those records.

**Response:**

1. If no, please indicate that you do not.

**Response:**

1. *Piping & Instrument Diagrams (P&IDs) Information*
2. Does your site use P&IDs? (Yes/No) If not, describe what equivalent information or documentation your site uses in lieu of P&IDs.

**Response:**

1. If your site uses P&IDs, describe how you ensure the information they contain is current and accurate.

**Response:**

1. Who at your site is responsible for updating/revising P&IDs when necessary?

**Response:**

1. Describe the training and qualification of that person to ensure they understand how to correctly update/revise the P&IDs.

**Response:**

1. Include an explanation of how your site documents and tracks any updates/revisions to P&IDs to ensure they are completed in a timely manner and the most current version is available.

**Response:**

1. If your site uses P&IDs, do you routinely provide P&ID information to contractors performing work in covered areas?

**(Yes/No)**

1. Are these contractors performing work in covered areas resident, non-resident, or a combination?

**Response:**

1. Describe who from your site is responsible for providing the P&ID info to the contractor, how they ensure that the contractor has been provided with current and accurate P&ID info, and how they verify that the contractor understands the P&ID info provided to them in order to use it to perform their work in a safe manner.

**Response:**

1. *Emergency Operations*
2. Describe in detail the process you use to ensure that every operator knows all of the emergency operating procedures they are responsible for?

**Response:**

1. Do you drill the emergency operating procedures with the operators?

**Response:**

1. Describe the drill for emergency operating procedures. Include the frequency of the drills.

**Response:**

1. Describe the most recent loss of containment incident you have had at your facility. Provide a detailed description of the incident and the corrective actions taken.

**Response:**

1. *Ammonia Refrigeration*
2. If your facility has ammonia refrigeration system(s) please indicate how much ammonia your system(s) contains.

**Response**:

1. For the last three year period, please indicate how many times the system has been charged. Please detail each delivery of ammonia you have taken and how much the system was charged with for each delivery.

**Response:**

1. *Contractors*
2. As the owner of a PSM covered site, describe in detail how you communicate the process hazards your contractors are exposed to while at your site doing the work they have been hired to do.

**Response:**

1. As a contractor at a PSM covered site, describe in detail the information you obtain from the owner about the process hazards to which your employees are exposed.

**Response:**

1. Is the information different from when you first arrive on the site to when you are doing a specific job on the site? If so, describe how.

**Response:**

1. As a contractor at a PSM covered site, describe in detail the hazards your operations bring to the site that could expose the host site, and other contractor workers.

**Response:**

1. As a contractor, describe in detail how you communicate the hazards your operations introduce to the host, their workers and other contractors at the site.

**Response:**

1. *Contractors and P&IDs*
2. Are you a resident or non-resident contractor at a PSM covered site?

**(resident/non-resident)**

1. Is P&ID information normally made available and provided to you before performing work at a PSM covered site?

**(Yes/No)**

1. Have you ever been provided P&ID information while performing work at a PSM covered site? (Yes/No)
2. If the answer to question iii. is yes, was the P&ID information provided to you by the host site before you began your work or did you request it for review before beginning your work?

**Response:**

1. If you have been provided P&ID information while performing work at a PSM covered site, where did your employees received training on P&IDs and how to use them?

**Response:**

1. Did someone from the site verify that you understood the P&ID info and how to use it?

**(Yes/No)**

1. Please describe in detail who from the site provided you the P&ID information, who explained the information to you, and how they verified that you understood the P&ID information.

**Response:**

1. Describe how you verified that the P&ID information provided to you was current and accurate.

**Response:**

1. **Metrics Information**

We know that all companies collect metrics data for various programs and various reasons. Some of these metrics are very important in evaluating the elements of a system or the business, as a whole. We are particularly interested in identifying the metrics you collect for safety and health, and specifically your PSM metrics.

1. What is your primary North American Industry Classification System

(NAICS) Code? If you do not know the correct code, please verify the accuracy with someone in your facility having access to that information.

**Response:**

1. Do you collect metrics electronically?

**Response:**

1. Please provide a narrative as to how you report the metrics you collect? What do you do with the information once collected and how is it utilized?

**Response:**

1. Please provide a couple of specific examples as how metrics were used specifically to assist with identifying issues and corrective measures within the last year.

**Response:**

1. *For all VPP-PSM Participants:* Please provide a list of (no more than) 15 PSM metrics regularly collected by your company. Prioritize the list providing the metrics you find most useful/critical and those metrics that give you a level of confidence in the function of a system or process or program.

**Response:**

1. *For Resident Contractors at a VPP-PSM Site:* Please provide a list of (no more than) 15 safety and health metrics you collect. Please prioritize the list providing the metrics you find most useful/critical and those metrics that give you a level of confidence in the function of a system or process or program.
2. If you are required by statute and operational function to develop and maintain a PSM program separate to that of your host site, please provide those PSM-related metrics.

**Response:**

1. If your operations fall under only paragraph (h) of the PSM standard please provide any metrics you collect regarding those elements.

**Response:**

1. **Comparative Analysis**

**Question:** Please describe in detail the processes you use to evaluate your safety and health management system as it relates to your PSM programs. Compare the progress you have made in continually improving your SHMS in relation to your PSM programs within the last year. Compare the responses you provided for the 2015 and 2016 Supplements to the ones you will submit for the 2017 Supplement B.

In your discussion, please also incorporate the plans you use, or are developing, to include leading indicators (metrics) to support having a high level of confidence in the stability of your PSM programs. Use information from the 2015 and 2016 Supplement B responses, the metrics you collect, and also any other supporting information from your SHMS and/or your PSM programs.

Please do not just copy your 2016 self-evaluation responses into the 2017 questions. Having different responses for each year will allow you to better assess your continuing improvement.

**Response:**