

## **Operational Safety Procedure Form**

(See ES&H Manual Chapter 3310 Appendix T1
Operational Safety Procedure (OSP) and
Temporary OSP Procedure for instructions.)



DEFINE THE SCOPE OF WORK											
Title:	С	Commissioning of Hall A Compton Polarimeter for 11 GeV									
Location:		Hall A			Гуре:	$\square_{\text{OSP}}$					
(per <u>T</u>	ask Ha	Fication azard Analysis attached) O Manual Chapter 3210 Appendix T3 Risk Code Assignment.)		Highest Risk Code Mitigation (3 Highest Risk Cod Mitigation (N, 1,		3 or 4): de after					
Docu	ment C	Owner(s):	Sirish Nanda		Date: N	Novembe	er 27, 2013				
Document History (Optional)											
Revis	Revision: Reason for revision or update:					Serial number of superseded document					
ANALYZE THE HAZARDS											
1. P	urpose	of the Proce	edure – Describe in detail the reason for the procedu	ure (what is	being done	and why).					
This work control document describes the operating procedure, associated hazards, and their mitigation, for the recently upgraded Hall A Compton polarimeter. Concurrence is sought that it can be safely operated by staff and users for experiments without further mitigating measures.											
2. S	cope –	include all o	perations, people, and/or areas that the procedure wi	ill affect.							
			he Hall A Compton Polarimeter								
3. D			acility – include floor plans and layout of a typical e	experiment o	or operation.						
<u>.</u>		e attached d									
4. A		ty and Respo									
		Sirish Nanda/Hall A Work Coordinator or designee									
			onsible for key tasks								
		n Nanda	•								
	4.3 Who analyzes the special or unusual hazards (See ES&H Manual Chapter 3210 Appendix T1 Work Planning, Control, and Authorization Procedure)										
	Hall	A Work Co	oordinator or designee								
	4.4	What are th	e Training Requirements (See http://www.jlab.org	g/div_dept/ti	rain/poc.pdf)	ľ					



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5. P	5. Personal and Environmental Hazard Controls Including:									
	5.1	Shielding								
		N/A								
	5.2	Interlocks								
		See attached document								
	5.3	Monitoring systems								
		N/A								
	5.4	Ventilation								
		N/A								
	5.5	Other (Electrical, ODH, Trip, Ladder) (Attach related Temporary Work Permits or Safety Reviews as appropriate.)								
		See attached document								
6 L	ist Of	Safety Equipment								
	Personal Protective Equipment									
	Safety Glasses, earmuffs, Laser safety eyewear									
	Special Tools									
	N/A									

#### **DEVELOP THE PROCEDURE**

1. Associated Administrative Controls

None

2. Operating Guidelines

See attached document

3. Notification of Affected Personnel (who, how, and when)

See list of Authorized Personnel on attached document

4. List the Steps Required to Execute the Procedure: from start to finish.

See attached procedure

5. Back Out Procedure(s) i.e. steps necessary to restore the equipment/area to a safe level.

None

- 6. Special environmental control requirements:
  - 6.1 Environmental impacts (See EMP-04 Project/Activity/Experiment Environmental Review)

None

- **6.2** Abatement steps (secondary containment or special packaging requirements)
- 7. Unusual/Emergency Procedures (e.g., loss of power, spills, fire, etc.)

None



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8. Instrument Calibration Requirements (e.g., safety system/device recertification, RF probe calibration)

None

9. Inspection Schedules

None

10. References/Associated Documentation

Attached device description, hazards, and operating procedure

11. List of Records Generated (Include Location / Review and Approved procedure)

# Click To Submit OSP for Electronic Review

Distribution: Copies to: affected area, authors, Division Safety Officer

**Expiration:** Forward to ESH&Q Document Control

#### **Form Revision Summary**

**Revision 1.2 – 09/15/12 –** Update form to conform to electronic review.

Revision 1.1 – 04/03/12 – Risk Code 0 switched to N to be consistent with 3210 T3 Risk Code Assignment.

**Revision 1 – 12/01/11 -** Added reasoning for OSP to aid in appropriate review determination.

Revision 0 - 10/05/09 - Updated to reflect current laboratory operations

ISSUING AUTHORITY	FORM TECHNICAL POINT-OF-CONTACT	APPROVAL DATE	REVIEW REQUIRED DATE	REV.
ESH&Q Division	Harry Fanning	12/01/11	12/01/14	1.2

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