



Company : Moses Lake Industries, Inc.
Factory : Moses Lake Industries, Inc.
Reporting Period : 2012

100%

Facility-Level Social and Environmental Responsibility

FB1 - Facility Information

FB0.1 - Company Name:

Moses Lake Industries, Inc.

FB0.2 - Facility Name:

Moses Lake Industries

FB0.3 - Facility Address Line 1

8248 Randolph Road NE

FB0.4 - Facility Address Line 2:

Moses Lake, WA 98837

FB0.5 - Facility City:

Moses Lake

FB0.6 - Facility State or Province:

Washington

FB0.7 - Facility Country:

United States

FB0.8 - Facility Postal Code:

98837

FB1.0 - Please choose your primary deliverables:

Products

FB1.2 - Do the products/services carry the customer name and/or logo?

No

FB1.3 - Please indicate how many supply chain tiers, including your own company, are involved in fulfillment of the customer contract(s).

2

FB1.4 - Notes and Comments: (If none enter N/A)

N/A

FB2 - Facility Contact Information

FB2.3 - Social and Environmental Responsibility Contact Name:

William Osborne

FB2.4 - Contact Position or Title:

Senior General Manager and Corporate EHSS Manager

FB2.5 - Contact Telephone Number:

5097625336

FB2.7 - Contact Email:

bosborne@mlindustries.com

FB2.10 - Company Headquarters Address (if different from above):

Same as above.

FB2.12 - Notes and Comments: (If none enter N/A)

N/A

FB3 - Facility Characteristics

FB3.1 - What are the principal activities performed at your facility (To select multiple rows hold down the Ctrl key and click additional choices):

other

FB3.1.2 - Please describe other:

Manufacturing

S1.6 - What is the principal business of your company? (To select multiple rows hold down the Ctrl key and click additional choices):

Business Services - Branded Products

High purity chemical manufacturing.

FB3.2 - What primary types of operations are performed? (To select multiple rows hold down the Ctrl key and click additional choices):

Chemical

FB3.3 - How many total employees are employed at your facility?

246

FB3.9 - How many contract or temporary employees are employed at your facility?

7

FB3.4 - Is your facility site owned or leased?

Owned

FB3.5 - Please include the year your company began operations at this location.

1984

FB3.6 - During the last 12 months, were there any public demonstrations, protests, or adverse media reports involving your facility's operations or business conduct?

No

FB3.8 - How many buildings do you have?

11

FB3.8.1 - What is the total property size in square meters (SQM)?

323749

FB3.8.2 - What is the total floor space (under roof, including all floors) in square meters (SQM)?

13320

FB3.7 - Notes and Comments: (If none enter N/A)

N/A

FL1 - Facility Contact Information for Labor and Ethics

FL1.4 - Labor and Ethics Contact Name

Mike Tiffany

FL1.5 - Contact Position or Title:

Director of Operations

FL1.6 - Contact Telephone Number:

5097625336

FL1.8 - Contact Email:

Mtiffany@mlindustries.com

FL1.9 - Contact Address:

8248 Randolph Rd. NE, Moses Lake, WA 98837

FL1.11 - Notes and Comments: (If none enter N/A)

N/A

FL2 - Management Accountability and History

FL2.1 - Is a management representative at this facility assigned responsibility for assuring and facilitating compliance with LABOR laws, regulations and codes?

Yes

FL2.2.1 - Name of management representative:

Liana Cockrum

FL2.2.2 - Position or Title:

HR Manager

FL2.2.4 - Telephone Number:

5097625336

FL2.2.6 - Email

lcockrum@mlindustries.com

FL2.3 - Is a management representative at this facility assigned responsibility for assuring and facilitating compliance with business ETHICS laws, regulations and codes (e.g. bribery, corruption, etc.)?

Yes

FL2.4.1 - Name of management representative:

Michael Harvey

FL2.4.2 - Position or Title:

President

FL2.4.4 - Telephone Number:

5097625336

FL2.4.6 - Email

mharvery@mlindustries.com

FL2.5 - During the past 3 years, has the facility been prosecuted or cited for labor or ethics violations resulting in penalties or corrective actions mandated by a court or government authority?

No

FL2.6 - Notes and Comments: (If none enter N/A)


N/A

FL3 - Labor and Ethics Policy and Procedures

FL3.1a - Does your facility adhere to a written LABOR policy (or statement of commitment)? (In the absence of a formal policy, you may assert a commitment to compliance with specific standards or legal requirements.)

Yes

FL3.1a.1 - If yes, please attach the policy statement or document asserting commitment to compliance with specific standards or legal requirements.

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FL3.13 - Please indicate if each of the following are included in the scope of your LABOR policy or supporting rules and procedures: Freely Chosen Employment

Yes

FL3.14 - Working Hours

Yes

FL3.15 - Wages and Benefits

Yes

FL3.16 - Humane Treatment

Yes

FL3.17 - Non-Discrimination

Yes

FL3.18 - Freedom of Association

Yes

FL3.27 - Are all items, identified above as included in the scope of your LABOR policy or supporting rules,

communicated clearly to workers in the local or appropriate languages?

Yes

FL3.7a - Do you place a contractual requirement on your suppliers (including labor agencies) to be in compliance with Labor laws, regulations, or codes of conduct?

Yes

FL3.28 - Does your company have a supplier code of conduct that covers LABOR standards?

Yes

FL3.9a - Please state the applicable Labor standard(s) or code(s):

EICC Code of Conduct and Standards

FL3.1b - Does your facility adhere to a written ETHICS policy (or statement of commitment)? (In the absence of a formal policy, you may assert a commitment to compliance with specific standards or legal requirements.)

Yes

FL3.1b.1 - If yes, please attach the policy statement or document asserting commitment to compliance with specific standards or legal requirements.

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FL3.19 - Please indicate if each of the following are included in the scope of your ETHICS policy or supporting rules and procedures: Business Integrity (Anti-Corruption)

Yes

FL3.20 - No Improper Advantage (Bribery)

Yes

FL3.21 - Disclosure of Information

Yes

FL3.22 - Intellectual Property

Yes

FL3.23 - Fair Business, Advertising, and Competition

Yes

FL3.24 - Protection of Identity

Yes

FL3.25 - Are all items, identified above as included in the scope of your ETHICS policy or supporting rules, communicated clearly to workers in the local or appropriate languages?

Yes

FL3.26 - What communication methods are used to inform workers about your policies and procedures?(e.g. website, handbooks, formal training sessions)

Formal training and employee handbooks

FL3.7b - Do you place a contractual requirement on your suppliers (including labor agencies) to be in compliance with ETHICS laws, regulations, or codes of conduct?

Yes

FL3.29 - Does your company have a supplier code of conduct that covers ETHICS standards?

Yes

FL3.9b - Please state the applicable Ethics standard(s) or code(s):

EICC Code of Conduct and Standards

FL3.12 - Notes and Comments: (If none enter N/A)

N/A

FL4 - Freely Chosen Employment

FL4.1 - What percentage of your workers have a written and signed employment contract?

100%

FL4.2 - Does your facility use foreign or migrant workers?

Yes

FL4.3 - Does your facility use third-party workforce recruiters to provide foreign or migrant workers?

No

FL4.5 - Who is responsible for safekeeping of travel documents (e.g. passport or visa) for foreign and migrant workers at your facility?

Workers

FL4.6 - Are any of your workers (direct or sub-contracted) required to deposit money or identity papers prior to becoming employed?

No

FL4.8 - Does your facility have a policy and procedure allowing workers to resign with no penalty after giving reasonable notice?

In Place

FL4.9 - Do your workers receive a clear explanation of your policies and procedures for giving notice of resignation and receiving their final payment?

Yes

FL4.13 - Have you implemented a program to monitor your supply chain for forced, bonded (including debt bondage) or indentured labor, involuntary prison labor, slavery, or trafficking of persons?

In Place

FL4.11 - Notes and Comments: (If none enter N/A)

N/A

FL5 - Child Labor Avoidance

FL5.1 - Do you have personnel records including evidence of the birth date of each worker?

Yes

FL5.2 - What evidence do you hold/retain copies of? (To select multiple rows hold down the Ctrl key and click additional choices):

Birth Certificate, ID Card, Other

FL5.3 - Does your facility use an external source (e.g. labor agency, police department) to verify workers' ages?

No

FL5.4a - What is the legal minimum age of employment for workers in the country/province/region where your facility is located: a) to perform light work:

16

FL5.4b - What is the legal minimum age of employment for workers in the country/province/region where your facility is located: b) to perform routine work:

18 or higher

FL5.4c - What is the legal minimum age of employment for workers in the country/province/region where your facility is located: c) to perform hazardous work:

18 or higher

FL5.5 - During the last 12 months, have any persons below these minimum employment ages applied for a job at your facility? (Do not include interns or apprentices)

No

FL5.7 - During the last 12 months, has your facility hired or utilized any persons under apprenticeship or vocational training programs?

Yes

FL5.8 - What was the minimum age of these workers?

18 or higher

FL5.9 - Does your facility employ young workers (over the legal minimum age but under 18)?

Yes

FL5.10 - What percentage of your workforce is under 18?

0 to 5%

FL5.11 - Does your facility ensure that young workers (over the legal minimum age but under 18) do not perform night work or hazardous work?

Yes

FL5.12 - Does your facility have a system or documented procedure for discovering workers below minimum age and taking corrective actions?

In Place

FL5.13 - Does your facility have a system or documented procedure to verify that your suppliers do not use child labor?

In Place

FL5.14 - Notes and Comments: (If none enter N/A)

Suppliers affirm compliance with EICC Code of Conduct as part of the MLI Standard Terms and Conditions of MLI-Issued Purchase Order.

FL6 - Working Hours

FL6.1 - Is there a legal limit on total working hours in the country or region where your facility operates?

No

FL6.5a - Does your facility place a limit on the number of hours that workers can work for the following: Per Day?

Yes

FL6.5a.1 - If yes, please state the limits

12 hours

FL6.5b - Per Week?

No

FL6.5c - Per Month?

No

FL6.6 - Do all your workers have regular rest days (at least one during every seven-day period)?

Yes

FL6.8 - Do your workers have regular breaks during their working hours?

Yes

FL6.9 - Do any of the workers at your facility perform overtime work?

Yes

FL6.12 - On what basis do workers accept overtime work?

Mostly Voluntary but sometimes Required

FL6.11 - Do your workers review for accuracy, and approve the hours they worked for each pay period in their local or appropriate language(s)?

Yes

FL6.13 - Notes and Comments: (If none enter N/A)

Although no formal limit has been set on weekly or monthly hours worked by MLI or the State of Washington, MLI encourages a healthy work/life balance through monitoring hours worked and our Work/Life Employee Assistance Program.

FL7 - Wages and Benefits

FL7.1 - Is there a legal minimum wage requirement in the country, region, or locality where your facility operates?

Yes

FL7.2a - Please enter the minimum wage in U.S. dollars per hour:

9.19

FL7.2b - Please enter the minimum wage per hour in the local currency:

9.19

FL7.3 - Is the base wage for any workers at your facility less than the minimum wage?

No

FL7.4 - Which of the following items are subtracted from the base wage paid to workers at your facility? (To select multiple rows hold down the Ctrl key and click additional choices):

None

FL7.5 - Do you provide workers upon hire with a written description of employment policies including: terms of payment and government deductions, employer-provided housing and meals, and disciplinary fines?

Yes

FL7.15 - Do you employ temporary contract workers at your facility?

Yes

FL7.17 - Do temporary contract workers at your facility receive benefits in addition to their wages?

No

FL7.6 - Does your facility use labor agencies to employ temporary contract workers?

Yes

FL7.7 - Do you have procedures for verifying and continually monitoring the labor agencies to ensure that fees, wages and deductions conform to local and national law?

In Place

FL7.16 - What percentage of the workers employed at your facility are temporary contract workers?

Less than 25%

FL7.8 - Do you pay newly hired workers less than the minimum wage during their apprenticeship or training period?

No

FL7.9 - Do you have a method for establishing worker wages that considers the type of work, market wages, and the legal minimum wage?

In Place

FL7.10 - Do you pay workers for overtime hours in addition to regular working hours?

Yes

FL7.11 - What is the rate of overtime pay compared to regular time pay? Select the best answer which matches your lowest rate of overtime paid.

Equal to or between time and a half and double time

FL7.12 - Are any of your workers paid according to a piece rate rather than an hourly rate?

No

FL7.13 - Do you provide your workers with a clear description, in their local or appropriate language(s), of the method of calculating their wages?

Yes

FL7.14 - Notes and Comments: (If none enter N/A)

N/A

FL8 - Humane Treatment

FL8.1 - Does your facility have written policies in the local or appropriate language(s) that describes acceptable worker practices and disciplinary measures if these practices are not followed?

Yes

FL8.2 - If employees or workers violate company policies, does your facility management have a procedure for issuing warnings to them?

Yes

FL8.3.1 - Does your facility use the following as a disciplinary measure: Fines?

No

FL8.3.2 - Base Wage Deductions?

No

FL8.3.3 - Bonus Deductions?

No

FL8.3.4 - Termination?

Yes

FL8.3.5 - Suspension?

Yes

FL8.3.6 - Job or Grade Level Demotion?

No

FL8.3.7 - Any Other Methods?

Yes

FL8.3.7.1 - Please describe other:

Progressive disciplinary scale.

FL8.4 - Does your facility prohibit physical punishment of workers as a disciplinary measure?

Yes

FL8.5 - Does your facility have procedures in place for prevention of harassment, coercion, threatening behavior, physical abuse, sexual abuse, or verbal abuse toward workers?

In Place

FL8.6 - Does your facility have a process for workers to confidentially report cases of harassment, coercion, threatening behavior, physical abuse, sexual abuse, or verbal abuse?

In Place

FL8.7 - Does your facility have procedures to investigate such cases if they arise and to discipline workers that commit such acts against workers?

In Place

FL8.10 - During the last 12 months, how many such cases occurred at your facility?

0

FL8.9 - Notes and Comments: (If none enter N/A)

N/A

FL9 - Non-Discrimination

FL9.1.1 - Does your facility require job applicants to provide the following prior to hiring: Ethnic Origin?

No

FL9.1.2 - Religion?

No

FL9.1.3 - Political Affiliation?

No

FL9.1.4 - Marital Status?

No

FL9.1.5 - Pregnancy Status?

No

FL9.1.6 - Date of Birth?

Yes

FL9.1.7 - Medical History?

No

FL9.1.8 - Sexual Orientation?

No

FL9.1.9 - Physical Disability?

Yes

FL9.1.10 - Union Membership Information?

No

FL9.2 - Do you have written policies and guidelines to prevent discrimination in hiring, promotion, equal pay, benefits, and training based on any of the above characteristics as well as race, color, age, and gender?

Yes

FL9.3 - Are records kept to confirm adherence to these guidelines?

Yes

FL9.4 - Do your facility's job postings include statements of non-discrimination?

Yes

FL9.14 - What percentage of the workers at your facility are women?

25

FL9.8 - Is your facility equipped with accommodations for Disabled persons (e.g. access to worksites, use of toilets, elevators, cafeteria, etc.)?

Yes

FL9.9 - Does your facility conduct pregnancy testing for female workers?

No

FL9.11 - With the exception of health and safety considerations does your facility place limitations on employment, utilization or promotion of pregnant female workers?

No

FL9.12 - During the last 12 months, were any workers removed from their jobs while on sick or maternity leave, pregnant, or breast-feeding?

No

FL9.13 - Notes and Comments: (If none enter N/A)

N/A

FL10 - Freedom of Association

FL10.1 - Are there any legal restrictions or prohibitions concerning workers creating or joining any labor

organizations in the country/region where your facility operates?

No

FL10.3 - Which, if any, of the following types of labor organizations are present and active at your facility? (To select multiple rows hold down the Ctrl key and click additional choices):

None

FL10.4 - Other than through a labor organization, does your facility have a process for workers to communicate openly with each other and with management regarding their collective views and interests?

Partial

FL10.5a - Does your facility have any formal agreements in place with independent trade union(s)?

No

FL10.5b - Does your facility have any formal agreements in place with government union(s)?

No

FL10.6 - Are workers at your facility free to join trade unions or other collective bargaining organizations of their choice?

Yes

FL10.7 - Do workers at your facility participate democratically in the selection of representatives for labor organizations?

No

FL10.8 - Does your facility management require workers to provide information about their membership in labor or other organizations related to worker rights?

No

FL10.9a - During the last 12 months, were any workers disciplined or in any way penalized for joining any organization?

No

FL10.9b - During the last 12 months, were any workers disciplined or in any way penalized for refusing to join or quitting any organization?

No

FL10.10 - At a minimum how often does your facility management meet with representatives of labor organizations?

Never

FL10.11 - Notes and Comments: (If none enter N/A)


N/A

FL11 - Ethical Business Practices

FL11.12 - Does your company have a written policy addressing corruption and bribery which expressly prohibits the payment of bribes or anything of value to third persons for the purpose of influencing business or government decisions?

Yes

FL11.12.1 - Please attach policy

 ADML-6.2.0-00.010P.pdf

FL11.13 - Does your facility have a written business integrity policy which expressly prohibits the following :
Payment of Bribes or anything of value to third persons for the purpose of influencing business or government

decisions?

Yes

FL11.14 - Extortion?

Yes

FL11.15 - Embezzlement?

Yes

FL11.15.1 - Please attach business integrity policy.

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FL11.4 - Does your facility have a program and/or procedures to detect, eliminate, and prohibit situations in which managers or workers have a potential conflict between the company's interests and their own?

In Place

FL11.5 - Does your facility have a program and/or procedures to ensure accurate disclosure of information regarding business activities, structure, financial situation, and performance in accordance with applicable regulations?

In Place

FL11.6 - Does a program and/or procedures exist to assure non-disclosure of sensitive or confidential information about customers, channel partners, suppliers, workers, and other business partners in accordance with applicable laws and regulations?

In Place

FL11.3 - Does your facility have a program and/or procedures to ensure that required standards of fair business, including advertising and competitive marketing, are upheld?

In Place

FL11.7 - Has your facility implemented a written procedure for workers to report about discrimination, ethical violations, harsh treatment, or other issues without threat of reprisals?

In Place

FL11.8 - Has your facility implemented a program and/or procedures to protect the identity of workers that report suspected cases of ethical or legal misconduct?

Partial

FL11.9 - Has your facility implemented a process for investigating reports of ethical or legal misconduct and for taking disciplinary actions?

In Place

FL11.10 - During the last 12 months, how many confidential notifications regarding ethical or legal violations were investigated at your facility?

None

FL11.16 - Does your facility provide formal training to employees on business ETHICS which includes training on how to prevent and detect corruption?

Yes

FL11.17 - Does your facility have a program and/or procedures in place to uphold: Business Integrity (corruption, extortion, embezzlement); No Improper Advantage (bribery, excessive gift-giving); Disclosure of Information; and Intellectual Property?

Yes

FL11.18 - Does your facility have a program and/or procedures in place to uphold: Fair Business, Advertising and

Competition; and Protection of Identity on the part of suppliers, contractors, or agents representing the facility?

Yes

FL11.19 - Does your company agree to not pay anything of value to any government official for the purpose of improperly influencing any official decision?

Yes

FL11.11 - Notes and Comments: (If none enter N/A)

N/A

FL12 - Labor / Ethics Management System Status

FL12.1a - Does your facility utilize or is it developing a management systems approach (including policies, programs, procedures, and review processes) to assure proper management of LABOR practices?

Yes

FL12.2 - Do you have a site-specific management system registered to SA 8000, Ethical Trading Initiative, or other recognized codes of social conduct? (Report company-wide management systems in the Corporate Questionnaire)

No

FL12.4a.1 - For your LABOR management systems, please indicate the level of implementation of the programs and procedures for: Freely Chosen Employment?

In Place

FL12.4a.2 - Child Labor Avoidance?

In Place

FL12.4a.3 - Working Hours?

In Place

FL12.4a.4 - Wages And Benefits?

In Place

FL12.4a.5 - Humane Treatment?

In Place

FL12.4a.6 - Non-Discrimination?

In Place

FL12.4a.7 - Freedom Of Association?

In Place

FL12.5a - To what extent are the above LABOR management systems documented?

Completely and Updated Regularly

FL12.6a - How often does the management of your facility review the status of the above LABOR management system(s) and identify improvement opportunities?

Every 2 to 4 Years

FL12.7a - What was the date of the last labor management review?

6/22/2012 0:0:0

FL12.1b - Does your facility utilize or is it developing a management systems approach (including policies, programs, procedures, and review processes) to assure proper management of ETHICS practices?

Yes

FL12.4b.1 - For your Ethics management systems, please indicate the level of implementation of the programs and procedures for: Business Integrity?

In Place

FL12.4b.2 - No Improper Advantage?

In Place

FL12.4b.3 - Disclosure Of Information?

In Place

FL12.4b.4 - Intellectual Property?

In Place

FL12.4b.5 - Fair Business Practices?

In Place

FL12.4b.6 - Protection Of Identity?

In Place

FL12.5b - To what extent are the above ETHICS management systems documented?

Completely and Updated Regularly

FL12.6b - How often does the management of your facility review the status of the above ETHICS management system(s) and identify improvement opportunities?

Every 2 to 4 Years

FL12.7b - What was the date of the last ETHICS management review?

8/19/2010 0:0:0

FL12.8 - Notes and Comments: (If none enter N/A)

N/A

FL13 - Labor / Ethics Management System Elements

FL13.1a - Does your facility monitor LABOR laws and regulations that apply to your facility?

Yes

FL13.2.a - Please describe the methods and sources used to monitor LABOR laws and regulations (e.g. Info. Subscription, Consulting Services, Industry Assoc., Regulatory Agencies, In House Specialists)

Audits. In house specialists.

FL13.3a - Does your facility have written performance objectives for LABOR practices, including metrics and targets with implementation plans for achieving them?

Yes

FL13.3a.1 - If yes, please attach the objectives for the current year.

 2013 Goal Posters HR.pdf

FL13.4a - How often does your facility review performance against LABOR objectives and targets?

Several Times Per Year

FL13.5a - Please indicate the date of the last labor review:

12/11/2012 0:0:0

FL13.6a - Has your facility implemented a risk assessment process to identify, prioritize, and mitigate the potential LABOR risks associated with your operations and activities?

None

FL13.8a - Does your facility conduct periodic audits of LABOR practices in order to assess conformance with regulatory and other requirements?

No

FL13.15a - Does your facility provide training programs for LABOR practices?

Yes

FL13.16a - How does your facility measure the effectiveness of training for LABOR practices?

Trainer evaluations and quizzes.

FL13.1b - Does your facility monitor ETHICS laws and regulations that apply to your facility?

Yes

FL13.2.b - Please describe the methods and sources used to monitor ETHICS laws and regulations (e.g. Info. Subscription, Consulting Services, Industry Assoc., Regulatory Agencies, In House Specialists) (Enter N/A if not applicable)

Audits. In house specialists.

FL13.3b - Does your facility have written performance objectives for ETHICS practices, including metrics and targets with implementation plans for achieving them?

No

FL13.6b - Has your facility implemented a risk assessment process to identify, prioritize, and mitigate the potential Business ETHICS risks associated with your operations and activities?

None

FL13.7 - Has your facility implemented a program to assess risks and manage the identified risks relating to the LABOR and ETHICS practices of your suppliers?

None

FL13.8b - Does your facility conduct periodic audits of ETHICS practices in order to assess conformance with regulatory and other requirements?

Yes

FL13.9b - Please indicate what types of requirements are covered in the audit process for ETHICS practices. (To select multiple rows hold down the Ctrl key and click additional choices):

Regulations, Internal Requirements, External Code of Conduct

FL13.10 - During the last 12 months, has your facility received a labor or ethics practices audit or assessment by a customer or other external organization at this facility?

No

FL13.12 - Does your facility have a process to implement timely corrective actions for labor or ethics deficiencies identified by internal or external assessments, audits, and reviews?

In Place

FL13.13 - Does the corrective action process include root cause analysis and prevention?

Yes

FL13.14 - Does your facility provide clear and simple written rules in the local or appropriate language(s), establishing rights, requirements and responsibilities for labor and ethics practices in accordance with company policy?

Yes

FL13.15b - Does your facility provide training programs for ETHICS practices?

Yes

FL13.16b - How does your facility measure the effectiveness of training for ETHICS practices?

Audits.

FL13.17 - To which of the following external groups does your facility communicate information about its labor and ethics performance, practices and expectations? (To select multiple rows hold down the Ctrl key and click additional choices):

None

FL13.20 - What methods are used to communicate externally about LABOR and ETHICS practices? (e.g. In-person Meetings, Published Reports, Website, etc.):

None

FL13.19 - Notes and Comments: (If none enter N/A)

N/A

▣ FH1 - Facility Contact Information for Health, Safety and Environment

FH1.4 - Health, Safety and Environment Contact Name:

William Osborne

FH1.5 - Contact Position or Title:

Corporate EHSS Manager

FH1.6 - Contact Telephone Number:

5097625336

FH1.8 - Contact Email:

bosborne@mlindustries.com

FH1.11 - Notes and Comments: (If none enter N/A)

N/A

▣ FH2 - Management Accountability and History for HS and E

FH2.1 - Is a management representative at this facility assigned responsibility for assuring and facilitating compliance with HEALTH and SAFETY laws, regulations and codes?

Yes

FH2.2.1 - Name of management representative:

William Osborne

FH2.2.2 - Position or Title:

Corporate EHSS Manager

FH2.2.4 - Telephone Number:

5097625336

FH2.2.6 - Email:

bosborne@mlindustries.com

FH2.3 - Is a management representative at this facility assigned responsibility for assuring and facilitating compliance with ENVIRONMENTAL laws, regulations and codes?

Yes

FH2.4.1 - Name of management representative:

William Osborne

FH2.4.2 - Position or Title:

Corporate EHSS Manager

FH2.4.4 - Telephone Number:

5097625336

FH2.4.6 - Email:

bosborne@mlindustries.com

FH2.5 - During the past 3 years, has the facility been prosecuted or cited for HEALTH and SAFETY, and ENVIRONMENTAL violations resulting in penalties or corrective actions mandated by a court or government authority?

No

FH2.6 - Notes and Comments: (If none enter N/A)


N/A

FH3 - Health, Safety and Environment Policy and Procedures

FH3.1a - Does your facility adhere to a written Occupational HEALTH and SAFETY policy (or statement of commitment)? (In the absence of a formal policy, you may assert a commitment to compliance with specific standards or legal requirements.)

Yes

FH3.1a.1 - If yes, please attach the policy statement, or a document containing your assertion of commitment to compliance with specific standards or legal requirements.

 EHSL-8.5.3-00.004P.pdf

FH3.2a.1 - Please indicate if each of the following are included in the scope of your HEALTH and SAFETY policy or supporting rules and procedures: Occupational Safety?

Yes

FH3.2a.2 - Emergency Preparedness?

Yes

FH3.2a.3 - Occupational Injury / Illness?

Yes

FH3.2a.4 - Industrial Hygiene?

Yes

FH3.2a.5 - Physically Demanding Work?

Yes

FH3.2a.6 - Machine Safeguarding?

Yes

FH3.2a.7 - Living Conditions?

Yes

FH3.3a.1 - Are your HEALTH and SAFETY policies and procedures communicated clearly to workers in the local or appropriate language(s) for the following: Occupational Safety?

Yes

FH3.3a.2 - Emergency Preparedness?

Yes

FH3.3a.3 - Occupational Injury / Illness?

Yes

FH3.3a.4 - Industrial Hygiene?

Yes

FH3.3a.5 - Physically Demanding Work?

Yes

FH3.3a.6 - Machine Safeguarding?

Yes

FH3.3a.7 - Living Conditions?

Yes

FH3.3a.8 - What communication methods are used to inform workers about your HEALTH and SAFETY policies and procedures? (e.g. website, handbooks, formal training sessions)?

Training, employee handbook, safety meetings

FH3.5a - Do you place a contractual requirement on your suppliers (including contractors) to be in compliance with HEALTH and SAFETY laws, regulations, or codes of conduct?

Yes

FH3.11 - Does your company have a supplier code of conduct that covers HEALTH and SAFETY standards?

Yes


FH3.7a - Please state the applicable Health and Safety standard(s) or code(s):

EICC Code of Conduct and Standards

FH3.1b - Does your facility adhere to a written ENVIRONMENTAL policy (or statement of commitment)? (In the absence of a formal policy, you may assert a commitment to compliance with specific standards or legal requirements.)

Yes

FH3.1b.1 - If yes, please attach the policy statement, or a document containing your assertion of commitment to compliance with specific standards or legal requirements.

 EHSL-8.5.3-00.004P.pdf

FH3.2b.1 - Please indicate if each of the following are included in the scope of your ENVIRONMENTAL policy or supporting rules and procedures: Environmental Permits?

Yes

FH3.2b.2 - Pollution Prevention?

Yes

FH3.2b.3 - Hazardous Substances?

Yes

FH3.2b.4 - Wastewater and Solid Waste?

Yes

FH3.2b.5 - Airborne Emissions?

Yes

FH3.2b.6 - Product Content?

Yes

FH3.3b.1 - Are your ENVIRONMENTAL policies and procedures communicated clearly to workers in the local or appropriate language(s) for the following: Environmental Permits?

Yes

FH3.3b.2 - Pollution Prevention?

Yes

FH3.3b.3 - Hazardous Substances?

Yes

FH3.3b.4 - Wastewater and Solid Waste?

Yes

FH3.3b.5 - Airborne Emissions?

Yes

FH3.3b.6 - Product Content?

Yes

FH3.3b.7 - What communication methods are used to inform workers about your ENVIRONMENTAL policies and procedures? (e.g. website, handbooks, formal training sessions)?

Training, employee handbook

FH3.5b - Do you place a contractual requirement on your suppliers (including contractors) to be in compliance with ENVIRONMENTAL laws, regulations, or codes of conduct?

Yes

FH3.12 - Does your company have a supplier code of conduct that covers ENVIRONMENTAL standards?

Yes

FH3.7b - Please state the applicable ENVIRONMENTAL standard(s) or code(s):

EICC Code of Conduct and Standards

FH3.8 - Notes and Comments: (If none enter N/A)

N/A

FH4 - Occupational Safety and Machine Safeguarding

FH4.1.1 - Do your facility operations involve or have present any of the following: Flammable or Corrosive Chemicals/Gasses?

Yes

FH4.1.2 - Exposure to high temperatures?

Yes

FH4.1.3 - Electrical systems?

Yes

FH4.1.4 - Powered industrial vehicles?

Yes

FH4.1.5 - High pressure vessels?

Yes

FH4.1.6 - Dangerous machinery?

Yes

FH4.1.7 - Worker entry into confined spaces?

Yes

FH4.2 - Does your facility have procedures in place for safeguarding of workers from potentially hazardous machinery, including barriers, interlocks, and periodic inspections?

In Place

FH4.3 - Does your facility provide protective equipment (e.g. safety glasses, hard hats, gloves) to workers exposed to potential hazards?

Yes

FH4.4 - Does your facility have procedures in place for identifying, evaluating, and controlling general safety hazards (e.g. electrical, fire, vehicles, slips, trips and fall hazards)?

In Place

FH4.5 - Does your facility provide occupational safety training to workers?

Yes

FH4.6 - Notes and Comments: (If none enter N/A)

N/A

FH5 - Emergency Preparedness

FH5.1 - Has your facility identified and assessed potential emergency situations such as process failures, accidents, storms, floods, or other events that pose a threat to humans or the environment?

Yes

FH5.2 - Has your facility developed and implemented an emergency preparedness and response program to minimize the impact of the identified emergency events?

In Place

FH5.3.1 - Does your emergency program include the following: Alarm Systems?

Yes

FH5.3.2 - Evacuation Procedures and Routes?

Yes

FH5.3.3 - Properly Marked Exit Signs?

Yes

FH5.3.4 - Emergency Lighting?

Yes

FH5.3.5 - Qualification and Training of Responders?

Yes

FH5.3.6 - Emergency Response Drills?

Yes

FH5.3.7 - Identification of Hazardous Releases or Exposures?

Yes

FH5.3.8 - Procedures for Hazard Control and Containment?

Yes

FH5.3.9 - Procedures for Use of Protective Equipment?

Yes

FH5.3.10 - Procedures for Clean-up and Decontamination?

Yes

FH5.3.11 - Procedures for External Communication and Reporting?

Yes

FH5.4 - Which of the following firefighting aids are available for immediate use at your facility? (To select multiple rows hold down the Ctrl key and click additional choices):

Extinguishers, Sprinkler Systems

FH5.5 - Are emergency medical supplies placed in convenient locations at the facility for immediate use?

Yes

FH5.6 - Are fire and emergency instructions for workers posted in convenient locations at the facility in the local or appropriate language(s)?

Yes

FH5.7 - Does your facility have a program to cooperate with local authorities, including fire and police, in order to manage emergencies and assure public safety?

In Place

FH5.8 - During the last 12 months, were there any fires, explosions, industrial accidents, or hazardous releases outside of secondary containment at your facilities that resulted in human injuries, fatalities, off-site impacts, or property damage?

No

FH5.9 - During the last 12 months, has there been an emergency evacuation drill at your facility?

Yes

FH5.10 - Notes and Comments: (If none enter N/A)

N/A

FH6 - Occupational Injury / Illness and Physically Demanding Work

FH6.1 - Does your facility have written guidance that defines and classifies different types of work-related INJURIES or ILLNESSES?

In Place

FH6.2 - Does your management encourage workers to report all work-related INJURIES or ILLNESSES?

Yes

FH6.3 - Does your facility have a program of insurance to compensate for the medical costs of work-related INJURIES or ILLNESSES?

In Place

FH6.4 - Does your facility have a program to manage occupational INJURIES and ILLNESSES, including treatment of reported cases, investigation, record-keeping, and returning workers to work as soon as they are physically ready?

In Place

FH6.5 - Does your facility have a program to control worker exposure to physically demanding work, (e.g. heavy lifting and highly repetitive assembly) to prevent work-related INJURIES?

In Place

FH6.6 - Does your facility have a program to provide regular medical examinations for workers and to detect any symptoms of work-related ILLNESSES or INJURIES?

None

FH6.7 - During the last 12 months, how many worker INJURIES have occurred at your facility, including work-related and other types of incidents?

6 to 10

FH6.8 - During the last 12 months, how many work-related ILLNESSES have occurred at your facility?

None

FH6.9 - During the last 2 years, have there been any similar work-related ILLNESSES reported by multiple workers at your facility?

No

FH6.10 - Notes and Comments: (If none enter N/A)

N/A

FH7 - Industrial Hygiene

FH7.1.1 - Does the potential exist for workers at your facility to be exposed to any of the following: Process Emissions (e.g. fumes, vapors, mists, dust)?

Yes

FH7.1.2 - Other airborne emissions (e.g. exhaust, cleaning agents)?

Yes

FH7.1.3 - Skin or oral contact with chemicals (e.g. solvents, epoxies)?

Yes

FH7.1.4 - Ionizing and non-ionizing radiation (e.g. x-rays, microwave)?

No

FH7.1.4.1 - If no, please explain why none of these exposures are possible at your facility.

Devices which emit ionizing, or non ionizing radiation above permissible limits are not used at MLI.

FH7.1.5 - Known chronic disease agents (e.g. lead, asbestos)?

Yes

FH7.1.6 - Prolonged high-decibel noise?

Yes

FH7.2 - Does your facility have a program and/or procedures in place to monitor and evaluate worker exposures to chemical, physical or biological agents?

In Place

FH7.3 - Does your facility have a program to implement controls (e.g. alternative materials and processes, ventilation hoods, time limits, job rotation) in order to reduce or eliminate worker exposure to chemical, biological and physical agents?

In Place

FH7.4 - Does your facility provide protective equipment (e.g. respirators, gloves, ear plugs) to workers exposed to chemical, biological and physical agents?

Yes

FH7.5 - Does your facility provide training to workers on the above industrial hygiene issues?

Yes

FH7.6 - Does your facility make available Material Data Safety Sheets (MSDS) or Chemical Data Sheets to workers that handle chemicals, written in the local or appropriate languages?

Yes

FH7.7 - Notes and Comments: (If none enter N/A)

N/A

FH8 - Living Conditions

FH8.1 - Does your facility provide dormitory housing for its workers?

No

FH8.8 - Does your facility provide or contract for canteen services for workers?

No

FH8.11 - Notes and Comments: (If none enter N/A)

N/A

FH9 - Environmental Permits

FH9.1 - Does your facility perform activities or handle materials that require an environmental permit?

Yes

FH9.2 - Does your facility have a program and/or procedures for obtaining environmental permits/approvals and managing compliance with the permit requirements?

In Place

FH9.3 - Are your facility operations currently in compliance with all local and national monitoring, reporting and permit/approval requirements?

Fully Compliant

FH9.5 - How frequently is your facility inspected by government authorities to confirm compliance with environmental permits/approvals?

Every 2 to 4 years

FH9.6 - During the last 12 months, was your facility cited or warned by a government agency regarding permit non-compliance issues?

No

FH9.7 - Notes and Comments: (If none enter N/A)

N/A

FH10 - Pollution Prevention

FH10.1 - Does your facility have a program and/or procedures to systematically reduce or eliminate pollution and waste in your operations?

Yes

FH10.2.1 - Does your facility use as a pollution prevention method any of the following: De-materialization (e.g. digital technology)?

Yes

FH10.2.2 - Material source reduction?

Yes

FH10.2.3 - Solvent re-use or elimination?

Yes

FH10.2.4 - Green chemistry (e.g. benign synthesis)?

Yes

FH10.2.5 - Process waste and emission minimization?

Yes

FH10.2.6 - Product or process life cycle management?

Yes

FH10.2.7 - Conversion of waste to economic by-products?

Yes

FH10.2.8 - Packaging reduction, recycling, or elimination?

Yes

FH10.3 - Does your facility have a program and/or procedures to systematically reduce the use of energy, water, and other resources in your operations?

Yes

FH10.4.2 - Does your facility as a resource reduction method use the following: Improvement in energy efficiency of processes?

Yes

FH10.4.3 - Renewable energy generation (e.g. wind, solar)?

Yes

FH10.4.4 - Waste heat capture and/or co-generation?

No

FH10.4.5 - Solar lighting and/or heating?

No

FH10.4.7 - Closed-loop process water recycling?

Yes

FH10.4.9 - Reduction in fuel consumption?

Yes

FH10.4.10 - Transport technology improvement (e.g. hybrids)?

No

FH10.6 - Does your facility have a program to consider environmental impacts in its construction, maintenance, and land use practices?

In Place

FH10.7 - During the last 12 months, has your facility received any awards or recognition for your efforts in pollution prevention, resource reduction, or environmental excellence?

Yes

FH10.8 - Please describe these awards:

2012 Pollution Prevention Plan recognized by the WDOE.

FH10.9 - Notes and Comments: (If none enter N/A)

N/A

FH11 - Hazardous Substances

FH11.1.1 - Are the following IN PRODUCTS used at the facility: Hazardous chemicals (e.g. flammable, toxic)?

Yes

FH11.1.4 - Radioactive materials?

No

FH11.1.7 - Biological materials (e.g. micro-organisms)?

No

FH11.1.2 - Are the following IN PROCESSES used at the facility: Hazardous chemicals (e.g. flammable, toxic)?

Yes

FH11.1.5 - Radioactive materials?

No

FH11.1.3 - Does your facility OTHEWISE USE any of the following at the facility: Other hazardous chemicals (e.g. flammable, toxic)?

Yes

FH11.1.6 - Radioactive materials?

No

FH11.1.9 - Biological materials (e.g. micro-organisms)?

No

FH11.2 - What is the quantity (in kg) of hazardous materials that is on-site? (Include all flammables, combustibles, corrosive reactive, toxic gasses, radioactive, biological and hazardous waste materials.)

Over 1000

FH11.3.1 - Does your facility use any of the following to STORE hazardous, flammable or corrosive chemicals: Bottles?

Yes

FH11.3.2 - Gas cylinders?

Yes

FH11.3.3 - Drums under 400 liters?

Yes

FH11.3.4 - Drums 400 liters or more?

No

FH11.3.5 - Above-ground tanks?

Yes

FH11.3.6 - Underground tanks?

No

FH11.3.7 - Any other containers?

Yes

FH11.3.7.1 - Please describe other:

1000L totes, 50mL - 30L containers.

FH11.4.1 - Are chemicals at your facility stored in enclosed or covered areas?

Yes

FH11.4.3 - Do the chemical storage areas at your facility have secondary containment?

Yes

FH11.5 - Does your facility provide hazardous material training to workers?

Yes

FH11.7 - Does your facility generate wastes that are classified as hazardous wastes?

Yes

FH11.8 - Does your facility have a program and/or procedures for management of hazardous wastes, including monitoring, characterization, treatment or conversion, and disposition?

In Place

FH11.9.1 - Are any of the following methods used to dispose of the hazardous waste: Onsite waste treatment ?

Yes

FH11.9.2 - Onsite long-term (longer than one year) storage?

No

FH11.9.3 - Collection and transfer to a waste management firm?

Yes

FH11.9.4 - Discharge to ground or water (e.g. pond)?

No

FH11.11 - Are permits for chemical handling and/ or storage required for your facility operations?

Yes

FH11.12 - Are permits for radioactive materials and/ or equipment required for your facility operations?

No

FH11.13 - Are permits for storage tanks of any type required for your facility operations?

No

FH11.10 - Notes and Comments: (If none enter N/A)

N/A

FH12 - Wastewater and Solid Waste (Non-Hazardous Waste)

FH12.1 - What type of wastewater is generated at your facility?

Both Sanitary and Industrial

FH12.2 - Does your facility have a program and/or procedures for management of wastewater, including monitoring, characterization, treatment, discharge, and/or recycling?

In Place

FH12.3.1 - Does your facility use the following to manage wastewater: Onsite wastewater treatment?

Yes

FH12.3.2 - Discharge to a municipal treatment facility?

Yes

FH12.3.3 - Discharge to a settling pond or surface water?

No

FH12.3.4 - Collection and transfer to a waste management firm?

Yes

FH12.3.5 - Any other methods?

Yes

FH12.3.5.1 - Please describe other:

RO reject sent to the Port of Moses Lake for crop irrigation.

FH12.4 - Does your facility have a program and/or procedures for management of solid waste (e.g. office waste, trash), including collection, separation, disposal, and/or recycling?

In Place

FH12.5.1 - Does your facility use the following to dispose of solid waste at your facility: Onsite disposal or incineration?

No

FH12.5.2 - Disposal at a public solid waste facility?

Yes

FH12.5.3 - Collection and transfer to a waste management firm?

Yes

FH12.5.4 - Any other methods?

Yes

FH12.5.4.1 - Please describe other:

Recycling.

FH12.8 - Are permits for chemical and other waste treatment required for your facility operations?

No

FH12.9 - Are permits for industrial wastewater discharge required for your facility operations?

Yes

FH12.10 - Are permits for sanitary wastewater discharge required for your facility operations?

Yes

FH12.7 - Notes and Comments: (If none enter N/A)

N/A

FH13 - Airborne Emissions

FH13.5 - Does your facility have a process to identify and measure all air emissions from your facility?

In Place

FH13.1 - Does your facility generate airborne emissions?

Yes

FH13.2a.1 - Are the following emissions generated at your facility: Volatile organic chemical emissions?

Yes

FH13.2a.2 - Aerosol or mist emissions?

No

FH13.2a.3 - Corrosive vapor emissions?

No

FH13.2a.4 - Particulates or dust emissions?

No

FH13.2a.5 - Ozone depleting substance emissions?

No

FH13.2a.6 - Combustion by-products emissions?

Yes

FH13.2a.7 - Are any other emissions generated at your facility?

Yes

FH13.2a.7.1 - Please describe other:

Toxic Air Pollutants

FH13.2b.1 - Are the following limited by regulations and/or permits: Volatile organic chemical emissions?

Yes

FH13.2b.2 - Aerosol or mist emissions?

Yes

FH13.2b.3 - Corrosive vapor emissions?

Yes

FH13.2b.4 - Particulates or dust emissions?

Yes

FH13.2b.5 - Ozone depleting substance emissions?

Yes

FH13.2b.6 - Combustion by-product emissions?

Yes

FH13.2b.7 - Any other emissions generated at your facility?

Yes

FH13.2b.7.1 - Please describe other:

Toxic Air Pollutants

FH13.3 - Does your facility have a program and/or procedures for management of airborne emissions, including monitoring, characterization, control, and treatment?

In Place

FH13.4.1 - Are the following used to CONTROL AIRBORNE EMISSIONS at your facility: Point of use exhaust ventilation?

Yes (or) emission levels are within legal limits and do not require exhaust ventilation

FH13.4.2 - An oxidizer?

No

FH13.4.3 - A scrubber?

Yes (or) emission levels are within legal limits and do not require a scrubber

FH13.4.4 - An electrostatic precipitator?

No

FH13.4.5 - Carbon filtration?

No

FH13.4.6 - Are any other methods?

No

FH13.6 - Does your facility have a program aimed at inventorying, reducing, and reporting the emissions of global warming gases (GWGs) from your operations?

In Place

FH13.7 - Does your facility have a program aimed at reducing mobile source emissions associated with incoming and outgoing shipments as well as worker commuting?

None

FH13.9 - Are permits for airborne emissions required for your facility operations?

Yes

FH13.8 - Notes and Comments: (If none enter N/A)

N/A

■ FH14 - Product Content

FH14.1 - Has your facility established a list of materials (e.g. lead, mercury, cadmium, CFCs, flame retardants) that are regulated or controlled in the products that you manufacture?

Not applicable

FH14.2 - Does your facility have a program to determine the quantities of controlled materials in your products (including regulatory and customer requirements)?

In Place

FH14.3 - Does your facility have a program to phase out controlled materials from its product within a specified time period, consistent with international legislation on restriction of hazardous substances?

In Place

FH14.4 - At what points do you integrate controlled material requirements into your operations? (To select multiple rows hold down the Ctrl key and click additional choices):

Design, Procurement, Quality Assurance

FH14.5 - During the last 12 months, have any of your facility's products been rejected by the buyer or banned from any market as a result of the use of controlled materials?

No

FH14.7 - Does your facility have a program to encourage the use of recycled materials and/or refurbished components in your products, subject to regulatory or customer approval?

In Place

FH14.8 - Does your facility have a program to assure proper information disclosure for your products, including material composition and product safety information?

In Place

FH14.9 - Does your facility work with suppliers to improve their management of product content?

Yes

FH14.10 - Does your facility have a program to facilitate recovery of discarded products, components, or materials at the end of their useful life (product take-back)?

In Place

FH14.11 - Notes and Comments: (If none enter N/A)

N/A

■ FH15 - Facility HS and E Management System Status

FH15.1a - Does your facility utilize or is it developing a management systems approach (including policies, programs, procedures, and review processes) to assure proper management of HEALTH and SAFETY practices?

Yes

FH15.2 - Do you have a site-specific management system registered to ISO 14001, OHSAS 18001, or other recognized health and safety or environmental management standards? (Report company-wide management systems in the Corporate Questionnaire)

Yes

FH15.3.1 - Type of certificate:

ISO 14001, OHSAS 18001

FH15.3.2 - Number:

1000889

FH15.3.3 - Date of issue:

6/17/2012 0:0:0

FH15.3.4 - Certifier:

UL DQS Inc.

FH15.3.5 - Please attach a copy of the certificate:

 14001 18001 Certificates, MLI, 121120.pdf

FH15.4a.1 - For your HEALTH and SAFETY management systems, what is the level of implementation of the programs and procedures for the following: Occupational Safety?

In Place

FH15.4a.2 - Emergency Preparedness?

In Place

FH15.4a.3 - Occupational Injury/ Illness?

In Place

FH15.4a.4 - Industrial Hygiene?

In Place

FH15.4a.5 - Physically Demanding Work?

In Place

FH15.4a.6 - Machine Safeguarding?

In Place

FH15.4a.7 - Living conditions?

In Place

FH15.5a - To what extent are the above HEALTH and SAFETY management system(s) documented?

Completely and Updated Regularly

FH15.6a - How often does the management of your facility review the status of the above HEALTH and SAFETY management system(s) and identify improvement opportunities?

At least every year

FH15.7a - What was the date of the last HEALTH and SAFETY management review?

10/10/2012 0:0:0

FH15.1b - Does your facility utilize or is it developing a management systems approach (including policies, programs, procedures, and review processes) to assure proper management of ENVIRONMENTAL practices?

Yes

FH15.4b.1 - For your ENVIRONMENTAL management systems, what is the level of implementation of the programs and procedures for the following: Environmental permits?

In Place

FH15.4b.2 - Pollution Prevention?

In Place

FH15.4b.3 - Hazardous Substances?

In Place

FH15.4b.4 - Wastewater and Solid Waste?

In Place

FH15.4b.5 - Airborne Emissions?

In Place

FH15.4b.6 - Product Content?

In Place

FH15.5b - To what extent are the above ENVIRONMENTAL management system(s) documented?

Completely and Updated Regularly

FH15.6b - How often does the management of your facility review the status of the above ENVIRONMENTAL management system(s) and identify improvement opportunities?

At least every year

FH15.7b - What was the date of the last ENVIRONMENTAL management review?

10/10/2012 0:0:0

FH15.8 - Notes and Comments: (If none enter N/A)

N/A

FH16 - HS and E Management System Elements

FH16.1a - Has your facility established a tracking system to identify and monitor HEALTH and SAFETY laws and regulations that apply to your facility?

Yes

FH16.2a - Please indicate the methods and sources used to track HEALTH and SAFETY laws and regulations. (To select multiple rows hold down the Ctrl key and click additional choices):

Information Subscription, Regulatory Agencies, In-House Specialists

FH16.3a - Does your facility have written performance objectives for HEALTH and SAFETY practices and results, including metrics and targets with implementation plans for achieving them?

Yes

FH16.3a.1 - If yes, please attach the objectives for the current year.

 EHSS 2013 Department Goals.pdf

FH16.4a - How often does your facility review HEALTH and SAFETY performance against these objectives and targets?

Several times per year

FH16.5a - Please indicate the date of the last HEALTH and SAFETY review:

10/10/2012 0:0:0

FH16.6a - Has your facility implemented a risk assessment process to identify, prioritize, and mitigate the potential HEALTH and SAFETY risks associated with your operations and activities?

In Place

FH16.8a - Does your facility receive periodic audits of health and safety practices in order to assess conformance with regulatory and other requirements, operations and activities?

Yes

FH16.9a - Please indicate what types of requirements are covered in the audit process of HEALTH and SAFETY practices. (To select multiple rows hold down the Ctrl key and click additional choices):

Regulations, Internal Requirements, External Codes of Conduct

FH16.16a - Does your facility provide general training programs for HEALTH and SAFETY practices?

Yes

FH16.17a - Does your facility measure the effectiveness of its HEALTH and SAFETY training?

In Place

FH16.1b - Has your facility established a tracking system to identify and monitor ENVIRONMENTAL laws and regulations that apply to your facility?

Yes

FH16.2b - Please indicate the methods and sources used to track ENVIRONMENTAL laws and regulations. (To select multiple rows hold down the Ctrl key and click additional choices):

Information Subscription, Regulatory Agencies, In-House Specialists

FH16.3b - Does your facility have written performance objectives for ENVIRONMENTAL practices and results,

including metrics and targets with implementation plans for achieving them?

Yes

FH16.3b.1 - If yes, please attach the objectives for the current year.

 EHSS 2013 Department Goals.pdf

FH16.4b - How often does your facility review ENVIRONMENTAL performance against these objectives and targets?

Several times per year

FH16.5b - Please indicate the date of the last ENVIRONMENTAL review:

10/10/2012 0:0:0

FH16.6b - Has your facility implemented a risk assessment process to identify, prioritize, and mitigate the potential ENVIRONMENTAL risks associated with your operations and activities?

In Place

FH16.8b - Does your facility conduct periodic audits of ENVIRONMENTAL practices in order to assess conformance with regulatory and other requirements?

Yes

FH16.9b - Please indicate what types of requirements are covered in the audit process of ENVIRONMENTAL practices. (To select multiple rows hold down the Ctrl key and click additional choices):

Regulations, Internal Requirements, External Codes of Conduct

FH16.16b - Does your facility provide general training programs for ENVIRONMENTAL practices?

Yes

FH16.17b - Does your facility measure the effectiveness of its ENVIRONMENTAL training?

In Place

FH16.7 - Has your facility implemented a program to assess risks and manage the identified risks relating to the Health and Safety, and Environmental practices of your suppliers?

In Place

FH16.10 - During the last 12 months, has your facility received a HEALTH and SAFETY or ENVIRONMENTAL audit or assessment by a customer or other external organization (e.g. government agency) at any of your facilities?

Yes

FH16.11 - What type of organization performed the audit?

Customer

FH16.12 - Does your facility have a process to implement timely corrective actions for HEALTH and SAFETY and ENVIRONMENTAL deficiencies identified by internal or external assessments, audits, and reviews?

In Place

FH16.13 - Does the corrective action process include root cause analysis and prevention?

Yes

FH16.14 - Does your facility utilize or have HEALTH and SAFETY and ENVIRONMENTAL technical specialists, such as industrial hygienists, or pollution control engineers?

Yes

FH16.14.1 - Please specify what types of specialists:

Engineers, Specialists, Technicians

FH16.15 - Does your facility provide clear and simple written rules to all employees and workers in the local or appropriate language(s), establishing requirements and responsibilities for HS and E practices in accordance with company policy?

Yes

FH16.18 - To which of the following external groups does your facility communicate information about its H/S and ENVIRONMENTAL performance, practices and expectations? (To select multiple rows hold down the Ctrl key and click additional choices):

Suppliers, Customers, Communities, Government, General Public

FH16.20 - Notes and Comments: (If none enter N/A)

N/A