

(Effective December 27, 2024)

WAC 296-67-383 Corrective action program. (1) The employer must develop, implement and maintain an effective written corrective action program to prioritize and implement recommendations of:

- (a) PHAs;
- (b) SPAs;
- (c) DMRs;
- (d) HCAs;
- (e) Incident investigations; and
- (f) Compliance audits.

(2) All findings and associated recommendations must be provided to the employer by the team performing the analysis, review, investigation, or audit in a timely manner.

(3) The employer may reject a team recommendation if the employer can demonstrate in writing that the recommendation meets one of the following criteria:

- (a) The analysis upon which the recommendation is based contains material factual errors;
- (b) The recommendation is not relevant to process safety; or
- (c) The recommendation is infeasible; however, a determination of infeasibility must not be based solely on cost.

(4) The employer may change a team recommendation if the employer can demonstrate in writing that an alternative measure would provide an equivalent or higher order of inherent safety. The employer may change a team recommendation for a safeguard if an alternative safeguard provides an equally or more effective level of protection.

(5) The employer must document all instances where any one of the criteria in subsection (3) or (4) of this section is used for the purpose of rejecting or changing a team recommendation.

(6) Each recommendation that is changed or rejected by the employer must be communicated to on-site team members for comment and made available to off-site team members for comment. The employer must document all written comments received from team members for each changed or rejected recommendation. The employer must document a final decision for each recommendation and must communicate it to on-site team members and make it available to off-site team members.

(7) The employer must develop and document corrective actions to implement each accepted recommendation. The employer must assign a completion date for each corrective action and a person responsible for completing the corrective action.

(8) If the employer determines that a corrective action requires revalidation of any applicable PHA, SPA, HCA, or DMR, these revalidations must be subject to the corrective action requirements of this section. The employer must promptly append all revalidated PHAs, SPAs, DMRs, and HCAs to the applicable report.

(9) The employer must promptly complete all corrective actions and must comply with all completion dates required by this section. The employer must perform an MOC for any proposed change to a completion date, pursuant to WAC 296-67-355 Management of change. The employer must make all completion dates available, upon request, to all affected employees and employee representatives.

(10) Except as required by subsections (11) and (13) of this section, each corrective action that does not require a process shutdown must be completed within 30 months after the completion of the analysis or review, unless the employer demonstrates in writing that it is infeasible to do so.

(11) Each corrective action from a compliance audit must be completed within 18 months after completion of the audit, unless the employer demonstrates in writing that it is infeasible to do so. Each corrective action from an incident investigation must be completed within 18 months after completion of the investigation, unless the employer demonstrates in writing that it is infeasible to do so.

(12) Each corrective action requiring a process shutdown must be completed during the first regularly scheduled turnaround of the applicable process, following completion of the PHA, SPA, DMR, HCA, MOC, compliance audit or incident investigation, unless the employer demonstrates in writing that it is infeasible to do so.

(13) Notwithstanding subsections (10), (11), and (12) of this section, corrective actions addressing process safety hazards must be prioritized and promptly corrected, either through permanent corrections or interim safeguards sufficient to ensure employee safety and health, pending permanent corrections.

(14) Where a corrective action cannot be implemented within the time limits required in subsection (10), (11), or (12) of this section, the employer must ensure that interim safeguards are sufficient to ensure employee safety and health, pending permanent corrections. The employer must document the decision and rationale for any delay and must implement the corrective action as soon as possible. The documentation must include:

(a) The rationale for deferring the corrective action;

(b) All MOC requirements under WAC 296-67-355;

(c) A revised timeline describing when the corrective action will be implemented; and

(d) An effective plan to make available the rationale and revised timeline to all affected employees and their representatives.

(15) The employer must track and document the completion of each corrective action and must append the documentation to the applicable PHA, SPA, DMR, HCA, incident investigation or compliance audit.

[Statutory Authority: RCW 49.17.010, 49.17.040, 49.17.050, 49.17.060, and chapter 49.17 RCW. WSR 24-02-037, § 296-67-383, filed 12/27/23, effective 12/27/24.]