How to Request a Health Hazard Assessment (HHA) in Three Easy Steps

Step 3: Submit the request:

- a. Go to the USAPHC website: http://phc.amedd.army.mil/Pages/default.aspx
- b. At the top of the web page, click on "Request Services."
- c. At the next page: Complete steps 1, 3, 4, and 5 and submit your request.

Note: You will not be able to submit your request unless you upload the memorandum requesting an HHA.

Mailing address and phone numbers:

Director, AIPH

ATTN: MCHB-IP-OHH 5158 Blackhawk Road APG, MD 21010-5403

Telephone: COM 410-436-2925 DSN 584-2925, FAX 410-436-8795

Submit your request via the USAPHC website as soon as possible. Budget for HHA Program reimbursable support.

Early HHA Program involvement prevents last minute surprises or delays. Normally it takes <u>90 days from the date we receive all health hazard data and information</u> to prepare an HHA report.

The HHA website contains specific information on the following topics:

- Data Requirements
- Initial Recommendations
- Health Effects
- Medical Criteria
- References



Health Hazard Categories Addressed by the Army HHA Program

Acoustic Energy

Biological Substances

Chemical Substances

Oxygen Deficiency (ventilation)

Radiation Energy (ionizing/nonionizing radiation, including lasers)

Shock (rapid acceleration/deceleration)

Temperature Extremes & Humidity

Trauma (musculoskeletal)

Vibration

Ultrasound



To view this information, please visit http://phc.amedd.army.mil/topics/ workplacehealth/hha/Pages/default.aspx

TA-153-0212



Health Hazard
Assessment Program
in Support of the
Army Acquisition Process
(AR 40-10)

HHA POCKET GUIDE



27 February 2012

Health Hazard Assessment Program
ATTN: MCHB-IP-OHH
5158 Blackhawk Road
Aberdeen Proving Ground, MD
21010-5403
Telephone: COM 410-436-2925
DSN 584-2925

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The U.S. Army's Health Hazard Assessment Program

- The Army's Health Hazard Assessment (HHA) Program is designed to identify and eliminate or control health hazards associated with the life-cycle management (LCM) of new and improved materiel and weapon systems. The HHA Program focuses on potential health hazards resulting from training, combat, and maintenance throughout a system's life cycle.
- There may be several Health Hazard Assessment Reports (HHARs) completed throughout the LCM of a system to support milestone decision reviews, type classifications, materiel releases, etc. Developers, testers, evaluators, users, maintainers, logisticians, and disposers should use all of the HHARs to identify, control, eliminate, or minimize personnel exposures to health hazards.
- The Army's HHA Program supports the Army acquisition community's compliance with health assessment requirements contained in Department of Defense (DoD) Regulations, Army Regulations (AR), and Army Acquisition Executive Manpower and Personnel Integration (MANPRINT) Policy. The proponent is The Surgeon General (TSG) and the Army Institute of Public Health (AIPH) is TSG's Lead Agent.

The MATDEV Perspective of How the HHA Process Works

- The materiel developer (MATDEV) should initiate the HHA process as early as possible during the Materiel Solution Analysis Phase.
- HHAs are to be done for all types of acquisitions to include materiel changes, nondevelopmental items (NDI), new developments, and rapid fielding initiatives.

The Process

- Identification of the potential health hazards. In coordination with the developer, potential health hazards are identified and data requirements, initial recommendations, health effects, and medical criteria are detailed in an Initial Health Hazard Assessment Report (IHHAR). Lessons learned from similar predecessor systems are retrieved from the HHA Program database and provided to the developer.
- Early integration of health hazard concerns. The IHHAR should inform the MATDEV about potential health hazards early in the acquisition process so that resources are programmed to address them. Also the information should be reflected in documents such as Capability Development Documents/Capability Production Documents, Request For Proposals, and early design specifications.

The NDI programs should use the IHHAR to tailor market investigations. An IHHAR should also provide data collection guidance.

- Collection of health hazard data. The developer is responsible for providing information to the medical assessor. The data may already exist, (i.e., that from a predecessor or like system may be sufficient) or it may be acquired during developmental/technical (and sometimes user/operational) testing (DT/TT/UT). The information from the IHHAR should be incorporated into test plans (e.g., Test and Evaluation Management Plan (TEMP), and Detailed Test Plans) to acquire new data and provide testers with an awareness of potential system health hazards.
- Assessment of health hazard data. When the health hazard data are provided to the Army Medical Department's Independent Medical Assessors (IMAs), an assessment is performed. Often there are multiple health hazard issues; therefore, the expertise of people from several scientific and health disciplines is required. A matrix concept is employed to address multiple health issues. A team of IMAs is formed and coordinated by the Army HHA Program at the AIPH. The product of this process is the HHAR which meets the requirements of DoD Instruction 5000.02, AR 40-10, AR 70-1.4R 700-142 and AR 602-2.
- Allow sufficient time for the HHA. The HHA process
 requires interaction between developer, tester, and matrixed
 Army Medical Department communities and should occur
 throughout the life cycle of a development program. AR
 40-10 indicates that at least 90 days are required to produce
 a formal HHAR; this time allows the interaction of multiple
 scientific and health specialists. The 90-day period starts
 when all the health hazard information is available to the
 IMA. If data are missing, the report may be delayed.

For more detail:

- AR 40-10, Health Hazard Assessment Program in Support of the Army Acquisition Process.
- AR 602-2, Manpower and Personnel Integration (MANPRINT).
- AR 70-1, Army Acquisition Policy.
- AR 700-142, Type Classification, Materiel Release, Fielding, and Transfer.
- U.S. Army Health Hazard Assessment Manual, Procedures Guide.
- DoDI 5000.02, Operation of the Defense Acquisition System.

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<u>Step 1:</u> Prepare a formal and signed memorandum requesting an HHA. Your memorandum should contain:

- Your name/technical point of contact (POC), address, Program Executive Office, phone/fax numbers, and e-mail address.
- System nomenclature and description to include major components.
- · Purpose of the system.
- · Life-cycle system phase and Acquisition Category level.
- Statement on availability of funds to support HHA effort.
- · System prototype availability (where/when).
- · Purpose of HHA report and date required.
- For NDIs, describe the health standards applied in the product design and health problems that surfaced during testing and/or market investigation.
- · Number of systems and users/operators planned for fielding.
- Provide the status/availability of the Safety Assessment Report (SAR), Programmatic Environmental, Safety, and Occupational Health Evaluation (PESHE), TEMP, healthrelated test reports, and technical manuals (TM).
- · Summary of Operational Mode Summary/Mission Profile.
- List names, phone numbers, e-mail addresses of system safety, MANPRINT and test POCs.

<u>Step 2:</u> Assemble the following information (if available) and forward to the HHA POC <u>when requested.</u>

- SAR
- · Human Factors Engineering Assessment
- PESHE
- System MANPRINT Management Plan
- TEMP
- · Relevant Detailed Test Plans
- · Acquisition Strategy
- Independent Evaluation Plans/Reports
- DT/TT/UT Test Reports
- Program Review Documentation
- · Operational Mode Summary/Mission Profile
- · Previous HHARs
- Other Health Hazard Reports (i.e., commercial vendors, other military services, etc.)
- User TMs