

# The Injury and Illness Prevention Program



*A comprehensive safety plan  
for identifying, correcting and  
reducing workplace hazards to  
prevent injuries and illnesses  
as required by law.*



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Item # FD-IIPP

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## Chapter 1

# Introduction and Implementation Procedures

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## About this Manual / Disclaimer

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The General Duty Clause, Section 5(a)(1) of the Occupational Safety and Health Act of 1970 (the Act), requires each employer to, "furnish to each of his employees employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm." To fulfill this requirement, OSHA recommends that employers implement an injury and illness prevention program (iipp) at their worksite. Injury and illness prevention programs are also addressed in specific standards for the general and construction industries and basic program elements for federal employees. In addition, twenty-five states, plus Puerto Rico and the Virgin Islands have OSHA-approved State Plans and have adopted their own standards and enforcement policies for safety and health. For the most part, these States adopt standards that are identical to those of Federal OSHA. However, some States have adopted different standards applicable to injury and illness or may have different enforcement policies.

Over their years of experience with enforcing the provisions of the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.), OSHA representatives have noted a strong correlation between the application of sound management practices in the operation of safety and health programs and a low incidence of occupational injuries and illnesses. Where effective safety and health management is practiced, injury and illness rates are significantly less than rates at comparable worksites where safety and health management is weak or non-existent. As a result of this awareness, OSHA has increased emphasis on management practices in several of the

Agency's programs. Standards, including notably the Hazard Communication Standard (29 CFR 1910.1200), began specifically to require management programs. An early OSHA standard requiring safety and health management programs in the construction industry was recently clarified and reaffirmed by the issuance of OSHA Instruction STD 3-1.1. OSHA also instituted programs to encourage voluntary improvement of safety and health management.

Currently, OSHA is in the process of passing regulations that will help employers reduce workplace injuries and illnesses through a systematic process proactively addressing workplace safety and health hazards (known as I2P2).

This manual provides information about creating an Injury and Illness Prevention Program including hazard assessment procedures, training and instruction, recordkeeping, and the documentation necessary to achieve these steps. Additionally, it contains Codes of Safe Practices, supervisor/employee training sheets and an overview of mandatory State Programs. A program as outlined herein can only be effective if taken seriously and followed through. Each organization is unique. The needs of your organization should be examined and implemented into the program in order to make it successful. It is essential that the employer demonstrate at all times their personal concern for their employees and the priority placed on them in your workplace. The policy must be clear. The employer shows its importance through their own actions.

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# Introduction

Injury and Illness Prevention Programs, known by a variety of names, are universal interventions that can substantially reduce the number and severity of workplace injuries and alleviate the associated financial burdens on U.S. workplaces. Many states have requirements or voluntary guidelines for workplace injury and illness prevention programs.

Addressing safety and health issues in the workplace saves the employer money and adds value to the business. Recent estimates place the business costs associated with occupational injuries at close to \$170 billion—expenditures that come straight out of company profits.

When workers stay whole and healthy, the direct cost-savings to businesses include:

- lower workers' compensation insurance costs;
- reduced medical expenditures;
- smaller expenditures for return-to-work programs;
- fewer faulty products;
- lower costs for job accommodations for injured workers;
- less money spent for overtime benefits.

Safety and health also make big reductions in indirect costs, due to:

- increased productivity;
- higher quality products;
- increased morale;
- better labor/management relations;
- reduced turnover;
- better use of human resources.

Employees and their families benefit from safety and health because:

- their incomes are protected;
- their family lives are not hindered by injury;
- their stress is not increased.

Simply put, protecting people on the job is in everyone's best interest—our economy, our communities, our fellow workers and our families.

Safety and health add value to businesses, workplaces and lives.

Most successful injury and illness prevention programs are based on a common set of key elements. These include: management leadership, worker participation/communication, hazard identification, hazard prevention and control, accident investigation, education and training, and program evaluation and improvement.

## Management Commitment/Assignment of Responsibilities

An employer's commitment to safety and health shows in every decision they make and every action they take. Employees will respond to that commitment.

The person or persons with the authority and responsibility for a safety and health program must be identified and given management's full support. An employer can demonstrate their commitment through their personal concern for employee safety and health and by the priority they place on these issues.

For maximum production and quality, an injury and illness program needs to control potential workplace hazards and correct hazardous conditions or practices as they occur or are recognized.

An employer must commit themselves and the company by building an effective injury and illness prevention program and integrating it into the entire operation. This commitment must be backed by strong organizational policies, procedures, incentives and disciplinary actions as necessary to ensure employee compliance with safe and healthful work practices. They should include:

1. Establishment of workplace objectives for accident and illness prevention, like those established for other business functions such as sales or production—for example: "Ten percent fewer injuries next year," or "Reduce downtime due to poorly maintained equipment."
2. Emphasis on the staff's safety and health responsibilities and recognition by supervisors and employees that they are accountable. Advise management staff that they will be held accountable for the safety record of the employees working under them, and then back

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- it up with firm action.
3. A means for encouraging employees to report unsafe conditions with assurance that management will take action.
  4. Allocation of company resources—financial, material and personnel—for:
    - identifying and controlling hazards in new and existing operations and processes, and potential hazards.
    - installing engineering controls.
    - purchasing personal protective equipment.
    - promoting and training employees in safety and health.
  5. Setting a good example! If, for instance, requiring hard hats to be worn in a specific area, then making sure that the employer and other management wear a hard hat in that area.

If the employer and management team do not support and participate in the program, then the program is doomed to failure from the start. It is especially important for plant supervisors and field superintendents to set a good example.

### **Safety Communications**

A program must include a system for communicating with employees—in a form readily understandable by all affected employees—on matters relating to occupational safety and health, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal.

While having an injury and illness program does not require employers to establish labor-management safety and health committees, it is an option that should be considered. Employers who choose to use a labor-management safety and health committee to comply with the communication requirements are presumed to be in substantial compliance if the committee:

1. Meets regularly but not less than quarterly.
  2. Prepares and makes available to the affected employees written records of the safety and health issues discussed at the committee meetings, and maintained for review by the Division upon request.
3. Reviews results of the periodic scheduled worksite inspections.
  4. Reviews investigations of occupational accidents and causes of incidents resulting in occupational injury, occupational illness or exposure to hazardous substances, and where appropriate, submits suggestions to management for the prevention of future incidents.
  5. Reviews investigations of alleged hazardous conditions brought to the attention of any committee member. When determined necessary by the committee, it may conduct its own inspection and investigation to assist in remedial solutions.
  6. Submits recommendations to assist in the evaluation of employee safety suggestions.
  7. Upon request of the Division, verifies abatement action taken by the employer to abate citations issued by the Division.

If employees are not represented by an agreement with an organized labor union, and part of the employee population is unionized, the establishment of labor-management committees is considerably more complicated. Where this is the case, an employer should request clarification from an OSHA Consultation Service.

Employers who elect not to use labor-management safety and health committees, should be prepared to formalize and document their required system for communicating with employees.

Here are some helpful tips on complying with this difficult section:

1. The communication system must be in a form “readily understandable by all affected employees.” This means the employer should be prepared to communicate with employees in a language they can understand, and if an employee cannot read in any language, the plan must be communicate with him/her orally in a language “readily understandable.” A communication system must be “designed to encourage employees to inform the employer of hazards at the workplace without fear of reprisal”—it must be a two-way system of communication.
2. Schedule general employee meetings at which safety is freely and openly discussed by those

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present. Such meetings should be regular, scheduled, and announced to all employees so that maximum employee attendance can be achieved. And remember to do this for all shifts. Many employers find it cost effective to hold such meetings at shift change time, with a brief overlap of schedules to accomplish the meetings. If properly planned, effective safety meetings can be held in a 15 to 20 minute time frame. Concentrate on:

- occupational accident and injury history at your own worksite, with possible comparisons to other locations in your company.
- feedback from the employee group.
- guest speakers from your workers' compensation insurance carrier or other agencies.
- concerned with safety.
- brief audio-visual materials that relate to your industry.
- control of the meetings.

Stress that the purpose of the meeting is safety. Members of management should attend these meetings.

3. Training programs are excellent vehicles for communicating with employees.
4. Posters and bulletins can be very effective ways of communicating with employees. Useful materials can be obtained from OSHA, your workers' compensation insurance carrier, the National Safety Council or other commercial and public service agencies.
5. Newsletters or similar publications devoted to safety are also very effective communication devices. If resources cannot be devoted to an entire publication, make safety a featured item in every issue of the company newsletter.
6. A safety suggestion box can be used by employees, anonymously if desired, to communicate their concerns to management.
7. Publish a brief company safety policy or statement informing all employees that safety is a priority issue with management, and urge employee to actively participate in the program for the common good of all concerned.

8. Communicate concerns about safety to all levels of management.
9. Document all communication efforts, in case you are required to demonstrate that a system of effective communication is in place.

## Hazard Assessment & Control

Periodic inspections and procedures for correction and control provide a method of identifying existing or potential hazards in the workplace, and eliminating or controlling them. Hazard control is the heart of an effective injury and illness prevention program.

If hazards occur or recur, this reflects a breakdown in the hazard control system. The hazard control system is also the basis for developing safe work procedures and injury/illness prevention training.

The required hazard assessment survey of an establishment, when first developing an injury and illness prevention program, must be made by a qualified person. This survey can provide the basis and guide for establishing a hazard assessment and control system. The survey produces knowledge of hazards that exist in the workplace, and conditions, equipment and procedures which could be potentially hazardous.

An effective hazard control system will identify: hazards that exist or develop in the workplace, how to correct those hazards, and steps that can be taken to prevent their recurrence. An effective system for monitoring workplace conditions allows:

1. Prevention of hazards through scheduled and documented self-inspections. Make sure established safe work practices are being followed and that unsafe conditions or procedures are identified and corrected properly. Scheduled inspections are in addition to the everyday safety and health checks that are part of the routine duties of managers and supervisors. The frequency of these inspections depends on the operations involved, the magnitude of the hazards, the proficiency of employees, changes in equipment or work processes, and the history of workplace injuries and illnesses. Inspections should be conducted by personnel who, through experience or training, are able to identify actual and potential hazards and understand safe work practices.

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- Written inspection reports must be reviewed by management and/or the safety committee. The review should assist in prioritizing actions and verify completion of previous corrective actions. Overall inspection program results should be reviewed for trends.
  - Know which OSHA safety orders contained in the Code of Regulations apply to your workplace and use them to identify potential hazards. An OSHA Consultation Service consultant or outside consultant can assist you in identifying safety orders applicable to your work.
2. Encouragement for employees to tell their employer or their supervisors of possibly hazardous situations, knowing their reports will be given prompt and serious attention without fear of reprisal. When they are informed that the situation was corrected (or why it wasn't hazardous), then it create a system by which employees continue to report hazards promptly and effectively.
  3. Maintenance of workplace equipment and personal protective equipment in safe and good working conditions. In addition to what is required by OSHA standards, an injury and illness prevention program monitors the operation of workplace equipment, and can also verify that routine preventive maintenance is conducted and personal protective equipment is reliable. This makes good safety sense, and proper maintenance can prevent costly breakdowns and undue exposures.
  4. Correction of hazards as soon as they are identified. For any that can't be immediately corrected, set a target date for correction based on such considerations as the probability and severity of an injury or illness resulting from the hazard; the availability of needed equipment, materials and/or personnel; time for delivery, installation, modification or construction; and training periods. Provide interim protection to employees who need it while correction of hazards is proceeding. A written tracking system such as a log helps to monitor the progress of hazard correction.
  5. Review and prioritization of the program based on the severity of the hazard.

## Accident Investigation

A primary tool employer should use in an effort to identify and recognize the areas responsible for accidents is a thorough and properly completed accident investigation. The investigation should be in writing and adequately identify the cause(s) of the accident or near-miss occurrence.

Accident investigations should be conducted by trained individuals, and with the primary focus of understanding why the accident or near miss occurred and what actions can be taken to preclude recurrence. In large organizations this responsibility may be assigned to the safety director. In smaller organizations the responsibility may lie directly with the supervisor responsible for the affected area or employee. Questions to ask in an accident investigation include:

1. What happened?  
The investigation should describe what took place that prompted the investigation: an injury to an employee, an incident that caused a production delay, damaged material or any other conditions recognized as having a potential for losses or delays.
2. Why did the incident happen?  
The investigation must obtain all the facts surrounding the occurrence: what caused the situation to occur; who was involved; was/were the employee(s) qualified to perform the functions involved in the accident or near miss; were they properly trained; were proper operating procedures established for the task involved; were procedures followed, and if not, why not; where else this or a similar situation might exist, and how it can be corrected.
3. What should be done?  
The person conducting the investigation must determine which aspects of the operation or process require additional attention. It is important to note that the purpose here is not to establish blame, but to determine what type of constructive action can eliminate the cause(s) of the accident or near miss.
4. What action has been taken?  
Actions already taken to reduce or eliminate the exposures being investigated should be noted, along with those remaining to

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be addressed. Any interim or temporary precautions should also be noted. Any pending corrective action and reason for delaying its implementation should be identified.

Corrective action should be identified in terms of not only how it will prevent a recurrence of the accident or near miss, but also how it will improve the overall operation. This will assist the investigator in selling his/her solutions to management. The solution should be a means of achieving not only accident control, but also total operation control.

If an employer has a safety and health committee, its members should review investigations of all accidents and near-miss incidents to assist in recommending appropriate corrective actions to prevent a similar recurrence.

Thorough investigation of all accidents and near misses will help to identify causes and needed corrections, and can help determine why accidents occur, where they happen, and any accident trends. Such information is critical to preventing and controlling hazards and potential accidents.

### **Safety Planning, Rules & Work Procedures**

Planning for safety and health is an important part of every business decision, including purchasing, engineering, changes in work processes, and planning for emergencies. A safety and health planning is effective when a workplace has:

1. Rules written to apply to everyone and addressing areas such as personal protective equipment, appropriate clothing, expected behavior, and emergency procedures. Employers and their employees should periodically review and update all rules and procedures to make sure they reflect present conditions. Rules and procedures should be written for new exposures when they are introduced into the work place.
2. Safe and healthful work practices developed for each specific job.
3. Discipline or reward procedures to help assure that safety rules and work procedures are put into practice and enforced. Reward or positive reinforcement procedures such as bonus, incentive or employee recognition programs should provide positive motivation for compliance with safety rules and procedures.

4. A written plan for emergency situations. A plan must include a list of emergencies which could arise and a set of procedures in response to each situation. Some emergency procedures, such as those covering medical emergencies or fire evacuation, are mandated by OSHA regulations.

If an employer has operations involving hazardous substances, procedures or processes, they must designate emergency response teams to be specifically trained and equipped to handle possible imminent hazards.

### **Injury and Illness Training**

Training is one of the most important elements of any injury and illness prevention program. It allows employees to learn their jobs properly, brings new ideas into the workplace, reinforces existing ideas and practices, and puts the program into action.

Employees benefit from safety and health training through fewer work-related injuries and illnesses, and reduced stress and worry caused by exposure to hazards.

Employers benefit from reduced workplace injuries and illnesses, increased productivity, lower costs, higher profits, and a more cohesive and dependable work force.

An effective injury and illness prevention program includes training for both supervisors and employees. Training for both is required by OSHA safety orders. An outside professionals can be hire to help develop and conduct the required training program. Help is also available from the OSHA Consultation Service, workers' compensation insurance carrier, private consultants and vendor representatives.

Outside trainers should be considered temporary. Eventually an employer will need their own in-house training capabilities so they can provide training that is timely and specific to the needs of their workplace and their employees.

To be effective and also meet OSHA requirements, your training program needs to:

1. Let your supervisors know:
  - they are key figures responsible for establishment and success of the injury and illness prevention program.
  - the importance of establishing and

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maintaining safe and healthful working conditions.

- they are responsible for being familiar with safety and health hazards to which their employees are exposed, how to recognize them, the potential effects these hazards have on the employees, and rules, procedures and work practices for controlling exposure to those hazards.
- how to convey this information to employees by setting good examples, instructing them, making sure they fully understand and follow safe procedures.
- how to investigate accidents and take corrective and preventive action.

2. Let your employees know:

- the success of the company's injury and illness prevention program depends on their actions as well as yours.
- the safe work procedures required for their jobs, and how these procedures protect them against exposure.
- when personal protective equipment is required or needed, how to use it and maintain it in good condition.
- what to do if emergencies occur in the workplace.

An effective injury and illness prevention program requires proper job performance by everyone in the workplace. The employer must ensure that all employees are knowledgeable about the materials and equipment they are working with, what known hazards are present and how they are controlled.

Each employee needs to understand that:

- no employee is expected to undertake a job until he/she has received instructions on how to do it properly and safely, and is authorized to perform the job.
- no employee should undertake a job that appears to be unsafe.
- no employee should use chemicals without fully understanding their toxic properties and without the knowledge required to work with them safely.
- mechanical safeguards must always be in place and kept in place.

- employees are to report to a superior or designated individual all unsafe conditions encountered during work.
- any work-related injury or illness suffered, however slight, must be reported to management at once.
- personal protective equipment must be used when and where required, and properly maintained.

Supervisors must recognize that they are the primary safety trainers in your organization. Employers should encourage and help them by providing supervisory training. Many community colleges offer management training courses at little or no cost.

The employer is required under OSHA standards to establish and carry out a formal training program. This program must, at a minimum, provide training and instruction:

- to all employees when your program is first established.
- to all new employees.
- to all employees given new job assignments for which training has not been previously received.
- whenever new substances, processes, procedures or equipment are introduced to the workplace and present a new hazard.
- whenever new personal protective equipment or different work practices are used on existing hazards.
- whenever you or your supervisors are made aware of a new or previously unrecognized hazard.
- for all supervisors to assure they are familiar with the safety and health hazards to which employees under their immediate direction and control may be exposed.

# Implementation Procedures

The following implementation procedures are intended to provide specific instructions for correctly utilizing the various components of our Injury and Illness Prevention Program. If you have additional questions about this guidebook or other kit components, please contact Personnel Concepts at 800-333-3795.

1. Review the “Introduction” in this chapter to get an overview of what is included in an injury and illness prevention program.
2. Review Chapter 2 “Hazard Assessment Procedures” for instructions on conducting a job hazard analysis and methods for correcting and preventing job hazards in your workplace. Utilize the Job Hazard Analysis Form and Hazard Assessment Checklist to assist in performing your analysis.
3. Review Chapter 3 “Creating Your Injury and Illness Prevention Program” for a description and sample of implementing a plan. Utilize the CD-ROM to customize your own program. The Action Plan Worksheet and Evaluation Checklist will keep track of your progress and assist in organization. Store a copy of your completed program in Chapter 8 “My Injury and Illness Prevention Program.”
4. Once you have created your injury and illness prevention program, utilize the training sheets in Chapter 4 “Training and Instruction” as well as the “Codes of Safe Practices” in Chapter 6 to educate your managers and employees about their roles in maintaining a healthy and safe workplace.
5. Distribute a Training Acknowledgement Form to each employee to sign. Retain the signed copy in the employee’s personnel file for the duration of their employment.
6. Review Chapter 5 “Recordkeeping” for an overview of OSHA’s requirements for documentation of exposure records, training records and OSHA Log 300.
7. Refer to Chapter 7 “State Programs” for the injury and illness prevention requirements in your state.
8. Maintain your Injury and Illness Prevention

Program by conducting monthly safety inspections utilizing the Hazard Assessment Checklists found in Chapter 2 and by scheduling quarterly safety meetings. For a complete Safety Meeting Kit, including instruction, training handouts, quizzes and documentation, contact Personnel Concepts at 800-333-3795.



Chapter 2

# Hazard Assessment Procedures

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# Understanding Job Hazard Analysis

Many workers are injured and killed at the workplace every day in the United States. Safety and health can add value to your business, your job, and your life. You can help prevent workplace injuries and illnesses by looking at your workplace operations, establishing proper job procedures, and ensuring that all employees are trained properly. One of the best ways to determine and establish proper work procedures is to conduct a job hazard analysis. A job hazard analysis is one component of the larger commitment of a safety and health management system.

A hazard is the potential for harm. In practical terms, a hazard often is associated with a condition or activity that, if left uncontrolled, can result in an injury or illness. Identifying hazards and eliminating or controlling them as early as possible will help prevent injuries and illnesses.

A job hazard analysis is a technique that focuses on job tasks as a way to identify hazards before they occur. It focuses on the relationship between the worker, the task, the tools, and the work environment. Ideally, after you identify uncontrolled hazards, you will take steps to eliminate or reduce them to an acceptable risk level.

Employers can use the findings of a job hazard analysis to eliminate and prevent hazards in their workplaces. This is likely to result in fewer worker injuries and illnesses; safer, more effective work methods; reduced workers' compensation costs; and increased worker productivity.

The analysis also can be a valuable tool for training new employees in the steps required to perform their jobs safely. For a job hazard analysis to be effective, management must demonstrate its commitment to safety and health and follow through to correct any uncontrolled hazards identified. Otherwise, management will lose credibility and employees may hesitate to go to management when dangerous conditions threaten them.

A job hazard analysis can be conducted on many jobs in the workplace. Priority should go to the following types of jobs:

- Jobs with the highest injury or illness rates;
- Jobs with the potential to cause severe or disabling injuries or illness, even if there is no history of previous accidents;

- Jobs in which one simple human error could lead to a severe accident or injury;
- Jobs that are new to your operation or have undergone changes in processes and procedures; and
- Jobs complex enough to require written instructions.

# Conducting a Job Hazard Analysis

When conducting the job hazard analysis, an employer should use as many tools at their disposal as possible. Seeking input from various sources will result in a more thorough analysis and help produce a sound injury and illness prevention program. To begin an analysis, OSHA recommends the following steps:

1. **Involve your employees.**  
It is very important to involve your employees in the hazard analysis process. They have a unique understanding of the job, and this knowledge is invaluable for finding hazards. Involving employees will help minimize oversights, ensure a quality analysis, and get workers to “buy in” to the solutions because they will share ownership in their safety and health program.
2. **Review your accident history.**  
Review with your employees your worksite’s history of accidents and occupational illnesses that needed treatment, losses that required repair or replacement, and any “near misses” — events in which an accident or loss did not occur, but could have. These events are indicators that the existing hazard controls (if any) may not be adequate and deserve more scrutiny.
3. **Conduct a preliminary job review.**  
Discuss with your employees the hazards they know exist in their current work and surroundings. Brainstorm with them for ideas to eliminate or control those hazards. If any hazards exist that pose an immediate danger to an employee’s life or health, take immediate action to protect the worker. Any problems that can be corrected easily should be corrected as soon as possible. Do not wait to complete your job hazard analysis. This will demonstrate your commitment to safety and health and enable you to focus on the hazards and jobs that need more study because of their complexity. For those hazards determined to present unacceptable risks, evaluate types of hazard controls.
4. **List, rank, and set priorities for hazardous jobs.**  
List jobs with hazards that present unacceptable

risks, based on those most likely to occur and with the most severe consequences. These jobs should be your first priority for analysis.

5. **Outline the steps or tasks.**  
Nearly every job can be broken down into job tasks or steps. When beginning a job hazard analysis, watch the employee perform the job and list each step as the worker takes it. Be sure to record enough information to describe each job action without getting overly detailed. Avoid making the breakdown of steps so detailed that it becomes unnecessarily long or so broad that it does not include basic steps. You may find it valuable to get input from other workers who have performed the same job.  
Later, review the job steps with the employee to make sure you have not omitted something. Point out that you are evaluating the job itself, not the employee’s job performance. Include the employee in all phases of the analysis—from reviewing the job steps and procedures to discussing uncontrolled hazards and recommended solutions. Sometimes, in conducting a job hazard analysis, it may be helpful to photograph or videotape the worker performing the job. These visual records can be handy references when doing a more detailed analysis of the work.

## Identifying Workplace Hazards

A job hazard analysis is an exercise in detective work. The goal is to discover the following:

- What can go wrong?
- What are the consequences?
- How could it arise?
- What are other contributing factors?
- How likely is it that the hazard will occur?

To make the job hazard analysis useful, employers need to document the answers to these questions in a consistent manner. (See “Job Hazard Analysis Form” on page 12) Describing a hazard in this way helps to ensure that efforts to eliminate the hazard and implement hazard controls help target the most important contributors to the hazard.

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Good hazard scenarios describe:

- Where it is happening (environment),
- Who or what it is happening to (exposure),
- What precipitates the hazard (trigger),
- The outcome that would occur should it happen (consequence), and
- Any other contributing factors.

Rarely is a hazard a simple case of one singular cause resulting in one singular effect. More frequently, many contributing factors tend to line up in a certain way to create the hazard. Here is an example of a hazard scenario:

In the metal shop (environment), while clearing a snag (trigger), a worker's hand (exposure) comes into contact with a rotating pulley. It pulls his hand into the machine and severs his fingers (consequences) quickly.

To perform a job hazard analysis, an employer should ask:

- What can go wrong? The worker's hand could come into contact with a rotating object that "catches" it and pulls it into the machine.
- What are the consequences? The worker could receive a severe injury and lose fingers and hands.
- How could it happen? The accident could happen as a result of the worker trying to clear a snag during operations or as part of a maintenance activity while the pulley is operating. Obviously, this hazard scenario could not occur if the pulley is not rotating.
- What are other contributing factors? This hazard occurs very quickly. It does not give the worker much opportunity to recover or prevent it once his hand comes into contact with the pulley. This is an important factor, because it helps you determine the severity and likelihood of an accident when selecting appropriate hazard controls. Unfortunately, experience has shown that training is not very effective in hazard control when triggering events happen quickly because humans can react only so quickly.
- How likely is it that the hazard will occur? This determination requires some judgment. If there have been "near-misses" or actual cases, then the likelihood of a recurrence would be considered

high. If the pulley is exposed and easily accessible, that also is a consideration. In the example, the likelihood that the hazard will occur is high because there is no guard preventing contact, and the operation is performed while the machine is running.

It may be appropriate to hire a professional to conduct a job hazard analysis if employees are involved in many different or complex processes. Sources of help include insurance companies, the local fire department, and private consultants with safety and health expertise. In addition, OSHA offers assistance through its regional and area offices and consultation services.

Even when receiving outside help, it is important that the employer and employees remain involved in the process of identifying and correcting hazards because they are on the worksite every day and most likely to encounter these hazards. New circumstances and a recombination of existing circumstances may cause old hazards to reappear and new hazards to appear. In addition, the employer and employees must be ready and able to implement whatever hazard elimination or control measures a professional consultant recommends.

## **Reviewing the Job Hazard Analysis**

Periodically reviewing the job hazard analysis ensures that it remains current and continues to help reduce workplace accidents and injuries. Even if the job has not changed, it is possible that during the review process the employer will identify hazards that were not identified in the initial analysis. It is particularly important to review job hazard analysis if an illness or injury occurs on a specific job. Based on the circumstances, the employer may determine that they need to change the job procedure to prevent similar incidents in the future. If an employee's failure to follow proper job procedures results in a "close call," the situation should be discussed with all employees who perform the job and they should be reminded of proper procedures. Any time a job hazard analysis is revised, it is important to train all employees affected by the changes in the new job methods, procedures, or protective measures adopted.

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# Job Hazard Analysis

Utilize the following form to perform a job hazard analysis in order to identify existing or potential hazards for the various job titles within your organization. Fill in the details of the job being analyzed including Job Title, Job Location, Name of the Analyst and Date Analysis is being conducted. Then, give a brief but thorough description of the task being performed, the hazard that could result from such a task, the consequences of the hazard (i.e. severe injury to hand or arm), the method that may control such hazard (i.e. using machine guards) and any rationale or comment necessary. Finally, record the date that the Hazard Controls were implemented and keep a copy of this form as evidence of your good faith effort to identify and rectify known hazards in and around the workplace.

Job Title \_\_\_\_\_

Job Location \_\_\_\_\_

Analyst \_\_\_\_\_ Date \_\_\_\_\_

Task Description

---

---

Hazard Description

---

---

Consequence

---

---

Hazard Controls

---

---

Rationale or Comment

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Date Hazard Controls were Implemented \_\_\_\_\_

# Hazard Assessment Checklist

The following checklist can be used to identify and evaluate hazards in your workplace. This checklist covers a wide variety of workplace safety and health hazards. All of the topics covered in this checklist may not apply to your particular workplace. When evaluating your workplace, use the sections of the checklist that apply to your workplace and work activities.

## General Work Environment

- Are all worksites clean and orderly?
- Are work surfaces kept dry or appropriate means taken to assure the surfaces are slip-resistant?
- Are all spilled materials or liquids cleaned up immediately?
- Is combustible scrap, debris and waste stored safely and removed from the worksite promptly?
- Is accumulated combustible dust routinely removed from elevated surfaces, including the overhead structure of buildings?
- Is combustible dust cleaned up with a vacuum system to prevent the dust going into suspension?
- Is metallic or conductive dust prevented from entering or accumulation on or around electrical enclosures or equipment?
- Are covered metal waste cans used for oily and paint-soaked waste?
- Are all oil and gas fired devices equipped with flame failure controls that will prevent flow of fuel if pilots or main burners are not working?
- Are paint spray booths, dip tanks and the like cleaned regularly?
- Are the minimum number of toilets and washing facilities provided?
- Are all toilets and washing facilities clean and sanitary?
- Are all work areas adequately illuminated?
- Are pits and floor openings covered or otherwise guarded?

## Personal Protective Equipment

- Are protective goggles or face shields provided and worn where there is any danger of flying particles or corrosive materials?
- Are approved safety glasses required to be worn at all times in areas where there is a risk of eye injuries such as punctures, abrasions, contusions or burns?
- Are employees who need corrective lenses (glasses or contacts lenses) in working environments with harmful exposures, required to wear only approved safety glasses, protective goggles, or use other medically approved precautionary procedures?
- Are protective gloves, aprons, shields, or other means provided against cuts, corrosive liquids and chemicals?
- Are hard hats provided and worn where danger of falling objects exists?
- Are hard hats inspected periodically for damage to the shell and suspension system?
- Is appropriate foot protection required where there is the risk of foot injuries from hot, corrosive, poisonous substances, falling objects, crushing or penetrating actions?
- Are approved respirators provided for regular or emergency use where needed?
- Is all protective equipment maintained in a sanitary condition and ready for use?
- Do you have eye wash facilities and a quick drench shower within the work area where employees are exposed to injurious corrosive materials?
- Where special equipment is needed for electrical workers, is it available?

- When lunches are eaten on the premises, are they eaten in areas where there is no exposure to toxic materials or other health hazards?
- Is protection against the effects of occupational noise exposure?

### **Walkways**

- Are aisles and passageways kept clear?
- Are aisles and walkways marked as appropriate?
- Are wet surfaces covered with non-slip materials?
- Are holes in the floor, sidewalk or other walking surface repaired properly, covered or otherwise made safe?
- Is there safe clearance for walking in aisles where motorized or mechanical handling equipment is operating.
- Are spilled materials cleaned up immediately?
- Are materials or equipment stored in such a way that sharp projectiles will not interfere with the walkway?
- Are changes of direction or elevations readily identifiable?
- Are aisles or walkways that pass near moving or operating machinery, welding operations or similar operations arranged so employees will not be subjected to potential hazards?
- Is adequate headroom provided for the entire length of any aisle or walkway?
- Are standard guardrails provided wherever aisle or walkway surfaces are elevated more than 30 inches above any adjacent floor or the ground?
- Are bridges provided over conveyors and similar hazards?

### **Floor and Wall Stairways**

- Are floor openings guarded by a cover, guardrail, or equivalent on all sides (except at entrance to stairways or ladders)?
- Are toeboards installed around the edges of a permanent floor opening (where persons may pass

below the opening)?

- Are skylight screens of such construction and mounting that they will withstand a load of at least 200 pounds?
- Is the glass in windows, doors, glass walls that are subject to human impact, of sufficient thickness and type for the condition of use?
- Are grates or similar type covers over floor openings such as floor drains, of such design that foot traffic or rolling equipment will not be affected by the grate spacing?
- Are unused portions of service pits and pits not actually in use either covered or protected by guardrails or equivalent?
- Are manhole covers, trench covers and similar covers, plus their supports, designed to carry a truck rear axle load of at least 20,000 pounds when located in roadways and subject to vehicle traffic?
- Are floor or wall openings in fire resistive construction provided with doors or covers compatible with the fire rating of the structure and provided with self-closing feature when appropriate?

### **Stairs & Stairways**

- Are standard stair rails or handrails on all stairways having four or more risers?
- Are all stairways at least 22 inches wide?
- Do stairs have at least a 6'6" overhead clearance?
- Do stairs angle no more than 50 and no less than 30 degrees?
- Are stairs of hollow-pan type treads and landings filled to noising level with solid material?
- Are step risers on stairs uniform from top to bottom, with no riser spacing greater than 7-1/2 inches?
- Are steps on stairs and stairways designed or provided with a surface that renders them slip resistant?

- Are stairway handrails located between 30 and 34 inches above the leading edge of stair treads?
- Do stairway handrails have a least 1-1/2 inches of clearance between the handrails and the wall or surface they are mounted on?
- Are stairway handrails capable of withstanding a load of 200 pounds, applied in any direction?
- Where stairs or stairways exit directly into any area where vehicles may be operated, are adequate barriers and warnings provided to prevent employees stepping into the path of traffic?
- Do stairway landings have a dimension measured in the direction of travel, at least equal to width of the stairway?
- Is the vertical distance between stairway landings limited to 12 feet or less?

### **Elevated Surfaces**

- Are signs posted, when appropriate, showing the elevated surface load capacity?
- Are surfaces elevated more than 30 inches above the floor or ground provided with standard guardrails?
- Are all elevated surfaces (beneath which people or machinery could be exposed to falling objects) provided with standard 4-inch toeboards?
- Is a permanent means of access and egress provided to elevated storage and work surfaces?
- Is required headroom provided where necessary?
- Is material on elevated surfaces piled, stacked or racked in a manner to prevent it from tipping, falling, collapsing, rolling or spreading?
- Are dock boards or bridge plates used when transferring materials between docks and trucks or rail cars?

### **Exiting or Egress**

- Are all exits marked with an exit sign and illuminated by a reliable light source?
- Are the directions to exits, when not immediately apparent, marked with visible signs?

- Are doors, passageways or stairways, that are neither exits nor access to exits and which could be mistaken for exits, appropriately marked "NOT AN EXIT," "TO BASEMENT," "STOREROOM," and the like?
- Are exit signs provided with the word "EXIT" in lettering at least 5 inches high and the stroke of the lettering at least 1/2 inch wide?
- Are exit doors side-hinged?
- Are all exits kept free of obstructions?
- Are at least two means of egress provided from elevated platforms, pits or rooms where the absence of a second exit would increase the risk of injury from hot, poisonous, corrosive, suffocating, flammable, or explosive substances?
- Are there sufficient exits to permit prompt escape in case of emergency?
- Are special precautions taken to protect employees during construction and repair operations?
- Is the number of exits from each floor of a building, and the number of exits from the building itself, appropriate for the building occupancy load?
- Are exit stairways which are required to be separated from other parts of a building enclosed by at least two-hour fire-resistive construction in buildings more than four stories in height, and not less than one-hour fire resistive construction elsewhere?
- When ramps are used as part of required exiting from a building, is the ramp slope limited to 1- foot vertical and 12 feet horizontal?
- Where exiting will be through frameless glass doors, glass exit doors, storm doors, and such are the doors fully tempered and meet the safety requirements for human impact?

### **Exit Doors**

- Are doors that are required to serve as exits designed and constructed so that the way of exit travel is obvious and direct?
- Are windows that could be mistaken for exit doors, made inaccessible by means of barriers or railings?

- Are exit doors openable from the direction of exit travel without the use of a key or any special knowledge or effort, when the building is occupied?
- Is a revolving, sliding or overhead door prohibited from serving as a required exit door?
- Where panic hardware is installed on a required exit door, will it allow the door to open by applying a force of 15 pounds or less in the direction of the exit traffic?
- Are doors on cold storage rooms provided with an inside release mechanism that will release the latch and open the door even if it's padlocked or otherwise locked on the outside?
- Where exit doors open directly onto any street, alley or other area where vehicles may be operated, are adequate barriers and warnings provided to prevent employees stepping into the path of traffic?
- Are doors that swing in both directions and are located between rooms where there is frequent traffic, provided with viewing panels in each door?

### **Portable Ladders**

- Are all ladders maintained in good condition, joints between steps and side rails tight, all hardware and fittings securely attached, and moveable parts operating freely without binding or undue play?
- Are non-slip safety feet provided on each ladder?
- Are non-slip safety feet provided on each metal or rung ladder?
- Are ladder rungs and steps free of grease and oil?
- Is it prohibited to place a ladder in front of doors opening toward the ladder except when the door is blocked open, locked or guarded?
- Is it prohibited to place ladders on boxes, barrels, or other unstable bases to obtain additional height?
- Are employees instructed to face the ladder when ascending or descending?

- Are employees prohibited from using ladders that are broken, missing steps, rungs, or cleats, broken side rails or other faulty equipment?
- Are employees instructed not to use the top 2 steps of ordinary stepladders as a step?
- When portable rung ladders are used to gain access to elevated platforms, roofs, and the like does the ladder always extend at least 3 feet above the elevated surface?
- Is it required that when portable rung or cleat type ladders are used the base is so placed that slipping will not occur, or it is lashed or otherwise held in place?
- Are portable metal ladders legibly marked with signs reading "CAUTION -- Do Not Use Around Electrical Equipment" or equivalent wording?
- Are employees prohibited from using ladders as guys, braces, skids, gin poles, or for other than their intended purposes?
- Are employees instructed to only adjust extension ladders while standing at a base (not while standing on the ladder or from a position above the ladder)?
- Are metal ladders inspected for damage?
- Are the rungs of ladders uniformly spaced at 12 inches, center to center?

### **Hand Tools & Equipment**

- Are all tools and equipment (both, company and employee-owned) used by employees at their workplace in good condition?
- Are hand tools such as chisels, punches, which develop mushroomed heads during use, reconditioned or replaced as necessary?
- Are broken or fractured handles on hammers, axes and similar equipment replaced promptly?
- Are worn or bent wrenches replaced regularly?
- Are appropriate handles used on files and similar tools?

- Are employees made aware of the hazards caused by faulty or improperly used hand tools?
- Are appropriate safety glasses, face shields, and similar equipment used while using hand tools or equipment that might produce flying materials or be subject to breakage?
- Are jacks checked periodically to assure they are in good operating condition?
- Are tool handles wedged tightly in the head of all tools?
- Are tool cutting edges kept sharp so the tool will move smoothly without binding or skipping?
- Are tools stored in dry, secure location where they won't be tampered with?
- Is eye and face protection used when driving hardened or tempered spuds or nails?

### **Portable (Power Operated) Tools & Equipment**

- Are grinders, saws, and similar equipment provided with appropriate safety guards?
- Are power tools used with the correct shield, guard or attachment recommended by the manufacturer?
- Are portable circular saws equipped with guards above and below the base shoe?
- Are circular saw guards checked to assure they are not wedged up, thus leaving the lower portion of the blade unguarded?
- Are rotating or moving parts of equipment guarded to prevent physical contact?
- Are all cord-connected, electrically operated tools and equipment effectively grounded or of the approved double insulated type?
- Are effective guards in place over belts, pulleys, chains, and sprockets, on equipment such as concrete mixers, air compressors, and the like?
- Are portable fans provided with full guards or screens having openings 1/2 inch or less?

- Is hoisting equipment available and used for lifting heavy objects, and are hoist ratings and characteristics appropriate for the task?
- Are ground-fault circuit interrupters provided on all temporary electrical 15 and 20 ampere circuits, used during periods of construction?
- Are pneumatic and hydraulic hoses on power-operated tools checked regularly for deterioration or damage?

### **Powder Actuated Tools**

- Are employees who operate powder-actuated tools trained in their use and carry a valid operator's card?
- Is each powder-actuated tool stored in its own locked container when not being used?
- Is a sign at least 7" by 10" with bold type reading "POWDER-ACTUATED TOOL IN USE" conspicuously posted when the tool is being used?
- Are powder-actuated tools left unloaded until they are actually ready to be used?
- Are powder-actuated tools inspected for obstructions or defects each day before use?
- Do powder-actuated tools operators have and use appropriate personal protective equipment such as hard hats, safety goggles, safety shoes and ear protectors?

### **Machine Guarding**

- Is there a training program to instruct employees on safe methods of machine operation?
- Is there adequate supervision to ensure that employees are following safe machine operating procedures?
- Is there a regular program of safety inspection of machinery and equipment?
- Is all machinery and equipment kept clean and properly maintained?
- Is sufficient clearance provided around and between machines to allow for safe operations, set up and servicing, material handling and waste removal?

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- Is equipment and machinery securely placed and anchored, when necessary to prevent tipping or other movement that could result in personal injury?
  - Is there a power shut-off switch within reach of the operator's position at each machine?
  - Can electric power to each machine be locked out for maintenance, repair, or security?
  - Are the noncurrent-carrying metal parts of electrically operated machines bonded and grounded?
  - Are foot-operated switches guarded or arranged to prevent accidental actuation by personnel or falling?
  - Are manually operated valves and switches controlling the operation of equipment and machines clearly identified and readily accessible?
  - Are all emergency stop buttons colored red?
  - Are all pulleys and belts that are within 7 feet of the floor or working level properly guarded?
  - Are all moving chains and gears properly guarded?
  - Are splashguards mounted on machines that use coolant, to prevent the coolant from reaching employees?
  - Are methods provided to protect the operator and other employees in the machine area from hazards created at the point of operation, ingoing nip points, rotating parts, flying chips, and sparks?
  - Are machinery guards secure and so arranged that they do not offer a hazard in their use?
  - If special hand tools are used for placing and removing material, do they protect the operator's hands?
  - Are revolving drums, barrels, and containers required to be guarded by an enclosure that is interlocked with the drive mechanism, so that revolution cannot occur unless the guard enclosure is in place, so guarded?
  - Do arbors and mandrels have firm and secure bearings and are they free from play?
  - Are provisions made to prevent machines from automatically starting when power is restored after a power failure or shutdown?
  - Are machines constructed so as to be free from excessive vibration when the largest size tool is mounted and run at full speed?
  - If machinery is cleaned with compressed air, is air pressure controlled and personal protective equipment or other safeguards used to protect operators and other workers from eye and body injury?
  - Are fan blades protected with a guard having openings no larger than 1/2 inch, when operating within 7 feet of the floor?
  - Are saws used for ripping, equipped with anti-kick back devices and spreaders?
  - Are radial arm saws so arranged that the cutting head will gently return to the back of the table when released?

### **Lockout Blockout Procedures**

- Is all machinery or equipment capable of movement, required to be de-energized or disengaged and blocked or locked out during cleaning, servicing, adjusting or setting up operations, whenever required?
- Is the locking-out of control circuits in lieu of locking-out main power disconnects prohibited?
- Are all equipment control valve handles provided with a means for locking-out?
- Does the lockout procedure require that stored energy (i.e. mechanical, hydraulic, air,) be released or blocked before equipment is locked-out for repairs?
- Are appropriate employees provided with individually keyed personal safety locks?
- Are employees required to keep personal control of their key(s) while they have safety locks in use?
- Is it required that employees check the safety of the lock out by attempting a start up after making sure no one is exposed?

- Where the power disconnecting means for equipment does not also disconnect the electrical control circuit:
- Are the appropriate electrical enclosures identified?
- Is means provided to assure the control circuit can also be disconnected and locked out?

### **Industrial Trucks - Forklifts**

- Are only trained personnel allowed to operate industrial trucks?
- Is substantial overhead protective equipment provided on high lift rider equipment?
- Are the required lift truck operating rules posted and enforced?
- Is directional lighting provided on each industrial truck that operates in an area with less than 2 foot candles per square foot of general lighting?
- Does each industrial truck have a warning horn, whistle, gong or other device which can be clearly heard above the normal noise in the areas where operated?
- Are the brakes on each industrial truck capable of bringing the vehicle to a complete and safe stop when fully loaded?
- Will the industrial truck's parking brake effectively prevent the vehicle from moving when unattended?
- Are industrial trucks operating in areas where flammable gases or vapors, or combustible dust or ignitable fibers may be present in the atmosphere, approved for such locations?
- Are motorized hand and hand/rider trucks so designed that the brakes are applied, and power to the drive motor shuts off when the operator releases his/her grip on the device that controls the travel?
- Are industrial trucks with internal combustion engine operated in buildings or enclosed areas, carefully checked to ensure such operations do not cause harmful concentration of dangerous gases or fumes?

### **Entering Confined Spaces**

- Are confined spaces thoroughly emptied of any corrosive or hazardous substances, such as acids or caustics, before entry?
- Before entry, are all lines to a confined space, containing inert, toxic, flammable, or corrosive materials valved off and blanked or disconnected and separated?
- Is it required that all impellers, agitators, or other moving equipment inside confined spaces be locked-out if they present a hazard?
- Is either natural or mechanical ventilation provided prior to confined space entry?
- Before entry, are appropriate atmospheric tests performed to check for oxygen deficiency, toxic substance and explosive concentrations in the confined space before entry?
- Is adequate illumination provided for the work to be performed in the confined space?
- Is the atmosphere inside the confined space frequently tested or continuously monitor during conduct of work?
- Is there an assigned safety standby employee outside of the confined space, whose sole responsibility is to watch the work in progress, sound an alarm if necessary, and render assistance?
- Is the standby employee or other employees prohibited from entering the confined space without lifelines and respiratory equipment if there is any questions as to the cause of an emergency?
- In addition to the standby employee, is there at least one other trained rescuer in the vicinity?
- Are all rescuers appropriately trained and using approved, recently inspected equipment?
- Does all rescue equipment allow for lifting employees vertically from a top opening?
- Are there trained personnel in First Aid and CPR immediately available?

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- Is there an effective communication system in place whenever respiratory equipment is used and the employee in the confined space is out of sight of the standby person?
  - Is approved respiratory equipment required if the atmosphere inside the confined space cannot be made acceptable?
  - Is all portable electrical equipment used inside confined spaces either grounded and insulated, or equipped with ground fault protection?
  - Before gas welding or burning is started in a confined space, are hoses checked for leaks, compressed gas bottles forbidden inside of the confined space, torches lighted only outside of the confined area and the confined area tested for an explosive atmosphere each time before a lighted torch is to be taken into the confined space?
  - If employees will be using oxygen-consuming equipment such as salamanders, torches, furnaces, in a confined space, is sufficient air provided to assure combustion without reducing the oxygen concentration of the atmosphere below 19.5 percent by volume?
  - Whenever combustion-type equipment is used in confined space, are provisions made to ensure the exhaust gases are vented outside of the enclosure?
  - Is each confined space checked for decaying vegetation or animal matter, which may produce methane?
  - Is the confined space checked for possible industrial waste, which could contain toxic properties?
  - If the confined space is below the ground and near areas where motor vehicles will be operating, is it possible for vehicle exhaust or carbon monoxide to enter the space?
  - Are hazardous substances identified which may cause harm by inhalation, ingestion, skin absorption or contact?
  - Are employees aware of the hazards involved with the various chemicals they may be exposed to in their work environment, such as ammonia, chlorine, epoxies, and caustics?
  - Is employee exposure to chemicals in the workplace kept within acceptable levels?
  - Can a less harmful method or product be used?
  - Is the work area's ventilation system appropriate for the work being performed?
  - Are spray painting operations done in spray rooms or booths equipped with an appropriate exhaust system?
  - Is employee exposure to welding fumes controlled by ventilation, use of respirators, exposure time, or other means?
  - Are welders and other workers nearby provided with flash shields during welding operations?
  - If forklifts and other vehicles are used in buildings or other enclosed areas, are the carbon monoxide levels kept below maximum acceptable concentration?
  - Has there been a determination that noise levels in the facilities are within acceptable levels?
  - Are steps being taken to use engineering controls to reduce excessive noise levels?
  - Are proper precautions being taken when handling asbestos and other fibrous materials?
  - Are caution labels and signs used to warn of asbestos?
  - Are wet methods used, when practicable, to prevent the emission of airborne asbestos fibers, silica dust and similar hazardous materials?
  - Is vacuuming with appropriate equipment used whenever possible rather than blowing or sweeping dust?

### **Environmental Controls**

- Are all work areas properly illuminated?
- Are employees instructed in proper first aid and other emergency procedures?

- Are grinders, saws, and other machines that produce respirable dusts vented to an industrial collector or central exhaust system?
- Are all local exhaust ventilation systems designed and operating properly such as airflow and volume necessary for the application? Are the ducts free of obstructions or the belts slipping?
- Is personal protective equipment provided, used and maintained wherever required?
- Are there written standard operating procedures for the selection and use of respirators where needed?
- Are restrooms and washrooms kept clean and sanitary?
- Is all water provided for drinking, washing, and cooking potable?
- Are all outlets for water not suitable for drinking clearly identified?
- Are employees' physical capacities assessed before being assigned to jobs requiring heavy work?
- Are employees instructed in the proper manner of lifting heavy objects?
- Where heat is a problem, have all fixed work areas been provided with spot cooling or air conditioning?
- Are employees screened before assignment to areas of high heat to determine if their health condition might make them more susceptible to having an adverse reaction?
- Are employees working on streets and roadways where they are exposed to the hazards of traffic, required to wear bright colored (traffic orange) warning vest?
- Are exhaust stacks and air intakes located that contaminated air will not be recirculated within a building or other enclosed area?
- Is equipment producing ultra-violet radiation properly shielded?

## **Flammable & Combustible Materials**

- Are combustible scrap, debris and waste materials (i.e. oily rags) stored in covered metal receptacles and removed from the worksite promptly?
- Is proper storage practiced to minimize the risk of fire including spontaneous combustion?
- Are approved containers and tanks used for the storage and handling of flammable and combustible liquids?
- Are all connections on drums and combustible liquid piping, vapor and liquid tight?
- Are all flammable liquids kept in closed containers when not in use (e.g. parts cleaning tanks, pans)?
- Are bulk drums of flammable liquids grounded and bonded to containers during dispensing?
- Do storage rooms for flammable and combustible liquids have explosion-proof lights?
- Do storage rooms for flammable and combustible liquids have mechanical or gravity ventilation?
- Is liquefied petroleum gas stored, handled, and used in accordance with safe practices and standards?
- Are liquefied petroleum storage tanks guarded to prevent damage from vehicles?
- Are all solvent wastes and flammable liquids kept in fire-resistant covered containers until they are removed from the worksite?
- Is vacuuming used whenever possible rather than blowing or sweeping combustible dust?
- Are fire separators placed between containers of combustibles or flammables, when stacked one upon another, to assure their support and stability?
- Are fuel gas cylinders and oxygen cylinders separated by distance, fire resistant barriers or other means while in storage?
- Are fire extinguishers selected and provided for the types of materials in areas where they are to be used?

- Class A: Ordinary combustible material fires.
- Class B: Flammable liquid, gas or grease fires.
- Class C: Energized-electrical equipment fires.
- If a Halon 1301 fire extinguisher is used, can employees evacuate within the specified time for that extinguisher?
- Are appropriate fire extinguishers mounted within 75 feet of outside areas containing flammable liquids, and within 10 feet of any inside storage area for such materials?
- Is the transfer/withdrawal of flammable or combustible liquids performed by trained personnel?
- Are fire extinguishers mounted so that employees do not have to travel more than 75 feet for a class "A" fire or 50 feet for a class "B" fire?
- Are employees trained in the use of fire extinguishers?
- Are extinguishers free from obstructions or blockage?
- Are all extinguishers serviced, maintained and tagged at intervals not to exceed one year?
- Are all extinguishers fully charged and in their designated places?
- Is a record maintained of required monthly checks of extinguishers?
- Where sprinkler systems are permanently installed, are the nozzle heads directed or arranged so that water will not be sprayed into operating electrical switchboards and equipment?
- Are "NO SMOKING" signs posted where appropriate in areas where flammable or combustible materials are used or stored?
- Are "NO SMOKING" signs posted on liquefied petroleum gas tanks?
- Are "NO SMOKING" rules enforced in areas involving storage and use of flammable materials?
- Are safety cans used for dispensing flammable or combustible liquids at a point of use?

- Are all spills of flammable or combustible liquids cleaned up promptly?
- Are storage tanks adequately vented to prevent the development of excessive vacuum or pressure as a result of filling, emptying, or atmosphere temperature changes?
- Are storage tanks equipped with emergency venting that will relieve excessive internal pressure caused by fire exposure?
- Are spare portable or butane tanks, which are sued by industrial trucks stored in accord with regulations?

### **Fire Protection**

- Do you have a fire prevention plan?
- Does your plan describe the type of fire protection equipment and/or systems?
- Have you established practices and procedures to control potential fire hazards and ignition sources?
- Are employees aware of the fire hazards of the material and processes to which they are exposed?
- Is your local fire department well acquainted with your facilities, location and specific hazards?
- If you have a fire alarm system, is it tested at least annually?
- If you have a fire alarm system, is it certified as required?
- If you have interior standpipes and valves, are they inspected regularly?
- If you have outside private fire hydrants, are they flushed at least once a year and on a routine preventive maintenance schedule?
- Are fire doors and shutters in good operating condition?
- Are fire doors and shutters unobstructed and protected against obstructions, including their counterweights?
- Are fire door and shutter fusible links in place?

- Are automatic sprinkler system water control valves, air and water pressures checked weekly/periodically as required?
- Is maintenance of automatic sprinkler system assigned to responsible persons or to a sprinkler contractor?
- Are sprinkler heads protected by metal guards, when exposed to physical damage?
- Is proper clearance maintained below sprinkler heads?
- Are portable fire extinguishers provided in adequate number and type?
- Are fire extinguishers mounted in readily accessible locations?
- Are fire extinguishers recharged regularly and noted on the inspection tag?
- Are employees periodically instructed in the use of extinguishers and fire protection procedures?

### **Hazardous Chemical Exposures**

- Are employees trained in the safe handling practices of hazardous chemicals such as acids, caustics, and the like?
- Are employees aware of the potential hazards involving various chemicals stored or used in the workplace--such as acids, bases, caustics, epoxies, and phenols?
- Is employee exposure to chemicals kept within acceptable levels?
- Are eye wash fountains and safety showers provided in areas where corrosive chemicals are handled?
- Are all containers, such as vats and storage tanks labeled as to their contents--e.g. "CAUSTICS"?
- Are all employees required to use personal protective clothing and equipment when handling chemicals (i.e. gloves, eye protection, and respirators)?
- Are flammable or toxic chemicals kept in closed containers when not in use?
- Are chemical piping systems clearly marked as to their content?
- Where corrosive liquids are frequently handled in open containers or drawn from storage vessels or pipelines, is adequate means readily available for neutralizing or disposing of spills or overflows properly and safely?
- Have standard operating procedures been established and are they being followed when cleaning up chemical spills?
- Where needed for emergency use, are respirators stored in a convenient, clean and sanitary location?
- Are respirators intended for emergency use adequate for the various uses for which they may be needed?
- Are employees prohibited from eating in areas where hazardous chemicals are present?
- Is personal protective equipment provided, used and maintained whenever necessary?
- Are there written standard operating procedures for the selection and use of respirators where needed?
- If you have a respirator protection program, are your employees instructed on the correct usage and limitations of the respirators?
- Are the respirators NIOSH approved for this particular application?
- Are they regularly inspected and cleaned sanitized and maintained?
- If hazardous substances are used in your processes, do you have a medical or biological monitoring system in operation?
- Are you familiar with the Threshold Limit Values or Permissible Exposure Limits of airborne contaminants and physical agents used in your workplace?
- Have control procedures been instituted for hazardous materials, where appropriate, such as respirators, ventilation systems, handling practices, and the like?

- Whenever possible, are hazardous substances handled in properly designed and exhausted booths or similar locations?
- Do you use general dilution or local exhaust ventilation systems to control dusts, vapors, gases, fumes, smoke, solvents or mists which may be generated in your workplace?
- Is ventilation equipment provided for removal of contaminants from such operations as production grinding, buffing, spray painting, and/or vapor decreasing, and is it operating properly?
- Do employees complain about dizziness, headaches, nausea, irritation, or other factors of discomfort when they use solvents or other chemicals?
- Is there a dermatitis problem--do employees complain about skin dryness, irritation, or sensitization?
- Have you considered the use of an industrial hygienist or environmental health specialist to evaluate your operation?
- If internal combustion engines are used, is carbon monoxide kept within acceptable levels?
- Is vacuuming used, rather than blowing or sweeping dusts whenever possible for clean up?
- Are materials, which give off toxic asphyxiant, suffocating or anesthetic fumes, stored in remote or isolated locations when not in use?
- Is there a Material Safety Data Sheet (MSDS) readily available for each hazardous substance used?
- How will you inform other employers whose employees share the same work area where the hazardous substances are used?
- Is there an employee training program for hazardous substances?
- Does this program include:
  - An explanation of what an MSDS is and how to use and obtain one?
  - MSDS contents for each hazardous substance or class of substances?
  - Explanation of "Right to Know"?
  - Identification of where employees can see the employer's written hazard communication program and where hazardous substances are present in their work area?
  - The physical and health hazards of substances in the work area, how to detect their presence, and specific protective measures to be used?
  - Details of the hazard communication program, including how to use the labeling system and MSDSs?
  - How employees will be informed of hazards of non-routine tasks, and hazards of unlabeled pipes?

### **Hazardous Substances Communication**

- Is there a list of hazardous substances used in your workplace?
- Is there a written hazard communication program dealing with Material Safety Data Sheets (MSDS) labeling, and employee training?
- Who is responsible for MSDSs, container labeling, employee training?
- Is each container for a hazardous substance (i.e. vats, bottles, storage tanks,) labeled with product identity and a hazard warning (communication of the specific health hazards and physical hazards)?

### **Electrical**

- Are all employees required to report as soon as practicable any obvious hazard to life or property observed in connection with electrical equipment or lines?
- Are employees instructed to make preliminary inspections and/or appropriate tests to determine what conditions exist before starting work on electrical equipment or lines?
- When electrical equipment or lines are to be serviced, maintained or adjusted, are necessary switches opened, locked-out and tagged whenever possible?

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- Are portable electrical tools and equipment grounded or of the double insulated type?
  - Are electrical appliances such as vacuum cleaners, polishers, vending machines grounded?
  - Do extension cords being used have a grounding conductor?
  - Are multiple plug adapters prohibited?
  - Are ground-fault circuit interrupters installed on each temporary 15 or 20 ampere, 120 volt AC circuit at locations where construction, demolition, modifications, alterations or excavations are being performed?
  - Are all temporary circuits protected by suitable disconnecting switches or plug connectors at the junction with permanent wiring?
  - Is exposed wiring and cords with frayed or deteriorated insulation repaired or replaced promptly?
  - Are flexible cords and cables free of splices or taps?
  - Are clamps or other securing means provided on flexible cords or cables at plugs, receptacles, tools, and equipment and is the cord jacket securely held in place?
  - Are all cord, cable and raceway connections intact and secure?
  - In wet or damp locations, are electrical tools and equipment appropriate for the use or location or otherwise protected?
  - Is the location of electrical power lines and cables (overhead, underground, underfloor, other side of walls) determined before digging, drilling or similar work is begun?
  - Are metal measuring tapes, ropes, handlines or similar devices with metallic thread woven into the fabric prohibited where they could come in contact with energized parts of equipment or circuit conductors?
  - Is the use of metal ladders prohibited in area where the ladder or the person using the ladder could come in contact with energized parts of equipment, fixtures or circuit conductors?
  - Are all disconnecting switches and circuit breakers labeled to indicate their use or equipment served?
  - Are disconnecting means always opened before fuses are replaced?
  - Do all interior wiring systems include provisions for grounding metal parts of electrical raceways, equipment and enclosures?
  - Are all electrical raceways and enclosures securely fastened in place?
  - Are all energized parts of electrical circuits and equipment guarded against accidental contact by approved cabinets or enclosures?
  - Is sufficient access and working space provided and maintained about all electrical equipment to permit ready and safe operations and maintenance?
  - Are all unused openings (including conduit knockouts) in electrical enclosures and fittings closed with appropriate covers, plugs or plates?
  - Are electrical enclosures such as switches, receptacles, junction boxes, etc., provided with tight-fitting covers or plates?
  - Are disconnecting switches for electrical motors in excess of two horsepower, capable of opening the circuit when the motor is in a stalled condition, without exploding? (Switches must be horsepower rated equal to or in excess of the motor hp rating).
  - Is low voltage protection provided in the control device of motors driving machines or equipment, which could cause probably injury from inadvertent starting?
  - Is each motor disconnecting switch or circuit breaker located within sight of the motor control device?
  - Is each motor located within sight of its controller or the controller disconnecting means capable of being locked in the open position or is a separate disconnecting means installed in the circuit within sight of the motor?
  - Is the controller for each motor in excess of two horsepower, rated in horsepower equal to or in excess of the rating of the motor is serves?

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- Are employees who regularly work on or around energized electrical equipment or lines instructed in the cardiopulmonary resuscitation (CPR) methods?
  - Are employees prohibited from working alone on energized lines or equipment over 600 volts?

### **Noise**

- Are there areas in the workplace where continuous noise levels exceed 85 dBA?
- Are noise levels being measured using a sound level meter or an octave band analyzer and records being kept?
- Have you tried isolating noisy machinery from the rest of your operation?
- Have engineering controls been used to reduce excessive noise levels?
- Where engineering controls are determined not feasible, are administrative controls (i.e. worker rotation) being used to minimize individual employee exposure to noise?
- Is there an ongoing preventive health program to educate employees in safe levels of noise and exposure, effects of noise on their health, and use of personal protection?
- Is the training repeated annually for employees exposed to continuous noise above 85 dBA?
- Have work areas where noise levels make voice communication between employees difficult been identified and posted?
- Is approved hearing protective equipment (noise attenuating devices) available to every employee working in areas where continuous noise levels exceed 85 dBA?
- If you use ear protectors, are employees properly fitted and instructed in their use and care?
- Are employees exposed to continuous noise above 85 dBA given periodic audiometric testing to ensure that you have an effective hearing protection system?

### **Fueling**

- Is it prohibited to fuel an internal combustion engine with a flammable liquid while the engine is running?
- Are fueling operations done in such a manner that likelihood of spillage will be minimal?
- When spillage occurs during fueling operations, is the spilled fuel cleaned up completely, evaporated, or other measures taken to control vapors before restarting the engine?
- Are fuel tank caps replaced and secured before starting the engine?
- In fueling operations is there always metal contact between the container and fuel tank?
- Are fueling hoses of a type designed to handle the specific type of fuel?
- Is it prohibited to handle or transfer gasoline in open containers?
- Are open lights, open flames, or sparking or arcing equipment prohibited near fueling or transfer of fuel operations?
- Is smoking prohibited in the vicinity of fueling operations?
- Are fueling operations prohibited in building or other enclosed areas that are not specifically ventilated for this purpose?
- Where fueling or transfer of fuel is done through a gravity flow system, are the nozzles of the self-closing type?

### **Material Handling**

- Is there safe clearance for equipment through aisles and doorways?
- Are aiseways designated, permanently marked, and kept clear to allow unhindered passage?
- Are motorized vehicles and mechanized equipment inspected daily or prior to use?
- Are vehicles shut off and brakes set prior to loading or unloading?

- Are containers or combustibles or flammables, when stacked while being moved, always separated by dunnage sufficient to provide stability?
- Are dock boards (bridge plates) used when loading or unloading operations are taking place between vehicles and docks?
- Are trucks and trailers secured from movement during loading and unloading operations?
- Are dock plates and loading ramps constructed and maintained with sufficient strength to support imposed loading?
- Are hand trucks maintained in safe operating condition?
- Are chutes equipped with sideboards of sufficient height to prevent the materials being handled from falling off?
- Are chutes and gravity roller sections firmly placed or secured to prevent displacement?
- At the delivery end of rollers or chutes, are provisions made to brake the movement of the handled materials.
- Are pallets usually inspected before being loaded or moved?
- Are hooks with safety latches or other arrangements used when hoisting materials so that slings or load attachments won't accidentally slip off the hoist hooks?
- Are securing chains, ropes, chockers or slings adequate for the job to be performed?
- When hoisting material or equipment, are provisions made to assure no one will be passing under the suspended loads?
- Are Material Safety Data Sheets available to employees handling hazardous substances?
- When seven or more employees are regularly transported in a van, bus or truck, is the operator's license appropriate for the class of vehicle being driven?
- Is each van, bus or truck used regularly to transport employees, equipped with an adequate number of seats?
- When employees are transported by truck, are provision provided to prevent their falling from the vehicle?
- Are vehicles used to transport employees, equipped with lamps, brakes, horns, mirrors, windshields and turn signals in good repair?
- Are transport vehicles provided with handrails, steps, stirrups or similar devices, so placed and arranged that employees can safely mount or dismount?
- Are employee transport vehicles equipped at all times with at least two reflective type flares?
- Is a full charged fire extinguisher, in good condition, with at least 4 B:C rating maintained in each employee transport vehicle?
- When cutting tools with sharp edges are carried in passenger compartments of employee transport vehicles, are they placed in closed boxes or containers which are secured in place?
- Are employees prohibited from riding on top of any load, which can shift, topple, or otherwise become unstable?

### **Transporting Employees & Materials**

- Do employees who operate vehicles on public thoroughfares have valid operator's licenses?

### **Control of Harmful Substances by Ventilation**

- Is the volume and velocity of air in each exhaust system sufficient to gather the dusts, fumes, mists, vapors or gases to be controlled, and to convey them to a suitable point of disposal?
- Are exhaust inlets, ducts and plenums designed, constructed, and supported to prevent collapse or failure of any part of the system?
- Are clean-out ports or doors provided at intervals not to exceed 12 feet in all horizontal runs of exhaust ducts?

- Where two or more different type of operations are being controlled through the same exhaust system, will the combination of substances being controlled, constitute a fire, explosion or chemical reaction hazard in the duct?
- Is adequate makeup air provided to areas where exhaust systems are operating?
- Is the intake for makeup air located so that only clean, fresh air, which is free of contaminants, will enter the work environment?
- Where two or more ventilation systems are serving a work area, is their operation such that one will not offset the functions of the other?

### **Sanitizing Equipment & Clothing**

- Is personal protective clothing or equipment, which employees are required to wear or use, of a type capable of being easily cleaned and disinfected?
- Are employees prohibited from interchanging personal protective clothing or equipment, unless it has been properly cleaned?
- Are machines and equipment, which processes, handle or apply materials that could be injurious to employees, cleaned and/or decontaminated before being overhauled or placed in storage?
- Are employees prohibited from smoking or eating in any area where contaminants are present that could be injurious if ingested?
- When employees are required to change from street clothing into protective clothing, is a clean changeroom with separate storage facility for street and protective clothing provided?
- Are employees required to shower and wash their hair as soon as possible after a known contact has occurred with a carcinogen?
- When equipment, materials, or other items are taken into or removed from a carcinogen-regulated area, is it done in a manner that will not contaminate non-regulated areas or the external environment?

### **Emergency Action Plan**

- Are you required to have an emergency action plan?
- Have emergency escape procedures and routes been developed and communicated to all employees?
- Do employees who remain to operate critical plant operations before they evacuate know the proper procedures?
- Is the employee alarm system that provides a warning for emergency action recognizable and perceptible above ambient conditions?
- Are alarm systems properly maintained and tested regularly?
- Is the emergency action plan reviewed and revised periodically?
- Do employees know their responsibilities:
  - For reporting emergencies?
  - During an emergency?
  - For conducting rescue and medical duties?

### **Ergonomics**

- Can the work be performed without eyestrain or glare to the employees?
- Does the task require prolonged raising of the arms?
- Do the neck and shoulders have to be stooped to view the task?
- Are there pressure points on any parts of the body (wrists, forearms, back of thighs)?
- Can the work be done using the larger muscles of the body?
- Can the work be done without twisting or overly bending the lower back?
- Are there sufficient rest breaks, in addition to the regular rest breaks, to relieve stress from repetitive-motion tasks?

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- Are tools, instruments and machinery shaped, positioned and handled so that tasks can be performed comfortably?
  - Are all pieces of furniture adjusted, positioned and arranged to minimize strain on all parts of the body?

### **Ventilation for Indoor Air Quality**

- Does your HVAC system provide at least the quantity of outdoor air required by the state building codes?
- Is the HVAC system inspected at least annually, and problems corrected?
- Are inspection records retained for at least 5 years?

## Common Hazards and Descriptions

Hazard	Hazard Description
Chemical (Toxic)	A chemical that exposes a person by absorption through the skin, inhalation, or through the blood stream that causes illness, disease, or death. The amount of chemical exposure is critical in determining hazardous effects. Check Material Safety Data Sheets (MSDS), and/or OSHA 1910.1000 for chemical hazard information.
Chemical (Flammable)	A chemical that, when exposed to a heat ignition source, results in combustion. Typically, the lower a chemical's flash point and boiling point, the more flammable the chemical. Check MSDS for flammability information.
Chemical (Corrosive)	A chemical that, when it comes into contact with skin, metal, or other materials, damages the materials. Acids and bases are examples of corrosives.
Explosion (Chemical Reaction)	Self-explanatory.
Explosion (Over-Pressurization)	Sudden and violent release of a large amount of gas/energy due to a significant pressure difference such as rupture in a boiler or compressed gas cylinder.
Electrical (Shock/Short Circuit)	Electrical contact with exposed conductors or a device that is incorrectly or inadvertently grounded, such as when a metal ladder comes into contact with power lines. 60Hz alternating current (common house current) is very dangerous because it can stop the heart.
Electrical (Fire)	Use of electrical power that results in electrical overheating or arcing to the point of combustion or ignition of flammables, or electrical component damage.
Electrical (Static/ESD)	The moving or rubbing of wool, nylon, other synthetic fibers, and even flowing liquids can generate static electricity. This creates an excess or deficiency of electrons on the surface of material that discharges (spark) to the ground resulting in the ignition of flammables or damage to electronics or the body's nervous system.
Electrical (Loss of Power)	Safety-critical equipment failure as a result of loss of power.
Ergonomics (Strain)	Damage of tissue due to overexertion (sprains and strains) or repetitive motion.
Ergonomics (Human Error)	A system design, procedure, or equipment that is error-provocative. (A switch goes up to turn something off).
Excavation (Collapse)	Soil collapse in a trench or excavation as a result of improper or inadequate shoring. Soil type is critical in determining the hazard likelihood.
Fall (Slip, Trip)	Conditions that result in falls (impacts) from height or traditional walking surfaces (such as slippery floors, poor housekeeping, uneven walking surfaces, exposed ledges, etc.)
Fire/Heat	Temperatures that can cause burns to the skin or damage to other organs. Fires require a heat source, fuel, and oxygen.
Mechanical/Vibration (Chaffing/Fatigue)	Vibration or material fatigue that results in a safety-critical failure. (Examples are abraded slings and ropes, weakened hoses and belts.)
Mechanical Failure	Self explanatory; typically occurs when devices exceed designed capacity or are inadequately maintained
Mechanical	Skin, muscle, or body part exposed to crushing, caught-between, cutting, tearing, shearing items or equipment.

Hazard	Hazard Description
Noise	Noise levels (>85 dBA 8 hr TWA) that result in hearing damage or inability to communicate safety-critical information.
Radiation (Ionizing)	Alpha, Beta, Gamma, neutral particles, and X-rays that cause injury (tissue damage) by ionization of cellular components.
Radiation (Non-Ionizing)	Ultraviolet, visible light, infrared, and microwaves that cause injury to tissue by thermal or photochemical means.
Struck By (Mass Acceleration)	Accelerated mass that strikes the body causing injury or death. (Examples are falling objects and projectiles.)
Struck Against	Injury to a body part as a result of coming into contact of a surface in which action was initiated by the person. (An example is when a screwdriver slips.)
Temperature Extreme (Heat/Cold)	Temperatures that result in heat stress, exhaustion, or metabolic slow down such as hypothermia.
Visibility	Lack of lighting or obstructed vision that results in an error or other hazard.
Weather Phenomena (Snow/Rain/Wind/Ice)	Self-explanatory.

# Correcting and Preventing Job Hazards

After reviewing the list of hazards with the employee, employers must consider what control methods will eliminate or reduce them.

The most effective controls are engineering controls that physically change a machine or work environment to prevent employee exposure to the hazard. The more reliable or less likely a hazard control can be circumvented, the better. If this is not feasible, administrative controls may be appropriate. This may involve changing how employees do their jobs.

Recommendations need to be discussed with all employees who perform the job and the responses should be considered carefully. When new or modified job procedures are introduced, employees need to understand what they are required to do and the reasons for the changes.

## Hazard Control Measures

Information obtained from a job hazard analysis is useless unless hazard control measures recommended in the analysis are incorporated into the tasks. Managers should recognize that not all hazard controls are equal. Some are more effective than others at reducing the risk.

The order of precedence and effectiveness of hazard control is the following:

1. Engineering controls.
2. Administrative controls.
3. Personal protective equipment.

Engineering controls include the following:

- Elimination/minimization of the hazard—Designing the facility, equipment, or process to remove the hazard, or substituting processes, equipment, materials, or other factors to lessen the hazard;
- Enclosure of the hazard using enclosed cabs, enclosures for noisy equipment, or other means;
- Isolation of the hazard with interlocks, machine guards, blast shields, welding curtains, or other means; and
- Removal or redirection of the hazard such as with local and exhaust ventilation.

Administrative controls include the following:

- Written operating procedures, work permits, and safe work practices;
- Exposure time limitations (used most commonly to control temperature extremes and ergonomic hazards);
- Monitoring the use of highly hazardous materials;
- Alarms, signs, and warnings;
- Buddy system; and
- Training.

Personal Protective Equipment—such as respirators, hearing protection, protective clothing, safety glasses, and hardhats—is acceptable as a control method in the following circumstances:

- When engineering controls are not feasible or do not totally eliminate the hazard;
- While engineering controls are being developed;
- When safe work practices do not provide sufficient additional protection; and
- During emergencies when engineering controls may not be feasible.

Use of one hazard control method over another higher in the control precedence may be appropriate for providing interim protection until the hazard is abated permanently. In reality, if the hazard cannot be eliminated entirely, the adopted control measures will likely be a combination of all three items instituted simultaneously.

The job procedures discussed here are for illustration only and do not necessarily include all the steps, hazards, and protections that apply to a particular industry. When employers conduct their own job safety analysis, they need be sure to consult the Occupational Safety and Health Administration standards for their industry. Compliance with these standards is mandatory, and by incorporating OSHA requirements in the job hazard analysis, the employer can be sure that their health and safety program meets federal standards. OSHA standards, regulations, and technical information are available online at [www.osha.gov](http://www.osha.gov).

Twenty-four states and two territories operate their own OSHA-approved safety and health programs and

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may have standards that differ slightly from federal requirements. Employers in those states should check with the appropriate state agency for more information.



Chapter 3

# Creating Your Injury and Illness Prevention Program

# OSHA Job Safety and Health Regulations and Requirements

OSHA has four separate sets of standards: General Industry (29 Code of Federal Regulations [CFR] 1910), Construction (29 CFR 1926), Maritime Employment (29 CFR 1915-1919), and Agriculture (29 CFR 1928). OSHA has regulations on posting and other administrative matters in 29 CFR 1903 and on recording and reporting of injuries and illnesses in 29 CFR 1904.

The OSH Act also has a General Duty Clause, section 5(a)(1), 29 U.S.C. 654(b)(1), which provides that:

(a) Each employer --

(1) shall furnish to each of his employees employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees.

A recognized hazard is a danger recognized by the employer's industry or industry in general, by the employer, or by common sense. The general duty clause does not apply if there is an OSHA standard dealing with the hazard, unless the employer knows that the standard does not adequately address the hazard.

Since its creation 40 years ago, OSHA has cited employers under the General Duty Clause when workers are exposed to serious recognized hazards that have a feasible means of abatement.

OSHA believes that workers will be better protected if each employer develops a proactive injury and illness prevention program to help them find hazards in their workplaces and develop a process to fix those hazards so that employees don't get hurt. This is not a one-size-fits-all requirement. Employers should tailor the program to the size and nature of their workplace.

Employers who may be covered under a specific standard, need to review the applicable standard for additional requirements. General Industry, Maritime, and Construction OSHA standards are available at [www.osha.gov](http://www.osha.gov).

After obtaining a copy of the current standards, employers need to identify those that apply to their business by a process of elimination. The first step is to read the introduction to the subpart heading, and then analyze the possible hazards in terms of **your** workplace, **your** equipment, **your** materials and of

**your** employees. For example, employers who are engaged in retail trade or service and do not have compressed gases, flammables, or explosives on their premises, can eliminate Hazardous Materials (Subpart H) as not applying to their business.

The following is a subject index of OSHA's standards that may apply to an employer's business (Only the General Industry are listed out by Subparts and Sections. Construction, Maritime and Agriculture are listed by Subparts only. This is a topic list for the purpose of allowing employers to see what other areas of their business may be required to comply with as it relates to Injury and Illness Prevention. Where a topic may apply to a business, the employer should see the full text of the standard on OSHA's website):

## **PART 1910 -- OCCUPATIONAL SAFETY AND HEALTH STANDARDS**

### **Subpart A -- General**

Sec.

1910.1 Purpose and scope.

1910.2 Definitions.

1910.3 Petitions for the issuance, amendment, or repeal of a standard.

1910.4 Amendments to this part.

1910.5 Applicability of standards.

1910.6 Incorporation by reference.

1910.7 Definition and requirements for a nationally recognized testing laboratory.

1910.8 OMB control numbers under the Paperwork Reduction Act.

### **Subpart B -- Adoption and Extension of Established Federal Standards**

1910.11 Scope and purpose

1910.12 Construction work.

1910.15 Shipyard employment.

1910.16 Longshoring and marine terminals.

1910.17 Effective dates.

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1910.18 Changes in established Federal standards.  
1910.19 Special provisions for air contaminants.

### **Subpart C -- [Removed and Reserved]**

1910.20 [Redesignated as 1910.1020]

### **Subpart D -- Walking - Working Surfaces**

1910.21 Definitions.  
1910.22 General requirements.  
1910.23 Guarding floor and wall openings and holes.  
1910.24 Fixed industrial stairs.  
1910.25 Portable wood ladders.  
1910.26 Portable metal ladders.  
1910.27 Fixed ladders.  
1910.28 Safety requirements for scaffolding.  
1910.29 Manually propelled mobile ladder stands and scaffolds (towers).  
1910.30 Other working surfaces.

### **Subpart E -- Exit Routes and Emergency Planning**

**1910.33 Table of contents.**  
1910.34 Coverage and definitions.  
1910.35 Compliance with alternate exit-route codes.  
1910.36 General requirements.  
1910.37 Means of egress, general.  
1910.38 Employee emergency plans and fire prevention plans.

### **Appendix to Subpart E of Part 1910 -- Exit Routes, Emergency Action Plans, and Fire Prevention Plans**

### **Subpart F -- Powered Platforms, Manlifts, and Vehicle-Mounted Work Platforms**

1910.66 Powered platforms for building maintenance.

1910.67 Vehicle-mounted elevating and rotating work platforms.  
1910.68 Manlifts.

### **Subpart G -- Occupational Health and Environmental Control**

1910.94 Ventilation.  
1910.95 Occupational noise exposure.  
1910.96 [Redesignated as 1910.1096]  
1910.97 Nonionizing radiation.  
1910.98 Effective dates.

### **Subpart H -- Hazardous Materials**

1910.101 Compressed gases (general requirements).  
1910.102 Acetylene.  
1910.103 Hydrogen.  
1910.104 Oxygen.  
1910.105 Nitrous oxide.  
1910.106 Flammable and combustible liquids.  
1910.107 Spray finishing using flammable and combustible materials.  
1910.108 Dip tanks containing flammable or combustible liquids.  
1910.109 Explosives and blasting agents.  
1910.110 Storage and handling of liquified petroleum gases.  
1910.111 Storage and handling of anhydrous ammonia.  
1910.112 [Reserved]  
1910.113 [Reserved]  
1910.119 Process safety management of highly hazardous chemicals.  
1910.120 Hazardous waste operations and emergency response.  
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# Voluntary Safety and Health Program Management Guidelines

Over the years, OSHA has found that effective management of worker safety and health protection is a decisive factor in reducing the extent and the severity of work-related injuries and illnesses. Effective management addresses all work-related hazards, including those potential hazards which could result from a change in worksite conditions or practices. It addresses hazards whether or not they are regulated by government standards.

As a result, OSHA placed more and more emphasis on safety and health programs. In 1982 OSHA began to approve worksites with exemplary safety and health management programs for participation in the Voluntary Protection Programs (VPP). Safety and health practices, procedures, and recordkeeping at participating worksites have been carefully evaluated and monitored by OSHA. These VPP worksites generally have lost-workday case rates that range from one-fifth to one-third the rates experienced by average worksites (Unpublished statistics, U.S. Department of Labor, OSHA 1988).

Further, most participating sites report improved employee morale and productivity as a by-product of their safety and health management activities.

Based upon the success of VPP and positive experience with other safety and health program initiatives and in order to broaden the information available, OSHA created Safety and Health Program Guidelines which are applicable to general industry, shipyard, and longshoring activities (53 FR 26790).

## General Guidelines

In general, the guidelines advise and encourage employers to “institute and maintain in their establishments a program which provides systematic policies, procedures, and practices that are adequate to recognize and protect their employees from occupational safety and health hazards.”

This means that the criterion for determining what is needed in a safety and health program at a particular site is: whatever feasible action it takes to protect the workers from the safety and health hazards at that specific site. The form of the safety and health program elements and implementing actions will vary at each site according to the nature of site organization and the nature of the hazards and

potential hazards at the site.

The guidelines further state that “an effective program includes provisions for the systematic identification, evaluation, and prevention or control of general workplace hazards, specific job hazards and potential hazards, which may arise from foreseeable conditions.”

General workplace hazards include such conditions as tripping hazards in walking areas and poor illumination. Specific job hazards may relate to the specific conditions in a job, such as exposure to a saw blade, or to the inherent hazardousness of an operation required in the job, such as the removal of jammed material from a point of operation. Potential hazards include such situations as the possibility of exposure to toxic chemicals as a result of a rupture of piping from the impact of a forklift.

OSHA and other government standards provide important guidance on the identification and control of hazards, but they are not always enough. Although compliance with the law is an important objective of and motive for an effective program. OSHA has found that the most successful programs look beyond government standards and legal requirements. They look for other sources of information about hazards, such as the American National Standards Institute (ANSI), and they use their own seasoned analytical abilities to look for and address hazards not covered by government or other standards. Their motive is to prevent injuries and illnesses and the attendant human and economic costs, whether or not compliance with the law is at issue.

According to the guidelines, “the extent to which the program is described in writing is less important than how effective it is in practice. As the size of a worksite or the complexity of a hazardous operation increases, however, the need for written guidance increases to ensure clear communication of policies and priorities and consistent and fair application of rules.”

OSHA has identified that an effective occupational safety and health program will include the following four elements:

**(1) Management commitment and employee involvement** are complementary. Management commitment provides the motivation force and the resources for organizing and controlling activities

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within an organization. In an effective program, management regards worker safety and health as a fundamental value of the organization and applies its commitment to safety and health protection with as much vigor as to other organizational purposes. Employee involvement provides the means through which workers develop and/or express their own commitment to safety and health protection, for themselves and for their fellow workers.

(2) **Worksite analysis** involves a variety of worksite examinations, to identify not only existing hazards but also conditions and operations in which changes might occur to create hazards. Unawareness of a hazard which stems from failure to examine the worksite is a sure sign that safety and health policies and/or practices are ineffective. Effective management actively analyzes the work and worksite, to anticipate and prevent harmful occurrences.

(3) **Hazard prevention and control** are triggered by a determination that a hazard or potential hazard exists. Where feasible, hazards are prevented by effective design of the job site or job. Where it is not feasible to eliminate them, they are controlled to prevent unsafe or unhealthful exposure. Elimination or control is accomplished in a timely manner, once a hazard or potential hazard is recognized.

(4) **Safety and health training** addresses the safety and health responsibilities of all personnel concerned with the site, whether salaried or hourly. It is often most effective when incorporated into other training about performance requirements and job practices. Its complexity depends on the size and complexity of the worksite, and the nature of the hazards and potential hazards at the site.”

## **Management Commitment and Employee Involvement**

A statement of policy is the foundation of safety and health management. It communicates the value in which safety and health protection is held in the business organization. If it is absorbed by all in the organization, it becomes the basic point of reference for all decisions affecting safety and health. It also becomes the criterion by which the adequacy of protective actions is measured.

A goal, and implementing objectives, make the safety and health policy more specific. Communicating them ensures that all in the organization understand the direction it is taking.

Actions speak louder than words. If top management gives high priority to safety and health protection in practice, other will see and follow. If not, a written or spoken policy of high priority for safety and health will have little credibility, and others will not follow it. Plant managers who wear required personal protective equipment in work areas, perform periodic “housekeeping” inspections, and personally track performance in safety and health protection demonstrate such involvement.

Since an effective program depends on commitment by employees as well as managers, it is important for their concerns to be reflected in it. An effective program includes all personnel in the organization--managers, supervisors, and other--in policy development, planning, and operations.

This does not mean a transfer of responsibility to employees; the Occupational Safety and Health Act of 1970 clearly places responsibility for safety and health protection on the employer. However, employees intimate knowledge of the jobs they perform and the special concerns they bring to the job give them a unique perspective which can be used to make the program more effective.

Employee participation may take any or all of a number of forms. Forms of participation which engage employees more fully in systematic prevention include (1) inspecting for hazards and recommending corrections or controls; (2) analyzing jobs to locate potential hazards and develop safe work procedures; (3) developing or revising general rules for safe work; (4) training newly hired employees in safe work procedures and rules, and/or training their co-workers in newly revised safe work procedures; (5) providing programs and presentations for safety meeting; and (6) assisting in accident investigations.

Employee involvement is effective only when the employer welcomes it and provides protection from any discrimination, including unofficial harassment, to the employees involved. However, inclusion of employees in one or more of the suggested activities, or in any way that fits the individual worksite and provides an employee role that has impact on decisions about safety and health protection, will strengthen the employer’s overall program of safety and health protection.

The guidelines also stress the importance of assigning and communicating “responsibility for all aspects of the program, so that managers, supervisors, and

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employees in all parts of the organization know that performance is expected of them.” A clear statement of that responsibility, as it relates both to organizational goals and objectives and to the specific functions of individuals, is essential. If all persons in an organization do not know what is expected of them, they are unlikely to perform as desired.

In addition, employers need to provide adequate authority and resources to responsible parties, so that assigned responsibilities can be met. For example, a person with responsibility for the safety of a piece of machinery need the authority to shut it down and get it repaired. Needed resources may include adequately trained and equipped personnel and adequate operational and capital expenditure funds.

Stating expectations of managers, supervisors, and other employees means little if management is not serious enough to track performance, to reward it when it is competent and to correct it when it is not. Holding everyone accountable for meeting their responsibilities is at the heart of effective worker safety and health protection. If management states high expectations for such protection but pays greater attention to productivity or other values, safety and health protection will be neglected.

To be effective, a system of accountability must be applied to everyone, from senior management to hourly employees. If some are held firmly to expected performance and others are not, the system will lose its credibility. Those held to expectations will be resentful; those allowed to neglect expectations may increase their neglect. Consequently, the chance of injury and illness will increase.

The people who uphold the program aren't the only ones who need review...the program itself also continually needs to be evaluated. The guidelines suggest that employers review program operations at least annually to evaluate their success in meeting the goal and objectives, so that deficiencies can be identified and the program and/or the objectives can be revised when they do not meet the goal of effective safety and health protection.

### **Worksite Analysis**

The identification of hazards and potential hazards at a worksite requires an active, on-going examination and analysis of work processes and working conditions. Because many hazards are by nature difficult to recognize, effective examination

and analysis will approach the work and working conditions from several perspectives.

The recognition of hazards which could result from changes in work practices or conditions requires especially thorough observation and thought, both from those who perform the work and those who are specially trained for that purpose. It is the general duty of the employer under the Occupational Safety and Health Act of 1970. Successful employers will actively seek the benefit of the experience of others in their industry, through trade associations, equipment manufacturers, and other sources.

Personnel performing regular inspections should, however, possess a degree of experience and competence adequate to recognize hazards in the areas they review and to identify reasonable means for their correction or control. Such competence should normally be expected of ordinary employees who are capable of safely supervising or performing the operations of the specific workplace.

A comprehensive baseline survey of the work and working conditions at a site permits a systematic recording of those hazards and potential hazards which can be recognized without intensive analysis. This baseline record provides a checklist for the more frequent routine inspections. With those hazards under control, attention can be given to the intensive analysis required to recognize less obvious hazards.

Subsequent comprehensive surveys provide an opportunity to step back from the routine check on control of previously recognized hazards and look for others. With the baseline established, these subsequent reviews are one occasion for focusing more intensive analysis in areas with the highest potential for new or less obvious hazards. The frequency with which comprehensive examinations are needed depends on the complexity, hazardousness, and changeability of the worksite. Many successful worksites conduct such reviews on an annual or biannual basis.

Analysis of new facilities, processes, materials, and equipment in the course of their design and early use (sometimes called “change analysis”) provides a check against the introduction of new hazards with them. Effective management ensures the conduct of such analyses during the planning phase, just before their first use, and during the early phases of their use. Numerous specific OSHA standards require inspection of particular equipment, conditions, and activities as

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a safety precaution prior to operation or use. This guideline makes clear that, in effective safety and health programs, this generally recognized inspection practice is applied more broadly to all conditions and activities.

Job hazard analysis is an important tool for more intensive analysis to identify hazards and potential hazards not previously recognized, and to determine protective measures. Through more careful attention to the work processes in a particular job, analysis can recognize new points at which exposure to hazards may occur or at which foreseeable changes in practice or conditions could result in new hazards.

### *Routine Inspections*

Once a comprehensive examination of the workplace has been conducted and hazard controls have been established, routine site safety and health inspections are necessary to ensure that changes in conditions and activities do not create new hazards and that hazard controls remain in place and are effective. Routine industrial hygiene monitoring and sampling are essential components of such inspections in many workplaces.

Personnel conducting these inspections also look out for new or previously unrecognized hazards, but not as thoroughly as those conducting comprehensive surveys.

The frequency and scope of these “routine” inspection depends on the nature and severity of the hazards which could be present and the relative stability and complexity of worksite operations.

### *Reporting System*

The guidelines further instruct employers, “So that employee insight and experience in safety and health protection may be utilized and employee concerns may be addressed, provide a reliable system for employees, without fear of reprisal, to notify management personnel about conditions that appear hazardous and to receive timely and appropriate responses; and encourage employees to use the system.”

Such a system is reliable only if it ensures employees a credible and timely response. The response will include both timely action to address any problems identified and a timely explanation of why particular actions were or were not taken.

### *Accident Review*

Accidents, and incidents in which employees narrowly escape injury, clearly expose hazards. Analysis to identify their causes permits development of measures to prevent future injury or illness. Although a first look may suggest that “employee error” is a major factor, it is rarely sufficient to stop there. Even when an employee has disobeyed a required work practice, it is critical to ask, “Why?” A thorough analysis will generally reveal a number of deeper factors, which permitted or even encouraged an employee’s action. Such factors may include a supervisor’s allowing or pressuring the employee to take short cuts in the interest of production, inadequate equipment, or a work practice which is difficult for the employee to carry out safely. An effective analysis will identify actions to address each of the causal factors in an accident or “near miss” incident.

A review of injury experience over a period of time may reveal patterns of injury with common causes which can be addressed. Correlation of changes in injury experience with changes in safety and health program operations, personnel, and production processes may help to identify causes.

### **Hazard Prevention and Control**

Effective management prevents or controls identified hazards and prepares to minimize the harm from job-related injuries and illnesses when they do occur. The guidelines state, “So that all current and potential hazards, however detected, are corrected or controlled in a timely manner, establish procedures for that purpose, using the following measures:

- (A) engineering techniques where feasible and appropriate;
- (B) procedures for safe work which are understood and followed by all affected parties, as a result of training, positive reinforcement, and, if necessary, endorsement through a clearly communicated disciplinary system;
- (C) provision of personal protective equipment; and
- (D) administrative controls, such as reducing the duration of exposure.”

Hazards, once recognized, are promptly prevented or controlled. Management action in this respect determines the credibility of its safety and health

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management policy and the usefulness of its entire program.

An effective program relies on the means for prevention or control which provides the best feasible protection of employee safety and health. It regards legal requirements as a minimum. When there are alternative ways to address a hazard, effective managers have found that involving employees in discussions of methods can identify useful prevention and control measures, serve as a means for communicating the rationale for decisions made, and encourage employee acceptance of the decisions.

When safe work procedures are the means of protection, ensuring that they are followed becomes critical. Ensuring safe work practices involves discipline in both a positive sense and a corrective sense. Every component of effective safety and health management is designed to create a disciplined environment in which all personnel act on the basis that worker safety and health protection is a fundamental value of the organization. Such an environment depends on the credibility of management's involvement in safety and health matters, inclusion of employees in decisions which affect their safety and health, rigorous worksite analysis to identify hazards and potential hazards, stringent prevention and control measures, and thorough training. In such an environment, all personnel will understand the hazards to which they are exposed, why the hazards pose a threat, and how to protect themselves and others from the hazards. Training for the purpose is reinforced by encouragement of attempt to work safely and by positive recognition of safe behavior.

If, in such a context, an employee, supervisor, or manager fails to follow a safe procedure, it is advisable not only to stop the unsafe action but also to determine whether some condition of the work has made it difficult to follow the procedure or whether some management system has failed to communicate the danger of the action and the means for avoiding it. If the unsafe action was not based on an external condition or a lack of understanding, or if, after such external condition or lack of understanding has been corrected, the person repeats the action, it is essential that corrective discipline be applied. To allow an unsafe action to continue not only continues to endanger the actor and perhaps others; it also undermines the positive discipline of the entire safety and health program. To be effective,

corrective discipline must be applied consistently to all, regardless of role or rank; but it must be applied.

Factors which may affect the time required for correction of hazards include: (1) The complexity of abatement technology; (2) the degree of risk; and (3) the availability of necessary equipment, materials, and staff qualified to complete the correction. Because conditions affecting hazard correction and control vary widely, it is impractical for OSHA to recommend specific time limits for all situations. An effective program corrects hazards in the shortest time permitted by the technology required and the availability of needed personnel and materials. It also provides for interim protection when immediate correction is not possible.

Maintenance of equipment of facilities is an especially important means of anticipating potential hazards and preventing their development. Planning, scheduling, and tracking preventive maintenance activities provides a systematic way of ensuring that they are not neglected.

### *Planning for Emergencies*

Planning and training for emergencies is essential in minimizing the harmful consequences of an accident or other threat if it does occur. If personnel are not so thoroughly trained to react to emergencies that their responses are immediate and precise, they may expose themselves and others to greater danger rather than reduce their exposure. The nature of potential emergencies depends on the nature of site operations and its geographical location. The extent to which training and drills are needed depends on the severity and complexity of the emergencies which may arise.

The availability of first aid and emergency medical care are essential in minimizing the harmful consequences of injuries and illnesses if they do occur. The nature of services needed will depend on the seriousness of injuries or health hazard exposures which may occur. Minimum requirements are addressed in OSHA standards.

### **Training for Employees, Supervisors and Managers**

Education and training are essential means for communicating practical understanding of the requirements of effective safety and health protection to all personnel. Without such understanding,

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managers, supervisors, and other employees will not perform their responsibilities for safety and health protection effectively.

It is not suggested that elaborate or formal training programs solely related to safety and health are always needed. Integrating consideration of safety and health protection into all organizational activities is the key to its effectiveness. Safety and health information and instruction is, therefore, often most effective when incorporated into other training about performance requirements and job practices, such as management training on performance evaluation, problem solving, or managing change; supervisors' training on the reinforcement of good work practices and the correction of poor ones; and employee training on the operation of a particular machine or the conduct of a specific task.

The guidelines emphasize that the employer needs to ensure understanding of safety and health information by employees, supervisors, and managers. The act of training itself is not sufficient to endure practical comprehension. Some means of verifying comprehension is essential. Formal testing, oral questioning, observation, and other means can be useful. In its Voluntary Protection Programs, OSHA has found that observing and interviewing employees, supervisors, and managers are the most effective measures for determining their understanding of what is expected of them in practice.

The commitment and cooperation of employees in preventing and controlling exposure to hazards is critical, not only for their own safety and health but for that of others as well. That commitment and cooperation depends on their understanding what hazards they may be exposed to, why the hazards pose a threat, and how they can protect themselves and others from the hazards. The means of protection which they need to understand include not only the immediate protections from hazards in their work processes and locations, but also the management systems which commit the organization to safety and health protection and provide for employee involvement in hazard identification and prevention.

OSHA's Hazard Communication Standard specifies, for chemical hazards, an employer duty to inform employees about workplace hazards and to provide training that will enable them to avoid work-related injuries or illnesses. Other standards set forth training requirements as well. The rationale for these standards

requirements is applicable in relation to all hazards.

Education and training in safety and health protection is especially critical for employees who are assuming new duties. This fact is reflected by the disproportionately high injury rates among workers newly assigned to work tasks. Although some of these injuries may be attributable to other causes, a substantial number are directly related to inadequate knowledge of job hazards and safe work practices. The Bureau of Labor Statistics reports that in 1979, 48 percent of workers injured had been on the job less than one year. ("The New Worker Factor Associated with Occupational Injuries and Illnesses," U.S. Department of Labor, Bureau of Labor Statistics, 1982.) These figures make clear the importance of training employees on job hazards and safe work practices before they assume new duties.

The extent of hazard information which is needed by employees will vary, but includes at least; (1) The general hazards and safety rules of the worksite; (2) specific hazards, safety rules, and practices related to particular work assignments; and (3) the employee's role in emergency situations. Such information and training is particularly relevant to hazards that may not be readily apparent, to within the ordinary experience and knowledge of, the employee.

The guidelines stress that manager/supervisor training is equally important... "So that supervisors will carry out their safety and health responsibilities effectively, ensure that they understand those responsibilities and the reasons for them, including;

- (A) analyzing the work under their supervision to identify unrecognized potential hazards;
- (B) maintaining physical protections in their work areas; and
- (C) reinforcing employee training on the nature of potential hazards in their work and on needed protective measures, through continual performance feedback and, if necessary, through enforcement of safe work practices."

Managers who understand both the way and the extent to which effective safety and health protection impacts the overall effectiveness of the business itself are far more likely to ensure that the necessary safety and health management systems operates as needed.

# Creating a Plan

The time to start a safety and health management system is **now**. Once an employer has a better picture of what constitutes a good safety and health program, they can address the practical concerns of putting these elements together and coming up with a program to suit their workplace.

After an employer reads and understands the preceding description of the Four-Point Program they should be ready to decide what they want to accomplish and to determine what steps are necessary to achieve their goals. The next step is to determine how and when each step will be done and who will do it.

A plan should consider the company's immediate needs and provide for ongoing, long-lasting worker protection. Once a plan is designed, it is important that the employer follow through and use it in the workplace. What will result is a program to anticipate, identify and eliminate conditions or practices that could result in injuries and illnesses.

Employers who have difficulty deciding where to begin, a phone call to their state Consultation Program will help get them started. A state consultant will survey a workplace for existing or potential hazards. Then, if requested, he or she will determine what the employer needs to make their safety and health program effective. The consultant will work with the employer to develop a plan for making these improvements and to keep the program effective.

## Designating Responsibility

An employer **must** decide who in the company is the most appropriate person to manage the safety and health system. Who can ensure that the program will become an integral part of the business? In many cases it will be the owner. Sometimes it will be a plant manager or key supervisor. It could even be an engineer, personnel specialist, or other staff member.

Whoever is chosen should be committed to workplace safety and health, have the time to develop and manage the program, and be willing to take on the responsibility and accountability that goes with operating an effective program. The individual will need the employer's full cooperation and support, but the ultimate responsibility for safety and health in your workplace rests on the employer.

## Ask for Help

Federal occupational safety and health law allows a state to develop and operate its own occupational safety and health program in place of the Federal OSHA program. It is possible that the regulatory aspect of the law (setting of mandatory minimum standards and conducting inspections of workplaces) is being operated by an employer's state government as opposed to Federal OSHA.

One of the first things to learn is which branch of government, Federal or state, has current jurisdiction over the business. Employers who are not sure what agency is responsible for administering workplace safety and health in their state, should contact the nearest OSHA Area Office to find out. Federal OSHA publications (or comparable state publications) are required for use in safety and health activities, such as:

- OSHA Workplace Poster (*Job Safety and Health Protection* - OSHA 3165). Employers must display the Federal or state OSHA poster in their workplace. This poster is also available in Spanish (*Job Safety and Health Protection* OSHA-3167).
- OSHA standards that apply to the business. Employers need to have a copy of all OSHA standards that apply to their type of business available for reference. Standards are the regulations that OSHA uses to inspect for compliance and should be the baseline for inspections in determining what to do when hazards are identified. Most businesses fall under OSHA's General Industry Standards. Employers who are involved with construction or maritime operations will need the standards that apply to these classifications. (In states with state-run occupational safety and health programs, use the appropriate state standards.)
- Recordkeeping requirements and the necessary forms.
- *Occupational Safety and Health Act of 1970*. Employers may want a copy of this legislation for reference.

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## Gather the Facts

Before making changes in safety and health operations, employers should gather information about the current conditions and business practices that comprise their safety and health program. This information can help identify problems and determine what is needed to solve them.

A workplace assessment should be conducted by the person responsible for the injury and illness prevention program and/or a professional safety and health consultant. The assessment consists of two major activities:

1. A comprehensive safety and health survey of the entire facility will identify any existing or potential safety and health hazards. This initial survey should focus on evaluating workplace conditions with respect to safety and health regulations and generally recognized safe and healthful work practices. It should include checking on the use of any hazardous materials, observing employee work habits and practices, and discussing safety and health problems with employees. See the Self-Inspection Checklists in the "Hazard Assessment Procedures" chapter of this manual, to help get a good start on creating this initial survey.
2. The second major activity is to assess any existing injury and illness prevention program and identify areas that work well and those that need improvement. It's important to gather as much information as possible that relates to safety and health management in the workplace. The following should be included in this review:

**Safety and health activities.** Examine ongoing activities as well as those tried previously, company policy statements, rules (both work and safety), guidelines for proper work practices and procedures, and records of training programs.

**Equipment.** List the major equipment, what it is used for and where it is located. Special attention should be given to inspection schedules, maintenance activities, and plant and office layouts.

**Employee capabilities.** Make an alphabetical list of all employees, showing the date hired, their job descriptions, and experience and training.

**Accident and injury/illness history.** Review first aid cases and workers' compensation insurance

payments and awards, and review your losses. Compare the insurance rate with others in the group. Give special attention to recurring accidents, types of injuries, etc.

After gathering facts, see if any major problem areas emerge such as interruptions in normal operations, too many employees taking too much time off due to illness or injury, too many damaged products, etc. General help with this kind of problem identification can often be obtained from compensation carriers, local safety councils, trade associations, state agencies, major suppliers or similarly situated businesses in the same industry.

If a major problem is discovered, an employer must see what can be done to solve it. Once a problem is identified, the corrective action or a plan to control the problem can be worked on. Immediate action must be taken and a record of what was done should be made and maintained. Even if no major problems are found, an employer shouldn't stop there. Once this is accomplished, it is time to develop a comprehensive safety and health program to avoid any major problems in the future.

## Establish a Four-Point Safety and Health Program

The success of any workplace safety and health program depends on careful planning. This means that an employer must take the time to analyze what they want to accomplish and develop an action plan in order to attain their goals. From this standpoint, the employer can design a step-by-step process to take them from the idea stage to an effective safety and health management system.

Employers need to establish their **management commitment and involve their employees**. No safety and health program will work without this commitment and involvement. The first step is to designate a person to be responsible for the injury and illness prevention program.

Employees should be involved as widely as possible from the beginning. They are most in contact with the potential and actual safety and health hazards at the worksite and will have constructive input on the development of the program. The ultimate success of an injury and illness prevention program will depend on their support.

The program must assign responsibility and accountability to all employees in the organization.

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A good injury and illness prevention program makes it clear that each and every employee, from the employer through the supervisory levels to the line worker, carries responsibility for his or her part of the program. Safety and health duties should be made clear and every individual held accountable for his or her safety- and health-related duties.

Next, employers need to establish and regularly conduct a **worksite analysis**. A successful safety and health program depends on an accurate identification of all the hazards and potential hazards in the workplace. This is an ongoing process that includes routine self-inspections.

Once the worksite analysis has been performed, systems and procedures to **prevent and control hazards** identified through the worksite analysis need to be created. OSHA standards can be helpful because they address controls in order of effectiveness and preference. The hierarchy of controls is engineering, administrative, work practice and PPE. Whenever feasible, engineering, administrative or work practice controls should be instituted even if they do not eliminate the hazard or reduce exposure. Employers should use of such controls in conjunction with PPE will help reduce the hazard or exposure to the lowest practical level. Where no standard exists, creative problem-solving and consultant resources may help create effective controls. The basic formula for controlling workplace hazards, in order of preference, includes:

- 1) **Eliminating the hazard** from the machine, the method, the material or the facility.
- 2) **Abating the hazard** by limiting exposure or controlling it at its source.
- 3) **Training personnel** to be aware of the hazard and to follow safe work procedures to avoid it.
- 4) Prescribing **PPE** for protecting employees against the hazard and ensuring that they not only use it, but that they know how to use it correctly.

The next step is to establish and provide ongoing **training for employees, supervisors and managers** to ensure that everyone at the worksite can recognize hazards and how to control them (See “Training and Instruction” chapter of this manual).

## Develop and Implement the Action Plan

Developing an action plan to build an injury and illness prevention program around the four points

can serve as a “road map” to take the program to where an employer wants it to be. An action plan describes what has to be done, the logical order in which to do it, who is responsible and where you want to be when you finish. It describes problems and solutions, but is not ironclad. An action plan can and should be changed to correspond with changes in the workplace.

A good action plan has two parts:

1. A list of major changes or improvements to make the injury and illness prevention program effective. Each item should be prioritized, have a target date for completion and identify who is responsible for implementation.
2. A specific plan to implement each major change or improvement, including what you want to accomplish, the steps required, who will be assigned to do what and a schedule for completion. (See “Action Plan Worksheet” on page 62)

Once a plan is established, it should be put into action, beginning with the highest priority item. A plan needs to be realistic, manageable and addresses the steps planned for that item. A detailed description of the steps required will help keep track of progress. Employers should keep in mind that they can work on more than one item at a time and that priorities may change as other needs are identified or as the company’s resources change.

Open communication with employees is crucial to the success of the efforts. Their cooperation depends on them understanding what the injury and illness prevention program is all about, why it is important to them and how it affects their work. The more that employees are involved in the changes being made, the smoother the transition will be.

Putting the action plan into operation will be a major step toward implementing an effective injury and illness prevention program.

**Remember, a safety and health program is a plan put into practice.** The program should be kept on track by periodically checking its progress and by calling on a state consultant when assistance is needed.

Any good management system requires periodic review. A careful look at each component of the injury and illness prevention program should be taken to determine what is working well and what changes are needed. Any necessary improvements can be turned into new safety and health objectives for the coming

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year. Developing new action plans to implement these improvements will continue progress toward an effective injury and illness prevention program, reduce safety and health risks, and increase efficiency and profit.

It is important that employers document activities. The best way to evaluate the success of the injury and illness prevention program is to have documentation of what has been done, which provides guidance on how to make it work even better.

Technical assistance may be available to employers through their insurance carrier; fellow business-people; suppliers of durable equipment and raw materials; the local safety council; and many local, state and Federal agencies, including the state on-site Consultation Programs and closest OSHA Area Office.

Establishing a quality safety and health management system will take time and involve some resources, but the results are well worth the effort. Employees will feel reassured because of their employer's commitment to their safety and health on the job. Employers may save money through increased productivity and reduced workers' compensation insurance costs. The tangible and intangible rewards for a solid injury and illness prevention program far outweigh the cost of an accident, injury or workplace fatality.

### Self Inspection

The most widely accepted way to identify hazards is to conduct safety and health inspections because the only way to be certain of an actual situation is to look at it directly from time to time.

Employers should begin a program of self-inspection in their own workplace. Self-inspection is essential to know where probable hazards exist and whether they are under control.

**It is important to not spend time with items that have no application to the business.** Each item should be seen by the employer or their designee and leave nothing to memory or chance. Everything should be written down including what is seen or not seen and what should be done about it.

Information should be added from the completed checklists to injury information, employee information, and process and equipment information to build a foundation to help determine what problems exist. Then, as the employer uses the OSHA

standards in their problem-solving process, it will be easier to determine the actions needed to solve these problems.

Once the hazards have been identified, control procedures should be instituted as described above under "Hazard Prevention and Control" on page 44.

Self-inspections should cover safety and health issues in the following areas:

**Processing, Receiving, Shipping and Storage** - equipment, job planning, layout, heights, floor loads, projection of materials, material handling and storage methods, training for material handling equipment.

**Building and Grounds Conditions** - floors, walls, ceilings, exits, stairs, walkways, ramps, platforms, driveways, aisles.

**Housekeeping Program** - waste disposal, tools, objects, materials, leakage and spillage, cleaning methods, schedules, work areas, remote areas, storage areas.

**Electricity** - equipment, switches, breakers, fuses, switch-boxes, junctions, special fixtures, circuits, insulation, extensions, tools, motors, grounding, national electric code compliance.

**Lighting** - type, intensity, controls, conditions, diffusion, location, glare and shadow control.

**Heating and Ventilation** - type, effectiveness, temperature, humidity, controls, natural and artificial ventilation and exhausting.

**Machinery** - points of operation, flywheels, gears, shafts, pulleys, key ways, belts, couplings, sprockets, chains, frames, controls, lighting for tools and equipment, brakes, exhausting, feeding, oiling, adjusting, maintenance, lockout/tagout, grounding, work space, location, purchasing standards.

**Personnel** - training, including hazard identification training; experience; methods of checking machines before use; type of clothing; PPE; use of guards; tool storage; work practices; methods for cleaning, oiling, or adjusting machinery.

**Hand and Power Tools** - purchasing standards, inspection, storage, repair, types, maintenance, grounding, use and handling.

**Chemicals** - storage, handling, transportation,

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spills, disposals, amounts used, labeling, toxicity or other harmful effects, warning signs, supervision, training, protective clothing and equipment, hazard communication requirements.

**Fire Prevention** - extinguishers, alarms, sprinklers, smoking rules, exits, personnel assigned, separation of flammable materials and dangerous operations, explosion-proof fixtures in hazardous locations, waste disposal and training of personnel.

**Maintenance** - provide regular and preventive maintenance on all equipment used at the worksite, recording all work performed on the machinery and by training personnel on the proper care and servicing of the equipment.

**PPE** - type, size, maintenance, repair, age, storage, assignment of responsibility, purchasing methods, standards observed, training in care and use, rules of use, method of assignment.

**Transportation** - motor vehicle safety, seat belts, vehicle maintenance, safe driver programs.

**First Aid Program/Supplies** - medical care facilities locations, posted emergency phone numbers, accessible first aid kits.

**Evacuation Plan** - establish and practice procedures for an emergency evacuation, e.g., fire, chemical/biological incidents, bomb threat; include escape procedures and routes, critical plant operations, employee accounting following an evacuation, rescue and medical duties and ways to report emergencies.

## Documenting Activities

It is important that employers document their activities in all elements of the Four-Point Workplace Program. Essential records, including those legally required for workers' compensation, insurance audits and government inspections must be maintained as long as the actual need exists or as required by law. Keeping records of activities, such as policy statements, training sessions, safety and health meetings, information distributed to employees, and medical arrangements made, is greatly encouraged. Maintaining essential records also will demonstrate sound business management as supporting proof for credit applications, for showing "good faith" in reducing any proposed penalties from OSHA inspections, for insurance and other audits, and aid

efficient review of your current safety and health activities for better control of operations and to plan improvements.

## Safety and Health Recordkeeping

Records of sales, costs, profits and losses are essential to all successful businesses. They enable the owner or manager to learn from experience and to make corrections for future operations. Records of accidents, related injuries, illnesses and property losses can serve the same purpose, if they are used in the same way. The primary purpose of OSHA-required recordkeeping is to retain information about accidents that have happened to help determine the causes and develop procedures to prevent a recurrence.

### *Injury/Illness Records*

OSHA rules for recording and reporting occupational injuries and illnesses affect 1.4 million establishments. Small businesses with 10 or fewer employees throughout the year are exempt from most of the requirements of the OSHA recordkeeping rules, as are a number of specific industries in the retail, service, finance, insurance and real estate sectors that are classified as low-hazard. Detailed information about OSHA recordkeeping rules can be found in Chapter 5 of this manual.

OSHA recordkeeping can help the small business employer evaluate the success of safety and health activities. Success can be measured by a reduction or elimination of employee injuries and illnesses during a calendar year.

The OSHA recordkeeping system has five steps:

1. Obtain a report on every injury or job-related illness requiring medical treatment (other than basic first aid).
2. Record each injury or job-related illness on OSHA Form 300 (Log of Work-Related Injuries and Illnesses) using the instructions provided.
3. Prepare a supplementary record of occupational injuries and illnesses for recordable cases on OSHA Form 301 (Injury and Illness Incident Report).
4. Every year, prepare an annual summary using OSHA Form 300A (Summary of Work-Related Injuries and Illnesses). Post it no later than February 1, and keep it posted until May 1. A good place to post it is next to the OSHA Workplace Poster.

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5. Retain these records for at least five years.

Periodically employers should review these records to look for any patterns or repeat situations. These records can help to identify high-risk areas that require immediate attention.

Basic OSHA recordkeeping requirements address only injuries and illnesses, so you might consider expanding your own records to include all incidents, including those where no injury or illness resulted. This information may assist you in pinpointing unsafe conditions and/or procedures. Safety councils, insurance carriers and others can assist you in instituting such a system.

The employer is required to report to OSHA within eight hours of the accident, all work-related fatalities or multiple hospitalizations that involve three or more employees.

Even if your business is exempt from routine recordkeeping requirements, you may be selected by the Federal Bureau of Labor Statistics (BLS) or a related state agency for inclusion in an annual sample survey. You will receive a letter directly from the agency with instructions, if you are selected.

#### *Exposure Records and Others*

In addition to injury/illness records, certain OSHA standards require records on the exposure of employees to toxic substances and hazardous exposures, physical examination reports and employment records. As you identify hazards, you will be able to determine whether these requirements apply to your workplace. Your records should be used in conjunction with your control procedures and with your self-inspection activity. They should not be considered merely as bookkeeping.

There are three basic methods for assessing safety and health program effectiveness:

- Checking documentation of activity;
- Interviewing employees at all levels for knowledge, awareness, and perceptions; and
- Reviewing site conditions and, where hazards are found, finding the weaknesses in management systems that allowed the hazards to occur or to be “uncontrolled.”

Some elements of the safety and health program are best assessed using one of these methods. Others lend themselves to assessment by two or all three methods.

## **Documentation**

Checking documentation is a standard audit technique. It is particularly useful for understanding whether the tracking of hazards to correction is effective. It can also be used to determine the quality of certain activities, such as self-inspections or routine hazard analysis.

Inspection records can tell the evaluator whether serious hazards are being found, or whether the same hazards are being found repeatedly. If serious hazards are not being found and accidents keep occurring, there may be a need to train inspectors to look for different hazards. If the same hazards are being found repeatedly, the problem may be more complicated. Perhaps the hazards are not being corrected. If so, this would suggest a tracking problem or a problem in accountability for hazard correction.

If certain hazards recur repeatedly after being corrected, someone is not taking responsibility for keeping those hazards under control. Either the responsibility is not clear, or those who are responsible are not being held accountable.

## **Employee Interviews**

Talking to randomly selected employees at all levels will provide a good indication of the quality of employee training and of employee perceptions of the program. If safety and health training is effective, employees will be able to tell the employer about the hazards they work with and how they protect themselves and others by keeping those hazards controlled. Every employee should also be able to say precisely what he or she is expected to do as part of the program. And all employees should know where to go and the route to follow in an emergency.

Employee perceptions can provide other useful information. An employee’s opinion of how easy it is to report a hazard and get a response will tell you a lot about how well the hazard reporting system is working. If employees indicate that the system for enforcing safety and health rules and safe work practices is inconsistent or confusing, you will know that the system needs improvement.

Interviews should not be limited to hourly employees. Much can be learned from talking with first-line supervisors. It is also helpful to query line managers about their understanding of their safety and health responsibilities.

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## Site Conditions and Root Causes of Hazards

Examining the conditions of the workplace can reveal existing hazards. But it can also provide information about the breakdown of those management systems meant to prevent or control these hazards.

Looking at conditions and practices is a well established technique for assessing the effectiveness of safety and health programs. For example, let's say that in areas where PPE is required, the employer sees large and understandable signs communicating this requirement and all employees -- with no exceptions -- wearing equipment properly. The employer has obtained valuable visual evidence that the PPE program is working.

Another way to obtain information about safety and health program management is through root analysis of observed hazards. This approach to hazards is much like the most sophisticated accident investigation techniques, in which many contributing factors are located and corrected or controlled.

When evaluating each part of a worksite's safety and health program, use one or more of the above methods, as appropriate.

The key to a successful and efficient evaluation is to combine elements when using each technique. First review the documentation available relating to each element. Then walk through the worksite to observe how effectively what is on paper appears to be implemented. While walking around, interview employees to verify that what you read and what you saw reflects the state of the safety and health program. The following will identify the components found in each element of a quality safety and health program and will describe useful ways to assess these components.

### 1. Assessing the Key Components of Leadership, Participation, and Line Accountability

#### o WORKSITE POLICY ON SAFE AND HEALTHFUL WORKING CONDITIONS

##### - Documentation

If there is a written policy, does it clearly declare the priority of worker safety and health over other organizational values, such as production?

##### - Interviews

When asked, can employees at all levels

express the worksite policy on worker safety and health?

If the policy is written, can hourly employees tell you where they have seen it?

Can employees at all levels explain the priority of worker safety and health over other organizational values, as the policy intends?

#### - Site Conditions and Root Causes of Hazards

Have injuries occurred because employees at any level did not understand the importance of safety precautions in relation to other organizational values, such as production?

#### o GOAL AND OBJECTIVES FOR WORKER SAFETY AND HEALTH

##### - Documentation

If there is a written goal for safety and health program, is it updated annually?

If there are written objectives, such as an annual plan to reach that goal, are they clearly stated?

If managers and supervisors have written objectives, do these documents include objectives for the safety and health program?

##### - Interviews

Do managers and supervisors have a clear idea of their objectives for worker safety and health?

Do hourly employees understand the current objectives of the safety and health program?

#### - Site Conditions and Root Causes of Hazards (Only helpful in a general sense.)

#### o VISIBLE TOP MANAGEMENT LEADERSHIP

##### - Documentation

Are there one or more written programs which involve top-level management in safety and health activities? For example, top management can receive and sign off on inspection reports either after each inspection or in a quarterly summary.

These reports can then be posted for employees to see. Top management can provide “open door” times each week or each month for employees to come in to discuss safety and health concerns. Top management can reward the best safety suggestions each month or at other specified intervals.

*- Interviews*

Can hourly employees describe how management officials are involved in safety and health activities?

Do hourly employees perceive that managers and supervisors follow safety and health rules and work practices, such as wearing appropriate personal protective equipment?

*- Site Conditions and Root Causes of Hazards*

When employees are found not wearing required personal protective equipment or not following safe work practices, have any of them said that managers or supervisors also did not follow these rules?

o EMPLOYEE PARTICIPATION

*- Documentation*

Are there one or more written programs that provide for employee participation in decisions affecting their safety and health?

Is there documentation of these activities; for example, employee inspection reports, minutes of joint employee-management or employee committee meetings?

Is there written documentation of any management response to employee safety and health program activities?

Does the documentation indicate that employee safety and health activities are meaningful and substantive?

Are there written guarantees of employee protection from harassment resulting from safety and health program involvement?

*- Interviews*

Are employees aware of ways they can participate in decisions affecting their safety and health?

Do employees appear to take pride in the achievements of the worksite safety and health program?

Are employees comfortable answering questions about safety and health programs and conditions at the site?

Do employees feel they have the support of management for their safety and health activities?

*- Site Conditions and Root Causes of Hazards (Not applicable.)*

o ASSIGNMENT OF RESPONSIBILITY

*- Documentation*

Are responsibilities written out so that they can be clearly understood?

*- Interviews*

Do employees understand their own responsibilities and those of others?

*- Site Conditions and Root Causes of Hazards*

Are hazards caused in part because no one was assigned the responsibility to control or prevent them?

Are hazards allowed to exist in part because someone in management did not have the clear responsibility to hold a lower-level manager or supervisor accountable for carrying out assigned responsibilities?

o ADEQUATE AUTHORITY AND RESOURCES

*- Documentation (Only generally applicable.)*

*- Interviews*

Do safety staff members or any other personnel with responsibilities for ensuring safe operation of production equipment have the authority to shut down that equipment or to order maintenance or parts?

Do employees talk about not being able to get safety or health improvements because of cost?

Do employees mention the need for more safety or health personnel or expert consultants?

- *Site Conditions and Root Causes of Hazards*

Do recognized hazards go uncorrected because of lack of authority or resources?

Do hazards go unrecognized because greater expertise is needed to diagnose them?

o ACCOUNTABILITY OF MANAGERS, SUPERVISORS, AND HOURLY EMPLOYEES

- *Documentation*

Do performance evaluations for all line managers and supervisors include specific criteria relating to safety and health protection?

Is there documented evidence of employees at all levels being held accountable for safety and health responsibilities, including safe work practices? Is accountability accomplished through either performance evaluations affecting pay and/or promotions or disciplinary actions?

- *Interviews*

When you ask employees what happens to people who violate safety and health rules or safe work practices, do they indicate that rule breakers are clearly and consistently held accountable?

Do hourly employees indicate that supervisors and managers genuinely care about meeting safety and health responsibilities?

When asked what happens when rules are broken, do hourly employees complain that supervisors and managers do not follow rules and never are disciplined for infractions?

- *Site Conditions and Root Causes of Hazards*

Are hazards occurring because employees, supervisors, and/or managers are not being held accountable for their safety and health responsibilities?

Are identified hazards not being corrected because those persons assigned the responsibility are not being held accountable?

o EVALUATION OF CONTRACTOR PROGRAMS

- *Documentation*

Are there written policies for onsite contractors?

Are contractor rates and safety and health programs reviewed before selection?

Do contracts require the contractor to follow site safety and health rules?

Are there means for removing a contractor who violates the rules?

- *Interviews*

Do employees describe hazardous conditions created by contract employees?

Are employees comfortable reporting hazards created by contractors?

Do contract employees feel they are covered by the same, or the same quality, safety and health program as regular site employees.

- *Site Conditions and Root Causes of Hazards*

Do areas where contractors are working appear to be in the same condition as areas where regular site employees are working? Better? Worse?

Does the working relationship between site and contract employees appear cordial?

**2. Assessing the Key Components of Worksite Analysis**

o COMPREHENSIVE SURVEYS, CHANGE ANALYSIS, ROUTINE HAZARD ANALYSIS

- *Documentation*

Are there documents that provide comprehensive analysis of all potential safety and health hazards of the worksite?

Are there documents that provide both the analysis of potential safety and health

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hazards for each new facility, equipment, material, or process and the means for eliminating or controlling such hazards?

Does documentation exist of the step-by-step analysis of the hazards in each part of each job, so that you can clearly discern the evolution of decisions on safe work procedures?

If complicated processes exist, with a potential for catastrophic impact from an accident but low probability of such accident (as in nuclear power or chemical production), are there documents analyzing the potential hazards in each part of the processes and the means to prevent or control them?

If there are processes with a potential for catastrophic impact from an accident but low probability of an accident, have analyses such as “fault tree” or “what if?” been documented to ensure enough back-up systems for worker protection in the event of multiple control failure?

*- Interviews*

Do employees complain that new facilities, equipment, materials, or processes are hazardous?

Do any employees say they have been involved in job safety analysis or process review and are satisfied with the results?

Does the safety and health staff indicate ignorance of existing or potential hazards at the worksite?

Does the occupational nurse/doctor or other health care provider understand the potential occupational diseases and health effects in this worksite?

*- Site Conditions and Root Causes of Hazards*

Have hazards appeared where no one in management realized there was potential for their development?

Where workers have faithfully followed job procedures, have accidents or near-misses occurred because of hidden hazards?

Have hazards been discovered in the design of new facilities, equipment, materials, and processes after use has begun?

Have accidents or near-misses occurred when two or more failures in the hazard control system occurred at the same time, surprising everyone?

o REGULAR SITE SAFETY AND HEALTH INSPECTIONS

*- Documentation*

If inspection reports are written, do they show that inspections are done on a regular basis?

Do the hazards found indicate good ability to recognize those hazards typical of this industry?

Are hazards found during inspections tracked to complete correction?

What is the relationship between hazards uncovered during inspections and those implicated in injuries or illness?

*- Interviews*

Do employees indicate that they see inspections being conducted, and that these inspections appear thorough?

*- Site Conditions and Root Causes of Hazards*

Are the hazards discovered during accident investigations ones that should have been recognized and corrected by the regular inspection process?

o EMPLOYEE REPORTS OF HAZARDS

*- Documentation*

Is the system for written reports being used frequently?

Are valid hazards that have been reported by employees tracked to complete correction?

Are the responses timely and adequate?

*- Interviews*

Do employees know whom to contact and what to do if they see something they believe to be hazardous to themselves or

coworkers?

Do employees think that responses to their reports of hazards are timely and adequate?

Do employees say that sometimes when they report a hazard, they hear nothing further about it?

Do any employees say that they or other workers are being harassed, officially or otherwise, for reporting hazards?

*- Site Conditions and Root Causes of Hazards*

Are hazards ever found where employees could reasonably be expected to have previously recognized and reported them?

When hazards are found, is there evidence that employees had complained repeatedly but to no avail?

o ACCIDENT AND NEAR-MISS INVESTIGATIONS

*- Documentation*

Do accident investigation reports show a thorough analysis of causes, rather than a tendency automatically to blame the injured employee?

Are near-misses (property damage or close calls) investigated using the same techniques as accident investigations?

Are hazards that are identified as contributing to accidents or near-misses tracked to correction?

*- Interviews*

Do employees understand and accept the results of accident and near-miss investigations?

Do employees mention a tendency on management's part to blame the injured employee?

Do employees believe that all hazards contributing to accidents are corrected or controlled?

*- Site Conditions and Root Causes of Hazards*

Are accidents sometimes caused at least

partly by factors that might also have contributed to previous near-misses that were not investigated or accidents that were too superficially investigated?

o INJURY AND ILLNESS PATTERN ANALYSIS

*- Documentation*

In addition to the required OSHA log, are careful records kept of first aid injuries and/or illnesses that might not immediately appear to be work-related?

Is there any periodic, written analysis of the patterns of near-misses, injuries, and/or illnesses over time, seeking previously unrecognized connections between them that indicate unrecognized hazards needing correction or control?

Looking at the OSHA 300 log and, where applicable, first aid logs, are there patterns of illness or injury that should have been analyzed for previously undetected hazards?

If there is an occupational nurse/doctor on the worksite, or if employees suffering from ordinary illness are encouraged to see a nearby health care provider, are the lists of those visits analyzed for clusters of illness that might be work-related?

*- Interviews*

Do employees mention illnesses or injuries that seem work-related to them but that have not been analyzed for previously undetected hazards?

*- Site Conditions and Root Causes of Hazards (Not generally applicable.)*

3. Assessing the Key Components of Hazard Prevention and Control

o APPROPRIATE USE OF ENGINEERING CONTROLS, WORK PRACTICES, PERSONAL PROTECTIVE EQUIPMENT, AND ADMINISTRATIVE CONTROLS

*- Documentation*

If there are documented comprehensive surveys, are they accompanied by a plan for systematic prevention or control of hazards found?

If there is a written plan, does it show

that the best method of hazard protection was chosen?

Are there written safe work procedures?

If respirators are used, is there a written respirator program?

- *Interviews*

Do employees say they have been trained in and have ready access to reliable, safe work procedures?

Do employees say they have difficulty accomplishing their work because of unwieldy controls meant to protect them?

Do employees ever mention personal protective equipment, work procedures, or engineering controls as interfering with their ability to work safely?

Do employees who use PPE understand why they use it and how to maintain it?

Do employees who use PPE indicate that the rules for PPE use are consistently and fairly enforced?

Do employees indicate that safe work procedures are fairly and consistently enforced?

- *Site Conditions and Root Causes of Hazards*

Are controls meant to protect workers actually putting them at risk or not providing enough protection?

Are employees engaging in unsafe practices or creating unsafe conditions because rules and work practices are not fairly and consistently enforced?

Are employees in areas designated for PPE wearing it properly, with no exceptions?

Are hazards that could feasibly be controlled through improved design being inadequately controlled by other means?

o FACILITY AND EQUIPMENT PREVENTIVE MAINTENANCE

- *Documentation*

Is there a preventive maintenance schedule that provides for timely

maintenance of the facilities and equipment?

Is there a written or computerized record of performed maintenance that shows the schedule has been followed?

Do maintenance request records show a pattern of certain facilities or equipment needing repair or breaking down before maintenance was scheduled or actually performed?

Do any accident/incident investigations list facility or equipment breakdown as a major cause?

- *Interviews*

Do employees mention difficulty with improperly functioning equipment or facilities in poor repair?

Do maintenance employees believe that the preventive maintenance system is working well?

Do employees believe that hazard controls needing maintenance are properly cared for?

- *Site Conditions and Root Causes of Hazards*

Is poor maintenance a frequent source of hazards?

Are hazard controls in good working order?

Does equipment appear to be in good working order?

o ESTABLISHING A MEDICAL PROGRAM

- *Documentation*

Are good, clear records kept of medical testing and assistance?

- *Interviews*

Do employees say that test results were explained to them?

Do employees feel that more first aid or CPR-trained personnel should be available?

Are employees satisfied with the medical arrangements provided at the site or elsewhere?

Does the occupational health care provider understand the potential hazards of the worksite, so that occupational illness symptoms can be recognized?

*- Site Conditions and Root Causes of Hazards*

Have further injuries or worsening of injuries occurred because proper medical assistance (including trained first aid and CPR providers) was not readily available?

Have occupational illnesses possibly gone undetected because no one with occupational health specialty training reviewed employee symptoms as part of the medical program?

o EMERGENCY PLANNING AND PREPARATION

*- Documentation*

Are there clearly written procedures for every likely emergency, with clear evacuation routes, assembly points, and emergency telephone numbers?

*- Interviews*

When asked about any kind of likely emergency, can employees tell you exactly what they are supposed to do and where they are supposed to go?

*- Site Conditions and Root Causes of Hazards*

Have hazards occurred during actual or simulated emergencies due to confusion about what to do?

In larger worksites, are emergency evacuation routes clearly marked?

Are emergency telephone numbers and fire alarms in prominent, easy to find locations?

**4. Assessing the Key Components of Safety and Health Training**

o ENSURING THAT ALL EMPLOYEES UNDERSTAND HAZARDS

*- Documentation*

Does the written training program include complete training for every employee in emergency procedures and in all potential

hazards to which employees may be exposed?

Do training records show that every employee received the planned training?

Do the written evaluations of training indicate that the training was successful, and that the employees learned what was intended?

*- Interviews*

Can employees tell you what hazards they are exposed to, why those hazards are a threat, and how they can help protect themselves and others?

If PPE is used, can employees explain why they use it and how to use and maintain it properly?

Do employees feel that health and safety training is adequate?

*- Site Conditions and Root Causes of Hazards*

Have employees been hurt or made ill by hazards of which they were completely unaware, or whose dangers they did not understand, or from which they did not know how to protect themselves?

Have employees or rescue workers ever been endangered by employees not knowing what to do or where to go in a given emergency situation?

Are there hazards in the workplace that exist, at least in part, because one or more employees have not received adequate hazard control training?

Are there any instances of employees not wearing required PPE properly because they have not received proper training? Or because they simply don't want to and the requirement is not enforced?

o ENSURING THAT SUPERVISORS UNDERSTAND THEIR RESPONSIBILITIES

*- Documentation*

Do training records indicate that all supervisors have been trained in their responsibilities to analyze work under their supervision for unrecognized hazards, to maintain physical protections,

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and to reinforce employee training through performance feedback and, where necessary, enforcement of safe work procedures and safety and health rules?

*- Interviews*

Are supervisors aware of their responsibilities?

Do employees confirm that supervisors are carrying out these duties?

*- Site Conditions and Root Causes*

Has a supervisor's lack of understanding of safety and health responsibilities played a part in creating hazardous activities or conditions?

o ENSURING THAT MANAGERS UNDERSTAND THEIR SAFETY AND HEALTH RESPONSIBILITIES

*- Documentation*

Do training plans for managers include training in safety and health responsibilities?

Do records indicate that all line managers have received this training?

*- Interviews*

Do employees indicate that managers know and carry out their safety and health responsibilities?

*- Site Conditions and Root Causes of Hazards*

Has an incomplete or inaccurate understanding by management of its safety and health responsibilities played a part in the creation of hazardous activities or conditions?

Effective safety and health program evaluation is a dynamic process. If the employer sees or hears about aspects of the program not covered in their document review, they should ask to receive the documents, if any, relating to these aspects. If the documents included program elements not visible during the walk around the site and/or not known to employees, the employer should probe further. Utilizing this cross-

checking technique should result in an effective, comprehensive evaluation of the worksite's safety and health program.

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# Safety and Health Management Systems Checklist

## Management Commitment and Employee Involvement

- Develop and communicate a safety and health policy to all employees.
- Demonstrate management commitment by instilling accountability for safety and health, obeying safety rules and reviewing accident reports.
- Conduct regular safety and health meetings involving employees, managers and supervisors.
- Assign responsible person(s) to coordinate safety and health activities.
- Integrate safety and health into business practices (e.g., purchases, contracts, design and development).
- Involve employees in safety and health related activities (e.g., self-inspections, accident investigations and developing safe practices).
- Recognize employees for safe and healthful work practices.

## Worksite Analysis

- Evaluate all workplace activities and processes for hazards.
- Reevaluate workplace activities when there are changes in:
  - Processes
  - Materials
  - Machinery
- Conduct on-site inspections, identify hazards and take corrective actions.
- Provide a hazard reporting system for employees to report unsafe and unhealthful conditions.
- Investigate all accidents and near misses to determine their root causes.

## Hazard Prevention and Control

- Eliminate and control workplace hazards (e.g., engineering controls, workstation design and work practices).
- Establish a preventive maintenance program.
- Keep employees informed of safety and health activities and conditions.
- Plan for emergencies (e.g., create an evacuation plan, train employees and conduct fire drills).
- Record and analyze occupational injuries and illnesses.

## Training for Employees, Supervisors and Managers

- Provide training on specific safe work practices before an employee begins work.
- Provide additional training for new work processes and when accidents and near misses occur.
- Provide refresher training on a routine basis.

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# My Action Plan Worksheet

An action plan is a specific, written description of problems and solutions-it can and should be changed to correspond with changes in the workplace. Use this action plan worksheet to generate an overall list of major changes or improvements needed to make your Injury and Illness Prevention Program effective. Assign each item a priority and a target date for completion, and identify the person who will monitor or direct each action.

Major Action Steps to be Taken	Priority (Assign Each Step a Number)	Projected Completion Date	Actual Completion Date

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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# Task Specific Worksheet

Instructions \_\_\_\_\_

Goal to be accomplished \_\_\_\_\_

Use this worksheet to document and track each major change or improvement listed in your IIPP Action Plan and work out a specific plan for making that change. Write out what you want to accomplish, the steps required, who would be assigned to do what, and when you plan to be finished. This part of the action plan helps you keep track of program improvement so that details do not slip through the cracks.

Specific Steps Required	Persons Assigned	Projected Completion Date	Problems/Delays Encountered	Actual Completion Date

# Accident Investigation Report

Company Name		Facility or Job		Name of Injured or Driver	
Age	Employee in Previous Accident <input type="checkbox"/> Yes <input type="checkbox"/> No	Occupation	Employment Date	Date of Accident/Hour	<input type="checkbox"/> am <input type="checkbox"/> pm

Exact Location \_\_\_\_\_

Describe injury or damage \_\_\_\_\_

Was injured or driver acting in regular line of duty?  Yes  No (explain) \_\_\_\_\_

Name of Witness(es) \_\_\_\_\_

## Unsafe Act

- Operating without authority; failure to secure or warn
- Operating or working at unsafe speed
- Making safety devices inoperative
- Using unsafe equipment, hands in place of equipment, or equipment unsafely
- Failure to use safe attire or personal protective equipment
- Improper:  turn  lane usage  backing  interval  signal
- Unsafe loading, placing, mixing, combining, etc.
- Taking unsafe position or posture
- Working on moving or dangerous equipment
- Distracting, teasing, abusing, startling, etc.
- Lack of job training or instruction
- Judgment
- Other: \_\_\_\_\_

## Unsafe Conditions

- Improper guarding (unguarding, inadequately guarded, guard removal, etc.)
- Defective substances or equipment (broken, poorly designed, slippery etc.)
- Hazardous arrangement (unsafe piled material, poor layout, poor housekeeping, no aisle markings, etc.)
- Improper dress or apparel (goggles, gloves, shoes, masks, sleeves, etc.)
- Defective:  brakes  motor  lights  wipers  steering  wheels or rims  other:
- Improper illumination (none, glaring light, etc.)
- Improper ventilation (poor, dusty, gassy, high humidity, etc.)
- Poor road or visibility conditions

## Steps Taken to Prevent a Recurrence

- Instructed employee  Supplied safeguard  Eliminated condition  Guarded machine
- Warned employee  Supplied pers. prot. equipt.  Repaired condition
- Other action \_\_\_\_\_
- Reported condition to: \_\_\_\_\_

Supervisor Signature \_\_\_\_\_ Date \_\_\_\_\_ Employee \_\_\_\_\_ Date \_\_\_\_\_  
 Forward to Safety Manager after completion. Must be retained for 3 years

# Injury and Illness Prevention

## Responsibility

The Injury and Illness Prevention (IIP) Program administrator,

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*Program Administrator*

has the authority and the responsibility for implementing and maintaining this IIP Program for

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*Establishment Name*

Managers and supervisors are responsible for implementing and maintaining the IIP Program in their work areas and for answering worker questions about the IIP Program. A copy of this IIP Program is available from each manager and supervisor.

## Compliance

All workers, including managers and supervisors, are responsible for complying with safe and healthful work practices. Our system of ensuring that all workers comply with these practices include one or more of the following checked practices:

- Informing workers of the provisions of our IIP Program.
- Evaluating the safety performance of all workers.
- Recognizing employees who perform safe and healthful work practices.
- Providing training to workers whose safety performance is deficient.
- Disciplining workers for failure to comply with safe and healthful work practices.

## Communication

All managers and supervisors are responsible for communicating with all workers about occupational safety and health in a form readily understandable by all workers. Our communication system encourages all workers to inform their managers and supervisors about workplace hazards without fear of reprisal.

Our communication system includes one or more of the following items:

- New worker orientation including a discussion of safety and health policies and procedures.
- Review of our IIP Program.
- Training programs.
- Regularly scheduled safety meetings.
- Posted or distributed safety information.
- A system for workers to anonymously inform management about workplace hazards.

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\_\_\_\_\_ Our establishment has less than ten employees and communicates with and instructs employees orally about general safe work practices and hazards unique to each employee's job assignment.

### **Hazard Assessment**

Periodic inspections to identify and evaluate workplace hazards shall be performed by a competent observer in the following areas of our workplace:

Periodic inspections are performed according to the following schedule:

1. When we initially established our IIP Program;
2. When new substances, processes, procedures or equipment which present potential new hazards are introduced into our workplace;
3. When new, previously unidentified hazards are recognized;
4. When occupational injuries and illnesses occur; and
5. Whenever workplace conditions warrant an inspection.

### **Accident / Exposure Investigations**

Procedures for investigating workplace accidents and hazardous substance exposures include:

1. Interviewing injured workers and witnesses;
2. Examining the workplace for factors associated with the accident/exposure;
3. Determining the cause of the accident/exposure;
4. Taking corrective action to prevent the accident/exposure from reoccurring; and
5. Recording the findings and actions taken.

### **Hazard Correction**

Unsafe or unhealthy work conditions, practices or procedures shall be corrected in a timely manner based on the severity of the hazards. Hazards shall be corrected according to the following procedures:

1. When observed or discovered; and
2. When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, we will remove all exposed workers from the area except those necessary to correct the existing condition. Workers who are required to correct the hazardous condition shall be provided with the necessary protection.

### **Training and Instruction**

All workers, including managers and supervisors, shall have training and instruction on general and job-specific safety and health practices. Training and instruction is provided:

1. When the IIP Program is first established;
2. To all new workers, except for construction workers who are provided training through a construction industry occupational safety and health training program approved by OSHA;
3. To all workers given new job assignments for which training has not previously provided;
4. Whenever new substances, processes, procedures or equipment are introduced to the workplace and

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represent a new hazard;

5. Whenever the employer is made aware of a new or previously unrecognized hazard;
6. To supervisors to familiarize them with the safety and health hazards to which workers under their immediate direction and control may be exposed; and
7. To all workers with respect to hazards specific to each employee's job assignment.

General workplace safety and health practices include, but are not limited to, the following:

1. Implementation and maintenance of the IIP Program.
2. Emergency action and fire prevention plan.
3. Provisions for medical services and first aid including emergency procedures.
4. Prevention of musculoskeletal disorders, including proper lifting techniques.
5. Proper housekeeping, such as keeping stairways and aisles clear, work areas neat and orderly, and promptly cleaning up spills.
6. Prohibiting horseplay, scuffling, or other acts that tend to adversely influence safety.
7. Proper storage to prevent stacking goods in an unstable manner and storing goods against doors, exits, fire extinguishing equipment and electrical panels.
8. Proper reporting of hazards and accidents to supervisors.
9. Hazard communication, including worker awareness of potential chemical hazards, and proper labeling of containers.
10. Proper storage and handling of toxic and hazardous substances including prohibiting eating or storing food and beverages in areas where they can become contaminated.

### **Recordkeeping**

We have checked one of the following categories as our recordkeeping policy.

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\_\_\_\_\_ Category 1. Our establishment has twenty or more workers or has a workers' compensation experience modification rate of greater than 1.1 and is not on a designated low hazard industry list. We have taken the following steps to implement and maintain our IIP Program:

1. Records of hazard assessment inspections, including the person(s) conducting the inspection, the unsafe conditions and work practices that have been identified and the action taken to correct the identified unsafe conditions and work practices, are recorded on a hazard assessment and correction form; and
2. Documentation of safety and health training for each worker, including the worker's name or other identifier, training dates, type(s) of training, and training providers. are recorded on a worker training and instruction form.

Inspection records and training documentation will be maintained according to the following checked schedule:

\_\_\_\_\_ For one year, except for training records of employees who have worked for less than one year which are provided to the employee upon termination of employment; or

\_\_\_\_\_ Since we have less than ten workers, including managers and supervisors, we only maintain inspection records until the hazard is corrected and only maintain a log of instructions to workers with respect to worker job assignments when they are first hired or assigned new duties.

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\_\_\_\_\_ Category 2. Our establishment has fewer than twenty workers and is not on a designated high hazard industry list. We are also on a designated low hazard industry list or have a workers' compensation experience modification rate of 1.1 or less, and have taken the following steps to implement and maintain our IIP Program:

1. Records of hazard assessment inspections; and
2. Documentation of safety and health training for each worker.

Inspection records and training documentation will be maintained according to the following checked schedule:

\_\_\_\_\_ For one year, except for training records of employees who have worked for less than one year which are provided to the employee upon termination of employment; or

\_\_\_\_\_ Since we have less than ten workers, including managers and supervisors, we maintain inspection records only until the hazard is corrected and only maintain a log of instructions to workers with respect to worker job assignments when they are first hired or assigned new duties.

.....

\_\_\_\_\_ Category 3. We are a local governmental entity (county, city, district, or and any public or quasi-public corporation or public agency) and we are not required to keep written records of the steps taken to implement and maintain our IIP Program.



Chapter 4

# Training and Instruction

# Training For Employees, Supervisors And Managers

An effective accident prevention program requires proper job performance from everyone in the workplace.

Employers must ensure that all employees know about the materials and equipment they work with, known hazards and how to control the hazards.

Each employee needs to know that:

no employee is expected to undertake a job until he or she has received job instructions on how to do it properly and is authorized to perform that job. Also,

no employee should undertake a job that appears unsafe.

It may be possible to combine safety and health training with other training, depending upon the types of hazards in the workplace.

Here are some actions to consider:

Ask a state consultant to recommend training for your worksite. The consultant may be able to conduct training while he or she is there.

Make sure you have trained your employees on every potential hazard that they could be exposed to and how to protect themselves. Then verify that they really understand what you taught them.

Pay particular attention to your new employees and to employees who are moving to new jobs. Because they are learning new operations, they are more likely to get hurt.

Train your supervisors to understand all the hazards faced by the employees and how to reinforce training with quick reminders and refreshers, or with disciplinary action if necessary.

Make sure that your top management staff understand their safety and health responsibilities and how to hold subordinate supervisory employees accountable for theirs.

## Documenting Training

It is important that employers document activities in all elements of the Workplace Program including training. Essential records, including those legally required for workers' compensation, insurance audits and government inspections must be maintained as

long as the actual need exists or as required by law. Keeping records of your activities, such as policy statements, training sessions, safety and health meetings, and information distributed to employees, is greatly encouraged. Maintaining essential records will also demonstrate sound business management as supporting proof for credit applications, for showing "good faith" in reducing any proposed penalties from OSHA inspections, for insurance and other audits, and aid efficient review of an employer's current safety and health activities for better control of operations and to plan improvements.

The following recordkeeping tips should be practiced:

- Written training certification must be maintained for each employee.
- Records must indicate course, date, signature of employer/trainer, and the names of employees trained.
- If accepting an employee's training from a previous employer or provider (for example, First Aid or CPR training), the employer must verify the content, the documentation with signature of the trainer or the employer, and date(s) of prior training. Per OSHA, the certification record must indicate the date that the new employer determined the prior training was adequate.

The following training sheets may be used to train supervisors, managers and employees the essential elements of a successful injury and illness prevention program.

Following the training sheets is a discussion on Safety Meetings which are similar in nature to the IIPP training and are required by a number of OSHA standards. Safety Meeting topics are generally more specific and involve a more in-depth look at the subject matter. Even where they are not required by law, Safety Meeting can enhance any IIPP Program and save an employer costs by mitigating accidents, liability and downtime. For a complete Safety Meeting Kit which includes an overview of Safety Meetings, OSHA Safety Training Requirements at-a-glance, documentation records, training sheets and employee quizzes, call a Personnel Concepts representative at 800-333-3795.

# Manager Training Sheets

*The most widely accepted way to identify hazards is to conduct safety and health inspections because the only way to be certain of an actual situation is to look at it directly from time to time. It is the responsibility of all supervisors to maintain safety interest within their departments.*

*Begin a program of self-inspection in your own department. Self-inspection is essential if you are to know where probable hazards exist and whether they are under control.*

**Don't spend time with items that have no application to your business.** *Make sure that each item is seen by you or your designee and leave nothing to memory or chance. Write down what you see or don't see and what you think you should do about it.*

*Add information from your completed checklists to injury information, employee information, and process and equipment information to build a foundation to help you determine what problems exist. Then, as you use the OSHA standards in your problem-solving process, it will be easier for you to determine the actions needed to solve these problems.*

*Once the hazards have been identified, implement the control procedures described on page 9 and establish your four-point safety and health program.*



Your self-inspections should cover safety and health issues in the following areas:

**Processing, Receiving, Shipping and Storage** - equipment, job planning, layout, heights, floor loads, projection of materials, material handling and storage methods, training for material handling equipment.

**Building and Grounds Conditions** - floors, walls, ceilings, exits, stairs, walkways, ramps, platforms, driveways, aisles.

**Housekeeping Program** - waste disposal, tools, objects, materials, leakage and spillage, cleaning methods, schedules, work areas, remote areas, storage areas.

**Electricity** - equipment, switches, breakers, fuses, switch-boxes, junctions, special fixtures, circuits, insulation, extensions, tools, motors, grounding, national electric code compliance.

**Lighting** - type, intensity, controls, conditions, diffusion, location, glare and shadow control.

**Heating and Ventilation** - type, effectiveness, temperature, humidity, controls, natural and artificial ventilation and exhausting.

**Machinery** - points of operation, flywheels, gears, shafts, pulleys, key ways, belts, couplings, sprockets, chains, frames, controls, lighting for tools and equipment, brakes, exhausting, feeding, oiling, adjusting, maintenance, lockout/tagout, grounding, work space, location, purchasing standards.

**Personnel** - training, including hazard identification training; experience; methods of checking machines before use; type of clothing; PPE; use of guards; tool storage; work practices; methods for cleaning, oiling, or adjusting machinery.

**Hand and Power Tools** - purchasing standards, inspection, storage, repair, types, maintenance, grounding, use and handling.

**Chemicals** - storage, handling, transportation, spills, disposals, amounts used, labeling, toxicity or other harmful effects, warning signs, supervision, training, protective clothing and equipment, hazard communication requirements.

**Fire Prevention** - extinguishers, alarms, sprinklers, smoking rules, exits, personnel assigned, separation of flammable materials and dangerous operations, explosion-proof fixtures in hazardous locations, waste disposal and training of personnel.

**Maintenance** - provide regular and preventive maintenance on all equipment used at the worksite, recording all work performed on the machinery and by training personnel on the proper care and servicing of the equipment.

**PPE** - type, size, maintenance, repair, age, storage, assignment of responsibility, purchasing methods, standards observed, training in care and use, rules of use, method of assignment.

**Transportation** - motor vehicle safety, seat belts, vehicle maintenance, safe driver programs.

**First Aid Program/Supplies** - medical care facilities locations, posted emergency phone numbers, accessible first aid kits.

**Evacuation Plan** - establish and practice procedures for an emergency evacuation, e.g., fire, chemical/biological incidents, bomb threat; include escape procedures and routes, critical plant operations, employee accounting following an evacuation, rescue and medical duties and ways to report emergencies.

*Addressing safety and health issues in the workplace saves the company money and adds value to the business. Recent estimates place the business costs associated with occupational injuries at close to \$170 billion-expenditures that come straight out of company profits.*



When workers stay whole and healthy, the direct cost-savings to businesses include:

- lower workers' compensation insurance costs;
- reduced medical expenditures;
- smaller expenditures for return-to-work programs;
- fewer faulty products;
- lower costs for job accommodations for injured workers;
- less money spent for overtime benefits.

Safety and health also make big reductions in indirect costs, due to:

- increased productivity;
- higher quality products;
- increased morale;
- better labor/management relations;
- reduced turnover;
- better use of human resources.

Employees and their families benefit from safety and health because:

- their incomes are protected;
- their family lives are not hindered by injury;
- their stress is not increased.

Simply put, protecting people on the job is in everyone's best interest-our economy, our communities, our fellow workers and our families. Injury and illness prevention add value to businesses, workplaces and lives.

There are reasons why accidents happen. Something goes wrong somewhere. It may take some thought, and maybe the help of friends or other trained people, to figure out **what** went wrong, but an accident always has a cause-a reason why. Once it is known why an accident happened, it is possible to prevent future incidents.

Not all dangers at a worksite depend on an accident to cause harm, of course. Worker exposure to toxic chemicals or harmful levels of noise or radiation may happen in conjunction with **routine** work as well as by accident. An employer may not realize the extent of the exposure or harm that they and their employees face. The effect may not be immediate. An injury and illness prevention plan that includes prevention of these health hazard exposures and accidents can mitigate hazards and prevent exposure.

A plan should address the types of accidents and health hazard exposures that could happen in the workplace. Because each workplace is different, a program should address the specific needs and requirements of that department/location.

There are four basic elements to all good safety and health

programs. These are as follows:

## 1. Management Commitment and Employee

**Involvement.** The manager or management team leads the way, by setting policy, assigning and supporting responsibility, setting an example and involving employees.

- Encourage employee involvement in the program and in decisions that affect their safety and health (e.g., inspection or hazard analysis teams; developing or revising safe work rules; training new hires or co-workers; assisting in accident investigations)
- Assign and communicate responsibility for all aspects of the program

## 2. Worksite Analysis.

The worksite is continually analyzed to identify all existing and potential hazards.

- Effective management actively analyzes the work and the worksite to anticipate and prevent harmful occurrences
- Provide a reliable system for employees, without fear of reprisal, to notify management about apparent hazardous conditions and to receive timely and appropriate responses
- Provide for investigation of accidents and "near miss" incidents, so that their causes and means for prevention are identified

## 3. Hazard Prevention and Control.

Methods to prevent or control existing or potential hazards are put in place and maintained.

- Establish procedures for timely correction or control of hazards, including :
  - o Engineering techniques, where feasible and appropriate
  - o Procedures for safe work which are understood and followed as a result of training, positive reinforcement, correction of unsafe performance, and enforcement
  - o Provision of personal protective equipment
  - o Administrative controls

## 4. Training for Employees, Supervisors and Managers.

Managers, supervisors and employees are trained to understand and deal with worksite hazards.

- Analyze the work under their supervision to identify unrecognized potential hazards
- Maintain physical protections in work areas
- Reinforce employee training through continual performance feedback and, if needed, enforcement of safe work practices

*The Company takes all reasonable precautions to protect the health and safety of its employees. As part of this commitment, the Company has implemented an Injury and Illness Prevention Program, which is intended to accomplish our primary objective of preventing health and safety hazards in the workplace.*

*The prevention of injury and illness is an objective affecting all levels of the organization and its activities. It is therefore, a basic requirement that each supervisor make the safety of employees an integral part of his or her regular management function. It is equally the duty of each employee to accept and follow established safety regulations and procedures.*



Our safety and health program will include:

Providing mechanical and physical safeguards to the maximum extent possible.

A program of safety and health inspections to identify and eliminate unsafe working conditions or practices, to control health hazards, and to fully comply with the safety and health standards for every job.

Training all employees in good safety and health practices.

Providing necessary personal protective equipment and instructions for its use and care.

Developing and enforcing safety and health rules and requiring that employees cooperate with these rules as a condition of employment.

Investigating, promptly and thoroughly, every accident to find out what caused it and to correct the problem so that it won't happen again.

Setting up a system of recognition and awards for outstanding safety service or performance.

We recognize that the responsibilities for safety and health are shared:

The employer accepts responsibility for leadership of the safety and health program, for its effectiveness and improvement, and for providing safe conditions.

Supervisors are responsible for developing the proper attitudes toward safety and health in themselves and in those they supervise, and for ensuring that all operations are performed with the utmost regard for the safety and health of all personnel involved, including themselves.

Employees are responsible for compliance with all rules and regulations and for continuously practicing safety while performing their duties.

Before a new or transferring employee starts to work, you must familiarize the employee with the safety rules and regulations. Following the training, you and the employee must initial a supervisor safety training acknowledgment. Having your employees understand and follow the safety rules and regulations will reduce personal injuries and will reduce costs. All safety topics, such as housekeeping, clothing, electricity, lifting, machines, hazard communication and general safety rules, are to be thoroughly covered with each employee working for you. Safety rules contained in the Employee Handbook are also to be covered.

Safety rules and regulations must be followed by all employees. They are not to be broken in an attempt to increase productivity. All supervisors will be responsible for enforcement of the safety guidelines. If any employee is observed violating safety rules, the employee is to be given a verbal and written warning. The written warning is to be placed in the employee's personnel file. Further violations will result in reprimands and actions leading up to and possibly including termination. A serious violation may call for discharge on the first offense. All serious violations must be reviewed by management to determine whether discharge, or a lesser penalty, is appropriate. Adherence to our safety rules and regulations is the key to reducing personal injuries and increasing profits.

*This information is supplied to you as part of our Hazardous Communication Program. All employees must adhere to the policies outlined in our formal Hazardous Communication Program. It is your responsibility to ensure that you receive training prior to working with any hazardous substance that is used in any job task that you perform. Please inform your supervisor immediately if you have not been properly trained on the use of any hazardous substance prior to beginning work with any substance and/or job task.*



## 1. Employee Information and Training

All employees must attend a Health and Safety orientation meeting conducted by \_\_\_\_\_ prior to starting a work assignment in a department that has exposure to a hazardous substance(s). This responsibility may be assigned to the department supervisor. This meeting will be for the purpose of hazardous materials training and procedures and will include the following:

- A. An overview of the requirements contained in the Hazardous Communication Regulation, including employee rights to information without discrimination or reprisal.
- B. Information about any operations in the work area where hazardous substances are present and/or used. A Hazardous Substance List and the work areas and/or processes where these substances are used will be made available to all employees.
- C. Location and availability of the written Hazardous Materials Communication Program. The Program will be kept in each separate department and will be available to any employee upon request.
- D. Methods and observation techniques used to determine the presence or release of Hazardous Substances in the Work Area. All Chemicals/ Hazardous Substances used in the Plant are restricted to certain areas and/or departments. This will be closely monitored by the supervisor of that area or department.
- E. Information about physical and health effects of the hazardous substances that are present at the worksite. These substances may be harmful and could be FATAL if ingested. Repeated and prolonged breathing of vapors or contact with the skin could be harmful and cause irritation. The vapors may also be combustible if the area is not properly ventilated. To receive additional information regarding a substance, please request the Safety Data Sheet (SDS) for that substance.
- F. Information about the steps the Company has taken to lessen or prevent exposure to these

substances through use of engineering controls, work practices and the use of personal protective equipment. Strict control over the use of these substances is conducted by the supervisor of the department where the substance is used. They are kept in an area accessible only to authorized personnel who have been properly trained in their usage. It is mandatory that the employees using these substances wear the proper gloves, aprons, eye protection and respirators provided by the Company.

- G. Training in the reading of labels and reviewing of SDS's to obtain appropriate hazard information. Our employees will be trained on the procedures of how to obtain hazard information in their initial employee orientation on safety and health. Continued education in these areas will be provided to employees during all company safety meetings. This may be done by the Plant Manager, a supervisor or outside consultant.
- H. Teaching of emergency first aid procedures to all employees at time of hire and continued during the course of their employment with our Company. The responsible supervisor of the employee will be properly trained in these first aid procedures. The supervisor will be responsible in the administration and direction of these procedures for their respective employees.

Whenever new production processes are introduced in the workplace involving hazardous substances or these substances are introduced by any other means, the responsible supervisors will retrain their employees regarding these substances and processes. This will include the hazards, proper usage, required personal protection equipment and first aid procedures.

All employees must follow the procedures outlined in this program. Failure to follow any company policy regarding the safe use of a hazardous substance may lead to disciplinary action up to and including immediate termination.

# Correcting Unsafe Acts

Manager/Supervisor

*It is the responsibility of all supervisors to correct unsafe acts in a positive manner. One of the most important elements in prevention of personal injuries is correcting unsafe acts committed by employees.*



It's important to differentiate between unsafe acts and unsafe conditions:

Unsafe Act - Performance of a task or other activity that is conducted in a manner that may threaten the health and/or safety of workers. Examples are:

- Operating without qualification or authorization.
- Lack of or improper use of PPE.
- Failure to tagout/lockout.
- Bypass or removal of safety devices.
- Using defective equipment.
- Use of tools for other than their intended purpose.
- Horseplay.

Unsafe Condition - A condition in the workplace that is likely to cause property damage or injury. Examples are:

- Defective tools, equipment, or supplies.
- Inadequate supports or guards.
- Fire and explosion hazards.
- Poor housekeeping.
- Hazardous atmospheric condition.
- Excessive noise.
- Poor ventilation.

The following will be helpful in correcting unsafe acts and for positive reinforcement:

1. Each day you should walk through your department and observe each of your employees without distractions. Look for any employee utilizing unsafe work methods or procedures.
2. If you see an employee in the process of an unsafe act, it is your responsibility to immediately go to the employee and correct the action in a positive manner.

3. Take time to explain to the employee the possible consequences - "what if... the knife slips and cuts your hand," "what if... you slip and fall because of the puddle on the floor," etc.
4. Observe safe acts and praise employees for those which are noteworthy. This lends positive reinforcement to working the right way—the safe way.
5. Emphasize positive safety awareness attitude.

*Thousands of accidents occur throughout the United States every day. The failure of people, equipment, supplies, or surroundings to behave or react as expected causes most of them. Accident investigations determine how and why these failures occur. By using the information gained through an investigation, a similar, or perhaps more disastrous, accident may be prevented. It is important to conduct accident investigations with prevention in mind.*

*All employees are to report any work-related injury, illness or near miss to the department supervisor or the IIPP Administrator. It is each department supervisor's responsibility to ensure employees follow this procedure. When an accident, illness or near miss is reported, the IIPP Administrator or the department supervisor will immediately conduct an accident investigation to determine the cause of the accident.*



The investigation must include the following:

1. What happened (What prompted the investigation)?
2. Why did the incident happen (causes)?
  - Who was involved?
  - Was this employee qualified and properly trained for the job being performed?
  - Were proper procedures being followed?
  - Are similar situations present? If so, how can they be corrected?
3. What should be done? Which aspects of the operation require additional attention?
4. What actions have been taken? Actions already taken to reduce or eliminate the exposure being investigated, should be noted along with those remaining to be addressed. Corrective action pending or not completed and reasons for delay should be noted.

The primary purpose of each accident investigation is to develop solutions to problems that caused the incident. All safety investigations must focus on correction of the problem.

It is the responsibility of all supervisors to complete a Supervisor's Accident Investigation Report. The supervisor must complete the Supervisor's Accident Investigation Report in detail. For example, consider the question "How could this accident have been prevented?" The answer, "be more careful," is not adequate. With thorough investigation, a better answer

could be given. A thoughtful response, as specific as possible, is required.

Supervisors have the primary responsibility of investigating injuries within their department. Investigation and analysis can determine accident causes and methods to prevent recurrence. Other persons included in the accident investigation are the injured employee and any eyewitnesses. The supervisor must interview any eyewitnesses and note their description of the accident for later analysis. Each witness should be asked to state if they know what caused the accident and how it could be prevented in the future. The supervisor reviews all pertinent facts at the site of the accident. If necessary, a photograph should be taken so important details will not be missed.

The supervisor must draw conclusions from an accident and take steps for corrective action. Individuals shall be assigned the responsibility for corrective action. A specific completion date for correcting a safety problem shall be given and a follow-up scheduled to assure the safety hazard has been corrected.

# Emergency Action Plan

Manager/Supervisor

*The purpose of the Emergency Action Plan is to provide a workplace free from hazards and to reduce danger in the workplace. It complies with OSHA's Emergency Action Plan regulation, found at 29 CFR 1910.38 and Subpart B and C which requires a written plan that contains specific program elements. The goal of our company is to provide all employees with the information necessary to recognize hazards and take the appropriate action before such condition results in an emergency.*



In the case of an emergency, employees will be alerted by:

- Sounding of alarm
  - Public address system announcement
  - Verbal announcement
  - Other
- 

The emergency notification signal is:

- The same in all situations
  - Distinctive for several different emergency situations
- 

This company's policy for reporting an emergency is:

- Call 911
  - Sound an alarm
  - Make an announcement over a paging system
  - Call Receptionist to make an announcement over paging system
  - Talk to a supervisor
- 

It is the policy of this company that, in an emergency, all employees evacuate the building immediately. Follow these emergency evacuation procedures:

- Stop all work.
- Exit buildings through the nearest door (assist disabled co-workers).
- Do not run.
- Do not lag behind.
- Do not make unnecessary noise.
- If you are the last to exit a room, close the door behind you.
- Go directly to your designate meeting area.
- Follow the instructions given by emergency personnel or plan administrator.
- Do not return to the building until all employees have been accounted for and you are instructed to do so.
- Do not go to your vehicles unless you are told to do so.
- Do not block emergency vehicle thoroughfares.

Evacuate through the nearest available marked exit. Fire Exits or evacuation plans are located in the following areas:

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Employees are to gather at the following locations:

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Always report to the appointed gathering area as soon as it is safe to do so. Failing to check in may endanger another person who might put themselves in harm's way to search for you. Employees must remain at the gathering site until they are told by management that may leave or return to the worksite. Employees who fail to follow this procedure are subject to disciplinary action, up to and including termination.

Employees will be accounted for after evacuation by: (describe the means for which employees will be accounted for)

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If they can do so without putting themselves in harms way, the following individuals will be responsible for critical plant operations during evacuation such as shutting down the gas and power and making sure that everyone is safely out of the building:

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In the event of a fire, the policy for employees being authorized to use a portable fire extinguisher to attempt to extinguish the fire before evacuating is:

- Any employee may do so
  - Only designated employees
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The following employees are trained to perform medical duties in the case of an emergency:

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# Employee Training Sheets

# Understanding Injury and Illness Prevention

*Protecting people on the job is in everyone's best interest-our economy, our communities, our fellow workers and our families. Injury and illness prevention add value to businesses, workplaces and lives.*



## **Employees and their families benefit from safety and health because:**

- their incomes are protected;
- their family lives are not hindered by injury;
- their stress is not increased.

## **This Company's Injury and Illness Prevention Program:**

- Provides procedures for identifying and evaluating hazards and unsafe conditions;
- Develops procedures for correcting hazards and unsafe conditions;
- Communicates with employees regarding health and safety matters and how to report hazards;
- Provides employee training programs;
- Develops compliance strategies;
- Maintains documentation for health and safety programs; and
- Identifies a person or persons with authority and responsibility for implementing the program.

## **Employees are responsible for following the requirements of the IIPP through the following actions:**

- Complete all health and safety training required for the job that you will be performing
- Know who is the designated Safety Coordinator for your work unit.
- Ask your supervisor when concerned about an unknown or hazardous situation or substance.
- Report all unsafe conditions, practices, or equipment to your supervisor.
- Follow all the safety rules presented to you through training during all work hours.
- Report all job related injuries and illnesses to your supervisor immediately.

## **Before performing any work, make sure that you:**

- Understand the Scope of Activities
- Understand the Hazards
- Implement Hazard Controls
- Perform Work Activities within Hazard Controls
- Provide Feedback and Make Improvements

## **Each employee needs to know that:**

- no employee is expected to undertake a job until he or she has received job instructions on how to do it properly and is authorized to perform that job. And,
- no employee should undertake a job that appears unsafe.

# Hazard Communication

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# Safety Policy

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The prevention of injury and illness is an objective affecting all levels of the organization and its activities. It is therefore, a duty of each employee to accept and follow established safety regulations and procedures.

## **Our safety and health program will include:**

- Providing mechanical and physical safeguards to the maximum extent possible.
- A program of safety and health inspections to identify and eliminate unsafe working conditions or practices, to control health hazards, and to fully comply with the safety and health standards for every job.
- Training all employees in good safety and health practices.
- Providing necessary personal protective equipment and instructions for its use and care.
- Developing and enforcing safety and health rules and requiring that employees cooperate with these rules as a condition of employment.
- Investigating, promptly and thoroughly, every accident to find out what caused it and to correct the problem so it won't happen again.
- Setting up a system of recognition and awards for outstanding safety service or performance.

## **We recognize that the responsibilities for safety and health are shared:**

- The employer accepts responsibility for leadership of the safety and health program, for its effectiveness and improvement, and for providing safe conditions.
- Supervisors are responsible for developing the proper attitudes toward safety and health in themselves and in those they supervise, and for ensuring that all operations are performed with the utmost regard

for the safety and health of all personnel involved, including themselves.

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# Emergency Action Plan

*The purpose of the Emergency Action Plan is to provide a workplace free from hazards and to reduce danger in the workplace. It complies with OSHA's Emergency Action Plan regulation, found at 29 CFR 1910.38 and Subpart B and C which requires a written plan that contains specific program elements. The goal of our company is to provide all employees with the information necessary to recognize hazards and take the appropriate action before such condition results in an emergency.*



In the case of an emergency, employees will be alerted by:

- Sounding of alarm
  - Public address system announcement
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The emergency notification signal is:

- The same in all situations
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This company's policy for reporting an emergency is:

- Call 911
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It is the policy of this company that, in an emergency, all employees evacuate the building immediately. Follow these emergency evacuation procedures:

- Stop all work.
- Exit buildings through the nearest door (assist disabled co-workers).
- Do not run.
- Do not lag behind.
- Do not make unnecessary noise.
- If you are the last to exit a room, close the door behind you.
- Go directly to your designate meeting area.
- Follow the instructions given by emergency personnel or plan administrator.
- Do not return to the building until all employees have been accounted for and you are instructed to do so.
- Do not go to your vehicles unless you are told to do so.
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Evacuate through the nearest available marked exit. Fire Exits or evacuation plans are located in the following areas:

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Employees are to gather at the following locations:

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Always report to the appointed gathering area as soon as it is safe to do so. Failing to check in may endanger another person who might put themselves in harm's way to search for you. Employees must remain at the gathering site until they are told by management that may leave or return to the worksite. Employees who fail to follow this procedure are subject to disciplinary action, up to and including termination.

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If they can do so without putting themselves in harms way, the following individuals will be responsible for critical plant operations during evacuation such as shutting down the gas and power and making sure that everyone is safely out of the building:

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- Any employee may do so
  - Only designated employees
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The following employees are trained to perform medical duties in the case of an emergency:

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# Conducting an Effective Safety Meeting

Each year, more than 4 million employees are injured on the job costing Americans over \$127.7 billion annually. Nearly 50 workers are injured every minute of the work week and 17 workers die on-the-job each day. That is why OSHA enforces over 100 different standards that require employers to train employees or for employees to have special qualifications to carry out particular job functions. These requirements reflect OSHA's belief that training is an essential part of every employer's safety and health program for protecting workers from injuries and illnesses.

However, only about 30 percent of businesses have established safety and health programs. About half of the 95 million workers who would be covered under an OSHA safety and health program standard don't have that protection today. Establishing a safety and health program to prevent occupational injuries and illnesses is not only the right thing to do, it's the profitable thing to do. Studies have shown a \$4 to \$6 return for every dollar invested in safety and health.

OSHA's 10 Most Frequently Cited Violations of 2007 are all areas in which training on proper procedure is critical for both safety and compliance. They include:

Scaffolding

Fall Protection

Hazard Communication

Respiratory Protection

Lockout Tagout

Powered Industrial Trucks

Electrical Wiring

Ladders

Machine Guarding

Electrical

In addition to their social costs, workplace injuries and illnesses have a major impact on an employer's bottom line. It has been estimated that employers pay almost \$1 billion per week for direct workers' compensation costs alone. Accidents are more expensive than many employers realize. The reason is the hidden costs that are often not attributed to the appropriate cause. Some costs are obvious, such as workers' compensation payments, medical expenses, and costs for legal services. But there are many

indirect costs such as:

Training and compensating replacement personnel

Repairing damaged property

Investigating the accident

Increased insurance costs

Implementing corrective action

Schedule delays

Administrative time

Lower morale

Increased absenteeism

Dissatisfied customers

In addition, companies that do not fulfill their training obligations under OSHA regulations subject themselves to hefty fines not only for not training but by allowing employees to carry out job assignments in an unsafe and non-compliant manner. With regular training, employees work safer and perform their job in a manner that complies with OSHA's standards. Penalties that employers face for noncompliance can be as much as \$70,000.

Training in the proper performance of a job is time and money well spent, and the employer should regard it as an investment rather than an expense. Ideally, safety and health training should be provided before problems or accidents occur. This training would cover both general safety and health rules and work procedures, and should be repeated if an accident or near miss incident occurs.

Safety meetings are not only compliance requirements, they are also useful tools that benefit both the employer and the employees. The purposes of the meetings are to:

- Promote Safety Awareness
- Motivate the employees
- Share ideas and suggestions
- Discuss safety standards
- Establish communication
- Demonstrate Management's concern for safety

## Needs Assessment

The first step in the training process is a basic one:

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to determine whether a problem can be solved by training. Whenever employees are not performing their jobs properly, it is often assumed that training will bring them up to standard. However, it is possible that other actions (such as hazard abatement or the implementation of engineering controls) would enable employees to perform their jobs properly.

Ideally, safety and health training should be provided before problems or accidents occur. This training would cover both general safety and health rules and work procedures, and would be repeated if an accident or near miss incident occurred.

Problems that can be addressed effectively by training include those that arise from lack of knowledge of a work process, unfamiliarity with equipment, or incorrect execution of a task. Training is less effective (but can still be used) for problems arising from an employee's lack of motivation or lack of attention to the job. Whatever its purpose, training is most effective when designed in relation to the goals of the employer's total safety and health program.

### **Determining What Training is Needed**

If the problem is one that can be solved, in whole or in part, by training, then the next step is to determine what training is needed. For this, it is necessary to identify what the employee is expected to do and in what ways, if any, the employee's performance is deficient. This information can be obtained by conducting a job analysis which pinpoints what an employee needs to know in order to perform a job.

When designing a new training program, or preparing to instruct an employee in an unfamiliar procedure or system, a job analysis can be developed by examining engineering data on new equipment or the safety data sheets on unfamiliar substances. The content of the specific Federal or State OSHA standards applicable to a business can also provide direction in developing training content. Another option is to conduct a Job Hazard Analysis (see OSHA 3071, same title, 1981). This is a procedure for studying and recording each step of a job, identifying existing or potential hazards, and determining the best way to perform the job in order to reduce or eliminate the risks. Information obtained from a Job Hazard Analysis can be used as the content for the training activity.

If an employer's learning needs can be met by revising an existing training program rather than developing a new one, or if the employer already

has some knowledge of the process or system to be used, appropriate training content can be developed through such means as:

1. Using company accident and injury records to identify how accidents occur and what can be done to prevent them from recurring.
2. Requesting employees to provide, in writing and in their own words, descriptions of their jobs. These should include the tasks performed and the tools, materials and equipment used.
3. Observing employees at the worksite as they perform tasks, asking about the work, and recording their answers.
4. Examining similar training programs offered by other companies in the same industry, or obtaining suggestions from such organizations as the National Safety Council (which can provide information on Job Hazard Analysis), the Bureau of Labor Statistics, OSHA approved State programs, OSHA full service Area Offices, OSHA-funded State consultation programs, or the OSHA Office of Training and Education.

The employees themselves can provide valuable information on the training they need. Safety and health hazards can be identified through the employees' responses to such questions as whether anything about their jobs frightens them, if they have had any near-miss incidents, if they feel they are taking risks, or if they believe that their jobs involve hazardous operations or substances.

### **Types of Meetings**

There are two types of safety meetings:

- Formal meetings are planned and scheduled ahead of time. Workers are notified well in advance of the topics or issues to be addressed. This would be the monthly or quarterly safety meeting in which a presentation may be given on the information and include a question and answer session.
- Informal or "tailgate" meetings are those "on-the-job" opportunities conducted with the workers just before a job begins. These meetings are 5-10 minutes long and focus on only those safety items that will be encountered during a particular work shift.

It also helps to differentiate between a safety meeting and safety training:

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#### Safety Meeting:

- Includes ALL employees
- Applies to ALL attendees
- Educational
- Provides Information

#### Safety Training:

- Focuses on skills development
- Task-specific
- Usually performance-based
- Training is measurable or observable

Depending on the topic or situation, one might be more appropriate than the other. For example, when dealing with the topic of Workplace Violence, an employer would conduct a safety meeting because it is a topic that pertains to all employees. However, where the topic being covered is “Forklifts,” then a Safety Training would be conducted only to those employees who operate or work around forklifts.

### Identifying Goals and Objectives

Once the kind of training that is needed has been determined, it is equally important to determine what kind of training is not needed. Employees should be made aware of all the steps involved in a task or procedure, but training should focus on those steps on which improved performance is needed. This avoids unnecessary training and tailors the training to meet the needs of the employees.

Once the employees’ training needs have been identified, employers can then prepare objectives for the training. Instructional objectives, if clearly stated, will tell employers what they want their employees to do, to do better, or to stop doing.

Learning objectives do not necessarily have to be written, but in order for the training to be as successful as possible, clear and measurable objectives should be thought out before the training begins. For an objective to be effective, it should identify as precisely as possible what the individuals will do to demonstrate that they have learned, or that the objective has been reached. They should also describe the important conditions under which the individual will demonstrate competence and define what constitutes acceptable performance.

Using specific, action-oriented language, the instructional objectives should describe the preferred

practice or skill and its observable behavior. For example, rather than using the statement: “The employee will understand how to use a respirator” as an instructional objective, it would be better to say: “The employee will be able to describe how a respirator works and when it should be used.” Objectives are most effective when worded in sufficient detail that other qualified persons can recognize when the desired behavior is exhibited.

### Developing Learning Activities

Once employers have stated precisely what the objectives for the training program are, then learning activities can be identified and described. Learning activities enable employees to demonstrate that they have acquired the desired skills and knowledge. To ensure that employees transfer the skills or knowledge from the learning activity to the job, the learning situation should simulate the actual job as closely as possible. Thus, employers may want to arrange the objectives and activities in a sequence which corresponds to the order in which the tasks are to be performed on the job, if a specific process is to be learned. For instance, if an employee must learn the beginning processes of using a machine, the sequence might be: (1) to check that the power source is connected; (2) to ensure that the safety devices are in place and are operative; (3) to know when and how to throw the switch; and so on.

A few factors will help to determine the type of learning activity to be incorporated into the training. One aspect is the training resources available to the employer. Can a group training program that uses an outside trainer and film be organized, or should the employer personally train the employees on a one-to-one basis? Another factor is the kind of skills or knowledge to be learned. Is the learning oriented toward physical skills (such as the use of special tools) or toward mental processes and attitudes? Such factors will influence the type of learning activity designed by employers. The training activity can be group oriented, with lectures, role play, and demonstrations; or designed for the individual as with self-paced instruction.

The determination of methods and materials for the learning activity can be as varied as the employer’s imagination and available resources will allow. The employer may want to use charts, diagrams, manuals, slides, films, viewgraphs (overhead transparencies), videotapes, audiotapes, or simply

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blackboard and chalk, or any combination of these and other instructional aids. Whatever the method of instruction, the learning activities should be developed in such a way that the employees can clearly demonstrate that they have acquired the desired skills or knowledge.

### **Length and Frequency of the Meeting**

A department supervisor must determine how long the workers can be away from the job without seriously disrupting operations. When planning the meeting, also consider the level and detail of the material to be presented and the attention span of the audience. Once safety meetings become an established routine, subsequent meetings become easier to plan and present. The workers will also come to accept safety meetings as part of their job. Always avoid scheduling a meeting on Monday morning or Friday afternoon.

Training should be provided:

- To each new hire prior to starting work
- Whenever a worker is assigned a new work task, tools or equipment
- Whenever there is a change in work procedure
- Whenever a worker demonstrates unsafe work practices or job performance
- Whenever there is a near-miss or accident

Workers who need training must work under close supervision of a designated person until they demonstrate that they can safely perform their duties.

### **Determining the Topic**

There are numerous possibilities for safety meeting topics and every workplace should choose topics that apply to their unique work environment. Topics for safety meetings can be obtained through:

- Observing everyday work practices
- Company safety procedures and guiding regulations
- Company accident and injury reports
- Safety inspection findings and corrective actions
- New equipment installations
- Management directives

Current issues should always be incorporated into the meeting whenever possible.

### **Conducting the Training**

With the completion of the steps outlined above, the employer is ready to begin conducting the training. To the extent possible, the training should be presented so that its organization and meaning are clear to the employees. To do so, employers or supervisors should: (1) provide overviews of the material to be learned; (2) relate, wherever possible, the new information or skills to the employee's goals, interests, or experience; and (3) reinforce what the employees learned by summarizing the program's objectives and the key points of information covered. These steps will assist employers in presenting the training in a clear, unambiguous manner.

In addition to organizing the content, employers must also develop the structure and format of the training. The content developed for the program, the nature of the workplace or other training site, and the resources available for training will help employers determine for themselves the frequency of training activities, the length of the sessions, the instructional techniques, and the individual(s) best qualified to present the information.

In order to be motivated to pay attention and learn the material that the employer or supervisor is presenting, employees must be convinced of the importance and relevance of the material. Among the ways of developing motivation are: (1) explaining the goals and objectives of instruction; (2) relating the training to the interests, skills, and experiences of the employees; (3) outlining the main points to be presented during the training session(s); and (4) pointing out the benefits of training (e.g., the employee will be better informed, more skilled, and thus more valuable both on the job and on the labor market; or the employee will, if he or she applies the skills and knowledge learned, be able to work at reduced risk).

An effective training program allows employees to participate in the training process and to practice their skills or knowledge. This will help to ensure that they are learning the required knowledge or skills and permit correction if necessary. Employees can become involved in the training process by participating in discussions, asking questions, contributing their knowledge and expertise, learning through hands-on experiences, and through role-playing exercises.

When conducting a safety meeting, it is always advisable to keep it short and simple (KISS).

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Presenting several short safety meetings is usually more effective than one long and potentially boring one. Avoid lengthy topics that might be more appropriate for a formal training session instead of a safety meeting. Multiple topics should be used only if they are closely related and short in length.

Key Points:

- Begin the meeting with a summary of what will be covered and why it is important.
- Present the meeting as an essential part of the company's safety objectives.
- Keep the tone informal to encourage participation.
- Be as flexible as possible within the limits of the agenda.
- Give examples of safety violations and their consequences.
- Ask for group participation throughout the meeting.
- Summarize at the end of the meeting.
- Announce the date, time and place of the next safety meeting.
- Always end on a positive note.

By keeping these points in mind, an employer will be focused on the message they want to deliver and keeping on track will be much easier.

When bringing the meeting to a close, be sure to summarize important points and ideas. Where possible, give the participants information that they can take with them and refer to at a later time. The last part of the meeting should allow for audience questions and possible suggestions for safety procedures.

## Recordkeeping

It's important that employers keep records of all safety meetings for their reference and as proof for OSHA and any other regulatory agency that might show an interest in their training practices. It may also be necessary to prove that an employee was trained on safety and proper procedure to defend a termination based on unsafe work practices or to show compliance with OSHA regulations that require employee training. Sign in sheets are an easy way to keep track of who has attended the meetings. The following recordkeeping tips should be practiced:

- Written training certification must be maintained for each employee.
- Records must indicate course, date, signature of employer/trainer, and the names of employees trained.
- If accepting an employee's training from a previous employer or provider (for example, First Aid or CPR training), the employer must verify the content, the documentation with signature of the trainer or the employer, and date(s) of prior training. Per OSHA, the certification record must indicate the date that the new employer determined the prior training was adequate.

## Evaluating the Program's Effectiveness

To make sure that the training program is accomplishing its goals, an evaluation of the training can be valuable. Training should have, as one of its critical components, a method of measuring the effectiveness of the training. A plan for evaluating the training session(s), either written or thought-out by the employer, should be developed when the course objectives and content are developed. It should not be delayed until the training has been completed. Evaluation will help employers or supervisors determine the amount of learning achieved and whether an employee's performance has improved on the job. Among the methods of evaluating training are: (1) Student opinion. Questionnaires or informal discussions with employees can help employers determine the relevance and appropriateness of the training program; (2) Supervisors' observations. Supervisors are in good positions to observe an employee's performance both before and after the training and note improvements or changes; and (3) Workplace improvements. The ultimate success of a training program may be changes throughout the workplace that result in reduced injury or accident rates.

However it is conducted, an evaluation of training can give employers the information necessary to decide whether or not the employees achieved the desired results, and whether the training session should be offered again at some future date.

## Improving the Program

If, after evaluation, it is clear that the training did not give the employees the level of knowledge and skill that was expected, then it may be necessary to revise

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the training program or provide periodic retraining. At this point, asking questions of employees and of those who conducted the training may be of some help. Among the questions that could be asked are: (1) Were parts of the content already known and, therefore, unnecessary? (2) What material was confusing or distracting? (3) Was anything missing from the program? (4) What did the employees learn, and what did they fail to learn?

It may be necessary to repeat steps in the training process, that is, to return to the first steps and retrace one's way through the training process. As the program is evaluated, the employer should ask: (1) If a job analysis was conducted, was it accurate? (2) Was any critical feature of the job overlooked? (3) Were the important gaps in knowledge and skill included? (4) Was material already known by the employees intentionally omitted? (5) Were the instructional objectives presented clearly and concretely? (6) Did the objectives state the level of acceptable performance that was expected of employees? (7) Did the learning activity simulate the actual job? (8) Was the learning activity appropriate for the kinds of knowledge and skills required on the job? (9) When the training was presented, was the organization of the material and its meaning made clear? (10) Were the employees motivated to learn? (11) Were the employees allowed to participate actively in the training process? (12) Was the employer's evaluation of the program thorough?

A critical examination of the steps in the training process will help employers determine where course revision is necessary.

### **List of Possible Safety Meeting Topics**

Accident Prevention Signs

AED

Back Safety

Bloodborne Pathogens

Chemicals

Cleaning Up Spills

Cold Stress (include severe winter weather)

Combustible Dust

Confined Space Entry

CPR

Ear Safety

Earthquakes

Electricity

Ergonomics

Eye and Face Protection

Fall Protection

Fire Extinguishers

Fire Safety

First Aid

Floods

Foodborne Illness

Foot Protection

Forklift

Hand Protection

Hand Washing

Hazard Communication

Head Protection

Heat Stress

Heimlich

Hepatitis A

Housekeeping

Hurricanes

Ladder Safety

LOTO

Machine Guarding

MRSA

MSDS

Pandemic Flu

Power Tool (include hand tool safety)

PPE

Respiratory Protection

Safe Computer Use

Safe Driving

Safe Lifting

Scaffolding

Slips, Trips and Falls

Substance Abuse

Tornados

Warehouse Safety

Workplace Violence



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# Employee Training Acknowledgement Form

I state that I have attended a training addressing \_\_\_\_\_, and have read and  
*Topic*  
received a copy of the \_\_\_\_\_ health and safety rules and regulations.  
*Company Name*

I further state that I understand these rules and acknowledge that compliance with the health and safety rules and regulations is a condition of employment. If I violate the safety rules or fail to report an injury to my supervisor immediately, I understand that I am subject to termination, in accordance with company policy.

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Instructor Signature*

\_\_\_\_\_  
*Date*



Chapter 5

# Recordkeeping

# Recording and Reporting Occupational Injuries and Illnesses

OSHA's regulations that address recordkeeping as they apply to health and safety are found under 29 CFR Part 1904, "Recording and Reporting Occupational Injuries and Illnesses." The rule is organized into seven sections, or subparts:

- Subpart A - Purpose
- Subpart B - Scope
- Subpart C - Forms and recording criteria
- Subpart D - Other requirements
- Subpart E - Reporting to the government
- Subpart F - Transition
- Subpart G - Definitions

## Subpart A - Purpose

The "purpose" section states the basic purpose of the rule: to require employers to collect injury and illness data and report it to the government, but it doesn't tell how the data are used or why they are important. The records provide the base data for the BLS survey of occupational injuries and illnesses, the Nation's primary source of occupational injury and illness statistics.

The records are also used by employers and employees to manage safety and health programs at individual workplaces. Analysis of the data is a widely recognized method for discovering workplace safety and health problems, and for tracking progress in solving those problems.

Finally, the data are used by OSHA. They collect the data to help direct their programs and measure their own performance, and their inspectors use the data during inspections to help direct their efforts to the hazards that are hurting workers.

The purpose section also includes a note to make it clear that recording an injury or illness does not have any effect on workers' compensation nor prove violation of an OSHA rule. Hopefully, this will reduce the stigma some employers feel accompanies the recording of a work-related injury or illness.

## Subpart B - Scope

The "scope" section includes an exemption for smaller employers and for establishments in certain industrial classifications. The scope section also deals with injury

and illness recordkeeping requirements from multiple government agencies.

Out of 7 million U.S. establishments, about 1.4 million are required to keep records. This means that about 20% of American workplaces must keep OSHA records, and about 80% are partially exempt.

While the 1904 regulation exempts many employers from keeping records at all times, these employers are not exempted from all of the 1904 requirements.

All employers are required to report fatalities and the in-patient hospitalization of 3 or more employees within 8 hours. Partially exempt employers may need to keep injury and illness records when the government asks them to do so.

Section 1904.1 addresses the size exemption. The size exemption is based on the company's peak employment during the last calendar year. If, at any time last year, the company reached 11 or more workers, the company is not size exempt. However, the company, or some of its individual establishments, may still be exempt because of industry classification.

The industry exemption (1904.2) applies to all industries in agriculture, construction, manufacturing, transportation, utilities and wholesale trade sectors. Appendix A to Subpart B lists the partially exempt service and retail industries. Establishments in these industries are exempt even if they are very large. For example, a very large chain of shoe stores or a very large bank is exempt. Some of the State Plan States have different industry exemptions.

The exempt retail and service industries were chosen by comparing the lost workday injury and illness experience of the industry with the national average. If the industry's lost workday case rate for the last 3 years was below 75% of the national average, the industry was exempted. As an example, sectors such as doctors' and dentists' offices and medical and dental laboratories are exempted.

The industry exemption applies to individual establishments, so a company that is engaged in several lines of business could have some establishments that keep records, and others that do not.

## Subpart C - Forms and Recording Criteria

Subpart C - Recordkeeping Forms and Recording Criteria includes the following paragraphs:

- 1904.4 Recording criteria
- 1904.5 Work-relatedness
- 1904.6 New case
- 1904.7 General recording criteria
- 1904.8 Needlesticks and sharps
- 1904.9 Medical removal
- 1904.10 Hearing loss
- 1904.11 Tuberculosis
- 1904.29 Forms

For the injury and illness statistics, Subpart C is the most important section of the rule, because it defines which cases should be recorded on the OSHA 300 Log and which should not be recorded.

This section of the rule follow the process for deciding if a case is recordable: determining work-relatedness, if it is a new case, if it meets the general recording criteria, and whether it has special criteria for a specific injury/illness type.

### *Recording criteria [1904.4]*

Under paragraph 1904 “Recording Criteria”, covered employers must record each fatality, injury or illness that:

- is work-related, and
- is a new case, and
- meets one or more of the criteria contained in sections 1904.7 through 1904.11.

Paragraph 1904.4 explains the overall process for deciding whether or not to record a case. All cases (both injury and illness cases) are analyzed using the same criteria. Illness cases are only recorded if they meet the same criteria as injury cases.

1904.4 also includes a flowchart that provides a visual representation of the overall process for deciding whether or not to record an injury or illness.

OSHA’s injury and illness recordkeeping is a 5-step process:

Did the employee experience an injury or illness?

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Yes

↓

Is the injury or illness work-related?

↓

Yes

↓

Is the injury or illness a new case?

↓

Yes

↓

Does the injury or illness meet the general criteria?...

↓

Yes

↓

or the application to specific cases?

↓

Yes

## Record the Injury or Illness

### STEP 1:

Did the employee experience an injury or illness?

#### **Definition [1904.46]**

An injury or illness is **an abnormal condition or disorder**. Injuries include cases such as, but not limited to, a cut, fracture, sprain, or amputation. Illnesses include both acute and chronic illnesses, such as, but not limited to, a skin disease, respiratory disorder, or poisoning.

### STEP 2:

Is the injury or illness work-related?

#### *Determination of Work-Relatedness [1904.5]*

**Work-relatedness** is presumed for injuries and illnesses resulting from events or exposures occurring in the **work environment** unless an exception specifically applies. A case is presumed work-related if, and only if, an event or exposure in the work environment is a discernable cause of the injury or illness or of a significant aggravation to a pre-existing condition.

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When employees are at the establishment, they are in the work environment. When employees are working away from the establishment, they carry a “bubble” of work environment wherever they go.

There must be significant aggravation of a pre-existing injury or illness to establish work-relatedness. The workplace event or exposure must aggravate a pre-existing injury or illness enough that it results in greater consequences than what would have occurred but for that event or exposure. This means that the pre-existing condition requires more medical treatment than otherwise needed; more restrictions, more days away, etc.

**Exemptions** under this section include:

- Present as a member of the general public
- Symptoms arising in work environment that are solely due to nonwork-related event or exposure (Regardless of where signs or symptoms surface, a case is work-related only if a work event or exposure is a discernable cause of the injury or illness or of a significant aggravation to a pre-existing condition.)
- Voluntary participation in wellness program, medical, fitness or recreational activity
- Eating, drinking or preparing food or drink for personal consumption
- Personal tasks outside assigned working hours
- Personal grooming, self medication for non-work-related condition, or intentionally self-inflicted
- Motor vehicle accident in parking lot/access road during commute
- Common cold or flu
- Mental illness, unless employee voluntarily provides a medical opinion from a physician or licensed health care professional (PLHCP) having appropriate qualifications and experience that affirms work-relatedness

Cases meeting the conditions of the listed exceptions to work relationship in the rule are not considered work-related and are, therefore, not recordable.

For example, if a grocery store employee is shopping in the store after work, falls and is injured, the employee is present as a member of the general public and the case is not work-related.

Likewise, if an employee has a diabetic episode and must be given prescription medications, the diabetes

is solely due to a nonwork-related event or exposure, and is not work-related.

Regardless of where signs or symptoms surface, a case is work related only if a work event or exposure is a discernable cause of the injury or illness or of a significant aggravation to a pre-existing condition.

If an employee passes out giving blood or is injured playing basketball – the case is due to voluntary participation in a wellness or fitness program and is not work-related.

If an employee burns his lip on a cup of coffee or chokes on a sandwich – the case is due to eating food or drink for personal consumption, and is not work-related.

When employees are **traveling**, an injury or illness that occurs while the employee is engaged in work activities for the employer is considered work-related (1904.5).

Travel to and from customer contacts and entertaining or being entertained at the direction of the employer are work-related. For example, if an employee falls in the airport while on a business trip, the case is work-related.

When an employee checks into a hotel or motel, he/she establishes a “home away from home.” While they’re in that “home away from home” status, cases that occur are not work-related. For example, if an employee slips in the hotel shower and is injured, the case is not work-related.

Likewise, if the employee takes a side trip while in transit for a vacation, to go sightseeing or shopping, etc., and is injured, the case is not work-related.

When employees are working at home, a case is work-related when an employee is injured or becomes ill while working for pay or compensation. Cases are not work-related if they are related to the general home environment.

For example, if an employee drops a box of work documents and injures her foot, the case would be considered work-related. If an employee’s fingernail was punctured and became infected by a needle from a sewing machine used to perform garment work at home, the injury would be considered work-related.

If an employee was injured because he tripped on the family dog while rushing to answer a work phone call, the case would not be considered work-related.

If an employee working at home is electrocuted

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because of faulty home wiring, the injury would not be considered work-related.

OSHA Directive CPL 2-0.125 gives guidance on OSHA's policy for employees who are working at home and explains that OSHA will not conduct inspections at home offices.

**STEP 3:**

Is the injury or illness a new case?

**Determination of a new case**

Consider an injury or illness a "new case" if the employee has not previously experienced a recorded injury or illness of the same type that affects the same part of the body,

**OR**

the employee previously experienced a recorded injury or illness of the same type that affected the same part of body but had recovered completely (all signs and symptoms had disappeared) from the previous injury or illness and an event or exposure in the work environment caused the signs or symptoms to reappear.

The following would be considered a new case:

- If there is a medical opinion regarding resolution of a case, the employer must follow that opinion
- If an exposure triggers the recurrence, it is a new case (e.g., asthma, rashes)
- If signs and symptoms recur even in the absence of exposure, it is not a new case (e.g., silicosis, tuberculosis, asbestosis)

**Step 4:**

Does the injury or illness meet the general criteria or the application to specific cases?

*General Recording Criteria 1904.7*

An injury or illness is recordable if it results in one or more of the following:

- Death
- Days away from work
- Restricted work activity
- Transfer to another job
- Medical treatment beyond first aid
- Loss of consciousness
- Significant injury or illness diagnosed by a PLHCP

Days Away From Work

Cases that result in days away from work are recordable. The employer is to check the box for days away cases and count the number of days away. The day of the injury or illness is not counted as a day away.

For days away or days restricted, count calendar days.

Under this system, a special case arises when an employee is injured on a Friday or right before a vacation, and returns on the next scheduled day. If a PLHCP gives information that the employee should not have worked during those days off, then the days should be counted.

The employer may stop counting days when they reach 180 days away from work or days of restricted work or both. We then know that this was a serious case. The employer may also stop counting days if the employee leaves the company for some reason not related to the injury or illness – for example, a plant shutdown.

If the employee is away from work for an extended time, the employer must record the case within 7 days with an estimate of the days away and then must update the day count when the actual number of days away or restricted becomes known.

Restricted Work

Cases that result in days of restricted work or job transfer are recordable. The employer is to check the box for restricted work cases and count the number of days restricted or transferred. The day of injury/illness is not counted as a day of restriction. A restriction that is limited only to the day of injury or illness does not make a case recordable.

Restricted work activity is evaluated by looking at two components: time and job functions. If, because of a work-related injury or illness, an employee is unable to work the full shift he or she was scheduled to work, then that worker is considered to be on restricted work activity. For example, if the employee was scheduled to work an 8-hour day, but is only able to work 4 hours, then his work activity is restricted.

If an employee is able to work a full shift, but is unable to perform all of his or her routine job functions, then the worker is also considered to be on restricted work activity.

OSHA has defined routine job functions as work that an employee would regularly have performed at

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least once per week, because OSHA believes that the range of activities captured by this interval of time will generally reflect the range of an employee's usual work activities. Activities performed less frequently than once per week reflect more uncommon work activities that are not considered routine duties for the purposes of this rule.

A case is not recordable under 1904.7(b)(4) as a restricted work case if three conditions are met:

1. the employee experiences minor musculoskeletal discomfort,
2. a health care professional determines that the employee is fully able to perform all or his/her routine job functions, and
3. the employer assigns a work restriction to that employee for the purpose of preventing a more serious condition from developing.

#### Job Transfers

Most job transfers involve some type of restriction. Even if they don't, job transfers due to an injury or illness are recordable events. If an injured or ill employee is transferred to another job for half days, this is also a job transfer.

If a permanent job transfer is made immediately, that is, on the day of injury or illness, at least one day of restricted work activity must be recorded.

#### Medical Treatment

Medical treatment is the management and care of a patient to combat disease or disorder. Medical treatment does not include visits to a PLHCP solely for observation and counseling, including follow-up visits.

Medical treatment also does not include diagnostic procedures, such as x-rays, blood tests, or MRIs. Use of prescription medications for diagnostic purposes is also not considered medical treatment; for example, prescription eye drops used to dilate the pupils.

Finally, medical treatment does not include first aid procedures.

**First Aid** is defined using a list of procedures that are all-inclusive:

- Using nonprescription medication at nonprescription strength
- Tetanus immunizations
- Cleaning, flushing, or soaking surface wounds
- Wound coverings, butterfly bandages, Steri-Strips

- Hot or cold therapy
- Non-rigid means of support
- Temporary immobilization device used to transport accident victims
- Drilling of fingernail or toenail, draining fluid from blister
- Eye patches
- Removing foreign bodies from eye using irrigation or cotton swab
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
- Finger guards
- Massages
- Drinking fluids for relief of heat stress

If a procedure is not on the list, it is not considered first aid for recordkeeping purposes.

#### Loss of Consciousness

All work-related cases involving loss of consciousness must be recorded. The length of time the person is unconscious is irrelevant.

#### Significant Injury or Illness

There are some significant injuries and illness, such as a punctured eardrum or a fractured toe or rib, for which neither medical treatment nor work restrictions may be recommended. In addition, there are some significant progressive diseases, such as byssinosis, silicosis, and some types of cancer, for which medical treatment or work restrictions may not be recommended at the time of diagnosis but are likely to be recommended as the disease progresses. OSHA believes that cancer, chronic irreversible diseases, fractured or cracked bones, and punctured eardrums are generally considered significant injuries and illnesses, and must be recorded at the initial diagnosis even if medical treatment or work restrictions are not recommended, or are postponed, in a particular case.

#### Needlesticks and Sharps 1904.8

Paragraph 1904.8 – Bloodborne Pathogens, requires the recording of all work-related needles and cuts from contaminated sharp objects. This provision has the greatest effect on the health care sector, especially hospitals and nursing homes.

The requirements of the bloodborne pathogen standard for sharps injury logs are linked to the

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recordkeeping rule. If the establishment is exempted from the 1904 requirements, it is also exempted from the sharps injury log requirements of 1910.1030.

An employer can use the 300 Log to meet the requirements for a sharps log. To do so, the employer must be able to segregate the sharps injury data and must include information on the type and brand of device that caused the injury.

#### *Medical Removal 1904.9*

Under 1904.9 requires the employer to record cases where an employee is medically removed under an OSHA standard. Several OSHA standards have medical removal criteria, including the lead, cadmium, and benzene standards.

The case is recorded as a days away or restricted work case depending on how the employer deals with the removal. If employers voluntarily remove employees below the thresholds in the standards, the case does not need to be recorded under this paragraph.

#### *Hearing Loss 1904.10*

Employers must also record work-related **hearing loss** cases when an employee's hearing test shows a marked decrease in overall hearing.

If an event or exposure in the work environment caused or contributed to the hearing loss, or significantly aggravated a pre-existing hearing loss, the case is work related. If a physician or other licensed health care professional determines that the hearing loss is not work related or has not been significantly aggravated by occupational noise exposure, employers are not required to record the case.

If an employee's hearing test (audiogram) reveals that the employee has experienced a work related Standard Threshold Shift (STS) in hearing in one or both ears, and the employee's hearing level is 25 decibels (dB) or more above audiometric zero [averaged at 2000, 3000, and 4000 Hertz (Hz)] in the same ear(s) as the STS, you must record the case on the OSHA 300 Log.

A Standard Threshold Shift, or STS, is defined in OSHA's general industry noise standard at 29 CFR 1910.95(g)(10)(i) as a change in hearing threshold, relative to the baseline audiogram for that employee, of an average of 10 dB or more at 2000, 3000, and 4000 Hz in one or both ears.

Paragraph 1910.95(g)(9) of OSHA's noise standard states:

(9) Revised baseline. An annual audiogram may be substituted for the baseline audiogram when, in the judgment of the audiologist, otolaryngologist, or physician who is evaluating the audiogram:

- (i) The standard threshold shift revealed by the audiogram is persistent, or
- (ii) The hearing threshold shown in the annual audiogram indicates significant improvement over the baseline audiogram.

When you are determining whether an STS has occurred, you may age adjust the employee's current audiogram results by using Tables F-1 or F-2, as appropriate, in Appendix F of 29 CFR 1910.95. You may not use an age adjustment when determining whether the employee's hearing level is 25 dB or more above audiometric zero.

In short, a recordable hearing loss case occurs when an employee experiences an STS (as defined in 1910.95), the STS is work-related, and the employee's aggregate hearing loss exceeds 25 dB from audiometric zero.

#### *Tuberculosis 1904.11*

If an employee is exposed to an active case of tuberculosis at work, and then has a positive TB skin test or becomes an active case, then it must be recorded. The case does not have to be recorded if there is evidence that the case did not arise from a workplace exposure.

#### *Forms 1904.29*

The rule requires employers to keep 3 forms: a 300 Log, a 300A Summary form, and a 301 Incident Report. (See section on OSHA Log 300 at the end of this chapter)

On the 300 Log, the employer checks one and only one of the outcome columns for each case, the one representing the most serious outcome of the case. If the status of the case changes, then the entry must be changed. For example, if the injured employee is experiencing days away from work, then dies, the employer must remove (or line out) the days away entry and the day count and check the box for a fatality.

The 301 form captures data on each injury and illness (the length of service, what time the injury occurred, what time the employee started work, etc.).

The questions about how the person was injured or became ill are identical to the BLS survey questions,

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which makes it easier for employers to complete the survey forms when they receive them.

Many employers use a Worker's Compensation Report, a First Report of Injury or a Company Accident Report as an equivalent form, and they can continue to do this. They just need to make sure that their form includes all of the same data that is found on the 301 form or can be supplemented so that data is attached to it.

There is a separate form for the summary, the 300A. This makes it easier to protect the privacy of injured or ill workers. The form asks for additional data on the average number of employees and hours worked to make it easier to calculate rates.

Incidence rates are the best way to compare an establishment or an individual company's data to the national statistics and to their prior performance.

The employer is required to record a case within 7 calendar days.

Employers can keep their records on equivalent forms, on a computer, or at a central location provided that they can get information into the system within 7 calendar days after an injury or illness occurs, and they can produce the data at the establishment when required.

### **Privacy Concerns**

For certain "privacy concern cases," employers must not enter the employee's name on the 300 form. Instead, they are to enter "privacy case."

A separate, confidential list of the employee's names and case numbers must be kept by the employer and provided to an OSHA inspector upon request.

Privacy concern cases are defined very specifically in the rule. Privacy concern cases are:

- an injury or illness to an intimate body part or the reproductive system,
- an injury or illness resulting from sexual assault,
- mental illness,
- HIV infection, hepatitis or tuberculosis,
- needlestick and sharps injuries that are contaminated with another person's blood or other potentially infectious material, or
- illness cases where employees independently and voluntarily request that their names not be entered on the log.

For a privacy concern case, if the employee's identity

can still be implied, the employer may use some discretion in describing the case. The rule requires that enough information be entered to identify the cause and general severity of the incident. For example, a sexual assault can be entered as "assault" or an injury to a reproductive organ can be entered as a "lower abdominal injury." The employer is not required to go into graphic detail in these types of cases.

If the employer gives out the forms to the public, the names must be removed first. There are exceptions for employee access, OSHA access, auditors, insurance, or law enforcement personnel.

### **Subpart D - Other requirements**

Subpart D includes other requirements, telling the employer how to handle multiple business establishments and temporary employees, how to summarize and store the data, what to do if the business is sold, employee involvement, state plans and variances.

#### *Multiple Business Establishments*

When the employer has more than one establishment, a separate log must be kept for each establishment expected to be in operation for more than a year.

For the short term establishments (those expected to be in operation for less than a year), the employer may keep one log that includes all of the injuries and illnesses at the short term establishments, or keep logs by state or district.

An employer with multiple lines of business may have some exempt and some covered establishments, and each employee must be linked to an establishment for recordkeeping purposes.

#### *Covered Employees*

Employees on the payroll must be included in the employer's records, unless the company is acting as a temporary help service.

Employees not covered in the OSH Act are also not included in the OSHA records. These include unpaid volunteers, sole proprietors, family members on family farms, domestic workers in residential settings.

Temporary workers will be the employees of the party exercising day-to-day control over them, and the supervising party will record their injuries and illnesses.

The employer and the temporary help service can discuss each case to see who is recording it. We do

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not want a case to be recorded twice if it can be avoided.

#### *Annual Summary*

The annual summary requirements lay out a process for completing the end-of-year processing.

The employer must first review the records and correct them if necessary, then complete the form, certify the form, and post it for 3 months.

The form includes data on average employment and hours worked to make it easier to calculate incidence rates. The employer may estimate these figures using the optional worksheet provided in the forms package.

The rule requires certification by a company executive to help improve management involvement in the records. A company executive is narrowly defined as:

- an owner of the company,
- an officer of the corporation
- the highest ranking person at the establishment, or
- his or her boss.

The records must be posted for 3 months.

#### *Retention and Updating*

The records must be retained for five years.

During the retention period, the employer must update the 300 form to include any cases that are newly discovered or whose status has changed, but does not have to change the summary or the 301 form.

#### *Employee Involvement*

The rule requires each employer to set up a way for employees to report injuries and illnesses. Employers also must tell each employee how to report. This is a very basic step to make sure employees report cases so they can get into the records.

Employers are also required to provide the records to employees. The 300 Log is available to employees, former employees, or employee representatives by the end of the next business day. An employee, former employee or personal representative is allowed to receive a copy of his or her own 301 form. An authorized representative can get 301 information for all the injuries and illnesses at the establishment, but only the information about the injury or illness. That information is provided on the right side of the 301 form.

#### *Prohibition Against Discrimination*

The rule reminds employers about the anti-discrimination provisions of the OSH Act. Employers may not discriminate against an employee for reporting a work-related injury or illness case.

#### *State Plans*

The State Plan States must collect the same information as federal OSHA. However, the States may have more stringent or supplemental requirements on other matters, such as industry and size exemptions, the reporting of fatalities and catastrophes, and the access provisions.

The State Plan States must cover public sector employees, so in these states records are kept by state and local government agencies.

#### **Subpart E - Reporting to the Government**

Subpart E includes the requirements for providing information to the government.

The federal government conducts two surveys of 1904 information – one by OSHA and one by the Bureau of Labor Statistics. If employers receive a form for either survey in the mail, they must complete and return the form using the instructions on the form.

Employers must report fatality and catastrophe incidents to OSHA within 8 hours, verbally discussing the case with OSHA. The case can be called in to the local area office or phoned in to 1-800-321-OSHA. Cases may be recordable but not reportable, for example, a fatality due to a motor vehicle accident on a public highway does not have to be reported within 8 hours, but it is a recordable fatality on the 300 Log.

Employers must provide the records within 4 business hours of a request by an OSHA or NIOSH official. If an inspection is in Texas and the records are in New York, use the business hours of New York.

#### **Subpart F – Transition to the Former Rule**

Subpart F tells the employer how to handle data collected under OSHA's old rule. You must save your copies of the OSHA 200 and 101 forms for five years following the year to which they relate and continue to provide access to the data as though these forms were the OSHA 300 and 301 forms. You are not required to update your old 200 and 101 forms.

# Regulatory Text

Occupational Safety & Health Administration

U.S. Department of Labor

## **OSHA Part 1904 - Recording and Reporting Occupational Injuries and Illnesses**

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1904.0 Purpose

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1904.46 Definitions

### **Subpart A -- Purpose**

§1904.0 Purpose

The purpose of this rule (Part 1904) is to require employers to record and report work-related fatalities, injuries and illnesses.

Note to §1904.0: Recording or reporting a work-related injury, illness, or fatality does not mean that the employer or employee was at fault, that an OSHA rule has been violated, or that the employee is eligible for workers' compensation or other benefits.

### **Subpart B -- Scope**

Note to Subpart B: All employers covered by the Occupational Safety and Health Act (OSH Act) are covered by these Part 1904 regulations. However, most employers do not have to keep OSHA injury and illness records unless OSHA or the Bureau of Labor Statistics (BLS) informs them in writing that they must keep records. For example, employers with 10 or fewer employees and business establishments in certain industry classifications are partially exempt from keeping OSHA injury and illness records.

§1904.1 Partial exemption for employers with 10 or fewer employees.

#### **(a) Basic requirement.**

(1) If your company had ten (10) or fewer employees at all times during the last calendar year, you do not need to keep OSHA injury and illness records unless OSHA or the BLS informs you in writing that you must keep records under §1904.41 or §1904.42. However, as required by §1904.39, all employers covered by the OSH Act must report to OSHA any workplace incident that results in a fatality or the hospitalization of three or more employees.

(2) If your company had more than ten (10) employees at any time during the last calendar year, you must keep OSHA injury and illness records unless

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your establishment is classified as a partially exempt industry under §1904.2.

**(b) Implementation.**

(1) Is the partial exemption for size based on the size of my entire company or on the size of an individual business establishment?

The partial exemption for size is based on the number of employees in the entire company.

(2) How do I determine the size of my company to find out if I qualify for the partial exemption for size?

To determine if you are exempt because of size, you need to determine your company's peak employment during the last calendar year. If you had no more than 10 employees at any time in the last calendar year, your company qualifies for the partial exemption for size.

§1904.2 Partial exemption for establishments in certain industries.

**(a) Basic requirement.**

(1) If your business establishment is classified in a specific low hazard retail, service, finance, insurance or real estate industry listed in Appendix A to this Subpart B, you do not need to keep OSHA injury and illness records unless the government asks you to keep the records under §1904.41 or §1904.42. However, all employers must report to OSHA any workplace incident that results in a fatality or the hospitalization of three or more employees (see §1904.39).

(2) If one or more of your company's establishments are classified in a non-exempt industry, you must keep OSHA injury and illness records for all of such establishments unless your company is partially exempted because of size under §1904.1.

**(b) Implementation.**

(1) Does the partial industry classification exemption apply only to business establishments in the retail, services, finance, insurance or real estate industries (SICs 52-89)?

Yes, business establishments classified in agriculture; mining; construction; manufacturing; transportation; communication, electric, gas and sanitary services; or wholesale trade are not eligible for the partial industry classification exemption.

(2) Is the partial industry classification exemption

based on the industry classification of my entire company or on the classification of individual business establishments operated by my company?

The partial industry classification exemption applies to individual business establishments. If a company has several business establishments engaged in different classes of business activities, some of the company's establishments may be required to keep records, while others may be exempt.

(3) How do I determine the Standard Industrial Classification code for my company or for individual establishments?

You determine your Standard Industrial Classification (SIC) code by using the Standard Industrial Classification Manual, Executive Office of the President, Office of Management and Budget. You may contact your nearest OSHA office or State agency for help in determining your SIC.

§1904.3 Keeping records for more than one agency.

If you create records to comply with another government agency's injury and illness recordkeeping requirements, OSHA will consider those records as meeting OSHA's Part 1904 recordkeeping requirements if OSHA accepts the other agency's records under a memorandum of understanding with that agency, or if the other agency's records contain the same information as this Part 1904 requires you to record. You may contact your nearest OSHA office or State agency for help in determining whether your records meet OSHA's requirements.

**Non-Mandatory Appendix A to Subpart B -- Partially Exempt Industries**

Employers are not required to keep OSHA injury and illness records for any establishment classified in the following Standard Industrial Classification (SIC) codes, unless they are asked in writing to do so by OSHA, the Bureau of Labor Statistics (BLS), or a state agency operating under the authority of OSHA or the BLS. All employers, including those partially exempted by reason of company size or industry classification, must report to OSHA any workplace incident that results in a fatality or the hospitalization of three or more employees (see §1904.39).

**SIC Code Industry Description**

525 Hardware Stores; 725 Shoe Repair and Shoeshine Parlors; 542 Meat and Fish Markets; 726 Funeral

Service and Crematories; 544 Candy, Nut, and Confectionery Stores; 729 Miscellaneous Personal Services; 545 Dairy Products Stores; 731 Advertising Services; 546 Retail Bakeries; 732 Credit Reporting and Collection Services; 549 Miscellaneous Food Stores; 733 Mailing, Reproduction, & Stenographic Services; 551 New and Used Car Dealers; 737 Computer and Data Processing Services; 552 Used Car Dealers; 738 Miscellaneous Business Services; 554 Gasoline Service Stations; 764 Reupholstery and Furniture Repair; 557 Motorcycle Dealers; 78 Motion Picture; 56 Apparel and Accessory Stores; 791 Dance Studios, Schools, and Halls; 573 Radio, Television, & Computer Stores; 792 Producers, Orchestras, Entertainers; 58 Eating and Drinking Places; 793 Bowling Centers; 591 Drug Stores and Proprietary Stores; 801 Offices & Clinics Of Medical Doctors; 592 Liquor Stores; 802 Offices and Clinics Of Dentists; 594 Miscellaneous Shopping Goods Stores; 803 Offices Of Osteopathic Physicians; 599 Retail Stores, Not Elsewhere Classified; 804 Offices Of Other Health Practitioners; 60 Depository Institutions (banks & savings institutions); 807 Medical and Dental Laboratories; 61 Nondepository Institutions (credit institutions); 809 Health and Allied Services, Not Elsewhere Classified; 62 Security and Commodity Brokers; 81 Legal Services; 63 Insurance Carriers; 82 Educational Services (schools, colleges, universities and libraries); 64 Insurance Agents, Brokers, & Services; 832 Individual and Family Services; 653 Real Estate Agents and Managers; 835 Child Day Care Services; 654 Title Abstract Offices; 839 Social Services, Not Elsewhere Classified; 67 Holding and Other Investment Offices; 841 Museums and Art Galleries; 722 Photographic Studios, Portrait; 86 Membership Organizations; 723 Beauty Shops; 87 Engineering, Accounting, Research, Management, and Related Services; 724 Barber Shops; 899 Services, not elsewhere classified.

### **Subpart C -- Recordkeeping Forms and Recording Criteria**

Note to Subpart C: This Subpart describes the work-related injuries and illnesses that an employer must enter into the OSHA records and explains the OSHA forms that employers must use to record work-related fatalities, injuries, and illnesses.

#### **§1904.4 Recording criteria.**

**(a) Basic requirement.** Each employer required by this Part to keep records of fatalities, injuries, and illnesses must record each fatality, injury and illness that:

- (1) Is work-related; and
- (2) Is a new case; and
- (3) Meets one or more of the general recording criteria of §1904.7 or the application to specific cases of §1904.8 through §1904.12.

#### **(b) Implementation.**

- (1) What sections of this rule describe recording criteria for recording work-related injuries and illnesses?

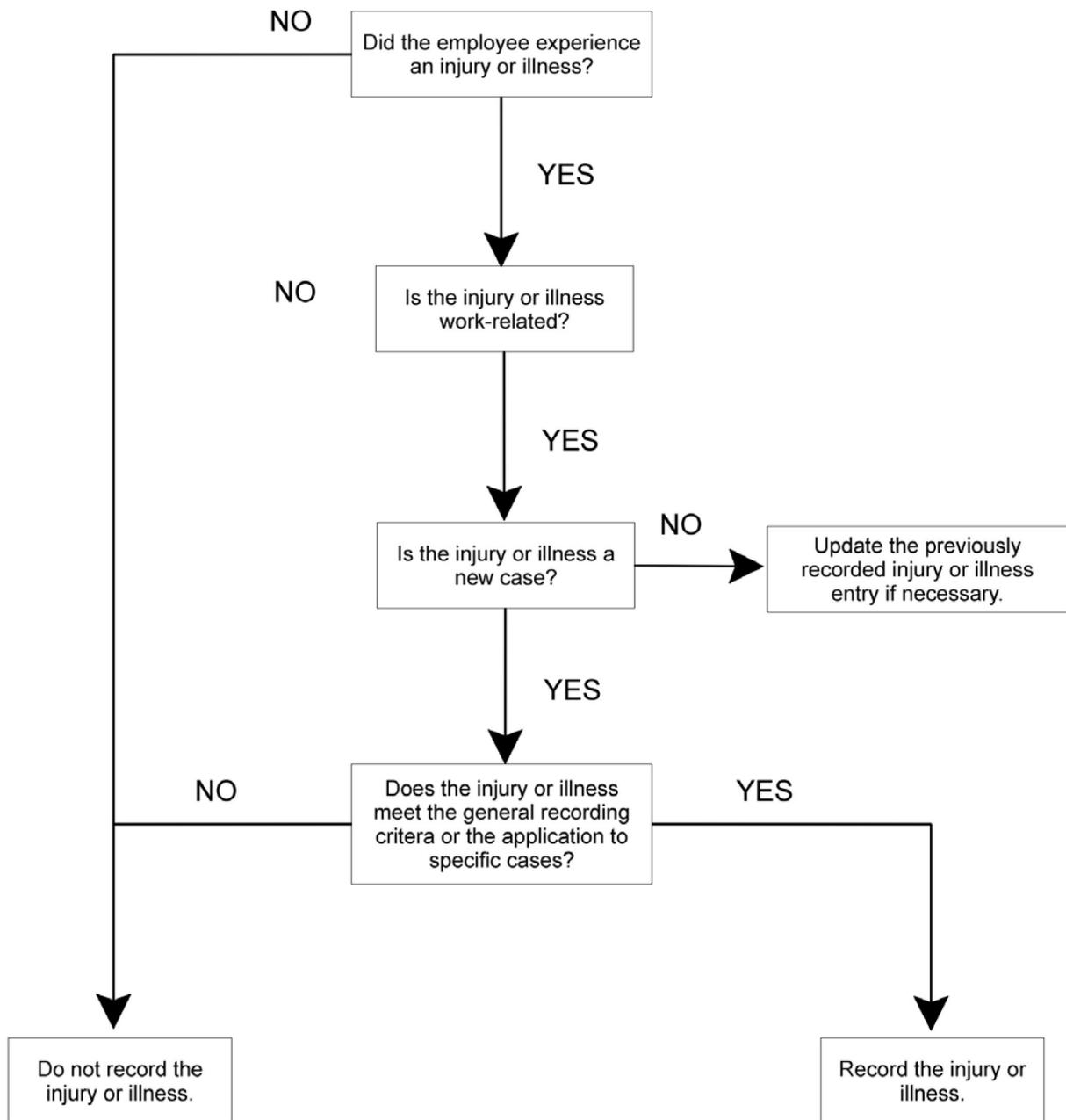
The table below indicates which sections of the rule address each topic.

- (i) Determination of work-relatedness. See §1904.5
- (ii) Determination of a new case. See §1904.6
- (iii) General recording criteria. See §1904.7
- (iv) Additional criteria. (Needlestick and sharps injury cases, tuberculosis cases, hearing loss cases, medical removal cases, and musculoskeletal disorder cases) See §1904.8 through §1904.12

- (2) How do I decide whether a particular injury or illness is recordable?

The decision tree for recording work-related injuries and illnesses below shows the steps involved in making this determination.

The decision tree for recording work-related injuries and illnesses below shows the steps involved in making this determination.



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§1904.5 Determination of work-relatedness.

**(a) Basic requirement.** You must consider an injury or illness to be work-related if an event or exposure in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing injury or illness. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the work environment, unless an exception in §1904.5(b)(2) specifically applies.

**(b) Implementation.**

- (1) What is the “work environment”?

OSHA defines the work environment as “the establishment and other locations where one or more employees are working or are present as a condition of their employment. The work environment includes not only physical locations, but also the equipment or materials used by the employee during the course of his or her work.”

- (2) Are there situations where an injury or illness occurs in the work environment and is not considered work-related?

Yes, an injury or illness occurring in the work environment that falls under one of the following exceptions is not work-related, and therefore is not recordable.

1904.5(b)(2) You are not required to record injuries and illnesses if...

- (i) At the time of the injury or illness, the employee was present in the work environment as a member of the general public rather than as an employee.
- (ii) The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment.
- (iii) The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, racquetball, or baseball.
- (iv) The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on the employer’s premises

or brought in). For example, if the employee is injured by choking on a sandwich while in the employer’s establishment, the case would not be considered work-related.

Note: If the employee is made ill by ingesting food contaminated by workplace contaminants (such as lead), or gets food poisoning from food supplied by the employer, the case would be considered work-related.

(v) The injury or illness is solely the result of an employee doing personal tasks (unrelated to their employment) at the establishment outside of the employee’s assigned working hours.

(vi) The injury or illness is solely the result of personal grooming, self medication for a non-work-related condition, or is intentionally self-inflicted.

(vii) The injury or illness is caused by a motor vehicle accident and occurs on a company parking lot or company access road while the employee is commuting to or from work.

(viii) The illness is the common cold or flu (Note: contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work).

(ix) The illness is a mental illness. Mental illness will not be considered work-related unless the employee voluntarily provides the employer with an opinion from a physician or other licensed health care professional with appropriate training and experience (psychiatrist, psychologist, psychiatric nurse practitioner, etc.) stating that the employee has a mental illness that is work-related.

- (3) How do I handle a case if it is not obvious whether the precipitating event or exposure occurred in the work environment or occurred away from work?

In these situations, you must evaluate the employee’s work duties and environment to decide whether or not one or more events or exposures in the work environment either caused or contributed to the resulting condition or significantly aggravated a pre-existing condition.

- (4) How do I know if an event or exposure in the

work environment “significantly aggravated” a preexisting injury or illness?

A preexisting injury or illness has been significantly aggravated, for purposes of OSHA injury and illness recordkeeping, when an event or exposure in the work environment results in any of the following:

(i) Death, provided that the preexisting injury or illness would likely not have resulted in death but for the occupational event or exposure.

(ii) Loss of consciousness, provided that the preexisting injury or illness would likely not have resulted in loss of consciousness but for the occupational event or exposure.

(iii) One or more days away from work, or days of restricted work, or days of job transfer that otherwise would not have occurred but for the occupational event or exposure.

(iv) Medical treatment in a case where no medical treatment was needed for the injury or illness before the workplace event or exposure, or a change in medical treatment was necessitated by the workplace event or exposure.

- (5) Which injuries and illnesses are considered pre-existing conditions?

An injury or illness is a preexisting condition if it resulted solely from a non-work-related event or exposure that occurred outside the work environment.

- (6) How do I decide whether an injury or illness is work-related if the employee is on travel status at the time the injury or illness occurs?

Injuries and illnesses that occur while an employee is on travel status are work-related if, at the time of the injury or illness, the employee was engaged in work activities “in the interest of the employer.”

Examples of such activities include travel to and from customer contacts, conducting job tasks, and entertaining or being entertained to transact, discuss, or promote business (work-related entertainment includes only entertainment activities being engaged in at the direction of the employer).

Injuries or illnesses that occur when the

employee is on travel status do not have to be recorded if they meet one of the exceptions listed below.

#### 1904.5 (b)(6)

If the employee has ...You may use the following to determine if an injury or illness is work-related.

- (i) Checked into a hotel or motel for one or more days.

When a traveling employee checks into a hotel, motel, or other temporary residence, he or she establishes a “home away from home.” You must evaluate the employee’s activities after he or she checks into the hotel, motel, or other temporary residence for their work-relatedness in the same manner as you evaluate the activities of a non-traveling employee. When the employee checks into the temporary residence, he or she is considered to have left the work environment. When the employee begins work each day, he or she re-enters the work environment. If the employee has established a “home away from home” and is reporting to a fixed worksite each day, you also do not consider injuries or illnesses work-related if they occur while the employee is commuting between the temporary residence and the job location.

- (ii) Taken a detour for personal reasons.

Injuries or illnesses are not considered work-related if they occur while the employee is on a personal detour from a reasonably direct route of travel (e.g., has taken a side trip for personal reasons).

- (7) How do I decide if a case is work-related when the employee is working at home?

Injuries and illnesses that occur while an employee is working at home, including work in a home office, will be considered work-related if the injury or illness occurs while the employee is performing work for pay or compensation in the home, and the injury or illness is directly related to the performance of work rather than to the general home environment or setting. For example, if an employee drops a box of work documents and injures his or her foot, the case is considered work-related. If an employee’s fingernail is punctured by a needle from a sewing machine used to perform

garment work at home, becomes infected and requires medical treatment, the injury is considered work-related. If an employee is injured because he or she trips on the family dog while rushing to answer a work phone call, the case is not considered work-related. If an employee working at home is electrocuted because of faulty home wiring, the injury is not considered work-related.

#### §1904.6 Determination of new cases.

**(a) Basic requirement.** You must consider an injury or illness to be a “new case” if:

- (1) The employee has not previously experienced a recorded injury or illness of the same type that affects the same part of the body, or
- (2) The employee previously experienced a recorded injury or illness of the same type that affected the same part of the body but had recovered completely (all signs and symptoms had disappeared) from the previous injury or illness and an event or exposure in the work environment caused the signs or symptoms to reappear.

#### **(b) Implementation.**

- (1) When an employee experiences the signs or symptoms of a chronic work-related illness, do I need to consider each recurrence of signs or symptoms to be a new case?

No, for occupational illnesses where the signs or symptoms may recur or continue in the absence of an exposure in the workplace, the case must only be recorded once. Examples may include occupational cancer, asbestosis, byssinosis and silicosis.

- (2) When an employee experiences the signs or symptoms of an injury or illness as a result of an event or exposure in the workplace, such as an episode of occupational asthma, must I treat the episode as a new case?

Yes, because the episode or recurrence was caused by an event or exposure in the workplace, the incident must be treated as a new case.

- (3) May I rely on a physician or other licensed health care professional to determine whether a case is a new case or a recurrence of an old case?

You are not required to seek the advice of a

physician or other licensed health care professional. However, if you do seek such advice, you must follow the physician or other licensed health care professional’s recommendation about whether the case is a new case or a recurrence. If you receive recommendations from two or more physicians or other licensed health care professionals, you must make a decision as to which recommendation is the most authoritative (best documented, best reasoned, or most authoritative), and record the case based upon that recommendation.

#### §1904.7 General recording criteria.

**(a) Basic requirement.** You must consider an injury or illness to meet the general recording criteria, and therefore to be recordable, if it results in any of the following: death, days away from work, restricted work or transfer to another job, medical treatment beyond first aid, or loss of consciousness. You must also consider a case to meet the general recording criteria if it involves a significant injury or illness diagnosed by a physician or other licensed health care professional, even if it does not result in death, days away from work, restricted work or job transfer, medical treatment beyond first aid, or loss of consciousness.

#### **(b) Implementation.**

- (1) How do I decide if a case meets one or more of the general recording criteria?

A work-related injury or illness must be recorded if it results in one or more of the following:

- (i) Death, See §1904.7(b)(2)
  - (ii) Days away from work, See §1904.7(b)(3)
  - (iii) Restricted work or transfer to another job, See §1904.7(b)(4)
  - (iv) Medical treatment beyond first aid, See §1904.7(b)(5)
  - (v) Loss of consciousness, See §1904.7(b)(6)
  - (vi) A significant injury or illness diagnosed by a physician or other licensed health care professional. See §1904.7(b)(7)
- (2) How do I record a work-related injury or illness that results in the employee’s death?

You must record an injury or illness that results

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in death by entering a check mark on the OSHA 300 Log in the space for cases resulting in death. You must also report any work-related fatality to OSHA within eight (8) hours, as required by §1904.39.

- (3) How do I record a work-related injury or illness that results in days away from work?

When an injury or illness involves one or more days away from work, you must record the injury or illness on the OSHA 300 Log with a check mark in the space for cases involving days away and an entry of the number of calendar days away from work in the number of days column. If the employee is out for an extended period of time, you must enter an estimate of the days that the employee will be away, and update the day count when the actual number of days is known.

- (i) Do I count the day on which the injury occurred or the illness began?

No, you begin counting days away on the day after the injury occurred or the illness began.

- (ii) How do I record an injury or illness when a physician or other licensed health care professional recommends that the worker stay at home but the employee comes to work anyway?

You must record these injuries and illnesses on the OSHA 300 Log using the check box for cases with days away from work and enter the number of calendar days away recommended by the physician or other licensed health care professional. If a physician or other licensed health care professional recommends days away, you should encourage your employee to follow that recommendation. However, the days away must be recorded whether the injured or ill employee follows the physician or licensed health care professional's recommendation or not. If you receive recommendations from two or more physicians or other licensed health care professionals, you may make a decision as to which recommendation is the most authoritative, and record the case based upon that recommendation.

- (iii) How do I handle a case when a physician or other licensed health care professional

recommends that the worker to return to work but the employee stays at home anyway?

In this situation, you must end the count of days away from work on the date the physician or other licensed health care professional recommends that the employee return to work.

- (iv) How do I count weekends, holidays, or other days the employee would not have worked anyway?

You must count the number of calendar days the employee was unable to work as a result of the injury or illness, regardless of whether or not the employee was scheduled to work on those day(s). Weekend days, holidays, vacation days or other days off are included in the total number of days recorded if the employee would not have been able to work on those days because of a work-related injury or illness.

- (v) How do I record a case in which a worker is injured or becomes ill on a Friday and reports to work on a Monday, and was not scheduled to work on the weekend?

You need to record this case only if you receive information from a physician or other licensed health care professional indicating that the employee should not have worked, or should have performed only restricted work, during the weekend. If so, you must record the injury or illness as a case with days away from work or restricted work, and enter the day counts, as appropriate.

- (vi) How do I record a case in which a worker is injured or becomes ill on the day before scheduled time off such as a holiday, a planned vacation, or a temporary plant closing?

You need to record a case of this type only if you receive information from a physician or other licensed health care professional indicating that the employee should not have worked, or should have performed only restricted work, during the scheduled time off. If so, you must record the injury or illness as a case with days away from work or restricted work, and enter the day counts, as

appropriate.

(vii) Is there a limit to the number of days away from work I must count?

Yes, you may “cap” the total days away at 180 calendar days. You are not required to keep track of the number of calendar days away from work if the injury or illness resulted in more than 180 calendar days away from work and/or days of job transfer or restriction. In such a case, entering 180 in the total days away column will be considered adequate.

(viii) May I stop counting days if an employee who is away from work because of an injury or illness retires or leaves my company?

Yes, if the employee leaves your company for some reason unrelated to the injury or illness, such as retirement, a plant closing, or to take another job, you may stop counting days away from work or days of restriction/job transfer. If the employee leaves your company because of the injury or illness, you must estimate the total number of days away or days of restriction/job transfer and enter the day count on the 300 Log.

(ix) If a case occurs in one year but results in days away during the next calendar year, do I record the case in both years?

No, you only record the injury or illness once. You must enter the number of calendar days away for the injury or illness on the OSHA 300 Log for the year in which the injury or illness occurred. If the employee is still away from work because of the injury or illness when you prepare the annual summary, estimate the total number of calendar days you expect the employee to be away from work, use this number to calculate the total for the annual summary, and then update the initial log entry later when the day count is known or reaches the 180-day cap.

(4) How do I record a work-related injury or illness that results in restricted work or job transfer?

When an injury or illness involves restricted work or job transfer but does not involve death or days away from work, you must record the injury or illness on the OSHA 300 Log by placing a check mark in the space for job transfer or restriction and an entry of the number of

restricted or transferred days in the restricted workdays column.

(i) How do I decide if the injury or illness resulted in restricted work?

Restricted work occurs when, as the result of a work-related injury or illness:

(A) You keep the employee from performing one or more of the routine functions of his or her job, or from working the full workday that he or she would otherwise have been scheduled to work; or

(B) A physician or other licensed health care professional recommends that the employee not perform one or more of the routine functions of his or her job, or not work the full workday that he or she would otherwise have been scheduled to work.

(ii) What is meant by “routine functions”?

For recordkeeping purposes, an employee’s routine functions are those work activities the employee regularly performs at least once per week.

(iii) Do I have to record restricted work or job transfer if it applies only to the day on which the injury occurred or the illness began?

No, you do not have to record restricted work or job transfers if you, or the physician or other licensed health care professional, impose the restriction or transfer only for the day on which the injury occurred or the illness began.

(iv) If you or a physician or other licensed health care professional recommends a work restriction, is the injury or illness automatically recordable as a “restricted work” case?

No, a recommended work restriction is recordable only if it affects one or more of the employee’s routine job functions. To determine whether this is the case, you must evaluate the restriction in light of the routine functions of the injured or ill employee’s job. If the restriction from you or the physician or other licensed health care professional keeps the employee from performing one or more of his or her routine job functions, or from working the full workday the injured or ill employee would otherwise have worked, the employee’s work has been restricted and you

must record the case.

(v) How do I record a case where the worker works only for a partial work shift because of a work-related injury or illness?

A partial day of work is recorded as a day of job transfer or restriction for recordkeeping purposes, except for the day on which the injury occurred or the illness began.

(vi) If the injured or ill worker produces fewer goods or services than he or she would have produced prior to the injury or illness but otherwise performs all of the routine functions of his or her work, is the case considered a restricted work case?

No, the case is considered restricted work only if the worker does not perform all of the routine functions of his or her job or does not work the full shift that he or she would otherwise have worked.

(vii) How do I handle vague restrictions from a physician or other licensed health care professional, such as that the employee engage only in “light duty” or “take it easy for a week”?

If you are not clear about the physician or other licensed health care professional’s recommendation, you may ask that person whether the employee can do all of his or her routine job functions and work all of his or her normally assigned work shift. If the answer to both of these questions is “Yes,” then the case does not involve a work restriction and does not have to be recorded as such. If the answer to one or both of these questions is “No,” the case involves restricted work and must be recorded as a restricted work case. If you are unable to obtain this additional information from the physician or other licensed health care professional who recommended the restriction, record the injury or illness as a case involving restricted work.

(viii) What do I do if a physician or other licensed health care professional recommends a job restriction meeting OSHA’s definition, but the employee does all of his or her routine job functions anyway?

You must record the injury or illness on the OSHA 300 Log as a restricted work case. If

a physician or other licensed health care professional recommends a job restriction, you should ensure that the employee complies with that restriction. If you receive recommendations from two or more physicians or other licensed health care professionals, you may make a decision as to which recommendation is the most authoritative, and record the case based upon that recommendation.

(ix) How do I decide if an injury or illness involved a transfer to another job?

If you assign an injured or ill employee to a job other than his or her regular job for part of the day, the case involves transfer to another job.

Note: This does not include the day on which the injury or illness occurred.

(x) Are transfers to another job recorded in the same way as restricted work cases?

Yes, both job transfer and restricted work cases are recorded in the same box on the OSHA 300 Log. For example, if you assign, or a physician or other licensed health care professional recommends that you assign, an injured or ill worker to his or her routine job duties for part of the day and to another job for the rest of the day, the injury or illness involves a job transfer. You must record an injury or illness that involves a job transfer by placing a check in the box for job transfer.

(xi) How do I count days of job transfer or restriction?

You count days of job transfer or restriction in the same way you count days away from work, using §1904.7(b)(3)(i) to (viii), above. The only difference is that, if you permanently assign the injured or ill employee to a job that has been modified or permanently changed in a manner that eliminates the routine functions the employee was restricted from performing, you may stop the day count when the modification or change is made permanent. You must count at least one day of restricted work or job transfer for such cases.

(5) How do I record an injury or illness that involves medical treatment beyond first aid?

If a work-related injury or illness results in medical treatment beyond first aid, you must

record it on the OSHA 300 Log. If the injury or illness did not involve death, one or more days away from work, one or more days of restricted work, or one or more days of job transfer, you enter a check mark in the box for cases where the employee received medical treatment but remained at work and was not transferred or restricted.

(i) What is the definition of medical treatment?

“Medical treatment” means the management and care of a patient to combat disease or disorder. For the purposes of Part 1904, medical treatment does not include:

- (A) Visits to a physician or other licensed health care professional solely for observation or counseling;
- (B) The conduct of diagnostic procedures, such as x-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g., eye drops to dilate pupils); or
- (C) “First aid” as defined in paragraph (b)(5)(ii) of this section.

(ii) What is “first aid”?

For the purposes of Part 1904, “first aid”, means the following:

- (A) Using a nonprescription medication at nonprescription strength (for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes);
- (B) Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);
- (C) Cleaning, flushing or soaking wounds on the surface of the skin;
- (D) Using wound coverings such as bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Steri-Strips™ (other wound closing devices such as sutures, staples, etc. are considered medical

treatment);

(E) Using hot or cold therapy;

(F) Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes);

(G) Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.).

(H) Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister;

(I) Using eye patches;

(J) Removing foreign bodies from the eye using only irrigation or a cotton swab;

(K) Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means;

(L) Using finger guards;

(M) Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes); or

(N) Drinking fluids for relief of heat stress.

(iii) Are any other procedures included in first aid?

No, this is a complete list of all treatments considered first aid for Part 1904 purposes.

(iv) Does the professional status of the person providing the treatment have any effect on what is considered first aid or medical treatment?

No, OSHA considers the treatments listed in §1904.7(b)(5)(ii) of this Part to be first aid regardless of the professional status of the person providing the treatment. Even when these treatments are provided by a physician or other licensed health care professional, they are considered first aid for the purposes of Part 1904. Similarly, OSHA considers treatment beyond first aid to be medical treatment even when it is provided by someone other than a physician or other licensed health care professional.

(v) What if a physician or other licensed health care professional recommends medical treatment but the employee does not follow the recommendation?

If a physician or other licensed health care professional recommends medical treatment, you should encourage the injured or ill employee to follow that recommendation. However, you must record the case even if the injured or ill employee does not follow the physician or other licensed health care professional's recommendation.

(6) Is every work-related injury or illness case involving a loss of consciousness recordable?

Yes, you must record a work-related injury or illness if the worker becomes unconscious, regardless of the length of time the employee remains unconscious.

(7) What is a "significant" diagnosed injury or illness that is recordable under the general criteria even if it does not result in death, days away from work, restricted work or job transfer, medical treatment beyond first aid, or loss of consciousness?

Work-related cases involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum must always be recorded under the general criteria at the time of diagnosis by a physician or other licensed health care professional.

Note to §1904.7: OSHA believes that most significant injuries and illnesses will result in one of the criteria listed in §1904.7(a): death, days away from work, restricted work or job transfer, medical treatment beyond first aid, or loss of consciousness. However, there are some significant injuries, such as a punctured eardrum or a fractured toe or rib, for which neither medical treatment nor work restrictions may be recommended. In addition, there are some significant progressive diseases, such as byssinosis, silicosis, and some types of cancer, for which medical treatment or work restrictions may not be recommended at the time of diagnosis but are likely to be recommended as the disease progresses.

OSHA believes that cancer, chronic irreversible diseases, fractured or cracked bones, and punctured eardrums are generally considered

significant injuries and illnesses, and must be recorded at the initial diagnosis even if medical treatment or work restrictions are not recommended, or are postponed, in a particular case.

#### §1904.8 Recording criteria for needlestick and sharps injuries.

**(a) Basic requirement.** You must record all work-related needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (as defined by 29 CFR 1910.1030). You must enter the case on the OSHA 300 Log as an injury. To protect the employee's privacy, you may not enter the employee's name on the OSHA 300 Log (see the requirements for privacy cases in paragraphs 1904.29(b)(6) through 1904.29(b)(9)).

#### **(b) Implementation.**

(1) What does "other potentially infectious material" mean?

The term "other potentially infectious materials" is defined in the OSHA Bloodborne Pathogens standard at §1910.1030(b). These materials include:

- (i) Human bodily fluids, tissues and organs, and
- (ii) Other materials infected with the HIV or hepatitis B (HBV) virus such as laboratory cultures or tissues from experimental animals.

(2) Does this mean that I must record all cuts, lacerations, punctures, and scratches?

No, you need to record cuts, lacerations, punctures, and scratches only if they are work-related and involve contamination with another person's blood or other potentially infectious material. If the cut, laceration, or scratch involves a clean object, or a contaminant other than blood or other potentially infectious material, you need to record the case only if it meets one or more of the recording criteria in §1904.7.

(3) If I record an injury and the employee is later diagnosed with an infectious bloodborne disease, do I need to update the OSHA 300 Log?

Yes, you must update the classification of the case on the OSHA 300 Log if the case results in death, days away from work, restricted work,

or job transfer. You must also update the description to identify the infectious disease and change the classification of the case from an injury to an illness.

- (4) What if one of my employees is splashed or exposed to blood or other potentially infectious material without being cut or scratched? Do I need to record this incident?

You need to record such an incident on the OSHA 300 Log as an illness if:

- (i) It results in the diagnosis of a bloodborne illness, such as HIV, hepatitis B, or hepatitis C; or
- (ii) It meets one or more of the recording criteria in §1904.7.

§1904.9 Recording criteria for cases involving medical removal under OSHA standards.

**(a) Basic requirement.** If an employee is medically removed under the medical surveillance requirements of an OSHA standard, you must record the case on the OSHA 300 Log.

**(b) Implementation.**

- (1) How do I classify medical removal cases on the OSHA 300 Log?

You must enter each medical removal case on the OSHA 300 Log as either a case involving days away from work or a case involving restricted work activity, depending on how you decide to comply with the medical removal requirement. If the medical removal is the result of a chemical exposure, you must enter the case on the OSHA 300 Log by checking the “poisoning” column.

- (2) Do all of OSHA’s standards have medical removal provisions?

No, some OSHA standards, such as the standards covering bloodborne pathogens and noise, do not have medical removal provisions. Many OSHA standards that cover specific chemical substances have medical removal provisions. These standards include, but are not limited to, lead, cadmium, methylene chloride, formaldehyde, and benzene.

- (3) Do I have to record a case where I voluntarily removed the employee from exposure before the medical removal criteria in an OSHA

standard are met?

No, if the case involves voluntary medical removal before the medical removal levels required by an OSHA standard, you do not need to record the case on the OSHA 300 Log.

§1904.10 Recording criteria for cases involving occupational hearing loss.

**(a) Basic requirement.** If an employee’s hearing test (audiogram) reveals that a Standard Threshold Shift (STS) has occurred, you must record the case on the OSHA 300 Log by checking the “hearing loss” column.

**(b) Implementation.**

- (1) What is a Standard Threshold Shift?

A Standard Threshold Shift, or STS, is defined in the occupational noise exposure standard at 29 CFR 1910.95(c)(10)(i) as a change in hearing threshold, relative to the most recent audiogram for that employee, of an average of 10 decibels (dB) or more at 2000, 3000, and 4000 hertz in one or both ears.

- (2) How do I determine whether an STS has occurred?

If the employee has never previously experienced a recordable hearing loss, you must compare the employee’s current audiogram with that employee’s baseline audiogram. If the employee has previously experienced a recordable hearing loss, you must compare the employee’s current audiogram with the employee’s revised baseline audiogram (the audiogram reflecting the employee’s previous recordable hearing loss case).

- (3) May I adjust the audiogram results to reflect the effects of aging on hearing?

Yes, when comparing audiogram results, you may adjust the results for the employee’s age when the audiogram was taken using Tables F-1 or F-2, as appropriate, in Appendix F of 29 CFR 1910.95.

- (4) Do I have to record the hearing loss if I am going to retest the employee’s hearing?

No, if you retest the employee’s hearing within 30 days of the first test, and the retest does not confirm the STS, you are not required to record the hearing loss case on the OSHA 300

Log. If the retest confirms the STS, you must record the hearing loss illness within seven (7) calendar days of the retest.

- (5) Are there any special rules for determining whether a hearing loss case is work-related?
- Yes, hearing loss is presumed to be work-related if the employee is exposed to noise in the workplace at an 8-hour time-weighted average of 85 dBA or greater, or to a total noise dose of 50 percent, as defined in 29 CFR 1910.95. For hearing loss cases where the employee is not exposed to this level of noise, you must use the rules in §1904.5 to determine if the hearing loss is work-related.
- (6) If a physician or other licensed health care professional determines the hearing loss is not work-related, do I still need to record the case?
- If a physician or other licensed health care professional determines that the hearing loss is not work-related or has not been significantly aggravated by occupational noise exposure, you are not required to consider the case work-related or to record the case on the OSHA 300 Log.

#### §1904.11 Recording criteria for work-related tuberculosis cases.

**(a) Basic requirement.** If any of your employees has been occupationally exposed to anyone with a known case of active tuberculosis (TB), and that employee subsequently develops a tuberculosis infection, as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional, you must record the case on the OSHA 300 Log by checking the “respiratory condition” column.

#### **(b) Implementation.**

- (1) Do I have to record, on the Log, a positive TB skin test result obtained at a pre-employment physical?
- No, you do not have to record it because the employee was not occupationally exposed to a known case of active tuberculosis in your workplace.
- (2) May I line-out or erase a recorded TB case if I obtain evidence that the case was not caused by occupational exposure?
- Yes, you may line-out or erase the case from the Log under the following circumstances:

- (i) The worker is living in a household with a person who has been diagnosed with active TB;
- (ii) The Public Health Department has identified the worker as a contact of an individual with a case of active TB unrelated to the workplace; or
- (iii) A medical investigation shows that the employee’s infection was caused by exposure to TB away from work, or proves that the case was not related to the workplace TB exposure.

#### §1904.12 Recording criteria for cases involving work-related musculoskeletal disorders. [Removed]

#### §§1904.13 - 1904.28 [Reserved]

#### §1904.29 Forms

**(a) Basic requirement.** You must use OSHA 300, 300-A, and 301 forms, or equivalent forms, for recordable injuries and illnesses. The OSHA 300 form is called the Log of Work-Related Injuries and Illnesses, the 300-A is the Summary of Work-Related Injuries and Illnesses, and the OSHA 301 form is called the Injury and Illness Incident Report.

#### **(b) Implementation.**

- (1) What do I need to do to complete the OSHA 300 Log?
- You must enter information about your business at the top of the OSHA 300 Log, enter a one or two line description for each recordable injury or illness, and summarize this information on the OSHA 300-A at the end of the year.
- (2) What do I need to do to complete the OSHA 301 Incident Report?
- You must complete an OSHA 301 Incident Report form, or an equivalent form, for each recordable injury or illness entered on the OSHA 300 Log.
- (3) How quickly must each injury or illness be recorded?
- You must enter each recordable injury or illness on the OSHA 300 Log and 301 Incident Report within seven (7) calendar days of receiving information that a recordable injury or illness has occurred.
- (4) What is an equivalent form?

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An equivalent form is one that has the same information, is as readable and understandable, and is completed using the same instructions as the OSHA form it replaces. Many employers use an insurance form instead of the OSHA 301 Incident Report, or supplement an insurance form by adding any additional information required by OSHA.

- (5) May I keep my records on a computer?

Yes, if the computer can produce equivalent forms when they are needed, as described under §§1904.35 and 1904.40, you may keep your records using the computer system.

- (6) Are there situations where I do not put the employee's name on the forms for privacy reasons?

Yes, if you have a "privacy concern case," you may not enter the employee's name on the OSHA 300 Log. Instead, enter "privacy case" in the space normally used for the employee's name. This will protect the privacy of the injured or ill employee when another employee, a former employee, or an authorized employee representative is provided access to the OSHA 300 Log under §1904.35(b)(2). You must keep a separate, confidential list of the case numbers and employee names for your privacy concern cases so you can update the cases and provide the information to the government if asked to do so.

- (7) How do I determine if an injury or illness is a privacy concern case?

You must consider the following injuries or illnesses to be privacy concern cases:

- (i) An injury or illness to an intimate body part or the reproductive system;
- (ii) An injury or illness resulting from a sexual assault;
- (iii) Mental illnesses;
- (iv) HIV infection, hepatitis, or tuberculosis;
- (v) Needlestick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (see §1904.8 for definitions); and
- (vi) Other illnesses, if the employee independently and voluntarily requests that

his or her name not be entered on the log. Musculoskeletal disorders (MSDs) are not considered privacy concern cases.

- (8) May I classify any other types of injuries and illnesses as privacy concern cases?

No, this is a complete list of all injuries and illnesses considered privacy concern cases for Part 1904 purposes.

- (9) If I have removed the employee's name, but still believe that the employee may be identified from the information on the forms, is there anything else that I can do to further protect the employee's privacy?

Yes, if you have a reasonable basis to believe that information describing the privacy concern case may be personally identifiable even though the employee's name has been omitted, you may use discretion in describing the injury or illness on both the OSHA 300 and 301 forms. You must enter enough information to identify the cause of the incident and the general severity of the injury or illness, but you do not need to include details of an intimate or private nature. For example, a sexual assault case could be described as "injury from assault," or an injury to a reproductive organ could be described as "lower abdominal injury."

- (10) What must I do to protect employee privacy if I wish to provide access to the OSHA Forms 300 and 301 to persons other than government representatives, employees, former employees or authorized representatives?

If you decide to voluntarily disclose the Forms to persons other than government representatives, employees, former employees or authorized representatives (as required by §§1904.35 and 1904.40), you must remove or hide the employees' names and other personally identifying information, except for the following cases. You may disclose the Forms with personally identifying information only:

- (i) to an auditor or consultant hired by the employer to evaluate the safety and health program;
- (ii) to the extent necessary for processing a claim for workers' compensation or other insurance benefits; or
- (iii) to a public health authority or law

enforcement agency for uses and disclosures for which consent, an authorization, or opportunity to agree or object is not required under Department of Health and Human Services Standards for Privacy of Individually Identifiable Health Information, 45 CFR.164.512.

**Subpart D -- Other OSHA Injury and Illness Recordkeeping Requirements**

**§1904.30 Multiple business establishments.**

**(a) Basic requirement.** You must keep a separate OSHA 300 Log for each establishment that is expected to be in operation for one year or longer.

**(b) Implementation.**

- (1) Do I need to keep OSHA injury and illness records for short-term establishments (i.e., establishments that will exist for less than a year)?

Yes, however, you do not have to keep a separate OSHA 300 Log for each such establishment. You may keep one OSHA 300 Log that covers all of your short-term establishments. You may also include the short-term establishments' recordable injuries and illnesses on an OSHA 300 Log that covers short-term establishments for individual company divisions or geographic regions.

- (2) May I keep the records for all of my establishments at my headquarters location or at some other central location?

Yes, you may keep the records for an establishment at your headquarters or other central location if you can:

(i) Transmit information about the injuries and illnesses from the establishment to the central location within seven (7) calendar days of receiving information that a recordable injury or illness has occurred; and

(ii) Produce and send the records from the central location to the establishment within the time frames required by §1904.35 and §1904.40 when you are required to provide records to a government representative, employees, former employees or employee representatives.

- (3) Some of my employees work at several different locations or do not work at any of my

establishments at all. How do I record cases for these employees?

You must link each of your employees with one of your establishments, for recordkeeping purposes. You must record the injury and illness on the OSHA 300 Log of the injured or ill employee's establishment, or on an OSHA 300 Log that covers that employee's short-term establishment.

- (4) How do I record an injury or illness when an employee of one of my establishments is injured or becomes ill while visiting or working at another of my establishments, or while working away from any of my establishments?

If the injury or illness occurs at one of your establishments, you must record the injury or illness on the OSHA 300 Log of the establishment at which the injury or illness occurred. If the employee is injured or becomes ill and is not at one of your establishments, you must record the case on the OSHA 300 Log at the establishment at which the employee normally works.

**§1904.31 Covered employees.**

**(a) Basic requirement.** You must record on the OSHA 300 Log the recordable injuries and illnesses of all employees on your payroll, whether they are labor, executive, hourly, salary, part-time, seasonal, or migrant workers. You also must record the recordable injuries and illnesses that occur to employees who are not on your payroll if you supervise these employees on a day-to-day basis. If your business is organized as a sole proprietorship or partnership, the owner or partners are not considered employees for recordkeeping purposes.

**(b) Implementation.**

- (1) If a self-employed person is injured or becomes ill while doing work at my business, do I need to record the injury or illness?

No, self-employed individuals are not covered by the OSH Act or this regulation.

- (2) If I obtain employees from a temporary help service, employee leasing service, or personnel supply service, do I have to record an injury or illness occurring to one of those employees?

You must record these injuries and illnesses if you supervise these employees on a day-to-day basis.

- (3) If an employee in my establishment is a contractor's employee, must I record an injury or illness occurring to that employee?

If the contractor's employee is under the day-to-day supervision of the contractor, the contractor is responsible for recording the injury or illness. If you supervise the contractor employee's work on a day-to-day basis, you must record the injury or illness.

- (4) Must the personnel supply service, temporary help service, employee leasing service, or contractor also record the injuries or illnesses occurring to temporary, leased or contract employees that I supervise on a day-to-day basis?

No, you and the temporary help service, employee leasing service, personnel supply service, or contractor should coordinate your efforts to make sure that each injury and illness is recorded only once: either on your OSHA 300 Log (if you provide day-to-day supervision) or on the other employer's OSHA 300 Log (if that company provides day-to-day supervision).

#### §1904.32 Annual summary.

**(a) Basic requirement.** At the end of each calendar year, you must:

- (1) Review the OSHA 300 Log to verify that the entries are complete and accurate, and correct any deficiencies identified;
- (2) Create an annual summary of injuries and illnesses recorded on the OSHA 300 Log;
- (3) Certify the summary; and
- (4) Post the annual summary.

#### **(b) Implementation.**

- (1) How extensively do I have to review the OSHA 300 Log entries at the end of the year?

You must review the entries as extensively as necessary to make sure that they are complete and correct.

- (2) How do I complete the annual summary? You must:

- (i) Total the columns on the OSHA 300 Log (if you had no recordable cases, enter zeros for each column total); and
- (ii) Enter the calendar year covered, the

company's name, establishment name, establishment address, annual average number of employees covered by the OSHA 300 Log, and the total hours worked by all employees covered by the OSHA 300 Log.

(iii) If you are using an equivalent form other than the OSHA 300-A summary form, as permitted under §1904.6(b)(4), the summary you use must also include the employee access and employer penalty statements found on the OSHA 300-A Summary form.

- (3) How do I certify the annual summary?

A company executive must certify that he or she has examined the OSHA 300 Log and that he or she reasonably believes, based on his or her knowledge of the process by which the information was recorded, that the annual summary is correct and complete.

- (4) Who is considered a company executive?

The company executive who certifies the log must be one of the following persons:

- (i) An owner of the company (only if the company is a sole proprietorship or partnership);
- (ii) An officer of the corporation;
- (iii) The highest ranking company official working at the establishment; or
- (iv) The immediate supervisor of the highest ranking company official working at the establishment.

- (5) How do I post the annual summary?

You must post a copy of the annual summary in each establishment in a conspicuous place or places where notices to employees are customarily posted. You must ensure that the posted annual summary is not altered, defaced or covered by other material.

- (6) When do I have to post the annual summary?

You must post the summary no later than February 1 of the year following the year covered by the records and keep the posting in place until April 30.

#### §1904.33 Retention and updating.

**(a) Basic requirement.** You must save the OSHA 300 Log, the privacy case list (if one exists), the annual

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summary, and the OSHA 301 Incident Report forms for five (5) years following the end of the calendar year that these records cover.

**(b) Implementation.**

- (1) Do I have to update the OSHA 300 Log during the five-year storage period?

Yes, during the storage period, you must update your stored OSHA 300 Logs to include newly discovered recordable injuries or illnesses and to show any changes that have occurred in the classification of previously recorded injuries and illnesses. If the description or outcome of a case changes, you must remove or line out the original entry and enter the new information.

- (2) Do I have to update the annual summary?

No, you are not required to update the annual summary, but you may do so if you wish.

- (3) Do I have to update the OSHA 301 Incident Reports?

No, you are not required to update the OSHA 301 Incident Reports, but you may do so if you wish.

§1904.34 Change in business ownership.

If your business changes ownership, you are responsible for recording and reporting work-related injuries and illnesses only for that period of the year during which you owned the establishment. You must transfer the Part 1904 records to the new owner. The new owner must save all records of the establishment kept by the prior owner, as required by §1904.33 of this Part, but need not update or correct the records of the prior owner.

§1904.35 Employee involvement.

**(a) Basic requirement.** Your employees and their representatives must be involved in the recordkeeping system in several ways.

- (1) You must inform each employee of how he or she is to report an injury or illness to you.
- (2) You must provide limited access to your injury and illness records for your employees and their representatives.

**(b) Implementation.**

- (1) What must I do to make sure that employees report work-related injuries and illnesses to me?

(i) You must set up a way for employees to report work-related injuries and illnesses promptly; and

(ii) You must tell each employee how to report work-related injuries and illnesses to you.

- (2) Do I have to give my employees and their representatives access to the OSHA injury and illness records?

Yes, your employees, former employees, their personal representatives, and their authorized employee representatives have the right to access the OSHA injury and illness records, with some limitations, as discussed below.

(i) Who is an authorized employee representative?

An authorized employee representative is an authorized collective bargaining agent of employees.

(ii) Who is a “personal representative” of an employee or former employee?

A personal representative is:

(A) Any person that the employee or former employee designates as such, in writing; or

(B) The legal representative of a deceased or legally incapacitated employee or former employee.

(iii) If an employee or representative asks for access to the OSHA 300 Log, when do I have to provide it?

When an employee, former employee, personal representative, or authorized employee representative asks for copies of your current or stored OSHA 300 Log(s) for an establishment the employee or former employee has worked in, you must give the requester a copy of the relevant OSHA 300 Log(s) by the end of the next business day.

(iv) May I remove the names of the employees or any other information from the OSHA 300 Log before I give copies to an employee, former employee, or employee representative?

No, you must leave the names on the 300 Log. However, to protect the privacy of injured and ill employees, you may not record the employee’s name on the OSHA 300 Log for

certain “privacy concern cases,” as specified in paragraphs 1904.29(b)(6) through 1904.29(b)(9).

(v) If an employee or representative asks for access to the OSHA 301 Incident Report, when do I have to provide it?

(A) When an employee, former employee, or personal representative asks for a copy of the OSHA 301 Incident Report describing an injury or illness to that employee or former employee, you must give the requester a copy of the OSHA 301 Incident Report containing that information by the end of the next business day.

(B) When an authorized employee representative asks for a copies of the OSHA 301 Incident Reports for an establishment where the agent represents employees under a collective bargaining agreement, you must give copies of those forms to the authorized employee representative within 7 calendar days. You are only required to give the authorized employee representative information from the OSHA 301 Incident Report section titled “Tell us about the case.” You must remove all other information from the copy of the OSHA 301 Incident Report or the equivalent substitute form that you give to the authorized employee representative.

(vi) May I charge for the copies?

No, you may not charge for these copies the first time they are provided. However, if one of the designated persons asks for additional copies, you may assess a reasonable charge for retrieving and copying the records.

#### §1904.36 Prohibition against discrimination.

Section 11(c) of the Act prohibits you from discriminating against an employee for reporting a work-related fatality, injury or illness. That provision of the Act also protects the employee who files a safety and health complaint, asks for access to the Part 1904 records, or otherwise exercises any rights afforded by the OSH Act.

#### §1904.37 State recordkeeping regulations.

**(a) Basic requirement.** Some States operate their own OSHA programs, under the authority of a State Plan approved by OSHA. States operating OSHA-approved State Plans must have occupational injury

and illness recording and reporting requirements that are substantially identical to the requirements in this Part (see 29 CFR 1902.3(k), 29 CFR 1952.4 and 29 CFR 1956.10(i)).

#### **(b) Implementation.**

- (1) State-Plan States must have the same requirements as Federal OSHA for determining which injuries and illnesses are recordable and how they are recorded.
- (2) For other Part 1904 provisions (for example, industry exemptions, reporting of fatalities and hospitalizations, record retention, or employee involvement), State-Plan State requirements may be more stringent than or supplemental to the Federal requirements, but because of the unique nature of the national recordkeeping program, States must consult with and obtain approval of any such requirements.
- (3) Although State and local government employees are not covered Federally, all State-Plan States must provide coverage, and must develop injury and illness statistics, for these workers. State Plan recording and reporting requirements for State and local government entities may differ from those for the private sector but must meet the requirements of paragraphs 1904.37(b)(1) and (b)(2).
- (4) A State-Plan State may not issue a variance to a private sector employer and must recognize all variances issued by Federal OSHA.
- (5) A State-Plan State may only grant an injury and illness recording and reporting variance to a State or local government employer within the State after obtaining approval to grant the variance from Federal OSHA.

#### §1904.38 Variances from the recordkeeping rule.

**(a) Basic requirement.** If you wish to keep records in a different manner from the manner prescribed by the Part 1904 regulations, you may submit a variance petition to the Assistant Secretary of Labor for Occupational Safety and Health, U.S. Department of Labor, Washington, DC 20210. You can obtain a variance only if you can show that your alternative recordkeeping system:

- (1) Collects the same information as this Part requires;
- (2) Meets the purposes of the Act; and

- 
- (3) Does not interfere with the administration of the Act.

**(b) Implementation.**

- (1) What do I need to include in my variance petition?

You must include the following items in your petition:

- (i) Your name and address;
- (ii) A list of the State(s) where the variance would be used;
- (iii) The address(es) of the business establishment(s) involved;
- (iv) A description of why you are seeking a variance;
- (v) A description of the different recordkeeping procedures you propose to use;
- (vi) A description of how your proposed procedures will collect the same information as would be collected by this Part and achieve the purpose of the Act; and
- (vii) A statement that you have informed your employees of the petition by giving them or their authorized representative a copy of the petition and by posting a statement summarizing the petition in the same way as notices are posted under §1903.2(a).

- (2) How will the Assistant Secretary handle my variance petition?

The Assistant Secretary will take the following steps to process your variance petition.

- (i) The Assistant Secretary will offer your employees and their authorized representatives an opportunity to submit written data, views, and arguments about your variance petition.
- (ii) The Assistant Secretary may allow the public to comment on your variance petition by publishing the petition in the Federal Register. If the petition is published, the notice will establish a public comment period and may include a schedule for a public meeting on the petition.
- (iii) After reviewing your variance petition and any comments from your employees and the public, the Assistant Secretary will decide

whether or not your proposed recordkeeping procedures will meet the purposes of the Act, will not otherwise interfere with the Act, and will provide the same information as the Part 1904 regulations provide. If your procedures meet these criteria, the Assistant Secretary may grant the variance subject to such conditions as he or she finds appropriate.

(iv) If the Assistant Secretary grants your variance petition, OSHA will publish a notice in the Federal Register to announce the variance. The notice will include the practices the variance allows you to use, any conditions that apply, and the reasons for allowing the variance.

- (3) If I apply for a variance, may I use my proposed recordkeeping procedures while the Assistant Secretary is processing the variance petition?

No, alternative recordkeeping practices are only allowed after the variance is approved. You must comply with the Part 1904 regulations while the Assistant Secretary is reviewing your variance petition.

- (4) If I have already been cited by OSHA for not following the Part 1904 regulations, will my variance petition have any effect on the citation and penalty?

No, in addition, the Assistant Secretary may elect not to review your variance petition if it includes an element for which you have been cited and the citation is still under review by a court, an Administrative Law Judge (ALJ), or the OSH Review Commission.

- (5) If I receive a variance, may the Assistant Secretary revoke the variance at a later date?

Yes, the Assistant Secretary may revoke your variance if he or she has good cause. The procedures revoking a variance will follow the same process as OSHA uses for reviewing variance petitions, as outlined in paragraph 1904.38(b)(2). Except in cases of willfulness or where necessary for public safety, the Assistant Secretary will:

- (i) Notify you in writing of the facts or conduct that may warrant revocation of your variance; and
- (ii) Provide you, your employees, and authorized employee representatives with an

opportunity to participate in the revocation procedures.

**Subpart E -- Reporting Fatality, Injury and Illness Information to the Government.**

**§1904.39 Reporting fatalities and multiple hospitalization incidents to OSHA.**

**(a) Basic requirement.** Within eight (8) hours after the death of any employee from a work-related incident or the in-patient hospitalization of three or more employees as a result of a work-related incident, you must orally report the fatality/multiple hospitalization by telephone or in person to the Area Office of the Occupational Safety and Health Administration (OSHA), U.S. Department of Labor, that is nearest to the site of the incident. You may also use the OSHA toll-free central telephone number, 1-800-321-OSHA (1-800-321-6742).

**(b) Implementation.**

- (1) If the Area Office is closed, may I report the incident by leaving a message on OSHA's answering machine, faxing the area office, or sending an e-mail?

No, if you can't talk to a person at the Area Office, you must report the fatality or multiple hospitalization incident using the 800 number.

- (2) What information do I need to give to OSHA about the incident?

You must give OSHA the following information for each fatality or multiple hospitalization incident:

- (i) The establishment name;
- (ii) The location of the incident;
- (iii) The time of the incident;
- (iv) The number of fatalities or hospitalized employees;
- (v) The names of any injured employees;
- (vi) Your contact person and his or her phone number; and
- (vii) A brief description of the incident.

- (3) Do I have to report every fatality or multiple hospitalization incident resulting from a motor vehicle accident?

No, you do not have to report all of these incidents. If the motor vehicle accident occurs on a public street or highway, and does not

occur in a construction work zone, you do not have to report the incident to OSHA. However, these injuries must be recorded on your OSHA injury and illness records, if you are required to keep such records.

- (4) Do I have to report a fatality or multiple hospitalization incident that occurs on a commercial or public transportation system?

No, you do not have to call OSHA to report a fatality or multiple hospitalization incident if it involves a commercial airplane, train, subway or bus accident. However, these injuries must be recorded on your OSHA injury and illness records, if you are required to keep such records.

- (5) Do I have to report a fatality caused by a heart attack at work?

Yes, your local OSHA Area Office director will decide whether to investigate the incident, depending on the circumstances of the heart attack.

- (6) Do I have to report a fatality or hospitalization that occurs long after the incident?

No, you must only report each fatality or multiple hospitalization incident that occurs within thirty (30) days of an incident.

- (7) What if I don't learn about an incident right away?

If you do not learn of a reportable incident at the time it occurs and the incident would otherwise be reportable under paragraphs (a) and (b) of this section, you must make the report within eight (8) hours of the time the incident is reported to you or to any of your agent(s) or employee(s).

**§1904.40 Providing records to government representatives.**

**(a) Basic requirement.** When an authorized government representative asks for the records you keep under Part 1904, you must provide copies of the records within four (4) business hours.

**(b) Implementation.**

- (1) What government representatives have the right to get copies of my Part 1904 records?

The government representatives authorized to receive the records are:

- (i) A representative of the Secretary of Labor

conducting an inspection or investigation under the Act;

(ii) A representative of the Secretary of Health and Human Services (including the National Institute for Occupational Safety and Health - NIOSH) conducting an investigation under Section 20(b) of the Act, or

(iii) A representative of a State agency responsible for administering a State plan approved under section 18 of the Act.

- (2) Do I have to produce the records within four (4) hours if my records are kept at a location in a different time zone?

OSHA will consider your response to be timely if you give the records to the government representative within four (4) business hours of the request. If you maintain the records at a location in a different time zone, you may use the business hours of the establishment at which the records are located when calculating the deadline.

§1904.41 Annual OSHA injury and illness survey of ten or more employers.

**(a) Basic requirement.** If you receive OSHA's annual survey form, you must fill it out and send it to OSHA or OSHA's designee, as stated on the survey form. You must report the following information for the year described on the form:

- (1) the number of workers you employed;
- (2) the number of hours worked by your employees; and
- (3) the requested information from the records that you keep under Part 1904.

**(b) Implementation.**

- (1) Does every employer have to send data to OSHA?

No, each year, OSHA sends injury and illness survey forms to employers in certain industries. In any year, some employers will receive an OSHA survey form and others will not. You do not have to send injury and illness data to OSHA unless you receive a survey form.

- (2) How quickly do I need to respond to an OSHA survey form?

You must send the survey reports to OSHA, or OSHA's designee, by mail or other means

described in the survey form, within 30 calendar days, or by the date stated in the survey form, whichever is later.

- (3) Do I have to respond to an OSHA survey form if I am normally exempt from keeping OSHA injury and illness records?

Yes, even if you are exempt from keeping injury and illness records under §1904.1 to §1904.3, OSHA may inform you in writing that it will be collecting injury and illness information from you in the following year. If you receive such a letter, you must keep the injury and illness records required by §1904.5 to §1904.15 and make a survey report for the year covered by the survey.

- (4) Do I have to answer the OSHA survey form if I am located in a State-Plan State?

Yes, all employers who receive survey forms must respond to the survey, even those in State-Plan State.

- (5) Does this section affect OSHA's authority to inspect my workplace?

No, nothing in this section affects OSHA's statutory authority to investigate conditions related to occupational safety and health.

§1904.42 Requests from the Bureau of Labor Statistics for data.

**(a) Basic requirement.** If you receive a Survey of Occupational Injuries and Illnesses Form from the Bureau of Labor Statistics (BLS), or a BLS designee, you must promptly complete the form and return it following the instructions contained on the survey form.

**(b) Implementation.**

- (1) Does every employer have to send data to the BLS?

No, each year, the BLS sends injury and illness survey forms to randomly selected employers and uses the information to create the Nation's occupational injury and illness statistics. In any year, some employers will receive a BLS survey form and others will not. You do not have to send injury and illness data to the BLS unless you receive a survey form.

- (2) If I get a survey form from the BLS, what do I have to do?

If you receive a Survey of Occupational Injuries and Illnesses Form from the Bureau of Labor Statistics (BLS), or a BLS designee, you must promptly complete the form and return it, following the instructions contained on the survey form.

- (3) Do I have to respond to a BLS survey form if I am normally exempt from keeping OSHA injury and illness records?

Yes, even if you are exempt from keeping injury and illness records under §1904.1 to §1904.3, the BLS may inform you in writing that it will be collecting injury and illness information from you in the coming year. If you receive such a letter, you must keep the injury and illness records required by §1904.5 to §1904.15 and make a survey report for the year covered by the survey.

- (4) Do I have to answer the BLS survey form if I am located in a State-Plan State?

Yes, all employers who receive a survey form must respond to the survey, even those in State-Plan States.

#### **Subpart F -- Transition From the Former Rule**

##### **§1904.43 Summary and posting of the 2001 data.**

**(a) Basic requirement.** If you were required to keep OSHA 200 Logs in 2001, you must post a 2001 annual summary from the OSHA 200 Log of occupational injuries and illnesses for each establishment.

##### **(b) Implementation.**

- (1) What do I have to include in the summary?

(i) You must include a copy of the totals from the 2001 OSHA 200 Log and the following information from that form:

- (A) The calendar year covered;
- (B) Your company name;
- (C) The name and address of the establishment; and
- (D) The certification signature, title and date.

(ii) If no injuries or illnesses occurred at your establishment in 2001, you must enter zeros on the totals line and post the 2001 summary.

- (2) When am I required to summarize and post the 2001 information?

(i) You must complete the summary by

February 1, 2002; and

(ii) You must post a copy of the summary in each establishment in a conspicuous place or places where notices to employees are customarily posted. You must ensure that the summary is not altered, defaced or covered by other material.

- (3) You must post the 2001 summary from February 1, 2002 to March 1, 2002.

##### **§1904.44 Retention and updating of old forms.**

You must save your copies of the OSHA 200 and 101 forms for five years following the year to which they relate and continue to provide access to the data as though these forms were the OSHA 300 and 301 forms. You are not required to update your old 200 and 101 forms.

##### **§1904.45 OMB control numbers under the Paperwork Reduction Act**

The following sections each contain a collection of information requirement which has been approved by the Office of Management and Budget under the control number listed 29 CFR citation OMB Control No.

1904.4 - 35 1218-0176

1904.39 - 41 1218-0176

1904.42 1220-0045

1904.43 - 44 1218-0176

#### **Subpart G -- Definitions**

##### **§1904.46 Definitions**

**The Act.** The Act means the Occupational Safety and Health Act of 1970 (29 U.S.C. 651 et seq.). The definitions contained in section 3 of the Act (29 U.S.C. 652) and related interpretations apply to such terms when used in this Part 1904.

**Establishment.** An establishment is a single physical location where business is conducted or where services or industrial operations are performed. For activities where employees do not work at a single physical location, such as construction; transportation; communications, electric, gas and sanitary services; and similar operations, the establishment is represented by main or branch offices, terminals, stations, etc. that either supervise such activities or are the base from which personnel carry out these activities.

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- (1) Can one business location include two or more establishments?

Normally, one business location has only one establishment. Under limited conditions, the employer may consider two or more separate businesses that share a single location to be separate establishments. An employer may divide one location into two or more establishments only when:

- (i) Each of the establishments represents a distinctly separate business;
- (ii) Each business is engaged in a different economic activity;
- (iii) No one industry description in the Standard Industrial Classification Manual (1987) applies to the joint activities of the establishments; and
- (iv) Separate reports are routinely prepared for each establishment on the number of employees, their wages and salaries, sales or receipts, and other business information. For example, if an employer operates a construction company at the same location as a lumber yard, the employer may consider each business to be a separate establishment.

- (2) Can an establishment include more than one physical location?

Yes, but only under certain conditions. An employer may combine two or more physical locations into a single establishment only when:

- (i) The employer operates the locations as a single business operation under common management;
- (ii) The locations are all located in close proximity to each other; and
- (iii) The employer keeps one set of business records for the locations, such as records on the number of employees, their wages and salaries, sales or receipts, and other kinds of business information. For example, one manufacturing establishment might include the main plant, a warehouse a few blocks away, and an administrative services building across the street.

- (3) If an employee telecommutes from home, is his or her home considered a separate establishment?

No, for employees who telecommute from home, the employee's home is not a business establishment and a separate 300 Log is not required. Employees who telecommute must be linked to one of your establishments under §1904.30(b)(3).

Injury or illness. An injury or illness is an abnormal condition or disorder. Injuries include cases such as, but not limited to, a cut, fracture, sprain, or amputation. Illnesses include both acute and chronic illnesses, such as, but not limited to, a skin disease, respiratory disorder, or poisoning. (Note: Injuries and illnesses are recordable only if they are new, work-related cases that meet one or more of the Part 1904 recording criteria.)

Physician or Other Licensed Health Care Professional. A physician or other licensed health care professional is an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently perform, or be delegated the responsibility to perform, the activities described by this regulation.

You. "You" means an employer as defined in Section 3 of the Occupational Safety and Health Act of 1970 (29 U.S.C. 652).

#### **PART 1952 -- [AMENDED]**

##### §1952.4 Injury and illness recording and reporting requirements.

(a) Injury and illness recording and reporting requirements promulgated by State-Plan States must be substantially identical to those in 29 CFR Part 1904 "Recording and Reporting Occupational Injuries and Illnesses." State-Plan States must promulgate recording and reporting requirements that are the same as the Federal requirements for determining which injuries and illnesses will be entered into the records and how they are entered. All other injury and illness recording and reporting requirements that are promulgated by State-Plan States may be more stringent than, or supplemental to, the Federal requirements, but, because of the unique nature of the national recordkeeping program, States must consult with OSHA and obtain approval of such additional or more stringent reporting and recording requirements to ensure that they will not interfere with uniform reporting objectives. State-Plan States must extend the scope of their regulation to State and local government employers.

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(b) A State may not grant a variance to the injury and illness recording and reporting requirements for private sector employers. Such variances may only be granted by Federal OSHA to assure nationally consistent workplace injury and illness statistics. A State may only grant a variance to the injury and illness recording and reporting requirements for State or local government entities in that State after obtaining approval from Federal OSHA.

(c) A State must recognize any variance issued by Federal OSHA.

(d) A State may, but is not required, to participate in the Annual OSHA Injury/Illness Survey as authorized by 29 CFR 1904.41. A participating State may either adopt requirements identical to 1904.41 in its recording and reporting regulation as an enforceable State requirement, or may defer to the Federal regulation for enforcement. Nothing in any State plan shall affect the duties of employers to comply with 1904.41, when surveyed, as provided by Section 18(c) (7) of the Act.

# OSHA Forms for Recording Work-Related Injuries and Illnesses

## Dear Employer:

This booklet includes the forms needed for maintaining occupational injury and illness records for 2004. These new forms have changed in several important ways from the 2003 recordkeeping forms.

In the December 17, 2002 Federal Register (67 FR 77165-77170), OSHA announced its decision to add an occupational hearing loss column to OSHA's Form 300, Log of Work-Related Injuries and Illnesses. This forms package contains modified Forms 300 and 300A which incorporate the additional column M(5) Hearing Loss. Employers required to complete the injury and illness forms must begin to use these forms on January 1, 2004.

In response to public suggestions, OSHA also has made several changes to the forms package to make the recordkeeping materials clearer and easier to use:

- On Form 300, we've switched the positions of the day count columns. The days "away from work" column now comes before the days "on job transfer or restriction."
- We've clarified the formulas for calculating incidence rates.
- We've added new recording criteria for occupational hearing loss to the "Overview" section.
- On Form 300, we've made the column heading "Classify the Case" more prominent to make it clear that employers should mark only one selection among the four columns offered.

The Occupational Safety and Health Administration shares with you the goal of preventing injuries and illnesses in our nation's workplaces. Accurate injury and illness records will help us achieve that goal.

*Occupational Safety and Health Administration  
U.S. Department of Labor*

## What's Inside...

In this package, you'll find everything you need to complete OSHA's Log and the *Summary of Work-Related Injuries and Illnesses* for the next several years. On the following pages, you'll find:

- ▼ **An Overview: Recording Work-Related Injuries and Illnesses** — General instructions for filling out the forms in this package and definitions of terms you should use when you classify your cases as injuries or illnesses.
- ▼ **How to Fill Out the Log** — An example to guide you in filling out the Log properly.
- ▼ **Log of Work-Related Injuries and Illnesses** — Several pages of the Log (but you may make as many copies of the Log as you need.) Notice that the Log is separate from the *Summary*.
- ▼ **Summary of Work-Related Injuries and Illnesses** — Removable *Summary* pages for easy posting at the end of the year. Note that you post the *Summary* only, not the Log.
- ▼ **Worksheet to Help You Fill Out the Summary** — A worksheet for figuring the average number of employees who worked for your establishment and the total number of hours worked.
- ▼ **OSHA's 301: Injury and Illness Incident Report** — A copy of the OSHA 301 to provide details about the incident. You may make as many copies as you need or use an equivalent form.

Take a few minutes to review this package. If you have any questions, visit us online at [www.osha-slc.gov](http://www.osha-slc.gov) or call your local OSHA office. We'll be happy to help you.



# An Overview: Recording Work-Related Injuries and Illnesses

The Occupational Safety and Health (OSHA) Act of 1970 requires certain employers to prepare and maintain records of work-related injuries and illnesses. Use these definitions when you classify cases on the Log. OSHA's recordkeeping regulation (see 29 CFR Part 1904) provides more information about the definitions below.

**The Log of Work-Related Injuries and Illnesses** (Form 300) is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the *Log* to record specific details about what happened and how it happened.

The *Summary* — a separate form (Form 300A) — shows the totals for the year in each category. At the end of the year, post the *Summary* in a visible location so that your employees are aware of the injuries and illnesses occurring in their workplace.

Employers must keep a *Log* for each establishment or site. If you have more than one establishment, you must keep a separate *Log* and *Summary* for each physical location that is expected to be in operation for one year or longer.

Note that your employees have the right to review your injury and illness records. For more information, see 29 Code of Federal Regulations Part 1904.35, *Employee Involvement*.

Cases listed on the *Log of Work-Related Injuries and Illnesses* are not necessarily eligible for workers' compensation or other insurance benefits. Listing a case on the *Log* does not mean that the employer or worker was at fault or that an OSHA standard was violated.

## When is an injury or illness considered work-related?

An injury or illness is considered work-related if an event or exposure in the work environment caused or contributed to the condition or significantly aggravated a preexisting condition. Work-relatedness is

presumed for injuries and illnesses resulting from events or exposures occurring in the workplace, unless an exception specifically applies. See 29 CFR Part 1904.5(b)(2) for the exceptions. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment. See 29 CFR Part 1904.5(b)(1).

## Which work-related injuries and illnesses should you record?

Record those work-related injuries and illnesses that result in:

- ▶ death,
- ▶ loss of consciousness,
- ▶ days away from work,
- ▶ restricted work activity or job transfer, or
- ▶ medical treatment beyond first aid.

You must also record work-related injuries and illnesses that are significant (as defined below) or meet any of the additional criteria listed below.

You must record any significant work-related injury or illness that is diagnosed by a physician or other licensed health care professional. You must record any work-related case involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum. See 29 CFR 1904.7.

## What do you need to do?

1. Within 7 calendar days after you receive information about a case, decide if the case is recordable under the OSHA recordkeeping requirements.

2. Determine whether the incident is a new case or a recurrence of an existing one.

3. Establish whether the case was work-related.

4. If the case is recordable, decide which form you will fill out as the injury and illness incident report.

You may use OSHA's 301, *Injury and Illness Incident Report* or an equivalent form. Some state workers compensation, insurance, or other reports may be acceptable substitutes, as long as they provide the same information as the OSHA 301.

## How to work with the Log

1. Identify the employee involved unless it is a privacy concern case as described below.

2. Identify when and where the case occurred.

3. Describe the case, as specifically as you can.

4. Classify the seriousness of the case by recording the **most serious outcome** associated with the case, with column G (Death) being the most serious and column J (Other recordable cases) being the least serious.

5. Identify whether the case is an injury or illness. If the case is an injury, check the injury category. If the case is an illness, check the appropriate illness category.

## What are the additional criteria?

You must record the following conditions when they are work-related:

- ▶ any needlestick injury or cut from a sharp person's blood or other potentially infectious material;
- ▶ any case requiring an employee to be medically removed under the requirements of an OSHA health standard;
- ▶ tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional after exposure to a known case of active tuberculosis;
- ▶ an employee's hearing test (audiogram) reveals 1) that the employee has experienced a Standard Threshold Shift (STS) in hearing in one or both ears (averaged at 2000, 3000, and 4000 Hz) and 2) the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 Hz) in the same ear(s) as the STS.

## What is medical treatment?

Medical treatment includes managing and caring for a patient for the purpose of combating disease or disorder. The following are not considered medical treatments and are NOT recordable:

- ▶ visits to a doctor or health care professional solely for observation or counseling;





- ▼ diagnostic procedures, including administering prescription medications that are used solely for diagnostic purposes; and
- ▼ any procedure that can be labeled first aid. (See below for more information about first aid.)

#### What is first aid?

If the incident required only the following types of treatment, consider it first aid. Do NOT record the case if it involves only:

- ▼ using non-prescription medications at non-prescription strength;
- ▼ administering tetanus immunizations;
- ▼ cleaning, flushing, or soaking wounds on the skin surface;
- ▼ using wound coverings, such as bandages, BandAids<sup>®</sup>, gauze pads, etc., or using SteriStrips<sup>®</sup> or butterfly bandages;
- ▼ using hot or cold therapy;
- ▼ using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.;
- ▼ using temporary immobilization devices (splints, slings, neck collars, or back boards);
- ▼ drilling a fingernail or toenail to relieve pressure, or draining fluids from blisters;
- ▼ using eye patches;
- ▼ using simple irrigation or a cotton swab to remove foreign bodies not embedded in or adhered to the eye;
- ▼ using irrigation, tweezers, cotton swab or other simple means to remove splinters or foreign material from areas other than the eye;

- ▼ using finger guards;
- ▼ using massages;
- ▼ drinking fluids to relieve heat stress

#### How do you decide if the case involved restricted work?

Restricted work activity occurs when, as the result of a work-related injury or illness, an employer or health care professional keeps, or recommends keeping, an employee from doing the routine functions of his or her job or from working the full workday that the employee would have been scheduled to work before the injury or illness occurred.

#### How do you count the number of days of restricted work activity or the number of days away from work?

Count the number of calendar days the employee was on restricted work activity or was away from work as a result of the recordable injury or illness. Do not count the day on which the injury or illness occurred in this number. Begin counting days from the day after the incident occurs. If a single injury or illness involved both days away from work and days of restricted work activity, enter the total number of days for each. You may stop counting days of restricted work activity or days away from work once the total of either or the combination of both reaches 180 days.

#### Under what circumstances should you NOT enter the employee's name on the OSHA Form 300?

You must consider the following types of injuries or illnesses to be privacy concern cases:

- ▼ an injury or illness to an intimate body part or to the reproductive system,
- ▼ an injury or illness resulting from a sexual assault,
- ▼ a mental illness,
- ▼ a case of HIV infection, hepatitis, or tuberculosis,
- ▼ a needlestick injury or cut from a sharp object that is contaminated with blood or other potentially infectious material (see 29 CFR Part 1904.8 for definition), and
- ▼ other illnesses, if the employee independently and voluntarily requests that his or her name not be entered on the log. You must not enter the employee's name on the OSHA 300 Log for these cases. Instead, enter "privacy case" in the space normally used for the employee's name. You must keep a separate, confidential list of the case numbers and employee names for the establishment's privacy concern cases so that you can update the cases and provide information to the government if asked to do so.

If you have a reasonable basis to believe that information describing the privacy concern case may be personally identifiable even though the employee's name has been omitted, you may use discretion in describing the injury or illness on both the OSHA 300 and 301 forms. You must enter enough information to identify the cause of the incident and the general severity of

the injury or illness, but you do not need to include details of an intimate or private nature.

#### What if the outcome changes after you record the case?

If the outcome or extent of an injury or illness changes after you have recorded the case, simply draw a line through the original entry or, if you wish, delete or white-out the original entry. Then write the new entry where it belongs. Remember, you need to record the most serious outcome for each case.

#### Classifying injuries

An injury is any wound or damage to the body resulting from an event in the work environment.

**Examples:** Cut, puncture, laceration, abrasion, fracture, bruise, contusion, chipped tooth, amputation, insect bite, electrocution, or a thermal, chemical, electrical, or radiation burn. Sprain and strain injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.



## Classifying illnesses

### Skin diseases or disorders

Skin diseases or disorders are illnesses involving the worker's skin that are caused by work exposure to chemicals, plants, or other substances.

**Examples:** Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; friction blisters, chrome ulcers; inflammation of the skin.

### Respiratory conditions

Respiratory conditions are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes at work.

**Examples:** Silicosis, asbestosis, pneumonitis, pharyngitis, rhinitis or acute congestion; farmer's lung; beryllium disease, tuberculosis, occupational asthma, reactive airways dysfunction syndrome (RAADS), chronic obstructive pulmonary disease (COPD), hypersensitivity pneumonitis, toxic inhalation injury, such as metal fume fever, chronic obstructive bronchitis, and other pneumoconioses.

### Poisoning

Poisoning includes disorders evidenced by abnormal concentrations of toxic substances in blood, other tissues, other bodily fluids, or the breath that are caused by the ingestion or absorption of toxic substances into the body.

**Examples:** Poisoning by lead, mercury,

cadmium, arsenic, or other metals; poisoning by carbon monoxide, hydrogen sulfide, or other gases; poisoning by benzene, benzol, carbon tetrachloride, or other organic solvents; poisoning by insecticide sprays, such as parathion or lead arsenate; poisoning by other chemicals, such as formaldehyde.

### Hearing Loss

Noise-induced hearing loss is defined for recordkeeping purposes as a change in hearing threshold relative to the baseline audiogram of an average of 10 dB or more in either ear at 2000, 3000 and 4000 hertz, and the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 hertz) in the same ear(s).

### All other illnesses

All other occupational illnesses.

**Examples:** Heatstroke, sunstroke, heat exhaustion, heat stress and other effects of environmental heat; freezing, frostbite, and other effects of exposure to low temperatures; decompression sickness; effects of ionizing radiation (isotopes, x-rays, radium); effects of nonionizing radiation (welding flash, ultra-violet rays, lasers); anthrax; bloodborne pathogenic diseases, such as AIDS, HIV, hepatitis B or hepatitis C; brucellosis; malignant or benign tumors; histoplasmosis; coccidioidomycosis.

## When must you post the Summary?

You must post the *Summary* only — not the *Log* — by February 1 of the year following the year covered by the form and keep it posted until April 30 of that year.

## How long must you keep the Log and Summary on file?

You must keep the *Log* and *Summary* for 5 years following the year to which they pertain.

## Do you have to send these forms to OSHA at the end of the year?

No. You do not have to send the completed forms to OSHA unless specifically asked to do so.

## How can we help you?

If you have a question about how to fill out the *Log*,

- visit us online at [www.osha.gov](http://www.osha.gov) or
- call your local OSHA office.

## Optional

# Calculating Injury and Illness Incidence Rates

### What is an incidence rate?

An incidence rate is the number of recordable injuries and illnesses occurring among a given number of full-time workers (usually 100 full-time workers) over a given period of time (usually one year). To evaluate your firm's injury and illness experience over time or to compare your firm's experience with that of your industry as a whole, you need to compute your incidence rate. Because a specific number of workers and a specific period of time are involved, these rates can help you identify problems in your workplace and/or progress you may have made in preventing work-related injuries and illnesses.

### How do you calculate an incidence rate?

You can compute an occupational injury and illness incidence rate for all recordable cases or for cases that involved days away from work for your firm quickly and easily. The formula requires that you follow instructions in paragraph (a) below for the total recordable cases or those in paragraph (b) for cases that involved days away from work, and for both rates the instructions in paragraph (c).

(a) To find out the total number of recordable injuries and illnesses that occurred during the year, count the number of line entries on your OSHA Form 300, or refer to the OSHA Form 300A and sum the entries for columns (G), (H), (I), and (J).

(b) To find out the number of injuries and illnesses that involved days away from work, count the number of line entries on your OSHA Form 300 that received a check mark in column (H), or refer to the entry for column

(H) on the OSHA Form 300A.

(c) The number of hours all employees actually worked during the year. Refer to OSHA Form 300A and optional worksheet to calculate this number.

You can compute the incidence rate for all recordable cases of injuries and illnesses using the following formula:

$$\frac{\text{Total number of injuries and illnesses} \times 200,000 \div \text{Number of hours worked by all employees}}{\text{Total recordable case rate}}$$

(The 200,000 figure in the formula represents the number of hours 100 employees working 40 hours per week, 50 weeks per year would work, and provides the standard base for calculating incidence rates.)

You can compute the incidence rate for recordable cases involving days away from work, days of restricted work activity or job transfer (DART) using the following formula:

$$\frac{\text{Number of entries in column H} + \text{Number of entries in column I} \times 200,000 \div \text{Number of hours worked by all employees}}{\text{DART incidence rate}}$$

You can use the same formula to calculate incidence rates for other variables such as cases involving restricted work activity (column I on Form 300A), cases involving skin disorders (column M-2) on Form 300A), etc. Just substitute the appropriate total for these cases, from Form 300A, into the formula in place of the total number of injuries and illnesses.

### What can I compare my incidence rate to?

The Bureau of Labor Statistics (BLS) conducts a survey of occupational injuries and illnesses each year and publishes incidence rate data by

various classifications (e.g., by industry, by employer size, etc.). You can obtain these published data at [www.bls.gov/iif/oshwc/osh/os/rrtbl.html](http://www.bls.gov/iif/oshwc/osh/os/rrtbl.html) or by calling a BLS Regional Office.

### Worksheet

Total number of injuries and illnesses <input style="width: 100%;" type="text"/>	X	200,000	÷	Number of hours worked by all employees <input style="width: 100%;" type="text"/>	=	Total recordable case rate <input style="width: 100%;" type="text"/>
Number of entries in Column H + Column I <input style="width: 100%;" type="text"/>	X	200,000	÷	Number of hours worked by all employees <input style="width: 100%;" type="text"/>	=	DART incidence rate <input style="width: 100%;" type="text"/>



# How to Fill Out the Log

The *Log of Work-Related Injuries and Illnesses* is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the *Log* to record specific details about what happened and how it happened.

If your company has more than one establishment or site, you must keep separate records for each physical location that is expected to remain in operation for one year or longer.

We have given you several copies of the *Log* in this package. If you need more than we provided, you may photocopy and use as many as you need.

The *Summary* — a separate form — shows the work-related injury and illness totals for the year in each category. At the end of the year, count the number of incidents in each category and transfer the totals from the *Log* to the *Summary*. Then post the *Summary* in a visible location so that your employees are aware of injuries and illnesses occurring in their workplace.

**You don't post the Log. You post only the Summary at the end of the year.**

OSHA's Form 300 (Rev. 01/2004)

## Log of Work-Related Injuries and Illnesses

This record must be maintained for each establishment, business, or activity at each physical location where work is performed, whether or not the employer is required to file an OSHA Form 300. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.12. Fill in the form. If you're not sure whether a case is recordable, call your local OSHA office for help.

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible. The information is not to be used for occupational safety and health purposes.

Year 20 2004  
 U.S. Department of Labor  
 Occupational Safety and Health Administration  
 Form approved OSHA no. 1218-0126

Establishment name XYZ Company State MI  
 City Ann Arbor

Identify the person		Describe the case		Classify the case		Enter the number of days lost or number of work restriction days		Check the appropriate boxes for the nature and type of illness						
(A) One	(B) Employer's name	(C) Job title (e.g. Worker)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g. Loading dock work area)	(F) Describe injury or illness, parts of body affected, and degree of disability that directly injured (e.g. Severe degree burn on right forearm from arduous task)	(G) Days away from work or restricted work activity or job transfer	(H) Job transfer or restriction days	(I) Death	(J) Loss of consciousness	(K) Loss of hearing	(L) Skin disorder	(M) Respiratory or chest illness	(N) Poisoning	(O) Other
1	Mark Begon	Welder	5-25-04	Incident	Fracture, left arm and left leg, fell from ladder	30	30							
2	Shane Alexander	Foundry man	7-2-04	pouring deck	poisoning from lead fumes	7	7							
3	Sam Swader	Electrician	8-15-04	2nd floor staircase	fracture left foot, fell over box	30	30							
4	Ralph Borella	Laborer	10-23-04	packaging dept. production floor	Back strain lifting boxes	3	3							
5	Jared Daniels	Machine op.	10-23-04	production floor	rust in eye									

Be as specific as possible. You can use two lines if you need more room.

Revise the log if the injury or illness progresses and the outcome is more serious than you originally recorded for the case. Cross out, erase, or white-out the original entry.

Choose ONLY ONE of these categories. Classify the case by recording the most serious outcome of the case, with column G (Death) being the most serious and column J (Other recordable cases) being the least serious.

Note whether the case involves an injury or an illness.

# Log of Work-Related Injuries and Illnesses

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Form approved OMB no. 1218-0176

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or other health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.6 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_

Identify the person		Describe the case		Classify the case		Enter the number of days the injured or ill worker was:		Check the "injury" column or choose one type of illness:											
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	(G) Death	(H) Days away from work	(I) Job transfer or restriction	(J) Other recordable cases	(K) Away from work	(L) On job transfer or restriction	(M) Injury	(1) Skin disorder	(2) Respiratory condition	(3) Poisoning	(4) Hearing loss	(5) All other illnesses	(6) All other illnesses	
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			/			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SAMPLE ONLY**  
 Actual Posting is 8.5" x 14"

**Page totals** \_\_\_\_\_  
 Be sure to transfer these totals to the Summary page (Form 300A) before you post it.  
 Page \_\_\_\_\_ of \_\_\_\_\_

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-364, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

# Summary of Work-Related Injuries and Illnesses



Form approved OMB no. 1218-0076

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employers, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths \_\_\_\_\_ Total number of cases with days away from work \_\_\_\_\_ Total number of cases with job transfer or restriction \_\_\_\_\_ Total number of other recordable cases \_\_\_\_\_

(G) \_\_\_\_\_ (H) \_\_\_\_\_ (I) \_\_\_\_\_ (J) \_\_\_\_\_

### Number of Days

Total number of days away from work \_\_\_\_\_ Total number of days of job transfer or restriction \_\_\_\_\_

(K) \_\_\_\_\_ (L) \_\_\_\_\_

### Injury and Illness Types

Total number of . . . \_\_\_\_\_

- (1) Injuries \_\_\_\_\_ (4) Poisonings \_\_\_\_\_
- (2) Skin disorders \_\_\_\_\_ (5) Hearing loss \_\_\_\_\_
- (3) Respiratory conditions \_\_\_\_\_ (6) All other illnesses \_\_\_\_\_

### Establishment information

Your establishment name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Industry description (e.g., *Manufacture of motor truck trailers*) \_\_\_\_\_

Standard Industrial Classification (SIC), if known (e.g., 3715) \_\_\_\_\_

OR \_\_\_\_\_

North American Industrial Classification (NAICS), if known (e.g., 336212) \_\_\_\_\_

**Employment information** (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees \_\_\_\_\_

Total hours worked by all employees last year \_\_\_\_\_

### Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive \_\_\_\_\_ Title \_\_\_\_\_

Phone \_\_\_\_\_ / / Date \_\_\_\_\_

**Post this Summary page from February 1 to April 30 of the year following the year covered by the form.**

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3014, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

## Optional

# Worksheet to Help You Fill Out the Summary

At the end of the year, OSHA requires you to enter the average number of employees and the total hours worked by your employees on the summary. If you don't have these figures, you can use the information on this page to estimate the numbers you will need to enter on the Summary page at the end of the year.

### How to figure the average number of employees who worked for your establishment during the year:

- Add** the total number of employees your establishment paid in all pay periods during the year. Include all employees, full-time, part-time, temporary, seasonal, salaried, and hourly.
- Count** the number of pay periods your establishment had during the year. Be sure to include any pay periods when you had no employees.

The number of employees paid in all pay periods = **1** \_\_\_\_\_

The number of pay periods during the year = **2** \_\_\_\_\_

**1** \_\_\_\_\_ = **3** \_\_\_\_\_

- Divide** the number of employees by the number of pay periods.

- Round the answer** to the next highest whole number. Write the rounded number in the blank marked *Annual average number of employees*.

The number rounded = **4** \_\_\_\_\_

For example, Acme Construction figured its average employment this way:

For pay period...	Acme paid this number of employees...
1	10
2	0
3	15
4	30
5	40
6	20
7	15
8	4+10
9	830

Number of employees paid = 830

Number of pay periods = 26

$830 \div 26 = 31.92$

31.92 rounds to 32

32 is the annual average number of employees

### How to figure the total hours worked by all employees:

Include hours worked by salaried, hourly, part-time and seasonal workers, as well as hours worked by other workers subject to day to day supervision by your establishment (e.g., temporary help services workers).

Do not include vacation, sick leave, holidays, or any other non-work time, even if employees were paid for it. If your establishment keeps records of only the hours paid or if you have employees who are not paid by the hour, please estimate the hours that the employees actually worked.

If this number isn't available, you can use this optional worksheet to estimate it.

### Optional Worksheet

\_\_\_\_\_ **Find** the number of full-time employees in your establishment for the year.

**X** \_\_\_\_\_ **Multiply** by the number of work hours for a full-time employee in a year.

\_\_\_\_\_ This is the number of full-time hours worked.

**+** \_\_\_\_\_ **Add** the number of any overtime hours as well as the hours worked by other employees (part-time, temporary, seasonal)

**Round** the answer to the next highest whole number. Write the rounded number in the blank marked *Total hours worked by all employees last year*.



# Injury and Illness Incident Report

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



Form approved OMB no. 1218-0076

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Completed by \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Title \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_\_

### Information about the employee

- 1) Full name \_\_\_\_\_
- 2) Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_
- 3) Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_
- 4) Date hired \_\_\_\_/\_\_\_\_/\_\_\_\_
- 5)  Male  Female

### Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_  
Facility \_\_\_\_\_
- 7) If treatment was given away from the worksite, where was it given?  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_
- 8) Was employee treated in an emergency room?  
 Yes  No
- 9) Was employee hospitalized overnight as an in-patient?  
 Yes  No

### Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness \_\_\_\_/\_\_\_\_/\_\_\_\_ AM / PM
- 12) Time employee began work \_\_\_\_ AM / PM  Check if time cannot be determined
- 13) Time of event \_\_\_\_ AM / PM
- 14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. *Examples:* "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."
- 15) **What happened?** Tell us how the injury occurred. *Examples:* "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."
- 16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected; be more specific than "hurt," "pain," or "sore." *Examples:* "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."
- 17) **What object or substance directly harmed the employee?** *Examples:* "concrete floor"; "chlorine"; "radial arm saw." *If this question does not apply to the incident, leave it blank.*
- 18) **If the employee died, when did death occur?** Date of death \_\_\_\_/\_\_\_\_/\_\_\_\_

Public reporting burden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to the collection of information unless it displays a current valid OMB control number. If you have any comments about this estimate or any other aspects of this data collection, including suggestions for reducing this burden, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

## If You Need Help...

If you need help deciding whether a case is recordable, or if you have questions about the information in this package, feel free to contact us. We'll gladly answer any questions you have.

▼ Visit us online at [www.osha.gov](http://www.osha.gov)

▼ Call your OSHA Regional office and ask for the recordkeeping coordinator

or

▼ Call your State Plan office

### Federal Jurisdiction

Region 1 - 617 / 565-9860  
Connecticut; Massachusetts; Maine; New Hampshire; Rhode Island

Region 2 - 212 / 337-2378  
New York; New Jersey

Region 3 - 215 / 861-4900  
DC; Delaware; Pennsylvania; West Virginia

Region 4 - 404 / 562-2300  
Alabama; Florida; Georgia; Mississippi

Region 5 - 312 / 353-2220  
Illinois; Ohio; Wisconsin

Region 6 - 214 / 767-4731  
Arkansas; Louisiana; Oklahoma; Texas

Region 7 - 816 / 426-5861  
Kansas; Missouri; Nebraska

Region 8 - 303 / 844-1600  
Colorado; Montana; North Dakota; South Dakota

Region 9 - 415 / 975-4310

Region 10 - 206 / 533-5930  
Idaho

### State Plan States

Alaska - 907 / 269-4957

Arizona - 602 / 542-5795

California - 415 / 703-5100

\*Connecticut - 860 / 566-4380

Hawaii - 808 / 586-9100

Indiana - 317 / 232-2688

Iowa - 515 / 281-3661

Kentucky - 502 / 564-3070

Maryland - 410 / 767-2371

Michigan - 517 / 322-1848

Minnesota - 651 / 284-5050

Nevada - 702 / 486-9020

\*New Jersey - 609 / 984-1389

New Mexico - 505 / 827-4230

\*New York - 518 / 457-2574

North Carolina - 919 / 807-2875

Oregon - 503 / 378-3272

Puerto Rico - 787 / 754-2172

South Carolina - 803 / 734-9669

Tennessee - 615 / 741-2793

Utah - 801 / 530-6901

Vermont - 802 / 828-2765

Virginia - 804 / 786-6613

Virgin Islands - 340 / 772-1315

Washington - 360 / 902-5601

Wyoming - 307 / 777-7786

\*Public Sector only





### **Have questions?**

If you need help in filling out the *Log or Summary*, or if you have questions about whether a case is recordable, contact us. We'll be happy to help you. You can:

- ▼ Visit us online at: [www.osha.gov](http://www.osha.gov)
- ▼ Call your regional or state plan office. You'll find the phone number listed inside this cover.



Chapter 6

# Code of Safe Practices

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## Creating Your Own Code of Safe Practices

Every workplace is unique with their own conditions and hazards that need to be attended to in order to create a safe work environment. Codes of Safe Practices are designed to inform employees of safe work habits that they are expected to maintain in order to do their part in an effective injury and illness prevention program.

The following Codes of Safe Practices address topics and hazards that are common to most worksites. They can be used as they are or they may be customized to your workplace using the CD-ROM included in this manual.

Additional Codes of Safe Practices may also be developed as needed to address work hazards in

or around your location. To create your own, do a job site analysis of the affected area. State the reason why the Code is needed followed by bulleted "Safe Work Practices." In some cases, it may be more appropriate to detail steps or procedures for executing a task (see Lockout Tagout Code of Safe Practices).

Codes of Safe Practices are an important tool for employers in communicating safety procedures to their employees. They may be posted in area frequented by employees, used as handouts or training guides or on a company intranet site.



## General Policy

*This Company will maintain a safety and health program conforming to the best practices recommended by OSHA. To be successful, such a program must embody the proper attitudes toward injury and illness prevention on the part of supervisors and employees. It also requires cooperation in all safety and health matters, not only between supervisor and employee, but also between each employee and his or her co-workers. Only through such a cooperative effort can a safety program in the best interest of all be established and preserved.*

1. All employees of this firm shall follow these safe practice rules, render every possible aid to safe operations, and report all unsafe conditions or practices to the supervisor/employer.
2. Supervisors shall insist that employees observe and obey every rule, regulation, and order necessary to the safe conduct of the work and take such action necessary to obtain compliance.
3. All employees shall be given frequent accident prevention instructions. Instructions, practice drills, and articles concerning workplace safety and health shall be given on a regular basis.
4. Anyone known to be under the influence of alcohol and/or drugs shall not be allowed on the job while in that condition. Persons with symptoms of alcohol and/or drug abuse are encouraged to discuss personal or work-related problems with the supervisor/employer.
5. No one shall knowingly be permitted or required to work while his or her ability or alertness is impaired by fatigue, illness, or other causes that might expose the individual or others to injury.
6. Employees should be alert to see that all guards and other protective devices are in proper places and adjusted, and they shall report deficiencies. Approved protective equipment shall be worn in specified work areas.
7. Horseplay, scuffling, and other acts that tend to endanger the safety or well-being of employees are prohibited.
8. Work shall be well planned and supervised to prevent injuries when working with equipment and handling heavy materials. When lifting heavy objects, employees should bend their knees and use the large muscles of the legs instead of the smaller muscles of the back. Back injuries are the most frequent and often the most persistent and painful type of workplace injury.
9. Workers shall not handle or tamper with any electrical equipment, machinery, or air or water lines in a manner not within the scope of their duties, unless they have received instructions from their supervisor/employer.
10. All injuries shall be reported promptly to the supervisor/employer so that arrangements can be made for medical and/or first aid treatment. First aid materials are located in \_\_\_\_\_ ;  
emergency, fire, ambulance, rescue squad, and doctors' telephone numbers are located \_\_\_\_\_ ;  
and fire extinguishers are located at \_\_\_\_\_



## Housekeeping

*This Company will maintain a safety and health program conforming to the best practices recommended by OSHA. To be successful, such a program must embody the proper attitudes toward injury and illness prevention on the part of supervisors and employees. It also requires cooperation in all safety and health matters, not only between supervisor and employee, but also between each employee and his or her co-workers. Only through such a cooperative effort can a safety program in the best interest of all be established and preserved.*

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### Safe Work Practices

- Keep aisles and stairways clear. They should not be used for temporary “overflow” or “bottleneck” storage.
- Ensure spills are reported and cleaned up immediately.
- Re-lay or stretch carpets that bulge or have become bunched to prevent tripping hazards.
- Make sure aisles and passageways are sufficiently wide for easy movement.
- Tape or anchor to the floor any temporary electrical cords that cross aisles.
- Eliminate cluttered or obstructed work areas.
- Clean only one side of a passageway at a time.
- Make sure that your work area has adequate lighting especially during night hours.
- Repair or report floor problems, such as cracks, missing tiles, etc.
- Always put trash in its proper disposal container. If a container is full, contact your supervisor.
- Keep drawers closed.
- Don’t carry something so large, you cannot see where you are going.
- Keep floors free of debris and accumulations of dust.
- Store equipment and materials in their assigned location.
- Remove any equipment or tools not in use from the work area.
- Guard floor openings or erect a barrier to prevent anyone from falling into them.
- Use drip pans and guards where possible spills might occur.
- Bundle hoses and cables when not in use.
- Regularly inspect, clean and repair all tools and equipment.
- Take any damaged or worn tools out of service.
- Do not clean equipment without “locking out.”
- Do not blow off dust with compressed air. Use a vacuum or brush.
- Don’t wait until end of the day to clean. Do it as you go.
- Keep scrap containers near where the waste is produced.
- Dispose of hazardous materials in approved marked containers.
- Maintain at least one meter (or about 3 feet) of clear space under sprinkler heads.
- Stack cartons and drums on a firm foundation and cross tie them, where necessary.
- Do not allow stored materials to obstruct aisles, stairs, exits, fire equipment, emergency eye-wash fountains, emergency showers, or first aid stations.
- Keep all storage areas clearly marked.



## PPE

*Hazards exist in every workplace in many different forms: sharp edges, falling objects, flying sparks, chemicals, noise and a myriad of other potentially dangerous situations. The Occupational Safety and Health Administration (OSHA) requires that employers protect their employees from workplace hazards that can cause injury.*

*When engineering, work practice and administrative controls are not feasible or do not provide sufficient protection, OSHA requires employers to provide personal protective equipment to their employees and ensure its use. Personal protective equipment, commonly referred to as "PPE", is any clothing or equipment that is designed to protect any part of the body from workplace hazards that can be absorbed, inhaled, or physically touched. Examples of PPE include such items as gloves, foot and eye protection, protective hearing devices (earplugs, muffs), hard hats, respirators and full body suits.*

*The Company will pay for the PPE that is necessary for the employee to perform their job safely in accordance with OSHA regulations. Exceptions include ordinary safety-toed footwear, ordinary prescription safety eyewear, logging boots and everyday clothing and weather-related gear. Employees can still be required to pay for these types of PPE, if (with the exception of logging boots) they are permitted to wear it away from work.*

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### Safe Work Practices

- Attend training sessions on PPE before performing jobs that require PPE and make sure that you understand the following:
  - o When PPE is necessary.
  - o What PPE is necessary.
  - o How to properly put on, take off, adjust and wear the PPE.
  - o The limitations of the PPE.
  - o Proper care, maintenance, useful life and disposal of PPE.
- Always wear PPE that is appropriate for the job that you are performing
- Wear PPE in the manner for which it was designed
- Make sure that PPE fits you properly in order to provide complete protection
- Care for, clean and maintain PPE
- Inform a supervisor of the need to repair or replace PPE
- Practice how to don and safely remove PPE



## Ladder Safety

*Ladders come in a variety of shapes, sizes and materials. Although they are more commonly utilized in occupations such as construction, they are generally used in some capacity at a number of workplaces for tasks such as stocking shelves or even changing a lightbulb.*

*Each year, there are more than 164,000 emergency room-treated injuries in the U.S. relating to ladders.*

*By using the right ladder for an appropriate purpose, many of these injuries can be mitigated.*

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### Safe Work Practices

- Equip stepladders with a metal spreader or locking device of sufficient size and strength to securely hold the front and back sections in open position.
- Keep ladders maintained in good condition at all times.
- Inspect ladders frequently and remove defective ones from service for repair or destruction and mark as "Dangerous, Do Not Use."
- Place ladders with a steady footing or have them secured or held in position.
- Extend ladders used to gain access to a roof or other area at least 3 feet above the point of support.
- When a ladder must be used near a door or walkway, make sure that the door is locked or the walkway is barricaded.
- When positioning a straight ladder, use the 1:4 rule meaning the base of the ladder should be one foot away from the wall for every four feet of ladder height up to the support point.
- Always face the ladder when climbing up or down.
- Climb slowly with weight centered between side rails. Don't lean too far over to one side or the other.
- Use both hands when climbing or descending a ladder.
- Keep a three-point grip on the ladder at all times (two hands and one foot or one hand and two feet).
- Make sure all rungs of a ladder are free of oil, grease and other slippery substances.
- Do not use portable stepladders longer than 20 feet.
- Do not use single ladders longer than 30 feet.
- Do not use extension ladders longer than 60 feet.
- Do not splice short ladders together to make a longer ladder.
- Do not use ladders in a horizontal position as a scaffolding or platform.
- Do not use the top of a rectangular ladder as a step.
- Do not use metal ladders near electricity.
- Do not use a ladder that has any missing rungs.
- Do not have more than one person on a ladder at a time.



## Emergency Action Plan

*An emergency action plan (EAP) is a written document required by OSHA standards [29 CFR 1910.38(a)]. The purpose of an EAP is to facilitate and organize employer and employee actions during workplace emergencies. Well developed emergency plans and proper employee training (such that employees understand their roles and responsibilities within the plan) will result in fewer and less severe employee injuries and less structural damage to the facility during emergencies. A poorly prepared plan will likely lead to a disorganized evacuation or emergency response, resulting in confusion, injury and property damage.*

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### Safe Work Practices

- Stop all work.
- Remain calm.
- Exit buildings through the nearest door when it is safe to do so.
- Assist those who are unable to exit the building on their own if it will not put you at additional risk.
- Do not run.
- Do not lag behind.
- Do not make unnecessary noise.
- If you are the last to exit a room, close the door behind you.
- Do not use elevators.
- Go directly to your designate meeting area.
- Follow the instructions given by emergency personnel or plan administrator.
- Do not return to the building until all employees have been accounted for and you are instructed to do so.
- Do not go to your vehicles unless you are told to do so.
- Do not block emergency vehicle thoroughfares.
- Make sure that you are aware of the Company's emergency procedures in the case of fire, chemical spill, natural disaster or other workplace emergency.



## Forklift Safety

*Each year, tens of thousands of injuries related to powered industrial trucks or forklifts occur in US workplaces. Many employees are injured when lift trucks are inadvertently driven off loading docks, lifts fall between docks and an unsecured trailer, they are struck by a lift truck, or when they fall while on elevated pallets and tines. Most incidents also involve property damage, including damage to overhead sprinklers, racking, pipes, walls, and machinery. Unfortunately, most employee injuries and property damage can be attributed to lack of safe operating procedures, lack of safety-rule enforcement, and insufficient or inadequate training.*

### Safe Work Practices

- Make sure that only licensed operators who are over the age of 18 drive the vehicle.
- Drive, turn and stop SLOWLY and smoothly.
- If the view forward is blocked by materials being carried, drive backwards.
- Before backing, LOOK BACK OVER BOTH SHOULDERS!
- Slow down and sound the horn at all intersections, doorways, blind corners, etc.
- Don't drive a forklift up to anyone standing in front of a wall, rack or other fixed object.
- No riders!!! No one should be on a forklift except the operator.
- Don't lift people unless an approved safety platform is used and it is secured to the forks.
- Travel with the load uphill when going up or down a hill, incline, ramp, etc.
- Don't move unstable loads.
- Be cautious around holes in floors, uneven surfaces, ramps, slopes or grades, etc.
- Yield the right-of-way to pedestrians; assume they don't see or hear you.
- Don't let anyone walk under elevated loads. Keep everyone clear of the area when moving or lifting a load.
- Plan your route for best surface, overhead clearances, visibility, etc.
- Before getting off a forklift, lower the forks to the ground, set controls in neutral, turn off engine, set parking brake.
- Never push or pull things with your forks; they are designed to lift and can be damaged or weakened by sideward pressure.
- Never turn on a slope or incline.
- Don't raise, lower or tilt a load while moving.
- Don't attempt to jump from an overturning, sit-down type forklift. Stay with the truck, holding on firmly, and press your back against the seat back
- Obey all traffic rules and signs.
- Drive with the load at a ground clearance height of 4-6 inches at the tips and 2 inches at the heels in order to clear most uneven surfaces and debris.
- Drive at a walking pace and apply the brakes slowly when driving on slippery surfaces such as icy or wet floors.
- Do not drive along the edge of an unguarded elevated surface such as a loading dock.
- Stay a minimum distance of three truck lengths from other operating mobile equipment.
- Look in the direction that you are driving; proceed when you have a clear path.
- Do not drive the forklift while people are on the attached man-lift platform.
- Drive unloaded forklifts in reverse when going up a ramp and forward when going down a ramp.
- Drive a loaded forklift in a forward gear when going up a ramp. Upon approaching the ramp, raise the forks an additional two inches to avoid hitting or scraping the ramp surface.



## Use of Tools and Equipment

Hand and power tools are a common part of our everyday lives and are present in nearly every industry. These tools help us to easily perform tasks that otherwise would be difficult or impossible. However, these simple tools can be hazardous and have the potential for causing severe injuries when used or maintained improperly. Special attention toward hand and power tool safety is necessary in order to reduce or eliminate these hazards.

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### Safe Work Practices

- Wear appropriate Personal Protective Equipment (PPE).
- When handling carpentry materials, wear a hard hat or bump cap to protect your head.
- Inspect tools before using them.
- Tools that appear to be damaged or have broken handles should be marked unsafe.
- Do not use them until they have been repaired.
- Before using any cutting tool, remove nails or other objects that might destroy the tool's cutting edge.
- Use tools properly.
- Always use proper-sized tools and equipment for the job.
- Use each tool only for the job for which it was intended.
- Take special care when hammering so that you strike the object, not your fingers.
- Keep your mind on your work and avoid horseplay and loud talk.
- Never use a screw driver to see if electrical circuits are hot.
- Never use a machinist's hammer in place of a carpenter's hammer.
- Be sure wrenches fit properly.
- Never use pliers in place of a wrench.
- Pull on wrenches, do not push.
- When sawing secure the material in the saw vise.
- Keep cutting-edge tools sharp.
- When cutting, always cut away from the body.
- Grip tools firmly.
- Hold hand tools securely so that they do not slip and hit someone.
- When handing a tool to another person, direct sharp points and cutting edges away from yourself and the other person.
- Do not chop at heights above your head when you are working with a hand axe.
- Do not throw tools from one location to another, from one employee to another, from scaffolds or other elevated platforms.
- Clean and put away all unneeded tools and materials.
- Carry and store tools properly.
- Do not carry tools in your hand when you are climbing. Carry tools in tool belts or hoist the tools to the work area using a hand line.
- All sharp-edge tools and chisels should be carried with the cutting edge down.
- Never carry sharp tools in a pocket.
- Store all sharp-edge cutting tools with the sharp edges down.



## Safe Lifting

Backbones are made up of 24 individual bones called vertebrae that are stacked on top of one another. Vertebrae are separated by soft discs of cartilage that perform like shock absorbers for your vertebrae, and also help your back to bend, twist and move around. Most of the support to your spine is maintained by your stomach muscles, as well as by the many muscles and ligaments that run up and down the length of your back.

If ligaments and muscles are weak, then discs in the lower back can become weakened. With excessive lifting, or a sudden fall a disc can rupture. Years of back abuse, or with aging, the discs may simply wear out and you may live with chronic pain for several years.

Poor physical condition, poor posture, lack of exercise, and excessive body weight contribute to the number and severity of sprains and strains. Although degeneration of the spine due to aging is a major contributor to lower back pain, most back-injuries occur in the 24 to 40 year old age group.

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### Safe Work Practices

- Size up the load and check overall conditions. Don't attempt the lift by yourself if the load appears to be too heavy or awkward. Check that there is enough space for movement, and that the footing is good. "Good housekeeping" ensures that you won't trip or stumble over an obstacle.
- Make certain that your balance is good. Feet should be shoulder width apart, with one foot beside and the other foot behind the object that is to be lifted. Get as close to the load as possible.
- Bend the knees; don't stoop. Keep the back straight, but not vertical. (There is a difference. Tucking in the chin straightens the back.)
- Grip the load with the palms of your hands and your fingers. The palm grip is much more secure. Tuck in the chin again to make certain your back is straight before starting to lift.
- Use your body weight to start the load moving, then lift by pushing up with the legs. This makes full use of the strongest set of muscles.
- Keep the arms and elbows close to the body while lifting.
- Carry the load close to the body. Don't twist your body while carrying the load. To change direction, shift your foot position and turn your whole body.
- Watch where you are going!
- To lower the object, bend the knees. Don't stoop. To deposit the load on a bench or shelf, place it on the edge and push it into position. Make sure your hands and feet are clear when placing the load.
- When possible, use mechanical equipment to move heavy items.



## Lockout Tagout

Lockout/Tagout (LOTO) refers to specific practices and procedures to safeguard employees from the unexpected energization or startup of machinery and equipment, or the release of hazardous energy during service or maintenance activities. This requires that a designated individual turns off and disconnects the machinery or equipment from its energy source(s) before performing service or maintenance and that the authorized employee(s) either lock or tag the energy-isolating device(s) to prevent the release of hazardous energy and take steps to verify that the energy has been isolated effectively.

Approximately 3 million workers service equipment and face the greatest risk of injury if lockout/tagout is not properly implemented. Compliance with the lockout/tagout standard (29 CFR 1910.147) prevents an estimated 120 fatalities and 50,000 injuries each year.

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### Safe Work Practices

Before beginning service or maintenance, the following steps must be accomplished in sequence and according to the specific provisions of the employer's energy-control procedure:

- (1) Notify all affected employees
- (2) Refer to the company procedure to identify, understand and know methods to control the energy.
- (3) Shut machine down by the normal stopping procedure.
- (4) De-activate the energy isolating device(s) so that the machine is isolated from the energy source(s).
- (5) Lock out the energy isolating device(s) with assigned individual lock(s).
- (6) Dissipate or restrain stored or residual energy.
- (7) Ensure that the machine is disconnected from the energy source(s).

Caution: Return operating control(s) to neutral or "off" position after verifying the isolation of the equipment.

- (8) Lock and tag the energy isolating devices appropriately.

### Restoring Equipment to Service

- (1) Check the machine to ensure that nonessential items have been removed and that the machine components are operationally intact.
- (2) Check the work area to ensure that all employees have been safely positioned.
- (3) Verify that the controls are in neutral.
- (4) Remove the lockout devices and reenergize the machine or equipment.
- (5) Notify affected employees that the servicing or maintenance is completed and the machine is ready for use.



## Electrical

Working with electricity can be dangerous. Engineers, electricians, and other professionals work with electricity directly, including working on overhead lines, cable harnesses, and circuit assemblies. Others, such as office workers and salespeople, work with electricity indirectly and may also be exposed to electrical hazards.

Electrical injuries vary from minor shock to death depending on circumstances and voltage. The majority of injuries result in:

- Electric shock
- Burns
- Loss of muscle control
- Falls

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### Safe Work Practices

- When repairing or cleaning equipment, always turn machine off at its source and follow the appropriate lockout/tagout procedures.
- Post conspicuous signs at the entrances to electrical rooms and similarly guarded locations to alert people to the electrical hazard and to forbid entry to unauthorized people.
- Utilize circuit protection devices such as fuses, circuit breakers or ground-faults.
- Keep electric tools properly maintained.
- Use extension cords for temporary use only and make sure that the cord is rated to handle the power you are using.
- Never alter 3-pronged plugs to fit into 2-pronged outlets.
- If you think there's something wrong with a piece of electrical equipment, don't use it.
- Remove metal jewelry, key chains and similar objects when working around electricity.
- Never use metal ladders when working near power lines or other energized wiring.
- Do not work on electricity around damp or wet environments.
- Use "non-sparking" tools and "spark-proof" motors when working with electricity near flammable materials.
- Never touch a person who is in contact with a live wire.
- Avoid excess bending, stretching and kinking of electrical supply cords.
- Never jerk plugs from wall outlets.
- Don't staple, tack, or nail cords to walls or floors.
- Turn off all appliances at the end of the day.
- Use only grounded appliances plugged into grounded (three prong plugs) outlets.
- Disconnect electrical equipment that malfunctions or gives off a strange odor and call the appropriate maintenance personnel.
- Promptly disconnect and replace cracked, frayed, or broken electrical cords.



Chapter 7

# State Programs

# State Injury & Illness Prevention Programs

In this chapter, we will survey state requirements and recommended guidelines for injury and illness prevention programs (IIPPs). Thirty-four states have some type of program initiatives for worker safety and health protection. These programs have a variety of names, including “Accident Prevention Programs”, “Injury and Illness Prevention Programs”, and “Safety and Health Programs.”

State programs also come in a variety of forms: they may be voluntary or mandatory; comprehensive or partial; applicable to all employers or only to a subset; and, may be administrated by the state’s occupational safety and health agency or through the state’s workers’ compensation system. Some states provide for a reduction in workers’ compensation premiums for participating employers.

For your reference, please see the alphabetical listing below for state IIPP guidelines, noting those that have mandatory requirements and those that have recommended program initiatives and/or incentives. Internet links have been provided for specific references to state programs and/or regulations.

## ALABAMA

Mandatory safety committee for employers subject to state workers’ compensation law:

<http://www.legislature.state.al.us/codeofalabama/1975/25-5-15.htm>

## ARKANSAS

No state requirement or guidelines to establish an injury and illness prevention program.

## CALIFORNIA

Mandatory for every employer to establish, implement and maintain an injury and illness prevention program under the California Code of Regulations (CCR) Section 3203; an exception applies to employers with fewer than 10 employees:

(a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:

- 1) Identify the person or persons with authority and responsibility for implementing the Program.

- 2) Include a system for ensuring that employees comply with safe and healthy work practices.
- 3) Include a system for communicating with employees in a form readily understandable by all affected employees on matters relating to occupational safety and health, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal. **EXCEPTION:** Employers having fewer than 10 employees shall be permitted to communicate to and instruct employees orally in general safe work practices.
- 4) Include procedures for identifying and evaluating work place hazards including scheduled periodic inspections to identify unsafe conditions and work practices.

<http://www.dir.ca.gov/title8/3203.html>

## COLORADO

No state requirement or guidelines to establish an injury and illness prevention program.

## CONNECTICUT

Voluntary guidelines only; the Connecticut Department of Public Health offers a *Workplace Hazard Assessment Program* that assists employers with identifying and addressing workplace hazards.

[http://www.ct.gov/dph/lib/dph/environmental\\_health/eoha/pdf/ct-hhe\\_brochure\\_-\\_2.pdf](http://www.ct.gov/dph/lib/dph/environmental_health/eoha/pdf/ct-hhe_brochure_-_2.pdf)

## DELAWARE

Voluntary guidelines only; the Delaware Department of Insurance offers an incentive program for participating employers who have established an injury and illness prevention program in their workplace. The program is intended to provide lower insurance premiums for qualifying employers who currently pay \$3,161 or more of annual workers’ compensation premiums.

<http://delcode.delaware.gov/title19/c023/sc04/index.shtml>

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## FLORIDA

Voluntary guidelines only; the Florida Division of Workers' Compensation offers an incentive program for participating employers who have established an injury and illness prevention program in their workplace. The program is intended to provide lower insurance premiums for qualifying employers who either implement a drug-free workplace program or implement an injury and illness prevention program.

[http://www.myfloridahouse.gov/FileStores/Web/Statutes/FS07/CH0627/Section\\_0627.0915.HTM](http://www.myfloridahouse.gov/FileStores/Web/Statutes/FS07/CH0627/Section_0627.0915.HTM)

## HAWAII

Mandatory written injury and illness prevention program for employers with 25 or more employees, as enforced under Hawaii Administrative Rules, Section 12-60-2.

<http://hawaii.gov/labor/hiosh/pdf/standards/part-2/12-60.pdf>

## IDAHO

Recommended for logging industry only; the Idaho Department of Labor provides the *Minimum Safety Standards and Practices for Logging*, which contains the primary safety rules for the state's logging industry.

<http://adm.idaho.gov/adminrules/rules/idapa17/0816.pdf>

## INDIANA

Voluntary guidelines only; the state's "INSafe" division provides a *Free Consultation Program* that offers a voluntary approach to designing and implementing effective safety and health management systems.

<http://www.in.gov/dol/insafe.htm>

## KANSAS

Voluntary guidelines only; the Kansas Department of Labor offers a *Safety and Health Achievement Recognition Program* (SHARP) that provides incentives and support to small, high-hazard employers who develop and implement injury and illness prevention programs, including reductions in workers' compensation premiums.

[http://www.dol.ks.gov/safety/sharp\\_program.html](http://www.dol.ks.gov/safety/sharp_program.html)

## LOUISIANA

Mandatory injury and illness prevention program for employers with 15 or more employees, as enforced under Subpart A, 1291(B)(4) of the Louisiana Statutes.

<http://www.laworks.net/Downloads/OWC/safetyrequirements.pdf>

## MAINE

Voluntary guidelines only; the Maine Department of Labor offers general guidelines for establishing a *Safety Management System* to maintain a safe and health workplace.

[http://www.safetyworksmaine.com/safe\\_workplace/safety\\_management/index.html](http://www.safetyworksmaine.com/safe_workplace/safety_management/index.html)

## MICHIGAN

Mandatory for construction industry only; written injury and illness prevention program for employers in the construction industry is required under the MIOSHA Construction Safety Standard, Part 1, Rule 114.

[http://www.michigan.gov/documents/dleg/deleg\\_wsh\\_cetsp01\\_326406\\_7.doc](http://www.michigan.gov/documents/dleg/deleg_wsh_cetsp01_326406_7.doc)

## MINNESOTA

Mandatory injury and illness prevention program for employers with 25 or more employees under Section 182.676 of the Minnesota Statutes. For businesses with 25 or less employees, a safety committee must be established if:

1. the employer has a lost workday cases incidence rate in the top ten percent of all rates for employers in the same industry; or
2. the workers' compensation premium classification assigned to the greatest portion of the payroll for the employer has a pure premium rate as reported by the Workers' Compensation Rating Association in the top 25 percent of premium rates for all classes.

<https://www.revisor.mn.gov/statutes/?id=182.676>

## MISSISSIPPI

No state requirement or guidelines to establish an injury and illness prevention program.

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## MISSOURI

Voluntary guidelines only; the Missouri Department of Labor & Industrial Relations provides the Missouri Workers' Safety Program (MWSP) to help employers improve workplace safety, reduce workers' compensation costs, and regulate safety services provided by insurance carriers.

[http://labor.mo.gov/DLS/WorkplaceSafety/workers\\_safety.asp](http://labor.mo.gov/DLS/WorkplaceSafety/workers_safety.asp)

## MONTANA

Mandatory for public and private schools only; see Montana Administrative Rules Section 39-71-1504.

<http://data.opi.mt.gov/bills/mca/39/71/39-71-1504.htm>

## NEBRASKA

Mandatory safety committee for employers subject to state workers' compensation law; such safety committees must establish a written injury prevention program, as enforced under the Nebraska Revised Statutes, Section 48-443(1)(a).

<http://law.justia.com/codes/nebraska/2009/Chapter48/48-443.html>

## NEVADA

Mandatory injury and illness prevention program required for employers with 25 or more employees, as enforced under Nevada Revised Statutes (NRS), Section 618.383; special circumstances for businesses who manufacture explosives:

NRS 618.383

1. Except as otherwise provided in subsections 8 and 9, an employer shall establish a written safety program and carry out the requirements of the program within 90 days after it is established.
2. The written safety program must include:
  - (a) The establishment of a training program for employees concerning safety in the workplace, particularly in those areas where there have been recurring injuries or where explosives are manufactured.
  - (b) If an employer has more than 25 employees, or if an employer's employees are engaged in the manufacture of explosives, the establishment

of a safety committee. **For businesses engaging manufacture of explosives with 10 or less employees:** An employer who has 10 or fewer employees is exempted from the provisions of this section unless the employer has employees engaged in the manufacture of explosives. For the purposes of this section, an employer in the mining industry shall not be deemed to be a manufacturer of explosives.

<http://www.leg.state.nv.us/nrs/NRS-618.html#NRS618Sec383>

## NEW HAMPSHIRE

Mandatory *Joint Loss Management Committee* for businesses with 5 or more employees; mandatory written injury and illness prevention program for businesses with 10 or more employees.

[http://www.labor.state.nh.us/safety\\_training\\_joint\\_loss.asp](http://www.labor.state.nh.us/safety_training_joint_loss.asp)

<http://gencourt.state.nh.us/rsa/html/XXIII/281-A/281-A-64.htm>

## NEW MEXICO

No state requirement or guidelines to establish an injury and illness prevention program. However, every employer subject to the provisions of the Workers' Compensation Act who has an annual workers' compensation premium liability of five thousand dollars (\$5,000) or more or who is a certified self-insurer shall receive an annual safety inspection.

<http://www.workerscomp.state.nm.us/partners/safety.php>

## NEW YORK

No state requirement or guidelines to establish an injury and illness prevention program. However, under the state's *Workplace Safety and Loss Prevention Program*, employers who generate an experience modification rating over 1.2 and have a payroll of over \$800,000 must undergo a comprehensive safety and loss prevention consultation.

[http://www.labor.state.ny.us/workerprotection/safetyhealth/dosh\\_workplace\\_safety.shtm](http://www.labor.state.ny.us/workerprotection/safetyhealth/dosh_workplace_safety.shtm)

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## NORTH CAROLINA

Mandatory safety and health committees must be established for employers with more than 11 employees or an experience modification rating of 1.5 or above, as enforced under Title 13 Section 07A.0601 of the North Carolina Annotated Code.

[http://www.nclabor.com/osha/etta/state\\_specific\\_rules/7a06.pdf](http://www.nclabor.com/osha/etta/state_specific_rules/7a06.pdf)

## NORTH DAKOTA

Voluntary guidelines only; the North Dakota Loss Control Department of Workforce Safety & Insurance (WSI) offers a *Safety Management Program* for participating employers who have established an injury and illness prevention program in their workplace. Employers who successfully participate in WSI's program can receive a workers' compensation premium discount of 10%.

<http://www.workforcesafety.com/safety/losscontrol.asp>

## OHIO

Voluntary guidelines only; the Ohio Bureau of Workers' Compensation offers a *10-Step Business Plan for Safety* designed to reduce employer costs, including a sample drug-free safety program, individual-retrospective rating and experience modifier capping.

<http://www.ohiobwc.com/employer/programs/10step/default.asp>

## OKLAHOMA

Voluntary guidelines only; the Oklahoma Department of Labor offers a *Workers' Compensation Premium Reduction (WCPR) Program* to help employers earn a reduction in workers' compensation insurance premiums.

<http://www.ok.gov/odol/documents/OSHAWCPRFactSheet20051117.pdf>

## OREGON

Mandatory for all employers to implement a written safety and health program, as enforced under Section 437-007-0100 of the Oregon Administrative Rules.

[http://www.cbs.state.or.us/external/osha/pdf/rules/division\\_7/div7\\_b.pdf](http://www.cbs.state.or.us/external/osha/pdf/rules/division_7/div7_b.pdf)

## PENNSYLVANIA

Voluntary guidelines only; the Pennsylvania Department of Labor & Industry offers a *Workplace Safety Committee Certification Program* to help employers earn a reduction in workers' compensation insurance premiums. Employers who form and maintain a workplace safety committee qualify for a 5 percent reduction in workers' compensation premiums.

[http://www.portal.state.pa.us/portal/server.pt/community/health\\_safety\\_division/10387](http://www.portal.state.pa.us/portal/server.pt/community/health_safety_division/10387)

## TENNESSEE

No state requirement or guidelines to establish an injury and illness prevention program. However, employers subject to the state's Workers' Compensation Law must establish and administer a safety committee if the employer has an experience modification rate of 1.2 or above.

<http://www.tn.gov/sos/rules/0800/0800-02/0800-02-03.pdf>

## TEXAS

Voluntary guidelines only; the Texas Department of Insurance offers the *Occupational Safety and Health Consultation (OSHCON) Program* as a free service to help private employers identify and eliminate occupational hazards, whether or not the employer carries workers' compensation insurance.

<http://www.tdi.texas.gov/oshcon/>

## UTAH

No state requirement to establish an injury and illness prevention program. However, employers carrying workers' compensation insurance may be required by the insurance carrier to establish a workplace safety program if the employer has an experience modification rate of 1.0 or higher, as enforced under Title 34 Section (3)(b) of the Utah Code. Any employer who fails or refuses to establish a workplace safety program may be charged an additional 5 percent over any existing current rates and premium modifications.

[http://le.utah.gov/~code/TITLE34A/htm/34A02\\_011100.htm](http://le.utah.gov/~code/TITLE34A/htm/34A02_011100.htm)

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## VERMONT

Voluntary guidelines only; the Vermont Department of Labor provides the *Vermont Project WorkSAFE Consultation* service to help guide employers in the development of a fully functional safety and health program.

<http://labor.vermont.gov/Default.aspx?tabid=436>

## WASHINGTON

Mandatory for all employers, with few exceptions, to develop a formal *Accident Prevention Program* that is outlined in writing, as enforced under Section 296-800-140 of the Washington Annotated Code.

<http://www.lni.wa.gov/wisha/rules/corerules/HTML/296-800-140.htm>

## WEST VIRGINIA

No state requirement to establish an injury and illness prevention program. However, in order to be approved for self-insurance status, employers must have an effective health and safety program at its workplace(s), as enforced under Chapter 23 Article 2B of the West Virginia Code.

<http://www.legis.state.wv.us/WVCODE/ChapterEntire.cfm?chap=23&art=2B>

## WYOMING

Voluntary guidelines only; the Wyoming Department of Workforce Services provides *Risk Management Programs* that offer incentives to participating employers who have established an injury and illness prevention program in their workplace. Upon acceptance into the program, employers have the potential to save up to 10 percent off their workers' compensation premiums.

<http://doe.wyo.gov/employers/RiskManagement/Pages/default.aspx>



Chapter 8

# My Injury and Illness Prevention Program

# Instructions for Use

Now that you've been introduced to the elements of an effective Injury & Illness Prevention Program (IIPP), it's time to put them together to generate your customized IIPP for your unique business. This tab has been set aside as a section to store your customized program for reference or should you need to provide it in cooperation of an OSHA inspection.

To build your customized IIPP, please refer to the enclosed IIPP Resource CD-ROM, as well as the Sample Program in Chapter 3 of this manual. Use these step-by-step tools to begin implementing your IIPP as your key to minimizing worker exposure to safety and health hazards. After generating your customized IIPP, you may insert it into this binder as a reference for training purposes or as new workplace hazards arise.

Keep in mind that your IIPP can only be effective if taken seriously and followed through. Because each company is unique, the needs of your company should be examined and incorporated into the program in order to make it successful. In addition, it is essential that your personal concern for your employees is demonstrated at all times and that the priority is placed on them in your workplace. This way your workers will be active participants in the development and implementation of your IIPP.

Under the Occupational Safety and Health Act of 1970 (OSH Act), employers are responsible for providing safe and healthful workplaces for their employees. By taking this responsibility now to implement your customized IIPP, you will be able to identify potential hazards and correct them before they negatively affect your workplace.

Once your customized IIPP program is completed, follow these steps to ensure a thorough implementation:

Distribute a copy of your IIPP program to all employees in the organization. You may also wish to have employees sign an Acknowledgement form that they have read and understand the program and their duties to uphold it. If a claim is ever made against you challenging the safety of the work environment, having a signed form that you have implemented and communicated a workplace injury and illness program will be your first line of defense.

Reinforce your injury and illness prevention program by conducting training and regular safety meetings. Utilize the training sheet and Codes of Safe Practices contained in this manual. Distribute a Training Acknowledgement Form to each employee to sign and retain the signed copy in the employee's personnel file for the duration of their employment.

Add copies of the Codes of Safe Practices and training sheets that apply to your business. You may also wish to add any forms that are required as part of your injury and illness prevention procedures.

Insert a copy of your complete program under this tab of your IIPP manual along with copies of training records and any other documentation you utilize in the maintenance of your program (i.e. Hazard Inspection checklists). In the event of an OSHA inspection, documentation of your compliance efforts will be accessible and easy to find.

Make sure you review and update your IIPP at least annually or as processes or equipment change in your organization.