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Ohio Safety Congress & Expo

WELL AT HOME. SAFE AT WORK.

Session 930
OSHA
Recordkeeping and Safety Management

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9 a.m. Tuesday, March 27

Ohio Bureau of Workers' Compensation

Instructors

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Course Objectives

- o Understand the benefit of accident recording to enhance your safety-management program
- o Decipher the OSHA recordkeeping standard, and what you need to do to be in compliance
- o Calculate and use DART rates to identify trends and measure against comparable industries

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Course Objectives

- o Use accident analysis to assist with the determination of recordability
- o What to expect from OSHA's recordkeeping national emphasis program and associated citations and penalties
- o Perform a recordkeeping audit and assess the working environment

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Turn and Talk

What are the benefits of OSHA recordkeeping for employers?

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OSHA's Safety and Health System Components

- o Management leadership and employee involvement
- o Worksite analysis
- o Safety and health training
- o Hazard prevention and control

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OSHA recordkeeping requirements and workers' compensation requirements are NOT the same.

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Partial Exemption Size

- Exempt if company has 10 or fewer employees during peak employment
- Based on number of employees in entire company
- Report fatalities
- Report hospitalization of three or more

1904.1

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Partial Exemption Certain Industries

- Exemption for low hazard retail, service, finance, insurance, real estate, etc.
- Report fatalities
- Report hospitalization of three or more
- See appendix A

1904.2

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Recording Criteria

- Must record each fatality injury, or illness that is:
 - Work related;
 - A new case;
 - Meets general recording criteria;
 - Additional criteria such as needlesticks, TB, hearing loss, medical removal.
- Decision tree

1904.4

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Decision Tree

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    graph TD
      Q1[Did the employee experience an injury or illness?] -- No --> A1[Do not record the injury or illness]
      Q1 -- Yes --> Q2[Is the injury or illness work-related?]
      Q2 -- No --> A1
      Q2 -- Yes --> Q3[Is the injury or illness a new case?]
      Q3 -- No --> A2[Update the previously recorded injury or illness entry if necessary.]
      Q3 -- Yes --> Q4[Does the injury or illness meet the general recording criteria or the application to specific cases?]
      Q4 -- No --> A1
      Q4 -- Yes --> A3[Record the injury or illness]
    
```

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Work Relatedness

- Presumption of work relatedness
- Work environment
- Nine exemptions (see handout)
- Significant aggravation
- Pre-existing condition
- Travel status
- Working at home

1904.5

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Determination of a New Case

- New case if:
 - No previous recordable injury/illness of same body part;
 - Employee had recovered completely from previous injury of same body part.

1904.6

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Determination of a New Case

- Chronic illness (cancer, asbestosis)
- Injury/illness as result of specific event or exposure (dermatitis)
- Using physician to determine new case
 - Must follow advise
 - Competing medical opinions

1904.6

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Activity

Work Relatedness
Determination of New Case

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Scenario 1

- An employee drives into the company parking lot at 7:30 a.m., exits his car and proceeds to cross the parking lot to clock-in to work.
- A second employee, also on the way to work, approaches the first employee. The two individuals get into a physical altercation in the parking lot. The first employee breaks an arm during the altercation.
- The employee goes to the doctor and receives medical treatment for his injury.

The company deems this non-work related and, therefore, no recordable, since the employees had not yet reported to work, and a work task was not being performed at the time of the altercation.

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Scenario 1

- An employee drives into the company parking lot at 7:30 a.m., exits his car and proceeds to cross the parking lot to clock-in to work.
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- The employee goes to the doctor and receives medical treatment for his injury.

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Scenario 2

An employee must report to a construction site by 8 a.m.

- The employee drove onto the construction site at 7:30 a.m. and parked the car.
- The employee exited the car and proceeded to the site office to report to work.
- The parking lot and sidewalks are privately owned by the property owner and both are within the property line.
- The employee stepped onto the sidewalk and slipped on the snow and ice.
- The employee suffered a back injury and missed multiple days of work.

The company believes the employee was still in the process of the commute to work since the employee had not yet checked in at the office. Since a work task was not being performed, the site personnel deemed the incident not work-related and, therefore, not recordable.

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General Recording Criteria

- Recordable if injury or illness results in:
 - Death;
 - Days away;
 - Restricted work/job transfer;
 - Medical treatment beyond first aid;
 - Loss of consciousness;
 - Significant injury/illness diagnosed.

1904.7(a)

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General Recording Criteria Death

- Include on log
- Report to OSHA within eight hours

1904.7(b)(2)

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General Recording Criteria Days Away from Work

- Do not count day of injury.
- Record according to physician directions.
- Conflicting recommendations
- Use calendar days, including weekends and holidays.
- Only record injury/illness in the year it occurred.
- Cap 180 days
- Employee leaves employment.

1904.7(b)(3)

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Activity

General recording criteria
Death
Days away

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Scenario 3a

What are the requirements for recordability when the employee fails to follow recommendations of the treating physician?

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Scenario 3a

What are the requirements for recordability when the employee fails to follow recommendations of the treating physician?

- If the employee comes to work when the physician states employee should stay at home, enter number of calendar days the physician recommended.
- If the employee stays home when the physician states he/she can return to work, you stop count days away from the date the physician recommends the employee return to work.

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Scenario 3b

List four situations when you stop counting days away from work on your log.

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Scenario 3b

List four situations when you stop counting days away from work on your log.

- Employee returns to work at full capacity.
- Employee returns to work on restrictions.
- 180 day cap
- Employee leaves employment due to reasons unrelated to injury or illness.

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Scenario 3c

How do you record on the log an injury/illness that extends from one calendar year to the next calendar year?

How is the annual summary affected?

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Scenario 3c

How do you record on the log an injury/illness that extends from one calendar year to the next calendar year?

- On the log, enter the number of calendar days for the year in which the injury occurred up to 180 days.

How is the annual summary affected?

- Estimate the number of days you expect the employee to be away from work and use this number to calculate the total for the annual summary.

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General Recording Criteria Restricted Work/Job Transfer

- What is restricted work?
- Routine function
- Partial day of work
- Vague restrictions
- Physician recommendations
- What is job transfer?
- Counting requirements
- Exception

1904.7(b)(4)

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Activity

Restricted Work
Job Transfer

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Scenario 4

An employee has a work-related occupational injury. The company physician examines the employee and determines he can return to work, full duty. However, the physician gives the employee a 20-pound lifting restriction, or a "do not use left hand" restriction for three weeks. The physician gives the restriction because the employer may rotate employees once or twice a month for non-routine tasks or equipment breakdown.

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Scenario 4 (continued)

With the restriction in place, the supervisor knows not to allow that employee to do non-routine tasks. Is this still considered a work restriction for recordkeeping purposes, and do the total days need to be counted on the OSHA Log since the restriction is for non-routine tasks, and the physician says the employee can perform all of his normal routine work and work the full work day?

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Scenario 4 (continued)

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Scenario 5

An employee is injured at work, and work relationship is established for recordkeeping purposes. The employee now cannot drive himself to work. The employee may have a cast or splint on, arm in a sling, using crutches or leg immobilized, etc. The employer has work the employee could do if the employee could get to work. The employee stated he cannot drive. Prior to the injury, the employee drove himself to work every day. He was not in a car pool or didn't catch a ride with co-workers, etc.

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Scenario 5 (continued)

Would this case be a days away from work case or a restricted work activity case? If the employer provided transportation (even though not required by the regulation to do so), could the company count the days as restricted, or must they still count the days as days away from work? Would the answer be the same if the employee's doctor wrote a restriction of "no driving," but the company says "the employee can get a ride with someone else, we have work available"?

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Scenario 5

An employee is injured at work, and work relationship is established for recordkeeping purposes. The employee now cannot drive himself to work. The employee may have a cast or splint on, arm in a sling, using crutches, or leg immobilized, etc. The employer has work the employee could do if the employee could get to work. The employee stated he cannot drive. Prior to the injury, the employee drove himself to work every day. He was not in a car pool, or didn't catch a ride with co-workers, etc.

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Scenario 5 (continued)

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Scenario 6

An employee is injured, and a physician places him/her under a work restriction(s). However, the employer does not have any available restricted work for a period of time. Should this case be classified as "Days away from work" or "Job transfer or restriction"?

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Scenario 6

An employee is injured, and a physician places him/her under a work restriction(s). However, the employer does not have any available restricted work for a period of time. Should this case be classified as "Days away from work" or "Job transfer or restriction"?

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Scenario 7

A physician or other licensed health-care professional recommends medical treatment, days away from work or restricted work activity as a result of a work-related injury or illness. Can the employer decline to record the case based on a contemporaneous second provider's opinion that the recommended medical treatment, days away from work or work restriction are unnecessary, if the employer believes the second opinion is more authoritative?

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Scenario 7

A physician or other licensed health care professional recommends medical treatment, days away from work or restricted work activity as a result of a work-related injury or illness. Can the employer decline to pay for the case based on a contemporaneous second provider's opinion that the recommended medical treatment, days away from work or work restriction are unnecessary, if the employer believes the second opinion is more authoritative?

**YES!
HOWEVER**

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Scenario 8

An employee sustained a work-related ankle injury (sprain) and received medical treatment. The employee returned to work immediately with restrictions. The employee's doctor has requested that the employee return for periodic office visits so he can observe the patient's improvement. The employee's doctor states that on the days the employee has an appointment, the employee is "unable to work that date." Your question concerns whether the days used by the employee to visit the doctor for follow-up, should be considered as days away from work?

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Scenario 8

An employee sustained a work-related ankle injury (sprain) and received medical treatment. The employee immediately returned to work with restrictions. The employee's doctor has requested that the employee return for periodic office visits so he can observe the patient's improvement. The employee's doctor states that on the days the employee has an appointment, the employee is "unable to work that date." Your question concerns whether the days used by the employee to visit the doctor for follow-up, should be considered as days away from work?

NO

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**General Recording Criteria
Medical Treatment**

- o Medical treatment does not include:
 - Physician or LHCP visits for observation or counseling;
 - Diagnostic procedures (X-rays);
 - First aid.
- o First aid
 - See handout for complete list
 - Treatment provider
 - Medical treatment recommended, but employee refuses

1904.7(b)(5)

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**General Recording Criteria
Loss of Consciousness**

- o Loss of consciousness
 - Every work related case recordable

1904.7(b)(6)

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Significant Diagnosis

- o Must be recorded regardless of medical treatment
 - Cancer
 - Chronic irreversible disease
 - Fractured or cracked bone
 - Punctured eardrums

1904.7(b)(7)

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Activity

Medical treatment
Loss of consciousness
Significant aggravation

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Scenario 9

An employee was performing routine work activities in a manufacturing setting when struck by an object that caused damage to his dental bridge. The employee to date has chosen not to seek any medical or dental treatment or consultation.

Would damage to a denture in the presence of no other discernable injury be considered a recordable injury requiring entry on the OSHA 300 Log even when medical treatment is not administered?

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Scenario 9

An employee was performing routine work activities in a manufacturing setting when struck by an object that caused damage to his dental bridge. The employee to date has chosen not to seek any medical or dental treatment or consultation.

Would damage to a denture in the presence of no other discernable injury be considered a recordable injury requiring entry on the OSHA 300 Log even when medical treatment is not administered?

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Scenario 10

Identify whether these two types of treatments constitute first aid or medical treatment for purposes of applying OSHA's recordkeeping rule and provide your reasoning.

- The use of glue to close a wound
- The use of a prescription antibiotic to prevent a possible infection for a puncture wound

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Scenario 10

Identify whether these two types of treatments constitute first aid or medical treatment for purposes of applying OSHA's recordkeeping rule and provide your reasoning.

- The use of glue to close a wound
- The use of a prescription antibiotic to prevent a possible infection for a puncture wound

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Scenario 11

A macaque monkey bites an employee working in a research lab. Monkeys can be naturally infected with Cercopithecine Herpes Virus 1, also known as "B virus." Protocol for responding to a monkey bite requires examination by a physician. At the physician's discretion, based primarily on the health of the employee, an anti-viral treatment may be initiated as a prophylactic treatment against B virus prior to determining whether or not the animal is a carrier or shedding the virus.

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Scenario 11 (continued)

- In this case, anti-viral treatment is initiated prior to obtaining test results. The employee receives no other care that would meet the OSHA recordkeeping definition of medical treatment. If the monkey is later examined, and the oral and ocular swabs and blood samples reveal the monkey does not test positive for B virus, could the case be red-lined off the OSHA 300 Log since these test results would indicate the anti-viral medication was not necessary?

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Scenario 11 (continued)

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Needlesticks

- Must be recorded if:
 - Contaminated with another person's blood;
 - Contaminated with other potentially infectious material;
 - Privacy case.

1904.8

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Sharps

- Only record if:
 - Splashed or exposed to blood, or other potentially infectious material without being cut if;
 - Results in diagnosis of bloodborne illness (HIV or Hepatitis);
 - Meets one of the other recording criteria.

1904.8

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Medical Removal

- Recordable if employee removed under medical surveillance requirement
- Days away or restricted work
- Chemical exposure is poisoning
- Voluntary removal

1904.9

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Occupational Hearing Loss

- Hearing tests and work related STS
- Current audiogram versus baseline audiogram
- Adjust for age
- Re-testing within 30 days
- Use 1904.5 to determine work relatedness

1904.10

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Work-Related Tuberculosis

- Occupationally exposed
- Positive TB tests at pre-employment physicals

1904.11

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Multiple Business Establishments

- Use a separate log for each establishment in operation one year or longer.
- Use one log for all establishments in business for less than one year.

1904.30

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Multiple Business Establishments

- May keep logs at headquarter locations if:
 - Information can be sent from establishments within seven days;
 - Information can be sent from headquarters within one business day for employee requests;
 - Information can be sent from headquarters within four hours for government requests.

1904.30

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Multiple Business Establishments

- Link employees who report to several locations to one establishment
- Employees visiting one establishment when assigned to another
- Employees working away from any of company establishments

1904.30

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Covered Employees

- Full time, part time, seasonal and migrant employees
- Temporaries
- Self-employed
- Volunteers

1904.31

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Change in Business Ownership

- Only responsible for recording injuries/illnesses, which occur during time of ownership
- Transfer records to new owner
- Updating requirements

1904.34

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Employee Involvement

- Must inform employees who to report injuries and illnesses to employer
- Provide limited access to records

1904.35

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Fatalities and Hospitalizations

- Employee death or in-patient hospitalization of three or more
 - Notify OSHA within eight hours
 - Must talk to a person
 - Motor vehicle accidents
 - Heart attacks
 - Death after 30 days

1904.39

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Providing Records to Government Representatives

- Provide requests within four hours
 - Secretary of Labor (OSHA)
 - Secretary of Health and Human Services (including NIOSH)

1904.40

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OSHA Annual Survey

- OSHA sends the survey each year to employers in certain industries.
- Employer must complete if requested by OSHA.
- Do not send injury and illness data to OSHA unless requested o by OSHA.

1904.41

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Requests from BLS

- Randomly selects employers each year
- Uses information to create occupational injury and illness statistics
- Must respond if request is received

1904.42

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Privacy

- Forms with personally identifying information can only be provided to:
 - Auditor or consultant hired by employer to evaluate safety and health program;
 - Extent necessary to process workers' compensation claim;
 - Public health authority or law enforcement.

1904.29

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Annual Summary

- End of each calendar year:
 - Verify entries are complete and accurate;
 - Create annual summary;
 - Certify the summary;
 - Post Feb. 1 to April 30.

1904.32

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Retention and Updating

- Keep 300 Log for five years, plus current year.
- Update 300 Log during five year period.
- Do not update Annual Summary (300A).
- Do not update Incident Report (301).

1904.33

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Common Recordkeeping Errors

- 300 Log not filled out fully
- Numbers in columns where check marks belong
- Poor communication between safety and HR
- Temporary employees not included on Log
- Confused OSHA requirements with BWC requirements
- Column F does not contain enough information

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Common Recordkeeping Errors

- Using a physician's opinion to determine "significant aggravation"
- Failure to accurately record restricted work
- No return to work forms
- No case numbers
- Incomplete FROI or no 301

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Activity

Recordkeeping audit

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Event 1

Mark Bagin, welder, was repairing the motor mount on a machine located in the west end of the basement of the shop on May 23. While working from a step-ladder, he slipped and fell to the floor, fracturing his left arm and left leg. He did not return to work until June 8, after having his leg cast removed. His employer placed him on restricted duty in the maintenance crib until June 20. At that time, after having his arm cast removed and he had recovered to full mobility, Bagin returned to his welding duties.

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Event 2

Tom Scott was returning to his machine following morning break on June 23, when he slipped in a puddle of water in the aisle. After falling, then striking his head on the concrete floor, he tried to sit up immediately but felt dizzy. Scott's supervisor drove him to the local emergency room. X-rays showed no fractures, but Scott continued to feel dizzy. ER staff observed him for nearly nine hours. After he no longer complained of dizziness, the doctor released him and advised him to take aspirin if he had a headache. Scott returned to work the following morning.

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Event 3

Shawn Alexander developed a high level of fatigue and irritability. He also noticed he had "wrist drop." He reported the symptoms on June 30. After discovering that Alexander worked on the foundry's pouring deck, his doctor diagnosed him with poisoning from lead fumes. The doctor told him to stay off work until July 31. He returned to work as directed, and his employer fitted him with a half-face respirator.

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Event 4

Sam Sanders tripped over a box in the second floor storeroom and broke his left foot on Aug. 3. A physician placed his foot in a cast. The doctor instructed Sanders to stay home until Sept. 3. On Sept. 3 his employer placed him on restricted duty in the tool crib until Sept. 10. At that time he resumed his full duties as an electrician.

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Event 5

On Sept. 15, Ralph Boccella, laborer, said he felt "something give" in his lower back while moving boxes in the packaging department. For the remainder of the day, he took it easy. That night, his doctor diagnosed a back strain and told him to apply ice to his back, take an over the counter pain reliever and to stay off his feet for three days.

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Event 6

Jarrod Daniels, machine operator, got dust in his right eye while cleaning off his milling table with compressed air on Oct. 21. His employer took him to the Sure-Care Clinic where a physician removed a particle (that had adhered to his eye). Daniels returned to work on the production floor that afternoon.

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Event 7

Bill Sykes reported for work on Nov. 11, his third day as a temp pulling stock at the distribution center. When descending a rolling stairway, carrying a medium-sized box, he missed the last step and broke his right ankle. With his ankle in a cast, he was required to use crutches for seven days. The distribution center's manager could not accommodate Sykes. He asked the temporary service agency for a replacement. Four days after the incident, the agency placed Sykes in its own office until he was off crutches. Sykes had no further contact with the distribution center.

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Event 8

On Nov. 13, Jim Jones, laborer, developed a skin rash while working in the parts assembly department. Jones has worked in parts assembly for four years. A supervisor sent Jones to the medical clinic. A physician diagnosed Jones with dermatitis due to chemical contact. He prescribed a cream to treat the area and told Jones to return to work the following Friday. Jones returned to work for his next shift as directed on Nov. 16.

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Event 9

Brad Smith, shipping stockman, had complained on Nov. 21 to his supervisor about a sore back. Smith's job requires him to manually move stock on a regular basis. The supervisor asked Smith if he wanted to go to the medical clinic. He declined and continued to work. Two days later, his back still hurting, Smith went to his personal physician who ordered tests. Based on the test results, the physician diagnosed Smith with a back strain. The physician told Smith not lift anything over 10 lbs for 14 days and take an over the counter pain reliever. Smith worked in the shipping office during those 14 days.

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Event 10

Maggie Williams, press operator, participates in the company hearing conservation program. She has worked for this company 15 years. Her job requires working any one of 10 presses located throughout the plant. During the annual audiometric testing on Dec. 10, the audiologist hired by the company determined Williams had experienced a standard threshold shift (STS) in her right ear. The company re-tested her on Dec. 21 and confirmed the existence of a STS.

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Activity

Identify areas in OSHA recordkeeping Events that you could use to manage recordability

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Calculating Average Number of Employees

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. The number of employees paid in all pay periods = 1. _____

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 pay periods during the year = 2. _____

Divide the number of employees by the number of pay periods. 1. _____ = 3. _____
2. _____ = 4. _____

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. _____

ACME company had 26 pay periods and paid a total of 830 employees

Pay periods	Number of employees	Number of employees paid	
1	10		= 830
2	0		
3	15		Number of pay periods = 26
4	30		830 / 26 = 31.92
▼	▼		31.92 rounds to = 32
24	20		
25	15		
26	+ 10		32 is the Annual average number of employees
	830		

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Calculating 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 (i.e. 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, 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, seasonal, temporary)
- _____ 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.

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Statistics

- DART rate
 - Days away, restricted or transferred rate
 - $(N / EH) \times (200,000)$
 - N = # cases days away AND restricted
 - EH = total employee hours worked
- DAFWII rate
 - Days away from work injury and illness rate
 - $(N / EH) \times (200,000)$
 - N = # cases days away ONLY
 - EH = total employee hours worked

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Additional Statistics

- Incident rate
 - $(N \times 200,000) / NH$
 - N = # of recordable injuries
 - NH = # of employee hours worked
- Severity rate
 - (N / RI)
 - N = Total # lost workdays
 - RI = Total # of recordable incidents

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Activity

Joe's Tool and Die

Calculate Joe's injury and illness incident rates

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DART/DAFWII Rates

- Site specific targeting list (SST-2011)
- OSHA recordkeeping NEP
- Data analysis

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SST-2011 Program

- The SST-2011 is the main inspection program for non-construction workplaces that have 20 or more employees.
- 2009 data used for 2011
- Any establishment that is on the primary inspection list may be moved to the current inspection cycle if it is also on any emphasis program list.

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SST-11 Program

Primary list

- Manufacturing (~3,300)
 - DART = 7.0 or above
 - DAFWII = 5.0 or above
- Non-manufacturing (~400)
 - DART – 15 or above
 - DAFWII – 14.0 or above
- Nursing (SIC 805) (~300)
 - DART – 16.0 or above
 - DAFWII – 13.0 or above

Secondary list

- Manufacturing
 - DART – 5.0 - 7.0
 - DAFWII – 4.0 - 5.0
- Non-manufacturing
 - DART – 5.0 - 15.0
 - DAFWII – 4.0 - 14.0
- Nursing (SIC 805)
 - DART – 13.0 - 16.0
 - DAFWII – 11.0 - 13.0

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Activity

Joe's Tool and Die

Would Joe's be included in OSHA's SST-11 program?

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National Emphasis Program

- Under-recorded injuries and illnesses may exist in establishments operating in historically high rate industries and reporting injury and illness rates slightly lower than the cut-off rates used by OSHA to compile its primary inspection targeting list under SST program.

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NEP Purpose

- Inspect the accuracy of the Occupational Injury and Illness Recording and Reporting Requirements for establishments in selected industries.

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NEP Program Procedures

- OSHA area office receives a list from the Office of Statistical Analysis.
 - DART rate greater than 4.2 and less than 8.0, and classified to be high rate manufacturing industries
 - NAICS code of 311615 or 115210
 - Greatest reported employment

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NEP In Scope Industries

- Appendix A of NEP
- Compilation of manufacturing industries having the highest 2007 and 2008 DART rates as reported by the Bureau of Labor Statistics Annual survey
- BLS Table SNR02
- See list of in Scope Industries

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NEP Records Review

- o Medical records
- o Workers' compensation records
- o Insurance records
- o Safety incident reports
- o First-aid logs
- o Alternate duty rosters
- o Disciplinary records pertaining to safety
- o Payroll/absentee records



NEP Issuance of Citations

- o If violations are found, other-than-serious citations will be issued to the company.
- o Employers will not be cited for over-recording of injuries.
 - Why would you not want to over-record?



Activity

Joe's Tool and Die
 Would Joe's be included in OSHA's Recordkeeping NEP?



NEP Penalties – FY 10

- o 242 inspection resulting in 419 violations
- o Average penalty \$1,455
- o Total penalties \$609,719



NEP Citations – FY 10

- o 113 Unrecorded cases
- o 74 Misrecorded cases involving restricted work activity
- o 66 Misrecorded cases involving days away from work
- o 35 Incomplete OSHA 300 entry
- o 31 OSHA 300A not certified



Data Analysis

Year	Number of Citations	Number of Violations	Total Penalties	Average Penalty
2010	242	419	\$609,719	\$1,455
2011	242	419	\$609,719	\$1,455

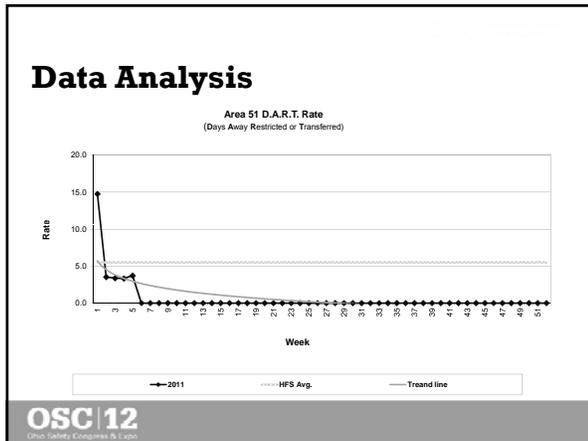
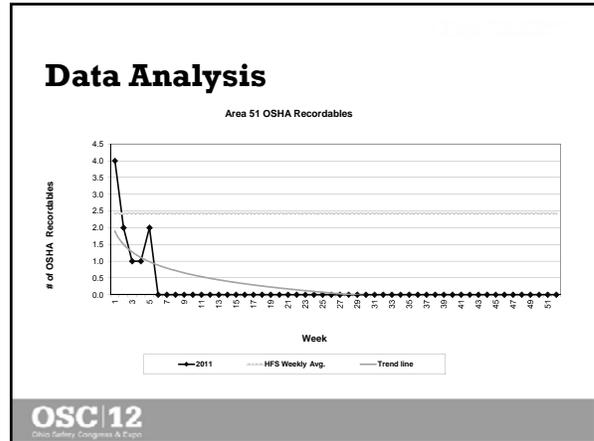
2011

OSHA 300A not certified: 31
 Incomplete OSHA 300 entry: 35
 Misrecorded cases involving days away from work: 66
 Misrecorded cases involving restricted work activity: 74
 Unrecorded cases: 113



Data Analysis

OSHA AREA	OSHA DISTRICT	Period	1	7	2	10	20000	284 694 73	7 025	5 620
OSHA AREA	OSHA DISTRICT	Period	Lost Time	Restricted	Recordable	TOTAL	INCHES	FEET	D.A.R.T.	D.A.R.T.
0100011	1	1.1	0	0	0	0	0	0	0	0
0110011	2	1.2	0	1	1	2	36,861.22	7,035	1,617	
0120011	3	1.5	1	0	1	2	20,445.06	5,264	1,264	
0130011	4	1.8	0	1	1	2	40,269.25	3,215	2,439	
0140011	5	2.1	0	1	1	2	53,822.18	7,418	1,709	
0150011	6	2.2	0	0	0	0	0.00	0	0	
0160011	7	2.3	0	0	0	0	0.00	0	0	
0170011	8	2.4	0	0	0	0	0.00	0	0	
0180011	9	3.1	0	0	0	0	0.00	0	0	
0190011	10	3.2	0	0	0	0	0.00	0	0	
0200011	11	3.3	0	0	0	0	0.00	0	0	
0210011	12	3.4	0	0	0	0	0.00	0	0	
0220011	13	4.1	0	0	0	0	0.00	0	0	
0230011	14	4.2	0	0	0	0	0.00	0	0	
0240011	15	4.3	0	0	0	0	0.00	0	0	
0250011	16	4.4	0	0	0	0	0.00	0	0	
0260011	17	5.1	0	0	0	0	0.00	0	0	
0270011	18	5.2	0	0	0	0	0.00	0	0	
0280011	19	5.3	0	0	0	0	0.00	0	0	
0290011	20	5.4	0	0	0	0	0.00	0	0	
0300011	21	6.1	0	0	0	0	0.00	0	0	
0310011	22	6.2	0	0	0	0	0.00	0	0	
0320011	23	6.3	0	0	0	0	0.00	0	0	
0330011	24	6.4	0	0	0	0	0.00	0	0	
0340011	25	7.1	0	0	0	0	0.00	0	0	



OSHA Recordkeeping and Accident Analysis

Costs of Accident

- o Accident iceberg
- o Direct costs versus indirect costs
- o Cost analysis worksheet
- o Profits

Accidents and Profits

When evaluating true cost of accidents both direct and indirect costs should be measured. These costs must be paid for by the profits from company sales or service.

Accident Cost	Profit Margin				
	1%	2%	3%	4%	5%
\$1,000	\$100,000	\$50,000	\$33,000	\$25,000	\$20,000
\$5,000	\$500,000	\$250,000	\$167,000	\$125,000	\$100,000
\$10,000	\$1,000,000	\$500,000	\$333,000	\$250,000	\$200,000
\$25,000	\$2,500,000	\$1,250,000	\$833,000	\$625,000	\$500,000
\$50,000	\$5,000,000	\$2,250,000	\$1,677,000	\$1,250,000	\$1,000,000
\$100,000	\$10,000,000	\$5,000,000	\$3,333,000	\$2,500,000	\$2,000,000
\$150,000	\$15,000,000	\$7,500,000	\$5,000,000	\$3,750,000	\$3,000,000
\$200,000	\$20,000,000	\$10,000,000	\$6,666,000	\$5,000,000	\$4,000,000

EXAMPLE: If your profit margin is 5%, \$500,000 in sales is required to pay for the direct and indirect costs of a \$25,000 accident.

Why Accident Analysis Fails

- Lack of time to complete
- Lack of motivation to complete
- Lack of accountability
- Lack of skills and knowledge
- Analysis stops short of finding real causes

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Pre-Plan Accident Analysis

- Define roles and responsibilities
- Develop procedures and documents
- Provide detailed training
 - For supervisors and employees
- Collect the tools needed to conduct investigations
- Determine what accidents are to be investigated

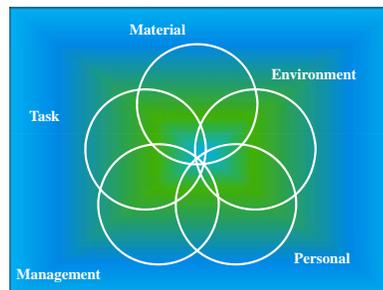
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Steps of Accident Analysis

- Gather information
- Analyze data
- Conclusions
- Recommendations
- Follow up

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Causal Factors



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Material

- The equipment and material used by employee or involved in accident
 - Equipment failure related to maintenance issues or defects
 - Machinery design or guarding related to poor design, foreign made, or missing guards
 - Hazardous substances related to solvents, irritants, caustics
 - Substandard material; i.e. problems with stock

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Task

- The actual work procedure used at the time of the incident
 - Ergonomic issues related to repetitive motion, lifting, work station height
 - Safe work procedures
 - Condition changes such as new material, changes or modifications to equipment
 - Appropriate tools and materials related to the right tool for the right job
 - Safety devices such as LOTO, GFCI's, PPE

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Management

- Management has legal responsibility for safety. Therefore, management's involvement or lack thereof in the incident should be investigated.
- Visible active senior management support for safety through leading employee meetings and discussing safety
- Safety policies
- Enforcement of safety policies
- Adequate supervision
- Knowledge of hazards
- Hazard corrective action
- Preventative maintenance
- Regular safety audits

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Personal

- Physical and mental condition of those employees involved
 - Level of experience related to task
 - Level of training related to length of time performing task
 - Physical capability
 - Health issues
 - Fatigue
 - Stress – work related and personal

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Environmental

- The physical surroundings at the time of an incident. The situation at the time of the incident is more important than what the "usual" conditions were unless a sudden change to the environment is relative to the incident.
- Weather conditions when work is being performed outside
- Housekeeping in the work area
- Temperature
- Noise levels
- Lighting
- Air contaminants
- PPE

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Activity

Use OSHA recordkeeping Events to identify causal factors of accidents

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Inspection Priorities and Penalties

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Inspection Priorities

- Imminent danger
- Catastrophes
- Employee complaints and referrals
- Programmed inspections – SST/RK NEP
- Follow-up inspections

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Current Penalty Structure

- De minimis \$0
- Other than serious \$0 – \$7,000
- Serious up to \$7,000
- Repeat and willful \$5,000 to \$70,000
- Failure to abate day/violation up to \$7,000
- Failure to post citation \$3,000
- Penalties may be discounted for:
 - Small employers, good faith, few or no previous violations.

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Increasing Penalties

- The penalty structure was last updated in 1990.
- There is no adjustment provisions for inflation.
- The current cap for a serious citation is \$7,000.
- The average current penalty for a serious citations is approximately \$1,000.
- The new structure should increase this to approximately \$3,000 to \$4,000.

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Recordkeeping NEP Penalties

- \$1,000 per year for inaccurate recording or improper completion of forms
 - May be reduced based on size
- Willful if intentionally failing to record

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Real World Examples

- Superior Energy Services
 - Feb 9, 2011
 - \$337,500
- Lowes Distribution Center
 - Oct 27, 2010
 - \$182,000
- Lowes Stores
 - April 29, 2010
 - \$110,000

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One Thing Leads to Another

- Lexington Homes Inc., Lexington, MS, Sept 14, 2010
- Recordkeeping NEP turns into wall-to-wall inspection
- \$60,076 in fines
- 36 serious citations

2010 - 09/14/2010 - US Department of Labor's OSHA cites Lexington, Miss., manufacturer with 40 safety and health violations, \$60,000 in proposed penalties

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When Incentive Programs Promote the Wrong Behavior

- AK-Steel, Middleton, Ohio, Oct 5, 2010
- \$53,000 in fines
- Failure to record worker injuries and illnesses
- Manager and supervisor bonuses tied to accident reporting resulted in discipline of employees

2010 - 10/05/2010 - US Labor Department's OSHA fines AK Steel Corp. in Middletown, Ohio, \$53,000 for failing to record worker injuries, hearing loss

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OSHA Recordkeeping Updates

- OSHA Recordkeeping Advisor – interactive tool
- Proposed changes
 - SIC codes to NAICS (proposed)
 - All hospitalizations within 8 hours (proposed)
 - All amputations within 24 hours (proposed)
 - Updates to Appendix A coverage (proposed)

2011 - 06/22/2011 - OSHA seeks comments on proposed updates, revisions to the occupational injury and illness tracking and reporting requirements

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