

# Application to the Virginia Voluntary Protection Program

Submitted to:

Department of Labor and Industry Voluntary Protection Program 3013 Peters Creek Road Roanoke, VA 24019

Attn: Mr. Milford Stern

#### **Application Instructions**

Please fill in the spaces provided. Each element has a link that will take you to the element requirements. Your answers must meet the requirements.

Previous application forms will not be accepted, only this application form should be used.

The VPP Assurances at the end of the application must be completed and submitted with the application.

Helpful Websites					
BLS Industry and Illness	https://www.bls.gov/iif/oshwc/osh/os/summ1_00_2016.xls				
Rates	<u>x</u>				
OSHA VPP Memo #5	https://www.osha.gov/dcsp/vpp/policy_memo5.html				
Virginia VPP	http://www.doli.virginia.gov/vosh_coop/vosh_vpp.html				
US Department of					
Labor and Industry VPP	https://www.osha.gov/dcsp/vpp/index.html				
NAICS and SIC codes	http://www.census.gov/eos/www/naics				
OSHA Federal Register					
Notice, January 9, 2009					
(VPP SHMS and the Elements starting on Page 936)	http://www.gpo.gov/fdsys/pkg/FR-2009-01-09/pdf/E9-165.p				

## **Attachments**

<u>Instructions</u>: List any attachments here. Please list each attachment and label the attachment with the element that it is referred to. Add as many as needed. See each individual element for requirements.

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Physical Address: (If different)

Name and Title:

E-Mail:

Phone:

**Corporate VPP Contact** 

Site Information									
		Site iii	101111	auon					
Prepared By			Title	е					
									I
		Site I	nforma	tion					
Name:	Name:								
Click her	e for help	with DUNS, CA	GE, FE	IN, NAI	CS ar	nd SIC C	ode in	form	ation
DUNS # Plus 4:				DUNS #					
CAGE Code:				FEIN:					
NAICS Code:				SIC Cod	de:				
Mailing Address	:								
Physical Address: (If different)									
Company VPP C Name and Title:									
E-Mail:			Phone	<b>:</b> :			Fax:		
Site Manager Na Title:	ame and								
E-Mail:		•	Phone	<b>:</b> :			Fax:		
# of Employees		# of Contract				Total #			
on Site:		Employees on S	Site:			Employ	ees on	Site:	
PSM: (Check Box That Applies)			Yes				No		
								-	
Corporate Information									
Name:									
				DUNC	ш.				
DUNS # Plus 4: CAGE Code:				DUNS :	#:				
NAICS Code				SIC Co	do				
Mailing Address	:			310 00	uc				

Provide written directions to the site from the nearest major highway or interstate and attach a site map or general layout map of the site

Fax:

# of Employees

**Corporate Wide:** 

#### Document #

Give a brief history of the site and company							
	Type of \	work pe	rformed and pr	oducts prod	luced:		
Ur	nion Informati	on – If	more than 1,	list each o	ne separately		
Union Name and							
Local Number:							
Site Rep:							
Address:		_					
Phone:		Fax:		E-Mail:			
	Union Information – If more than 1, list each one separately						
Union Name and	ion Informatio	on – If	more than 1,	iist each oi	ne separately		
Local Number:							
Site Rep:							
Address:							
Phone:		Fax:		E-Mail:			

#### **Recordable Injury Plus Illness Case Incident Rates**

Table 1 - Records the TCIR (Total Case Incident Rate) and DART (Days Away from work, Restricted work activity, and/or job Transfer). Fill in the YELLOW cells with company data and the ORANGE cells with the BLS published data.

Table 1 - TCIR (Total Case Incident Rate) Employee Data, Past 3 Years

NAICS:

Year	Hours	Total Cases	<u>T</u> otal <u>C</u> ase <u>I</u> ncicent <u>R</u> ate (TCIR)	Days Away, Restricted, Transferred Cases	<u>D</u> ays <u>A</u> way, <u>R</u> estricted or <u>T</u> ransferred <u>R</u> ate (DART)
2015			#DIV/0!		#DIV/0!
2016			#DIV/0!		#DIV/0!
2017			#DIV/0!		#DIV/0!
TOTAL	0	0		0	
Three Year Average Rates			#DIV/0!		#DIV/0!
Most recently published **BLS rates					
Percent above / (below) BLS rate			#DIV/0!		#DIV/0!

#### **Applicable Contractors**

Table 2 - Records rates of Applicable Contractors (those who worked more than 1,000 on your site in any calendar quarter), listing each contractor individually.

Table 2 – Site Applicable Contractors Recordable Nonfatal Injury and Illness Case Incidence Rates

Contractor Name			NAICS Code for	Contractor			
Total Hours Worked	at Site for the \	<b>Year</b>					
Year	Hours	Total Cases	<u>T</u> otal <u>C</u> ase <u>I</u> ncicent <u>R</u> ate (TCIR)	Days Away, Restricted, Transferred Cases	<u>D</u> ays <u>A</u> way, <u>R</u> estricted or <u>T</u> ransferred <u>R</u> ate (DART)		
2017			#DIV/0!		#DIV/0!		
TOTAL	0	0		0			
Year Average Rates			#DIV/0!		#DIV/0!		
Most recently	published **BLS	S rates					
Percent above / (below) BLS rate			#DIV/0!		#DIV/0!		
•							

NOTE: Applicable Contractor rates do not have to be submitted with the application, but must be maintained at the site for review by the OSHA VPP Team.

## Narrative Evaluation of Safety and Health Management System (SHMS)

#### **Instructions**

In assessing your system you must use the following format to address each of the sub-elements by providing a <u>narrative summary</u> description for each sub-element. It is not necessary to repeat the narrative evaluation that has already been described above.

## 1 Management Leadership and Employee Involvement

#### A. Management Leadership

#### 1. Management Commitment and Leadership

Attach a copy of the company's top level safety policy specific to the facility.

Click here for requirements

#### 2. Written Safety and Health Management System

Click here for requirements

#### 3. Visible Leadership

Attach a copy of the site's safety and health policy.

Attach the current year's safety and health goals and objectives.

Click here for requirements

#### 4. Communications

Click here for requirements

#### 5. Responsibility and Authority

Attach previously established written material, such as sample job descriptions for managers that include safety and health elements and performance expectations.

Attach a blank performance appraisal form for managers and supervisors. Managers must be evaluated on safety and health performance.

Click here for requirements

## 5a. Describe how the site safety and health functions fit into the overall management organization.

Attach an overall organizational chart explaining the relationship of the site's safety and health personnel to your overall organization. For large sites, include a separate organizational chart for safety and health functions.

Click here for requirements

#### 6. Resources

Click here for requirements

#### 7. Planning

Click here for requirements

#### 8. Program Evaluations – Setting Goals and Objectives

Click here for requirements

E	3	Employee Involvement
	1.	Employee Involvement Click here for requirements
	2.	Employee Knowledge and Notification
		Click here for requirements
(		Contract Worker Coverage
	1	On-Site Contractor Programs
		Click here for requirements
	2.	Contractor Injury and Illness Data
		<u>Click here for requirements</u>
	_	
	3.	Contractor Listing
		<u>Click here for requirements</u>
		Calf Fredrickien of the Cafety and Health Management Cretem
ı	)	Self-Evaluation of the Safety and Health Management System
	1.	Annual Self-Evaluation of the SHMS
		Attach a copy of the most recent annual evaluation of your entire safety and health program.
		Click here for requirements

2	Worksite Analysis
Α.	Comprehensive Safety and Industrial Hygiene Survey Provide evidence that the surveyors were qualified to perform the work. Click here for requirements
В.	Hazard Analysis of Routine Jobs, Tasks, and Processes Click here for requirements
C.	Hazard Analysis of Significant Changes, New Processes, and Non-Routine Tasks (Including Pre-Use Analysis and New Baselines) Attach documentation such as project design evaluations, preliminary hazard analyses, process hazard analyses, fault free analyses, or management of change forms.  Click here for requirements
D.	Routine Self-Inspections Click here for requirements
E.	Hazard Reporting System for Employees Click here for requirements
F.	Investigation of Accidents and Near Misses Click here for requirements
G.	Trend Analysis Click here for requirements

3	Hazard Prevention and Control						
Α.	Hazard Elimination and Control Methods Click here for requirements						
	i. Engineering Controls						
	<u>Click here for requirements</u>						
	ii. Administrative Controls						
	Click here for requirements						
	iii. Work Practice Controls Click here for requirements						
В.	Personal Protective Equipment If respirator use is required, attach a copy of the program.						
	Click here for requirements						
C.	Occupational Health Care Program Click here for requirements						
D.	Preventive Maintenance of Equipment						
	Proved a brief description or list of the type of equipment covered. <u>Click here for requirements</u>						
E.	Tracking of Hazard Correction  Click here for requirements						
F.	Disciplinary System – Safety and Health Rules						
•	Click here for requirements						
G.	Emergency Preparedness Click here for requirements						

4	Safety and Health Training
Α.	Formal and Informal Training Click here for requirements
	Office Field For Forgati Officerto
В.	Training Courses Click here for requirements
C.	Testing Click here for requirements
D.	Training Records
	Click here for requirements
E.	Training Frequency Click here for requirements
F.	Contractor Training Click here for requirements
G.	Visitor Training
	Click here for requirements

#### VPP Assurances

Company Name Date

Agrees to comply with the following items as a Voluntary Protection Program participant:

#### 1. Compliance

a. You will comply with the Occupational Safety and Health Act (OSH Act) and correct, in a timely manner, all hazards discovered through self-inspections, employee notifications, accident investigations, VOSH onsite reviews, process hazard reviews, annual evaluations, or any other means.

#### 2. Correction of Deficiencies

a. Within 90 days, you will correct safety and health deficiencies related to compliance with VOSH requirements and identified during any VOSH onsite review.

#### 3. Employee Support

a. Our employees support the VPP application. At sites with employees organized into one or more collective bargaining units, the authorized representative for each collective bargaining unit must either sign the application or submit a signed statement indicating that the collective bargaining agent(s) support VPP participation. VOSH must receive concurrence from all such authorized agents to accept the application. At non-union sites, management's assurance of employee support will be verified by the VOSH onsite review team during employee interviews.

#### 4. VPP Elements

a. VPP elements are in place, and management commits to meeting and maintaining the requirements of the elements and the overall VPP.

#### 5. Orientation

a. Employees, including newly hired employees and contract employees, will receive orientation on the VPP, including employee rights under VPP and under the OSH Act.

#### 6. Non-Discrimination

a. You will protect employees given safety and health duties as part of your safety and health program from discriminatory actions resulting from their carrying out such duties, just as Section 40.1-51.2:1 of the Code of Virginia and protect employees who exercise their rights.

#### 7. Employee Access

a. Employees will have access to the results of self-inspections, accident investigations, and other safety and health data upon request. At unionized sites, this requirement may be met through employee representative access to these results.

#### 8. Documentation

a. You will maintain your safety and health program information and make it available for VOSH review to determine initial and continued approval to the VPP. This information will include:

- i. Any agreements between management and collective bargaining agent(s) concerning safety and health.
- ii. All documentation enumerated under Section III.J.4 of the July 24, 2000 Federal Register Notice.
- iii. Any data necessary to evaluate the achievement of individual Merit or 1-Year Conditional STAR goals.

#### 9. Annual Submission

- a. Each year by February 15, you will submit the following information to the Virginia VPP Coordinator:
  - i. For the previous calendar year, the TCIR for injuries plus illnesses, and the DART rates.
  - ii. The total number of cases for each of the above two rates.
  - iii. Hours worked and estimated average employment for the past full calendar year.

#### 10. Contactor Rates

- a. You will submit data on each applicable contractor. Applicable contractors are those employers who have contracted with you to perform certain jobs and whose employees worked a total of 1,000 or more hours in at least 1 calendar quarter at your worksite. The data will consist of:
  - i. The site's TCIR and DART rate for each applicable contractor's employees.
  - ii. The total number of cases from which these two rates were derived.
  - iii. Hours worked and estimated average employment for the past full calendar year.
  - iv. The appropriate SIC code for each applicable contractor's work at the site.

#### 11. Annual Evaluation

a. A copy of the most recent safety and health annual evaluation. Include a description of any success stories, such as reductions in workers' compensation rates, increased in employee involvement, and improvements in employee morale.

#### 12. Organizational Changes

a. Whenever significant organizational or ownership changes occur, you will provide VOSH, within 60 days, a new Statement of Commitment signed by both management and any authorized collective bargaining agents.

#### 13. Collective Bargaining Changes

a. Whenever a change occurs in the authorized collective bargaining agent, you will provide VOSH, within 60 days, a new signed statement indicating that the new representative supports VPP participation.

Signature of Company Official	Date	
(Owner, President, Site Manager, Etc.)		

## **Appendix**

#### **Definitions**

- <u>DUNS#:</u> The D&B Data Universal Numbering System or D-U-N-S<sup>®</sup> Number is a unique nine-digit identifier for businesses. It is used to establish a business credit file, which is often referenced by lenders and potential business partners to help predict the reliability and/or financial stability of the company in question.<sup>1</sup>
- <u>DUNS # Plus 4:</u> The D&B Data Universal Numbering System or D-U-N-S<sup>®</sup> Number is a unique nine-digit identifier for businesses. The Plus 4 is the System for Award Management (SAM) is the Official U.S. Government system that consolidated the capabilities of CCR/FedReg, ORCA, and EPLS.<sup>2</sup>
- *CAGE Code*: he Commercial And Government Entity (CAGE) Code is a five-character ID number used extensively within the federal government, assigned by the Department of Defense's Defense Logistics Agency (DLA). The CAGE code is used to support a variety of mechanized systems throughout the government and provides a standardized method of identifying a given legal entity at a specific location. The code may be used for a facility clearance, or a pre-award survey.<sup>3</sup>
- <u>FEIN:</u> An Employer identification Number (EIN) is also known as a Federal tax identification Number, and is used to identify a business entity.<sup>4</sup>
- <u>NAICS Code</u>: The North American Industry Classification System (NAICS) is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy.<sup>5</sup>
- **SIC Code:** The **Standard Industrial Classification** *SIC* is a system for classifying industries by a four-digit code. <sup>6</sup> (Click here to return)

#### **Elements**

#### Management Commitment to VPP Participation and Leadership

Describe the sites statement of commitment to maintaining compliance with and continuously improving safety and health and meeting VPP requirements? How is this communicated to all employees? Establishing, documenting, and communicating to employees and contractors clear goals that are attainable and measurable, objectives that are relevant to workplace hazards and trends of injury and illness, and policies and procedures that indicate how to accomplish the objectives and meet the goals. Ensuring that all workers (including contract workers) are provided equal, high-quality safety and health protection. (Click here to return)

#### Written Safety and Health Management System

 Are all the elements and sub-elements of a basic safety and health management system part of a signed, written document? Have all VPP elements and sub-elements been in place at least 1 year? Is the written safety and health management system at least minimally effective to address the scope and complexity of the worksite? Have any VPP documentation requirements been waived? (Click here to return)

#### **Visible Leadership**

<sup>&</sup>lt;sup>1</sup> http://www.dnb.com/duns-number.html

<sup>&</sup>lt;sup>2</sup> https://www.sam.gov/portal/SAM/##11

https://www.fsd.gov/fsd-gov/answer.do?sysparm\_number=KB0011119

<sup>4</sup> https://www.irs.gov/businesses/small-businesses-self-employed/employer-id-numbers-eins

<sup>&</sup>lt;sup>5</sup> http://www.census.gov/eos/www/naics/

<sup>&</sup>lt;sup>6</sup> https://en.wikipedia.org/wiki/Standard Industrial Classification

Describe the ways top management is visibly involved in the safety and health program such as
wearing any required personal protective equipment, reporting hazards, reporting injuries and illnesses,
following the same safety and health procedures expected for all employees at the workplace, and
subjecting managers and employees to the same disciplinary system for infractions. (Click here to
return)

#### **Communications**

Describe the methods used to communicate policies, goals and objectives with all employees and how
the site created an environment that allows for reasonable employee access to site management and
senior management. How does the site communicate goals and objectives to all employees? (Click here
to return)

#### **Responsibility and Authority**

- Describe how the site communicates the responsibility and authority for safety and health management system performance to all employees. Describe the system used for holding line managers, supervisors, employees accountable for safety and health and how the system is documented and measured. This should include annual appraisal systems used to evaluate meeting or correcting deficient safety and health goals. Each employee, at any level, must be able to describe his/her responsibility for safety and health. Explain how the site assigns authority to those who are responsible for safety & health and how the site provides all employees including contract and subcontractor employees the same equal, high-quality safety and health protection.
- List the general Safety and Health Responsibilities of Personnel.
- How does safety and health fit into the overall management organization? Who oversees safety and health? What is their position in the company? (Click here to return)

#### Resources

- Explain how the site provides resources to those who have responsibility and authority. This includes resources as time, training, personnel, equipment, budget, and access to experts. (CSP, CIH, or other licensed health care professionals as needed).
- Provide details concerning the use of certified professions.
- Describe the resources that are available at or near the site. List distance from site, type of services offered. Onsite medical personnel or medical facilities, onsite fire prevention equipment, etc.
- How these professional integrate their services with each other and how communication is maintained (Click here to return)

#### **Planning**

- Describe how safety and health are part of the overall management planning process including planning for typical and well as unusual/emergency safety and health expenditures in the budget, new equipment, processes, buildings, correction of uncontrolled hazards.
- Describe how safety and health are a part of the overall management planning, such as setting production goals, increasing or decreasing the workforce, or introducing a new product line.
- (Click here to return)

#### **Program Evaluations**

- Describe how the site conducts an annual self-evaluation of the safety and health management system in order to maintain knowledge of the hazards to which employees are exposed, maintain knowledge of the effectiveness of system elements ensure completion of the previous years' recommendations and modify goals, policies, and procedures. Describe the system for setting safety and health goals and objectives.
- Who evaluates the program, at what time of year, how the evaluation report distributed and people are held accountable to ensure the recommendations are accomplished.
- Describe how the recommendations from the annual program evaluation are integrated into the safety and health objectives for next year.
- This evaluation is not the same as a safety audit. It is a review and assessment of the effectiveness of all the program elements: Management Leadership, Employee Involvement, Worksite Analysis, Hazard Prevention and Control and Training.

- If either the site's or applicable contractor's injury incidence rates are/or the lost-workday case rates are above the national average for the appropriate most recently published NAICS, include both long-term and short-term strategies for reducing these rates.
- (Click here to return)

#### **Employee Involvement**

- Discuss how employees, including new hires, are involved in the safety and health management system. Do employees have access to the results of inspections, accident investigations, medical records and personal sampling data upon request?
- List at least three active and meaningful ways employees are involved in your program other than hazard reporting.
- Provide specific information concerning employee involvement in decision making. This would include problem resolution, hazard analyses, accident investigations, safety and health training, or evaluation of the safety and health program.
- (Click here to return)

#### **Employee Knowledge and Notification**

- Describe the methods used to ensure that all employees, including newly hired/transferred employees, are initially and annually provided awareness of the following:
  - o The site's participation in VPP
  - o An employee's right to file a complaint with OSHA, and
  - An employee's right to receive the results of self-inspections and accident investigation, upon request (Click here to return)

#### **On-Site Contractor Programs**

- Discuss how contractors are selected to perform work on site? (If using rate, specify the rates used and cut off levels. Describe how their past performance in safety and health is taken into account in the bidding process.
- Explain the oversight and management system for contractors to ensure the contractors' employees are provided effective protection and follow the sites safety and health policy.
- Discuss the procedure used when a contractor is found in violation of a Safety and Health policy.
- Describe the means to ensure prompt correction and/or control of hazards, however detected, under a contractor's control? (Click here to return)

#### **Contractor Injury and Illness Data**

- Describe the methods used to ensure that all injuries and illnesses occurring during work performed under a contract are recorded and submitted to the site's safety and health staff.
- How does the site verify the contractor injury and illness data and is it included in the sites report?
- What happens if the contractors TCIR or DART rate increases? (Click here to return)

#### **Contractor Listing**

• List the names of resident contractor companies and the approximate number of contract employees on the site at the time of the application or during the most recent calendar year, whichever most accurately reflects the usual situation at the site. (Click here to return)

#### **Annual Self-Evaluation of the SHMS**

• The site must completed an annual self-evaluation that included a written narrative with recommendations for timely improvements, assignment of responsibility for those improvements, and documentation of timely follow-up action or the reason no action was taken. Who conducts the evaluation and how were they trained to perform an evaluation? Are the results shared with employees and how? (Click here to return)

#### **Indicators Used to Measure Progress**

What indicators does the site use to measure progress toward goals and objectives, effectiveness
of hazard controls and overall effectiveness of the safety and health management system?
Explain the rationale behind the selection of indicator, the method, frequency, and responsibility
for monitoring or measuring each indicator. The periodic review of the indicator suitability,
methods used to keep records, the analysis, interpretation, and communication of results. (Click
here to return)

#### **Comprehensive Safety and Industrial Hygiene Survey**

- Describe the methods used for initial determination of safety and health hazards (noise, air contaminants)
- Include baseline industrial hygiene surveys, comprehensive safety surveys, machine guarding surveys, radiological survey/exposure mapping etc.
- Provide evidence that the surveyors were qualified to perform the work(Click here to return)

#### Hazard Analysis of Routine Jobs, Tasks, and Processes

- State how the site reviews jobs, processes and/or the interaction among activities to determine safe work procedures at your worksite.
- Describe how results from analyses, such as job hazard analyses, are used in training employees
  to do their jobs safely and in planning and implementing the hazard correction and control
  program. Explain how the results improve work practices. Describe the frequency of these
  analyses and provide supporting documentation
- Describe how you decide which processes to analyze first. (Click here to return)

## Hazard Analysis of Significant Changes, New Processes, and Non-Routine Tasks (Including Pre-Use Analysis and New Baselines)

Pre-Use Analysis: When considering new equipment, chemicals, facilities, or significantly different
operations or procedures is an analysis completed to address any concerns or hazards that might
be created? Does the analysis address each step, hazard controls, dates conducted,
recommendations for improvements, documented, included in training and the hazard control
program? (Click here to return)

#### **Routine Self-Inspections**

- Describe the system used to conduct routine, general worksite safety and health inspections. Include schedules and types of inspections, the qualifications of those conducting the inspections, and how corrections are tracked to completion.
- Describe the system for inspecting the entire site quarterly. (Click here to return)

#### **Hazard Reporting System for Employees**

- Describe the system employees use to report hazards. Does it include protection from reprisal, timely and adequate response, and correction of identified hazards? Describe if your program has an anonymous factor.
- Describe how "imminent danger" situations are reported by employees and handled by management.
- Describe how corrections are tracked to completion. (Click here to return)

#### **Investigation of Accidents and Near Misses**

- Describe the system used to conduct accident and incident investigations.
- Describe training and/or guidance given to investigators; provide criteria used for deciding which accidents/incidents will be investigated.
- Describe how near-miss incidents are handled. How many have been turned in? Is this information being trended?
- Describe the "lessons learned" process being used and demonstrate root cause analyses.
- Describe method of tracking recommendations and corrections to completion. (Click here to return)

#### **Trend Analysis**

- Describe the system(s) used to conduct trend analyses of all data generated by the safety and health program, include employee reports of hazards, first aid incidents, near miss reports, hazard assessment data and injury and illness experience data.
- Describe how the results of the trend analyses are disseminated and used by the line organizations. (Click here to return)

#### **Hazard Elimination and Control Methods**

- Describe the different types of controls that are used at the facility and have any follow-up studies been conducted based on incidents, inspections or recommendations from employees?
- Engineering Controls

Engineering controls directly eliminate a hazard by such means as substituting a less hazardous substance, isolating the hazard; these are the most reliable and effective. Describe and provide examples of engineering controls have been implemented at the site?

#### Administrative Controls

 Administrative controls significantly limit daily exposure to hazards by control or manipulation of the work schedule or work habits. (Example: job rotation) Describe ways you limit daily exposure to hazards by adjusting work schedules or work tasks.

#### Work Practice Controls

 These controls include workplace rules, safe and healthful work practices, personal hygiene, housekeeping and maintenance, PPE, LOTO, Confined Space Entry, etc. List the written occupational safety and health programs implemented at your site. (Click here to return)

#### **Personal Protective Equipment**

- PPE should only be used when all other hazard controls have been exhausted or more significant hazard controls are not feasible. Describe the requirements for selecting, using, maintaining, and distributing personal protective equipment?
- Describe if there is a complete PPE hazard assessment completed. (Click here to return)

#### **Occupational Health Care Program**

- Describe how the site integrates the employee medical program with the safety and health program.
- Describe the availability of both onsite and offsite medical services and physicians.
- Are employees trained in First Aid, CPR, is there an AED on site? What type of training did employee receive?
- Describe how licensed occupational health professionals are involved in routine hazard analyses, in recognizing and treating injuries and illnesses early on, in limiting severity of harm and in managing injury and illness cases. (Click here to return)

#### **Preventive Maintenance of Equipment**

• Summarize and briefly describe the procedures in use for preventive maintenance of equipment. Include information on scheduling and describe how the maintenance timetable is followed and adjusted. (Click here to return)

#### **Tracking of Hazard Correction**

 How does the site track hazards until completion? Does the tracking system assign responsibility, time frames for corrections, interim protection, provide feedback to employees that have reported the hazard? Does the system result in timely correction of hazards? (Click here to return)

#### **Disciplinary System**

- Describe any positive reinforcement system you may use.
- Provide detailed description including peer-to-peer safety observations, incentives for participation in safety activities, etc.
- Describe or attach a copy of the sites safety and health rules, describing the written disciplinary system. Does it include procedures for disciplinary action of managers, supervisors, and nonsupervisory employees who violate health and safety polices, rules, work practices, material handling or emergency procedures? Is it enforces equally? Does it discourage employees from reporting? (Click here to return)

#### **Emergency Preparedness**

- Describe the company's emergency planning and preparedness program. Include information on emergency and annual evacuation drills. How many were completed and what types.
- Describe how credible scenarios are chosen for emergency drills and their relationship to site specific hazards.
- Describe the review process of the drills/exercises. (Click here to return)

#### Formal and Informal Training

#### Document #

- Describe formal and informal safety and health training programs for employees, supervisors and managers.
- Is training classroom, hands on, computer based?
- Specifically address how employees are taught to recognize hazards related to their jobs? (Click here to return)

#### **Training Courses**

• Describe how often and in what way courses are evaluated and updated? (Click here to return)

#### **Testing**

• Describe testing in use to ensure that employees understand and retain course information and the effectiveness of the training. (Click here to return)

#### **Training Records**

Describe how and where training records are kept. (Click here to return)

#### **Training Frequency**

- Describe how frequently training is performed and what prompts repeat training.
- (Click here to return)

#### **Contractor Training**

Describe the safety and health orientation provided for contractor(s).(Click here to return)

#### **Visitor Training**

• Where personal protective equipment (PPE) is required (either by OSHA standard or decision of describe the orientation provided for visitors. (Click here to return)