

Application to the Virginia STAR Program

Submitted to: Department of I

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

Attn: Mr. Milford Stern

Application Instructions

Answer each question in the space provided. Each element has a <u>Click Here for requirement</u> link that will take you to the requirements for that element. Your answers must meet the requirements.

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

The last page of this document includes a checklist of required documents to be submitted with your application.

Helpful Websites				
BLS Industry and Illness Rates	Click here to look up BLS Industry and Illness Rates			
OSHA VPP Memo #5	https://www.osha.gov/dcsp/vpp/policy_memo5.html			
Virginia VPP	Virginia VPP			
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)		Jan 9, 2009 Federal Register Notice		

	Attachments					
	structions: List any attachments here. Please list each attachment and label the attachment with the ment that it is referred to. Add as many as needed. See each individual element for requirements.					
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Site Information									
Prepared By				T	Title				
Trepared by					1100				
			Site I	nfor	matio	n			
Name:	Name:								
Clic	Click here for help with NAICS, FEIN, and SIC Code information								
NAICS Code:			FEIN:				SIC	Code:	
Mailing Address:	:								
Physical Address (If different)	s:								
Site VPP Contact Name and Title:	t								
E-Mail:				PI	none:			Fax:	
Site Manager Na Title:	me and								
E-Mail:				PI	none:			Fax:	
·			En	ıploy	rees				
On Site:		Compan	y Wide:			Contrac	tor Emplo	yees on	Site:
PSM Site Ch	noose an i		o you h /essels?		Pressu	ire	Choo	se an item	1.
		Co	orporat	te In	forma	tion			
Name:									
NAICS Code:			FEI	N:			SIC	Code	
Mailing Address:	Mailing Address:								
Physical Address: (If different)									
Corporate VPP Contact Name and Title:									
E-Mail:									
Phone:			Fax:						

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

Give a brief history and physical description of the site.				
		-		
Type of	work performed	and products pr	roduced:	
1				
	<u> </u>			
			e number of employees.	
Salaried Employees I.E Exemp supervisory positions.	t employees in mai	nagement or		
Salaried Non-Management I.E	Engineers, Sales	Reps, Etc.		
Hourly I.E Non-Exempt	y 22 3, 22 3	Sp.Sy SS		
Employee Hours and Shift Instructions	Describe the hou needed by tabbir		employees work in the facility. Add as	
Shifts	needed by tabbil	9.	Schedule Hours	
		1		
	ation – If more	than 1, list eac	ch one separately	
Union Name and Local Number:				
Site Rep:				
Address:				
Phone:	Fax:	E-Ma	il:	
	tion – If more t	than 1, list eac	h one separately	
Union Name and				

Document # V100

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) rate. Fill in the **YELLOW cells with company data** and the **GREEN cells with the BLS published data**. Activate table by **Double Clicking** on it.

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

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NAICS:	

Year	Hours	Total Cases	<u>T</u> otal <u>C</u> ase <u>I</u> ncident <u>R</u> ate (TCIR)	Days Away, Restricted, Transferred Cases	<u>Days Away,</u> <u>R</u> estricted or <u>Transferred</u> <u>R</u> ate (DART)
2016			#DIV/0!		#DIV/0!
2017			#DIV/0!		#DIV/0!
2018			#DIV/0!		#DIV/0!
TOTAL	0	0		0	
Three Year Average Rates			#DIV/0!		#DIV/0!
Most recently published **BLS rates					
Percent d	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 quarte**r), listing each contractor individually. Activate table by **Double Clicking** on it.

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

Contractor Name	NAICS Code for Contractor				
Year	Hours	Total Cases	<u>T</u> otal <u>C</u> ase <u>I</u> ncident <u>R</u> ate (TCIR)	Days Away, Restricted, Transferred Cases	<u>Days Away,</u> <u>Restricted or</u> <u>Transferred</u> <u>Rate (DART)</u>
2018			#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!

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

Describe your written safety and health management system, including safety and health policies, procedures, systems, and programs.

Program descriptions must contain pertinent information that clearly explains the management and administration of the program, such as responsibilities and types of documentation maintained. Include those systems applicable to operations considered highly hazardous (e.g., Lockout/Tagout, Confined Space, Process Safety Management) and those considered non-routine.

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
		Click here for requirements
	6.	In House Resources
	0.	Click here for requirements
		<u>Click here for requirements</u>
	7.	Line Accountability
		Click here for requirements
	8.	Planning - Setting Goals and Objectives
		Click here for requirements
	9.	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
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E	3	Employee Involvement
	1.	Employee Involvement
		Click here for requirements
		Since the requirements
	2.	Employee Knowledge and Notification
	2.	Click here for requirements
		Click here for requirements
	•	Contract Worker Coverage
		Contract Worker Coverage
	1	On-Site Contractor Programs
		Click here for requirements
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	2.	Contractor Injury and Illness Data
		Click here for requirements
	3.	Contractor Listing
		<u>Click here for requirements</u>

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

4	Safety and Health Training
Α.	Formal and Informal Training Click here for requirements
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. We will comply with the Occupational Safety and Health Act (OSHA 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, we will correct safety and health deficiencies related to compliance with VOSH requirements and identified during any Virginia Star onsite review.

3. Employee Support

- a. Our employees support the Virginia STAR application and participation.
- b. At sites with employees organized into one or more collective bargaining units, the authorized representative for each collective bargaining unit must provide a separate letter stating its support or sign this Assurance Letter indicating that the collective bargaining agent(s) support Virginia STAR participation.
- c. VOSH must receive concurrence from all such authorized agents to accept the application.
- d. 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 Virginia STAR.

5. Orientation

a. Employees, including newly hired or transferred employees and contract employees, will receive orientation on the VPP and Virginia STAR program, including employee rights under VPP and under the OSHA Act.

6. Non-Discrimination

a. We will protect employees given safety and health duties as part of our safety and health program from discriminatory actions resulting from their carrying out such duties, as described in 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's access to these results.

8. Documentation

- a. We will maintain our safety and health program information and make it available for VOSH review to determine initial and continued participation in the Virginia STAR program. This information will include:
 - i. Any agreements between management and the 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 15th, we will submit the following information to the Virginia VPP Office:
 - i. For the previous calendar year, the TCIR for injuries and illnesses, and the DART rate.
 - ii. The total number of cases for each of the above two rates.
 - iii. Hours worked and estimated average employment for the full calendar year of the report.

10. Contractor Rates

- a. We will submit data on each applicable contractor. Applicable contractors are those employers who have contracted with our facility to perform certain jobs and whose employees worked a total of 1,000 or more hours in at least one (1) calendar quarter at our 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 full calendar year of the report.
 - iv. The appropriate NAICS 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 worker's compensation rates, increases in employee involvement, and improvements in employee morale.

12. Organizational Changes

a. Whenever significant organizational or ownership changes occur, we will provide the VPP Manager, **within 60 days**, a new Assurance Letter signed by both management and any authorized collective bargaining agents or a letter stating the union's support.

13. Collective Bargaining Changes

a. Whenever a change occurs in the authorized collective bargaining agent, we will provide the VPP Manager, **within 60 days**, a new signed statement indicating that the new representative supports Virginia STAR participation.

	6/29/2019
Highest Site Company Official Signature and Title	Date
Print Name and Title	
	6/29/2019
Highest Union Official Site Representative Signature and Title	Date
Print Name and Title	

Appendix

Definitions

- **FEIN:** An Employer identification Number (EIN) is also known as a Federal tax identification Number, and is used to identify a business entity.¹
- **NAICS Code:** 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.²
- **SIC Code:** The **Standard Industrial Classification** *SIC* is a system for classifying industries by a four-digit code.³ (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? (Click here to return)

Visible Leadership

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. (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.

¹ https://www.irs.gov/businesses/small-businesses-self-employed/employer-id-numbers-eins

² http://www.census.gov/eos/www/naics/

³ https://en.wikipedia.org/wiki/Standard Industrial Classification

• 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)

In House 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 professionals integrate their services with each other and how communication is maintained (Click here to return)

Line Accountability

- What are the documented performance standards and appraisal system for supervisors and front line employees?
- How is safety performance incorporated into the appraisal system?
- What safety measurements are used in the employee's performance evaluations? (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, and 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 how individuals 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)

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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:
 - 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 contractor's 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 complete 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.
- Include how many hazards have been reported and average time frame for repairs.
- Include how feedback is given to the employee that reported the hazard.
- Describe how corrections are tracked to completion and include the name of any electronic tracking program used. (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.
- State the number of accidents and near misses that have been investigated in the year of the report. (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.
- Describe any trends you have discovered and how they were addressed. (Click here to return)

Certified Professional Resources

- How are certified safety and health professionals and other licensed health care professionals made available to the site? This can be onsite or off site (corporate or third party). (Example: IH, CSP, CIH, PE, Ergonomic Specialist, etc.)
- What other certified safety professional do you use? What is their role in your safety program?
- Were any used in the previous year? (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 or isolating the hazard; these are the most reliable and effective. Describe and provide examples of engineering controls that 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.

• 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)

Hazard Control Programs

- What Hazard Control Programs does the site have in place and are they effective?
- The hazard control programs a site uses must be understood by all employees, equally
 enforced, clearly communicated, written disciplinary system that includes procedures for
 disciplinary action or reorientation of managers, supervisors, and non-supervisory employees
 who break or disregard safety rules, safe work practices, proper materials handling, or
 emergency procedures.
- Hazard control programs must be updated by management as needed, used by employees and incorporated in training. (Examples: OSHA required ones (PPE, LOTO, Confined Space Entry, etc., and any other industry required programs, please list).
- Have there been any new findings in the hazard control program or newly implemented programs in the previous year? (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. If off site, which medical services and physicians are employed by the site, state names and location.
- Are employees trained in First Aid and CPR? Is there an AED on site? What type of training did employees receive? Was it through an outside service?
- 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. List the name(s) of any computerized PM system used. (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, and provide feedback to
employees that have reported the hazard? Does the system in place result in a 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 non-supervisory employees who violate health and safety polices, rules, work practices, material

handling or emergency procedures? Is it enforced 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 drills 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 and how results are communicated to employees that are not present for the drills. (Click here to return)

Process Safety Management

• If applicable, please submit a current Supplement B and label under the attachment section. (Click here to return)

Formal and Informal Training

- 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.
- If using an electronic tracking system, what is the name of it? (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 the site) describe the orientation provided for visitors. (Click here to return)

Application Check List

Use the following guidance and checklist when completing the VPP application to help ensure you have a completed application.

• The following documents should be attached:

Company Top level safety policy specific to the facility
Site's safety and health policy
Current year's safety goals
Sample job description's or EWP's that include S&H elements and
expectations for all employees and management
Organizational chart explaining the relationship of the site's safety &
health personnel to the organization
Copy of the annual self-evaluation that was completed
Copy of documentation of completed hazard analysis, process hazard
analyses, management of change forms
Sample of a self-inspection
Copy of the site specific Respiratory Protection program, if employees are
required to use respirators
List of equipment included in preventive maintenance program
Copy of the Emergency Action Program
VPP Assurances signed
Copy of the site specific Respiratory Protection program, if employees are required to use respirators List of equipment included in preventive maintenance program Copy of the Emergency Action Program