AKOSH Program Directive #18-06

Date: July 2, 2018

To: All AKOSH Staff

From: Deborah Kelly, Director

Subject: Consultation and Training Policies and Procedures Manual (CPPM)

This Program Directive, PD 18-06, is formal notice that the Alaska Department of Labor and Workforce Development, Division of Labor Standards and Safety recognizes and will implement the OSHA Instruction CSP 02-00-003 Consultation Policies and Procedures Manual.

This manual cancels and replaces OSHA Instruction CSP 02-00-002 and its supplemental notices. It outlines the overall policy framework for administering and managing the OSHA Consultation Program, updates and clarifies the criteria and requirements for participation in the Safety and Health Achievement Recognition Program (SHARP) and the requirements of the monitoring and evaluation system.

Please ensure that all members of your staff receive a copy of this program directive.

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Executive Summary

This directive constitutes Alaska Occupational Safety and Health (AKOSH)’s general consultation and training policies and procedures for use by the field officers in conducting on-site consultation visits, formal and informal training and other services related to assisting employers in the development and implementation of effective safety and health management systems.

Alaska OSH Consultation and Training section may provide assistance to employers under federal jurisdiction and for those circumstances consultants, in addition to the procedures presented in this manual, shall refer to federal directive CSP-02-00-003, Consultation Policies and Procedures Manual (CPPM) for their requirements.

Disclaimer

This manual is intended to provide instruction regarding some of the internal operations of AKOSH, and is solely for the benefit of AKOSH. No duties, rights, or benefits, substantive or procedural, are created or implied by this manual. The contents of this manual are not enforceable by any person or entity against the Alaska Department of Labor and Workforce Development or the State of Alaska. Statements which reflect current Occupational Safety and Health Review Board, federal OSHA Review Commission, or court precedents do not necessarily indicate acquiescence with those precedents.
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Chapter 1 Introduction

I. Purpose.

The Alaska Department of Labor and Workforce Development (DOLWD), Occupational Safety and Health (AKOSH) Consultation and Training program is charged with assisting private and public sector employers in implementing and maintaining effective safety and health programs. The AKOSH Consultation and Training Policies and Procedures Manual (AKOSH CPPM) provides procedures for maintaining effectiveness, consistency and quality in the conduct of field workplace safety and health consultation visits and training. It is expected that these procedures will be revised periodically to maintain efficiency and address programmatic issues.

II. Scope.

This Instruction applies to AKOSH Consultation and Training Section personnel.

III. Definitions and Terminology.


Action Plan for Inspection Deferral (Action Plan). The written plan, developed by the consultant and approved by the Assistant Chief of Consultation and Training, outlining the necessary achievements and time frames required for the employer to earn SHARP status. The Action Plan is implemented by the employer.

Alaska Administrative Code (AAC). Regulations adopted to provide additional definition to Alaska Occupational Safety and Health Laws.

Alaska Occupational Safety and Health Laws (AKOSH laws). The body of Alaska statutes from AS 18.60.010 through AS 18.60.105.

Assistant Attorney General (AAG). The legal representative for AKOSH.

Assistant Chief of Consultation and Training. Assists the Chief, Occupational Safety and Health in the planning, organizing, directing and controlling resources and program delivery for Consultation and Training, which is comprised of Safety Officers, Industrial Hygienists, and a Training Coordinator.

Assistant Secretary. Assistant Secretary of Labor for Occupational Safety and Health. For the purposes of this manual, Assistant Secretary may also refer to the Commissioner of the Alaska Department of Labor and Workforce Development.
Chief of AKOSH. Manages the Occupational Safety and Health section. The Chief of AKOSH manages the day-to-day operations through Assistant Chiefs to ensure adherence to AKOSH’s statutory responsibilities for worker safety and health protection.

Closed Case Date (Safety and/or Health Closed Case Date). The date entered in OIS at the conclusion of an employer’s visit-in-progress status for safety- and/or health-related assistance.

Code of Federal Regulations (CFR). This term applies to federal regulations adopted to provide additional definition to the federal OSH Act.

Compliance Assistance Activities. Consultation assistance activities provided away from an employer's worksite. Examples include technical advice provided through telephone conversations and videoconferences; electronic and printed correspondence, such as e-mail and fax; speeches and presentations to stakeholders; off-site technical training not related to a visit; and marketing to employers, such as targeted mailings and door-to-door promotions.


Compliance Officer. A Federal or State compliance safety or health officer (CSHO).

Compliance Safety and Health Officer (CSHO). This term refers to Safety Engineers, Safety Compliance Officers, and Industrial Hygienists.

Safety and Health Consultant (Consultant). A state employee who provides consultation services. This term refers to Safety Consultants and Industrial Hygienists.

Consultation. All activities that may be provided to employers under the jurisdiction of an On-site Consultation Cooperative Agreement.

Cooperative Agreement. The legal instrument which enables the States to collaborate with OSHA to provide on-site consultation services in accordance with 29 CFR Part 1908.

Days Away, Restricted, and Transferred (DART). A rate that represents the total non-fatal injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer per 100 full-time employees for a given period of time (usually 1 to 3 years).

Designee. The State official designated by the Governor to be responsible for oversight of an On-site Consultation Cooperative Agreement.
**Director of Labor Standards and Safety.** Responsible for managing the Labor Standards and Safety Division including its three sections: Occupational Safety and Health, Mechanical Inspection, and Wage and Hour.

**Education.** Planned and organized activity by a consultant to convey to employers and employees information that would enable them to establish and maintain safe and healthful working conditions at their workplace.

**Employee.** A person employed at a worksite whose employer has requested consultation services.

**Employee representative.** The authorized representative of employees at a site where there is a recognized labor organization representing employees.

**Employer.** A person engaged in a commercial business with employees.

**Hazard correction.** The elimination or control of a workplace hazard in accordance with the requirements of applicable Federal or State statutes, regulations, or standards.

**Hazard Survey.** Within the scope of the visit, the collection of information on hazards, observation of work processes, methods, procedures, employee activities, employee interviews, and advice on hazard control or elimination as appropriate.

**He/She and His/Hers.** The terms he and she, as well as his or her, when used throughout this manual, are interchangeable. That is, male(s) applies to female(s), and vice versa.

**High-hazard business or operation.** A business or operation on OSHA’s high-hazard list; a supplemental high-hazard list approved by the Directorate of Cooperative and State Programs; or any national, state, or local emphasis program list.

**Imminent danger.** Conditions or practices in any place of employment which are such that a danger exists which could reasonably be expected to cause death or serious physical harm immediately or before the imminence of such danger can be eliminated through the enforcement procedures otherwise provided by this Act. See Section 13(a) of the OSH Act and 29 CFR 1908.6(f)(1).

**List of Hazards (Serious).** The List of Hazards consists of hazards identified by the consultant and their correction due dates as agreed upon by the employer and the consultant. The List of Hazards is the official document that must be posted by the employer.

**Off-site Consultation.** The provision of consultative assistance on occupational safety and health issues away from an employer's worksite by such means as telephone and
correspondence, and at locations other than the employer's worksite, such as the consultation project offices.

**On-site Consultation.** The process of walking through an employer's worksite, identifying hazards, conducting applicable safety and/or health program review, providing correction assistance, and helping to develop or improve the employer's occupational safety and health management system. It includes a written report to the employer on the findings and recommendations resulting from the visit. It may include training and education needed to address hazards or potential hazards at the worksite.

**OSHA.** The Federal Occupational Safety and Health Administration or the State agency responsible under a Plan approved under Section 18 of the OSH Act for the enforcement of occupational safety and health standards in that State.

**OSHA Information System (OIS).** An OSHA web-based system.

**Other-than-serious hazard.** Any condition or practice which would be classified as an other-than-serious violation of applicable Federal or State statutes, regulations, or standards, based on criteria contained in the current OSHA field instructions or approved State Plan counterpart.

**Professional Judgment.** All AKOSH employees are expected to exercise their best judgment as safety and health professionals and as representatives of the Alaska Department of Labor and Workforce Development in every aspect of carrying out their duties.

**Program assessment.** Refers to a consultant's review of an employer's existing safety and health management program. This review identifies elements considered adequate and elements that need development or improvement. Consultants use the Safety and Health Program Assessment Worksheet (Revised OSHA Form 33) to conduct the program assessment.

**Program assistance.** Refers to the consultant's recommendations for developing or improving program elements. The Safety and Health Program Assessment Worksheet (Revised OSHA Form 33) is used as a guide to evaluate the existing safety and health program.

**Programmed inspection.** OSHA worksite inspections whose scheduling are based upon objective or neutral criteria. These inspections do not include imminent danger, fatality/catastrophe, formal complaints, and other critical inspections as determined by the Commissioner of the Alaska Department of Labor and Workforce Development.

**Programmed inspection schedule.** The set of criteria by which OSHA determines which sites to inspect in a given year. The worksites are selected according to national or state scheduling plans for safety and for health or special emphasis programs.
Recognition and achievement program. A Consultation Program for recognizing the achievement of a small employer who operates, at a particular worksite, an exemplary safety and health management system that results in the immediate and long-term prevention of job-related injuries and illnesses.

Safety and health management system. Refers to a comprehensive, employer-provided, site-specific system to protect employee safety and health, as outlined in the 1989 "Safety and Health Program Management Guidelines" (FR 54:3909-3916).

Scope of Visit. For Full-Service and Limited-Service Visits.

1. Full-service visit. An On-site Consultation visit that provides a complete, safety and/or health hazard survey of all working conditions, equipment, processes and OSHA-mandated safety and health programs at the worksite. There are three types of full-service visits:
   a. Full-service safety: when one consultant conducts a safety visit as defined above.
   b. Full-service health: when one consultant conducts a health visit as defined above.
   c. Full-service both: when one consultant conducts a single visit for both safety and health as defined above.

2. Limited-service visit. A less complete safety and/or health hazard survey than that provided by a full-service visit. A limited visit provides a focused survey of a particular work process or type of hazard or a focused survey that is conducted of one discipline, safety or health, or both disciplines at once. There are three types of limited-service visits:
   a. Limited-service safety: when one consultant conducts the safety visit as defined above.
   b. Limited-service health: when one consultant conducts the health visit as defined above.
   c. Limited-service both: when one consultant conducts a single visit for both safety and health as defined above.

Serious hazard. Any condition or practice which would be classified as a serious violation of applicable Federal or State statutes, regulations or standards, based on criteria contained in the current AKOSH Field Operation Manual, except that the element of employer knowledge may not be considered.

Small business. For the purposes of the Consultation Program, a small business is defined as an employer having fewer than 250 employees at a fixed worksite and no more than 500 employees corporation-wide.
**Standard Element Paragraph (STEP).** Word processing files for entry of hazard information, which are customized by the user in preparing a written report to the employer. Each STEP describes an unsafe condition(s) covered by a standard(s), the potential effect on employees of that condition(s), the standard(s) referenced, and the recommended corrective action(s).

**Total Recordable Case Rate (TRC).** A rate that represents the total non-fatal injuries and illnesses per 100 full-time employees for a given period of time (usually 1 to 3 years).

**Trade Secret.** Information which is not generally known or reasonably ascertainable, by which a business can obtain an economic advantage over competitors or customers. See 18 USC 1905 and Section 15 of the OSH Act.

**Training.** The planned and organized activity of a consultant to transfer skills, techniques, and methodologies to employers and their employees that will assist them in establishing and maintaining safe and healthful workplace conditions.

**Visits.** Visits can be classified as follows:

1. **Initial Visit.** A hazard assessment visit(s) provided by a safety or health consultant. An initial visit must consist of an on-site opening conference, an examination of all aspects of the safety and health management system relating to the scope of the visit, a walkthrough of the workplace, and a closing conference.

2. **Training and Assistance Visit.** An On-site Consultation visit that is conducted to provide training to employers and their employees in hazard identification and correction or in safety and health program development.

3. **Follow-up Visit.** An On-site Consultation visit(s) conducted to verify the correction of previously identified hazards, address new hazards observed, and/or assist the employer with activities relating to implementation of a safety and health management system.

4. **Visit-in-Progress.** A Consultation visit-in-progress is from the beginning of the opening conference to the end of the correction due dates (including extensions).

**Willful violation.** Under the OSH Act, Sec. 17 a willful violation is one where the evidence shows either an intentional violation of the OSH Act or plain indifference to its requirements.

**Workplace, Jobsite and Worksite.** The terms workplace, jobsite and worksite are interchangeable. Workplace is used more frequently in general industry, while jobsite and worksite are more commonly used in the construction industry.
**Written Report to the Employer.** The confidential report provided by the Consultant to the employer, documenting all hazards identified, hazard correction recommendations, correction due dates, and an assessment of the employer's safety and health management system.
Chapter 2 Outreach and Promotions

I. Introduction.

AKOSH's mission is to reduce and eliminate workplace hazards and the incidence of workplace safety and health accidents by promulgating and enforcing standards and regulations; providing training, outreach, and education; establishing partnerships; and encouraging continual improvement in workplace safety and health and the development of comprehensive safety and health management systems. Effective and efficient use of resources requires careful, flexible planning and execution.

II. AKOSH Responsibilities.

A. Providing Assistance to Small Employers

In 1996, Congress passed the Small Business Regulatory Enforcement Fairness Act (SBREFA) to respond to the concern expressed by the small business community that Federal regulations were too numerous and complex, and that small business needed special assistance in understanding and complying with those regulations.

AKOSH operates a federally-approved occupational safety and health program to provide guidance and compliance assistance in addition to enforcement actions to reduce workplace illnesses, injuries and fatalities. These programs must contain procedures to answer inquiries by small entities (small businesses). These programs also provide information on and advice about compliance with the statutes and regulations; interpretations; and applications of the law to specific sets of facts supplied by the small entity.

B. AKOSH Outreach Program

AKOSH maintains an outreach program appropriate to local conditions and needs. Functions include compliance assistance services in developing compliance safety and health management systems, training and education services, referral services, cooperative programs, abatement assistance, and technical services.

C. Responding to Requests for Assistance

AKOSH shall make every effort to respond to all requests for assistance given available resources, but priority will be given to requests from small employers with less than 250 employees.
Chapter 3 Relationship to Enforcement Activity

I. Introduction.

Alaska’s OSH Consultation and Training Program is completely separate from AKOSH’s enforcement efforts and does not issue citations or propose penalties. However, the Consultation Program depends on having an effective AKOSH’s Enforcement Program to compel employers to achieve compliance. Additionally, the AKOSH Consultation Program relies on enforcement as a deterrent to ensure that employers rectify all identified hazards.

II. Confidentiality.

The Consultation Services Section shall not inform the Enforcement section of the results of any consultation activity. Exceptions are found at 29 CFR 1908.6(f)(1) failure to eliminate imminent danger and 29 CFR 1908.6(f)(4) failure to eliminate serious hazards. Only the Assistant Chief of Consultation and Training will refer employers that do not comply with 29 CFR 1908.6(f)(1) and (f)(4) to the Chief of OSH for additional evaluation and action.

III. Imminent Danger Situations.

Consultants and trainers may not issue citations for alleged violations of AS 18.60.010 - 18.60.105 or any regulation, standard, rule or order promulgated pursuant thereto. However, if a consultant or trainer during the course of a visit to a place of employment discovers an imminent danger, he or she shall not proceed with the on-site visit until the imminent danger situation is resolved and employees are removed from dangers. The consultant must document the employer’s actions. If the employer is not cooperating the consultant must immediately contact the Assistant Chief of Consultation and Training or designee who may recommend to the Chief of AKOSH to authorize issuing an order restraining the practice or condition creating the imminent danger.

If a restraining order is authorized, the Chief of AKOSH will immediately inform the Division Director that a restraining order was issued. AKOSH will have the affected place of employment inspected by a compliance officer. The compliance officer may modify or revoke the restraining order and recommend to the department that a citation be issued.

Three situations that an AKOSH Consultant could identify an imminent danger situation are:

1. During a consultation visit
2. While on duty
3. While off duty
1. If an imminent danger situation is identified during a consultation visit, follow the guidance previously stated.

2. If an imminent danger situation is identified while on duty, the consultant shall use professional judgment, address the situation immediately, and follow the guidance previously stated.

3. If an imminent danger situation is identified while off duty, contact the Assistant Chief of Consultation and Training or designee for authorization to proceed.

IV. On-site Consultation Visit Priority.

An on-site consultation visit in progress will take priority over AKOSH programmed inspections. An on-site consultation visit will be considered "in progress" in relation to the working conditions, hazards, or situations covered by the visit from the beginning of the opening conference through the end of the correction due dates and any extensions thereof. If an on-site consultation visit is already in progress it will terminate when the following AKOSH compliance inspections are about to take place:

- Imminent danger inspection;
- Fatality/catastrophe inspection;
- Complaint inspections; and/or
- Other critical inspections, as determined by the Director of Labor Standards and Safety or Commissioner of Labor and Workforce Development.

**NOTE:** Other “such critical inspections” may include, but are not limited to, referrals as defined in Chapter 9, Complaint and Referral Processing in the AKOSH FOM. Following an evaluation of the hazards alleged in a referral, if the Division Director determines that enforcement action is required prior to the end of an abatement period established by the state consultation project, the consultation visit in progress shall be immediately terminated to allow for an enforcement inspection.

For purposes of efficiency and expediency, an employer’s worksite shall not be subject to concurrent consultation and enforcement-related visits.

**Full Service on-site Consultation Visits.** While a worksite is undergoing a full service on-site consultation visit for safety or health, programmed enforcement activity of that discipline may not occur until after the end of the worksite’s visit “in progress” status.

**Limited Service on-site Consultation Visits.** If a worksite is undergoing a limited service on-site consultation visit, whether focused on a particular type of work process or a hazard, programmed enforcement activity may not proceed while the consultant is at the worksite. The re-scheduled enforcement activity must be limited only to those areas that were not addressed by the scope of the consultative visit (posted list of hazards).
Enforcement Follow-Up and Monitoring Inspections. If an enforcement follow-up or monitoring inspection is scheduled while a worksite is undergoing an on-site consultation visit, the inspection shall not be deferred; however, its scope shall be limited only to those areas required to be covered by the follow-up or monitoring inspection. In such instances, the consultant must halt the on-site visit until the enforcement inspection is completed. In the event AKOSH issues a citation(s) as a result of the follow-up or monitoring inspection, an on-site consultation visit may not proceed until the citation(s) becomes a final order(s).

V. On-site Consultation and 90-day Deferral.

If an establishment has requested an initial full-service comprehensive consultation visit for safety or health from the State OSHA Consultation Program, and that visit has been scheduled by the State Program, an HHT inspection may be deferred for 90 calendar days from the date of the notification by the State Program to the AKOSH Enforcement Program. If a site is particularly difficult to access and, due to no fault of the employer, a consultation visit cannot be conducted within 90 days from the request, the Assistant Chief of AKOSH Enforcement will request a determination from the Chief of OSH before scheduling a programmed inspection.

AKOSH may, however, in exercising its authority to schedule inspections, assign a lower priority to worksites where consultation visits are scheduled.
Chapter 4 Consultation Services and Cooperative Programs

I. Introduction.

AKOSH offers a number of avenues for businesses and organizations to work cooperatively with the Agency. AKOSH Consultants and Compliance Officers are expected to discuss the various cooperative programs with employers at the closing of an enforcement inspection or whenever an employer makes a request for such information.

The following cooperative programs are administered by the AKOSH Consultation and Training Program:

- On-site consultation visits and training
- Safety and Health Achievement Recognition Programs (SHARP) and pre-SHARP
- Voluntary Protection Programs (VPP)
- Partnerships

II. On site Safety and Health Consultation Visits.

A. Overview

The AKOSH Consultation and Training program operates through a mix of state funding and Section 21(d) and 23(g) agreements where state funds are matched with Federal OSHA funding.

The AKOSH Consultation and Training Program offers a variety of services at no cost to employers. These services include assisting employers in the development and implementation of an effective safety and health management system, and offering training and education to the employer and employees at the worksite. Smaller businesses in high hazard industries or those involved in hazardous operations receive priority.

On-site consultation visits include an opening conference, a walk-through of employer worksites, identification of hazards, correction assistance, and assistance in the development or improvement of the employer’s occupational safety and health management system, and a closing conference. An on-site consultation visit will result in a written report to the employer, detailing findings and recommendations of the consultant. It may include training and education needed to address hazards or potential hazards at the worksite.

Although the on-site consultation program does not issue citations or propose penalties, employers receiving consultation services must immediately correct or eliminate exposure to identified imminent danger hazards and correct all serious hazards by the
assigned abatement date. Employers are also expected to correct all other-than serious hazards and recordkeeping deficiencies.

B. **Prioritizing and Scheduling Services**

The Assistant Chief of Consultation and Training or designee must schedule consultation services according to a prioritizing method that focuses on the most serious deficiencies/hazards first, as defined by the following criteria:

1. **Imminent Danger or Congressional Designation.** First priority must be given to employers who indicate an imminent danger situation or are in industries (or indicated hazards) designated for highest priority by Congress.

2. **Small Employers Targeted in the Federal or the State Strategic Plan, National Emphasis Program, Local Emphasis Program, or Other "Targeted Industries."** Second priority must be given to small employers who are in a "targeted" industry as defined by the Federal or the State Strategic Management Plan, a National Emphasis Program, a Local Emphasis Program, other targeting programs or the OSHA Strategic Partnership Program.

3. **Referred by AKOSH or OSHA to the Consultation Project.** Third priority must be given to small employers who are specifically referred by AKOSH or OSHA to the Consultation Program or for which OSHA directly suggests requesting a consultation. Scenarios assigned the third priority could include, but are not limited to, establishments receiving OSHA’s Hazard Alert Letter (HAL); as a condition of any OSHA Settlement Agreement; as a result of actions involving an OSHA Rapid Response Investigation (RRI), or some future equivalent of the Site Specific Targeting inspection plan.

4. **Small, High-Hazard Employers.** Fourth priority must be given to small employers who are in a high-hazard industry, as defined below, or who have the highest incidence rates. Establishments and operations are defined as "high-hazard" based on the following criteria:
   
   a. **High Incidence Rates.** An establishment is considered "high-hazard" for OSHA consultation priority consideration if that establishment's DART rate is above the national average for that industry.

   b. **High-Hazard North America Industrial Classification System (NAICS) Codes.** An establishment is considered high-hazard if it is in an industry whose North American Industrial Classification System (NAICS) code is on the OSHA-generated listing of high-hazard industries (Annual OSHA High Rate Industries Listing).

   c. **Alternative High-Hazard Listing.** If an establishment is not on the OSHA-generated listing, consultants may refer to an alternative high-hazard listing
developed by the State and approved for use by OSHA's Directorate of Cooperative and State Programs.

d. **Secondary NAICS codes.** One or more hazardous work processes or work areas (for example, bindery in a publishing house) may be located within an establishment in an industry that is not on the high-hazard list. If such a process or area is the focus of a visit, a secondary code may be used to classify the establishment and, therefore, the priority for receiving a visit, as high-hazard. To be used, the secondary NAICS code must be either on the OSHA-generated high-hazard listing or on the OSHA-approved alternative State listing.

e. **Hazardous Processes.** An establishment may also be classified as "high-hazard" based on the number of hazardous operations required to complete a work process and which cannot be described by a secondary NAICS code. OSHA's criteria for hazardous processes include the following:

i. A substance in regular use at the establishment has a health code of HE1 - HE4 (carcinogen, chronic toxicity and acute toxicity) located under Health Factors of the Chemical Sampling Information website.

ii. A substance in regular use at the establishment is explosive, or working conditions or work processes in use at that site pose an explosion hazard.

5. **Small, Non-High-Hazard Employers.** Fifth priority must be given to small employers who are not in a high-hazard industry, or who have lower workplace incidence rates.

6. **Mid-Size Employers (including franchise operations).** Sixth priority must be given to mid-size employers (including franchise operations) who employ fewer than 250 employees at the site but more than 500 employees corporation-wide.

7. **Larger Employers.** The lowest priority shall be given to employers who employ more than 250 employees at the site. Services to employers in this size range will often be limited in scope but are allowed as resources permit.

C. **Requests for Consultation Visits**

The Assistant Chief of Consultation and Training or designee must ensure that the following criteria are met before providing consultation services:

1. No On-site Consultation Visit may be provided in the absence of a request by the employer.
2. A request for on-site consultation services must always include a request for a hazard survey unless a consultation hazard survey, OSHA inspection, or private consultation survey conducted in the past twelve (12) months provides adequate foundation for conducting a consultation visit.

3. If an employer requests a consultation visit for more than one site under his or her control, each site must be dealt with as a distinct request.

4. Employers who cannot be promptly scheduled for a consultation visit because of low scheduling priority or other project considerations must be informed of their statutory responsibility to maintain a safe and healthful workplace.

5. Construction Sites.
   a. While assistance may be provided to subcontractors away from the worksite on safety and health management systems (off-site assistance), a subcontractor request for on-site consultation may be accepted only with the approval of the general contractor or the controlling employer at the site.
   b. Although the visit request was made by a subcontractor, the general contractor or controlling employer must accept responsibility for ensuring the correction of any serious hazard identified during the course of the visit. This responsibility includes hazards that were not created by the general contractor and those that might not be under the requesting subcontractor's control.
   c. If a company's headquarters is in another State, Assistant Chief of Consultation and Trainings may need to cooperate across state lines.
   d. The same scheduling priorities must be applied to requests from construction sites as for other employers requesting consultative assistance.

6. Multi-Employer On-site Consultation Visits
   a. If an on-site visit on a multi-employer worksite is conducted at the request of a general contractor or an employer who has oversight or control over other employers on that worksite, the visit shall only be counted once.
   b. If individual employers request separate visits to be conducted with the consent of the controlling employer, these visits may be coded separately. These separate visits will require that the correct procedures, including opening and closing conferences, a written report, and other required elements as outlined in the CPPM, be followed.
D. Communicating Employer Obligations and Rights

In response to any inquiry from the public regarding the program and before agreeing to an employer's request for a consultation visit, the Consultant must clearly explain the following information:

1. **Independence.** The Consultation Program is independent of Federal or State OSHA enforcement.

2. **Cost.** Consultative services are provided at no cost to the employer and are supported by Federal and State funds.

3. **Confidentiality.**
   
   a. **Public Disclosure.** Employers participating in OSHA activity funded under 21(d) of the OSH Act will not have the results from the consultation visit publicized; the results will remain confidential from State or Federal enforcement, except in situations where imminent dangers or serious hazards are not corrected as agreed upon in the employer’s Action Plan. Finally, as per 29 CFR 1908.6(g) (2) states may also disclose information contained in the consultant's report to the extent required by 29 CFR 1920.1020 (Access to Employee Exposure and Medical Records) or other applicable OSHA standards or regulations."

   b. **Enforcement Disclosure.** The identity of employers requesting on-site consultation, as well as the findings from the consultant's report, shall not be provided to OSHA for use in any compliance activity as per 29 CFR 1908.7(a)(3). The exceptions are found at 29 CFR 1908.6(f) (1) failure to eliminate imminent danger and 29 CFR 1908.6(f) (4) failure to eliminate serious hazards.

4. **Employee Participation.** Employee participation is required on all on-site visits involving hazard identification. Requirements vary depending on whether or not the site has a recognized employee representative.

5. **No Citations or Penalties.** Consultants do not issue citations or propose penalties.

5. **Imminent Danger Situations.** The employer must correct imminent danger situations immediately or remove employees from the danger area. Failure to remove employees from an imminent danger area will result in immediate referral to enforcement.

7. **Hazard Correction.** The employer must correct all serious hazards in accordance with mutually agreed upon correction due dates and provide to the Consultant
documentation of the action taken to eliminate or control the hazards. Failure to do so will result in referral to enforcement. Employers shall correct other-than-serious hazards and regulatory violations in a timely manner but need not send verification of correction to the Consultant, except for those employers wishing to participate in a recognition and achievement program, such as Pre-SHARP or SHARP.

8. **Enforcement Inspection in Progress.** An enforcement inspection is considered “in progress” in the following situations: “in progress” in the following situations:

   a. From the time a compliance officer initially seeks entry to the workplace to the end of the closing conference.

   b. When right of entry is refused, the inspection is “in progress” until the Commissioner or Commissioners designee seeks a warrant or determines that allowing a consultation visit to proceed is in the best interest of employees.

   c. During and following an enforcement inspection, no consultation visit may take place until it has been determined whether or not:

      i. Any citations will be issued.

      ii. A citation has been issued, and the contest period has expired.

      iii. Cited items have become final orders. If the consultant has reason to believe there are citations that have not become final orders, the Assistant Chief of Consultation and Training must contact the OSHA Regional Office or AKOSH Assistant Chief of Enforcement as applicable, to determine the employer's status.

9. **Enforcement Inspections Following Consultation Services.** The following conditions apply if an enforcement inspection occurs after consultation services have been provided.

   a. Employer's Good Faith. If the employer chooses to provide enforcement with a copy of the consultant's written report to the employer, it may be used by enforcement to determine the employer's "good faith" for purposes of adjusting any proposed penalties and judging the extent to which an inspection is required.

   b. No Immunity from Citations. Regardless of the consultant’s advice and written report to the employer, in a subsequent enforcement inspection, a compliance officer is not precluded from finding hazardous conditions or
violations of standards, rules, or regulations for which citations would be issued and penalties proposed.

10. **Participation in a Recognition and Achievement Program.** If an employer satisfies all of the conditions required to participate in a recognition and achievement program administered under Section 21(d), then that particular worksite may be deleted from AKOSH or OSHA’s Programmed Inspection Schedule for a period of up to two (2) years upon initial approval or up to three (3) years for subsequent renewal periods. (See Chapter 4 and Appendix C of this document.)

11. **Posting the List of Hazards.** The employer must agree to post the List of Hazards, as it was received from the Consultation Project, for a minimum of three (3) working days, and it can only be removed once all hazards identified on the list are corrected. Agreed-upon modifications or extensions of correction due dates must also be posted. Posting must be in a prominent place where it is readily observable by all employees. While in most instances this will entail posting a hard copy of the List of Hazards, posting by electronic means is acceptable in cases where electronic transmission is the employer's normal means of providing notices to employees and each employee is equipped with an electronic communication device. Failure to post the List of Hazards will result in the termination of the Consultation visit-in-progress status.

12. **Employer’s Rights.** In addition to the obligations stated above, the employer also retains the following rights during and after a consultation visit:

   a. **Modifying the Scope or Terminating the Visit.** The employer has the right to modify the scope of the visit or terminate participation in the visit at any time, including termination of the hazard survey before its completion. The employer is responsible for correcting any serious hazards identified up to the point of termination and except in situations where imminent danger or serious hazards are not corrected as agreed upon, the employer's name and the results of the on-site visit will remain confidential in accordance with Section II of this chapter.

   b. **Correction Schedule and Report Findings.** The employer has the right to disagree with the correction schedules and may, within 15 working days of receipt of the Written Report to the Employer, appeal to the Assistant Chief of Consultation and Training for amendment of the correction date(s) or any other substantive findings of the Written Report. Disagreement over or amendment of the correction schedule or report findings does not relieve the employer of the responsibility to correct serious hazards identified.

   c. **Informing Enforcement.** If an enforcement inspection occurs after the conclusion of the consultation visit, the employer is not required to inform
the CSHO of the consultation on-site visit or furnish a copy of the results, except to the extent that disclosure of information contained in such a report is required by 29 CFR 1910.1020 (Access to Employee Exposure and Medical Records) or other standards.

d. **Private Discussion with the Consultant.** The employer has the right to request a private meeting with the consultant to discuss matters that he or she may wish not to discuss in the presence of the employee representative.

E. **Preparation for a Visit**

An on-site consultative visit shall be made only after appropriate preparation by the consultant. Before the visit, the consultant shall become familiar with as many factors concerning the establishment’s operation as possible. The consultant shall review all applicable codes and standards. In addition, the consultant shall ensure that all necessary technical and personal protective equipment is available and functioning properly. (See 29 CFR 1908.6(a).)

1. **Research.** Each consultant shall review and analyze the data collected from the employer on the OIS Consultation Request Activity. In addition, the following information shall be reviewed before the visit:

   a. **Case File.** The consultant shall evaluate all available data for the worksite, including:

      i. Case files of previous consultations at the establishment.
      ii. Employer's AKOSH/OSHA inspection history by conducting an establishment search on OSHA’s database.
      iii. Typical hazards found under the North American Industrial Classification System (NAICS).
      iv. Hazardous chemicals and quantities.
      v. Prior years’ injury and illness national averages and the employers OSHA 300 logs.

   b. **References.** The consultant shall refer to technical reference material about potential hazards and industrial processes that may be encountered and refer to any relevant standards.

   c. **Sampling Methods.** Appropriate sampling methods shall be reviewed based on past experience and information on the Consultation Request Activities from prior visits as well as any prior enforcement inspection activity.

   d. **Severe Violator Enforcement Program (SVEP) Referral Cases.** Consultants shall review the SVEP list as part of the research before conducting consultation visits. Projects are responsible for contacting the Region or the
2. **Survey Materials and Equipment.** The Assistant Chief of Consultation and Training is responsible for ensuring that all materials and equipment required for an on-site survey are available to the consultant. The consultant, however, is responsible for taking and using the equipment needed for the on-site visit.

   a. **Forms and Handouts.** The consultant shall assemble all reports, forms, and other materials in sufficient quantity to conduct the on-site survey. See the OSHA Information System Consultation User Guide and the current year’s guidance.

   b. **Sampling Equipment.** The Consultant shall select the necessary equipment using standard sampling and calibration methods as outlined in the OSHA Technical Manual, OSHA Directives, Wisconsin Occupational Health Laboratory (WOHL) sampling guide, manufacturer's recommendations, and other standard calibration procedures and practices.

   c. **Consultant Safety and Health Considerations.** All necessary personal protective equipment must be used. The Assistant Chief of Consultation and Training must ensure that the equipment is usable and that the consultant has been trained in its use and limitations. This requirement includes a pre-visit hazard review with the consultant and the use of appropriate control strategies to reduce exposure to anticipated hazards in the workplace.

3. **Visit Confirmation.** If an employer's requested visit is scheduled thirty (30) days or more after the request date, the requesting employer shall be contacted within five (5) working days of the scheduled visit to confirm the visit date. When verifying the scheduled visit, the employer must once again be asked whether any Federal or State OSHA inspection activity is “in progress” or whether the employer has denied entry to OSHA enforcement activity.

4. **Entry to the Workplace.** Upon arrival at the worksite, the consultant must introduce himself or herself and produce official state identification which, at a minimum, identifies the consultant’s name, employer, and place of employment.

5. **Opening Conference.** The first phase of the on-site visit is the opening conference with the employer or an authorized employer’s representative. The employer or representative must have the authority to make safety and health decisions and be authorized to implement these changes. The opening conference is necessary to establish a clear understanding of the purpose of the visit and its procedures. It provides an opportunity to gain the employer’s trust and allows the consultant to confirm the scope of the request and to review with the employer the terms of the visit. If a visit is limited scope, the consultant must
inform the employer that if a hazard outside of the agreed upon scope of the visit is identified in plain sight during the walkthrough, the employer will still be responsible for correcting the hazard and is subject to referral to enforcement for failure to rectify the hazard.

a. **Introductions.** The consultant must identify himself or herself and any other consultation project personnel participating in the visit. The employer, other company representatives, and employees or employee representative(s) must be identified and their names, titles, and contact information recorded in the case file notes.

b. **Employee Participation.** Employee participation is required during all on-site visits. Requirements vary according to whether the site has a recognized employee representative, as explained below.

<table>
<thead>
<tr>
<th>If:</th>
<th>Then:</th>
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<tr>
<td>the site has a recognized employee representative</td>
<td>an employee representative of affected employees must be afforded an opportunity to participate in the opening and closing conferences and to accompany the consultant and the employer's representative during the physical inspection of the workplace. In the interest of time and clarity, the consultant shall encourage joint opening and closing conferences. If there is an objection to a joint conference, the consultant must conduct separate conferences with the employer and the employee representative. The consultant may increase the number of employee participants during the hazard survey if he/she determines that additional representatives will improve the quality of the visit. The consultant may confer privately with the employee representative.</td>
</tr>
<tr>
<td>the site has no recognized employee representative</td>
<td>the consultant must confer with a reasonable number of employees during the course of the visit in order to identify and judge the extent of particular hazards within the scope of the employer's request and to evaluate the employer's safety and health management system. The employer must agree to permit such contact in order for the visit to proceed.</td>
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</table>
c. **Scope of Visit.** The scope of the visit must be discussed with the employer and any employee representatives of affected employees based on the type of visit that the employer has requested. On an initial visit requesting limited service, the consultant shall strongly recommend the benefits of a full service visit. If a visit is limited scope, the consultant is still required to document any hazards outside of the agreed upon scope of the visit if found in plain sight during the walkthrough. If the scope of the visit is modified based on hazards found in plain sight and/or the employer requests program assistance in areas that were not addressed when the visit was requested, then the consultant must re-evaluate the use of the Worksheet based on the criteria outlined in Section II of this Chapter.

d. **Employer's Obligations and Rights.** The consultant must discuss the obligations and rights as outlined in Chapter 4, Section II (D), which the employer must agree to in order for the consultation visit to continue.

e. **Evaluating Employer's Injury and Illness Rates.** If the employer did not provide the Log of Work-Related Injuries and Illnesses (OSHA Form 300) information before the visit, the consultant must review the employer's current and previous three (3) years’ Form 300 logs to determine the employer's rates. The consultant must calculate the rates, compare them to the national average for the employer's NAICS code, and inform the employer of the results. Employers that fall below the threshold for keeping records shall also have their rates assessed. In these cases, the consultant must make an effort to estimate the previous years' injury and illness rates and record the data into the OIS. Consultants shall encourage employers that are not required to maintain Form 300 logs to use this form as a tool for evaluating their safety and health system.

**F. Walkthrough of the Workplace**

This phase of the on-site process allows the consultant to become familiar with the worksite. If a hazard is identified but employee exposure is not observed, the consultant must document the hazard and require corrective action by the employer. During the walkthrough of the workplace, the consultant must conduct the following activities:

a. **Hazard Survey.** The consultant must inform the employer and the employee representative of all identified hazards at the time they are recorded. If an imminent danger exists, exposed employees must be informed, and the employer must remove them from exposure immediately. If an employer fails to immediately remove an employee from an imminent danger area, the consultant must terminate the visit and immediately refer the employer to enforcement authorities.
b. **Documentation.** The consultant must record all facts pertinent to the identified hazard(s) in field notes to be included in the case file. All field notes, observations, analyses, written documentation, videotapes, photographs, sketches, and hazard descriptions are part of the survey record and must be retained in the case file. The consultant must document as much information as necessary to establish the specific characteristics of each identified hazard. If the employer or the employer’s representative corrects the hazard "on the spot," the consultant must document the hazard and the correction method in the field notes.

c. **Recommendation of Interim Protection.** The consultant must indicate in the case file notes whether interim protection is required, the nature of the recommended interim protection, the date the interim protection must be in place and the dates that interim protections are expected to be replaced with the final agreed upon protections. Extensions to the interim protection periods must also be documented in the case file.

d. **Referrals.** For full-service both visits, if a consultant identifies a hazard not within their specific expertise, they must notify/refer the hazard to another consultant with that specific expertise. Additionally, if a visit is limited scope, the consultant must document all hazards, even if outside the visit scope, when the hazard is found in plain sight during the walkthrough.

G. **Closing Conference**

Closing conferences must be conducted on-site during the initial visit. Consultants may not delay conducting the closing conference to give them more time to complete the Written Report or wait for laboratory results. Note that the Written Report must be sent to the employer no later than 20 calendar days after the closing conference is held. In the closing conference, the consultant must conduct the following activities:

a. **Hazard(s) Identified and Date of Correction.** Discuss the classification of identified hazards, possible methods of correction, and mutually agree upon correction dates for all serious hazards. The correction due date(s) for serious hazards must be for the shortest feasible time frame. Hazard correction time frame begins immediately after the closing conference, not on the written report receipt date. The employer must start correcting hazards immediately and must not wait for the written report before taking corrective action. Other-than-serious hazards and violations of OSHA regulatory standards must also be brought to the attention of the employer. In addition, the consultant must inform the employer that other-than-serious hazards and regulatory standards violations must be corrected in the shortest time frame. Failure to correct these hazards and regulatory violations can be cited by OSHA enforcement. Refer to AKOSH Field Operations Manual (FOM).
b. **Comments on the Safety and Health Management System.** Describe the adequacies and deficiencies of the employer's safety and health management system and make recommendations to resolve any deficiencies identified.

c. **Additional On-site Visits.** Discuss with the employer the extent to which additional on-site visits may be needed for training, verification of hazard correction, and/or employee exposure monitoring. It is important for Consultation Projects to work with employers to address emerging hazards and areas of emphasis. This work may include the Projects following up with additional verification visits.

d. **Training and/or Follow-up Visits.** Develop a schedule with the employer for training and/or follow-up visits, as needed.

H. **Transmitting the List of Hazards**

The consultant must forward a List of Hazards to the employer and the employee representative no later than 20 calendar days from the closing conference date. If there is a delay in producing the Written Report, which includes the List of Hazards, a separate List of Hazards report must be produced within a reasonable period of time (not greater than 20 calendar days) after the closing conference.

I. **Written Reports and Documenting Consultation Services**

The Written Report to the employer must be prepared at the conclusion of any initial visit and must include field sampling results (including a copy of laboratory results, if applicable) for any sampling performed. Visits other than initial visits do not require a written report, but these visits must be concluded with a letter to the employer summarizing the activity. The information contained in the consultation written report is confidential and shall only be disclosed to the employer for whom it was prepared, as provided for in 29 CFR 1908.7(a)(3). Any inappropriate disclosure would adversely affect the operation of the OSHA Consultation Program and is forbidden except as allowed or required by 29 CFR 1908, 29 CFR 1910.1020, or other applicable OSHA standards or regulations.

**Timing of the Written Report.** The Written Report must be sent to the employer as soon as possible but not longer than 20 calendar days after the closing conference. If laboratory results are not received by this date, the written report shall be sent to the employer without the results and include any hazards identified that are not dependent on laboratory results. As soon as the laboratory results are received, they must be sent to the employer as an addendum to the written report. Consultants may not delay conducting the closing conference in order to give themselves more time to complete the Written Report or to wait for laboratory results.
Responsibility for Preparing the Written Report. The consultant who conducted the initial visit is responsible for the preparation of the written report. If one safety and one health consultant conduct two visits, the consultant to whom the visit was initially assigned is responsible for preparing the written report and obtaining input from the other consultants. (See also Chapter 4 Section II (I) of this manual.)

Required Elements of the Written Report. Projects are encouraged to use the report template provided by OSHA. However, projects that desire to create and use their own template must include the following information:

Executive Summary. This section must include all of the following:

- A summary of the employer's request;
- The scope of the services provided;
- The name of the consultant(s) conducting the visit;
- Items of importance covered in the opening conference;
- A description of the workplace and the working conditions;
- A comparison of the site's DART and TRC rates to the national industry average; and
- Items of importance covered in the closing conference.

Employer's Obligations and Rights. The report must include the information outlined in "Communicating Employer Obligations and Rights," located in Chapter 4, Section II, of this manual.

Hazards Identified. This is an itemization of all the hazards identified during the visit, the classification of the hazard, a correction due date for each serious hazard, and recommended methods to eliminate or control the hazard. If a hazard is corrected on the spot, the report must describe the method used to correct the hazard.

If a Standard Element Paragraph (STEP) is used, it must be modified to meet the specific conditions of the employer's worksite. Other-than-serious hazards and violations of OSHA regulatory standards must be brought to the attention of the employer. The consultant must inform the employer that these hazards and standards violations must also be corrected in the shortest feasible time frame. Failure to correct these hazards and regulatory standards can be cited by OSHA.

Evaluation of Safety and Health Management System. In this section of the report, consultation projects are to refer the reader to the safety and health program assessment worksheet in the Appendix of the written report. Consultation Projects may also utilize this section of the written report to summarize or provide additional information of the employer’s overall safety and health management system. If Projects do not customize this section, the following language shall be utilized. Safety and Health Management Systems (SHMS) are universal interventions that can substantially reduce the number and severity of workplace injuries and alleviate the
associated financial burdens on U.S. workplaces. Most successful programs are based on a common set of key elements. These include: management leadership, worker participation, hazard identification, hazard prevention and control, education and training, and program evaluation and improvement. Because of the importance of these programs, OSHA requires consultation projects to assess some SHMS elements during General Industry consultation visits. A complete program assessment can also be requested when an employer desires. OSHA encourages all employers to work toward implementing an effective SHMS to protect their workers and recognizes employers who do so through SHARP. For more information on the specific items that consultants assessed in your workplace, please review Appendix B.

Training Provided. A summary of both the formal and informal training which was conducted during the visit must be included in the report.

Sampling Data. If sampling has been conducted, the appropriate template shall be selected, including tables, forms, and charts, to display the results.

Other Findings. In this section, the consultant must list and discuss any other safety and health issues that are subject to the General Duty Clause and which, if found by enforcement, would be cited.

Safety and Health Program Assessment Worksheet (Worksheet). If the use of a Worksheet was required, it must be included as an appendix to the report. See Chapter 4 and Appendix H.

Cover Letter. Every Written Report must be sent with a cover letter. Templates provided by OSHA include two types of letters: one for when no hazards were observed, and another for when serious hazards were observed. When serious hazards are observed, the Assistant Chief of Consultation and Training must ensure that the cover letter transmitting the Written Report includes the following paragraph:

Accompanying this report is a List of Hazards which includes a description of the serious hazard(s) and the date by which we mutually determined that the hazard(s) would be corrected. This List of Hazards must be posted, unedited, in a prominent location where it is readily observable by all employees for three (3) working days or until the hazard(s) have been corrected, whichever is later. If we approve an extension to the correction due dates, a new List of Hazards will be sent to you showing the revised date(s).

List of Hazards. The List of Hazards must accompany the consultant's Written Report. The consultant must also send the employee representative a copy of the List of Hazards and any modifications and/or extensions to correction due dates, using the contact information obtained during the “Opening Conference.” The first page of the List of Hazards shall be printed on the Consultation Project's letterhead.
**Case File.** Case Files must be maintained in a defined, uniform format, whether in a format acceptable to the Region, or in accordance to the requirements in Appendix E. A project may organize files in a different manner than Appendix H, as long as all contents listed in Appendix E are included in a consistent and organized fashion.

**III. Safety and Health Achievement Recognition Program (SHARP) and pre-SHARP.**

The Safety and Health Achievement Recognition Program (SHARP) recognizes employers’ efforts to create a safe workplace and exempts them from inspection. SHARP for private employers is funded under Section 21(d) of the Act. SHARP for public employers is funded under mixture of state and 23 (g) funds.

SHARP is designed to provide incentives and support those employers that implement and continuously improve effective safety and health management system(s) at their worksite. SHARP participants are exempted from OSHA programmed inspections.

**Training and Assistance Visits.**

Training and Assistance Visits are primarily conducted to provide an employer with safety and health program assistance, training and education, and/or correction assistance. Training and Assistance Visits may be provided only after a hazard survey, such as initial consultation visit, an OSHA inspection, or a private consultant survey has been conducted within the past 12 months. The hazard survey must provide adequate foundation for conducting services through a training and assistance visit.

**Program Assistance.** Employers may request additional assistance with development of a Safety and Health Management Systems (SHMS) after the initial visit. This assistance will be documented through use of Safety and Health Assessment Form in OIS.

**Formal Training.** Consultants provide formal training in a classroom-like setting, following a syllabus a copy of which must be maintained in the case file. Additionally, a complete roster of all attendees must also be maintained in the case file. Formal training may take place on-site or off-site.

**On-site Training.** Training visits may only be conducted on-site when specifically requested by the employer and only in conjunction with or within 12 months of a hazard survey. If the training visit is subsequent to a hazard survey not conducted by the Consultation Project, the consultant must have access to the survey report and be able to confirm that serious hazards were or are being corrected. A copy of the hazard survey report should be included in the case file. The consultant must also conduct a brief walkthrough of the workplace to verify hazard corrections and review current conditions to determine that no new hazardous conditions exist.

**Off-site Training.** Off-site training is technical in nature and takes place at a location other than the employer’s place of business. It may be coded as either a visit or a Compliance Assistance Activity, based on the following criteria:
If the off-site training is provided for a single employer and is directly connected to one or more hazards found during an initial or follow-up visit, it should be recorded in the OIS as a Visit Activity.

If the off-site technical training is not directly related to an on-site visit, it should be recorded in OIS as a Compliance Assistance Activity. A hazard survey is not a prerequisite for providing this service.

If an employer requests Formal Training for the same day as an initial visit, the Formal Training may be counted as a separate Training and Assistance Visit in limited situations where it is cost effective to do so. If the Project would like to count the Formal Training as a separate visit, a closing conference must be held prior to the training. Additionally, the Project must send a separate letter to the employer describing the training, and retain all required documentation (preapproved syllabus and roster of attendees) in the case file.

Informal Training. Consultants may provide informal safety and health training to employers and employees as requested by the employer (after a hazard survey has been conducted). Informal training does not involve any planned preparation or a syllabus. Training should be tailored to specific safety and health hazards observed at the workplace. Informal training should typically be provided and documented during the initial visit, however, informal training may be provided during a training and assistance visit when the employer’s request also includes Program Assistance, Formal Training, or Correction Assistance.

Training Documentation.

During the Initial Visit. Training services provided during the initial visit must be included in the written report to the employer.

Following the Written Report. Training services provided after the written report has been sent to the employer must be followed up with a letter to the employer describing the training and a copy of the letter must be placed in the case file.

Training Log. The CPM must maintain a log of the formal training that has been scheduled, conducted, and/or cancelled for review by the Regional Office. The log should include formal training conducted individually by the Project and/or in coordination with other organizations.

Trainers’ Qualifications.

Informal Training. To be qualified to provide informal training the consultant must have:

- Completed the Introduction to On-site Consultation Course (OSHA course 1500);
- Have subject-matter knowledge in the area of the training being offered and demonstrated the ability to conduct training.
Consultants should demonstrate their ability to conduct informal training before being authorized to conduct it on their own. That demonstration may involve a mentoring process, where the consultant observes an experienced consultant conduct informal training and demonstrates to the satisfaction of the Consultation Program Manager an understanding of the principles of the informal training process. The Consultation Program Manager should maintain records which will allow the Region to track who is authorized to conduct training during the biannual on-site monitoring.

**Formal Training.** To be qualified to deliver formal training, the consultant must meet all of the requirements for providing informal training in addition to all of the following:

- Be selected by the Assistant Chief of Consultation and Training to deliver formal training; and
- A minimum of 2 years previous experience conducting formal training for adults, or be trained as a trainer by an accredited institution.

**Trainer’s Qualifications Waivers.**

Based on the consultant’s prior work history and skill set, the Regional Administrator has the discretion to waive the requirements listed above in paragraphs – Trainer’s Qualifications: Informal Training and/or Trainer’s Qualifications: Formal Training. To obtain such a waiver, the Consultation Program Manager must submit a written request to the Regional Administrator.

**Resource-Related Considerations.**

**Economies of Scale.** Off-site training leverages resources when one consultant can address a common training need for multiple employers.

**Training Coordination.** To avoid duplication of effort and to ensure the most efficient use of limited consultation resources, requests for off-site training approved by the Assistant Chief of Consultation and Training should be coordinated with other providers of similar or related training. In particular, the Assistant Chief of Consultation and Training should coordinate with Susan Harwood grantees, the OSHA Training Institute, OSHA Strategic Partnership Participants, Alliance members, and Small Business Development Centers. The Assistant Chief of Consultation and Training should also coordinate with OSHA’s Compliance Assistance Specialists and other regional or State personnel to assure that joint training sessions are conducted where appropriate. In addition, the CPM should maintain a log of the training that has been scheduled for review by the Regional Office.

**Over Reliance on Consultants by Employers.** Consultants should always encourage employers to develop their own training programs in order to reduce reliance on consultants and to ensure that the employer establishes a training capability for any new employees and/or annual employee refresher training.
IV.  **Voluntary Protection Program (VPP).**

A.  **AKOSH VPP Manager Responsibilities.**

The Assistant Chief of Consultation or designated VPP coordinator must keep the Chief of OSH and the Assistant Chief of Enforcement informed regarding VPP applicants and the status of participants in the VPP. This will prevent unnecessary scheduling of programmed inspections at VPP sites and ensure efficient use of resources. Information shall include the following determinations:

1. That the site can be removed from the programmed inspection list. Such removal may occur no more than 75 days prior to the on-site evaluation;

2. Of the site’s approval for the VPP program;

3. Of the site’s withdrawal or termination from the VPP program; and

4. If the VPP coordinator is the first person notified by the site of an event requiring enforcement, the VPP coordinator must instruct the site to contact the AKOSH Enforcement office.

B.  **Programmed Inspections and VPP Participation.**

1. **Inspection Deferral.** Approved sites must be removed from any programmed inspection lists for the duration of participation, unless a site chooses otherwise. The applicant’s worksite will be deferred starting no more than 75 calendar days prior to the commencement of its scheduled pre-approval on-site review.

2. **Inspection Exemption.** The exemption from programmed inspections for approved VPP sites will continue for as long as they continue to meet VPP requirements. Sites that have withdrawn or have been terminated from VPP will be returned to the programmed inspection list, if applicable, at the time of the next inspection cycle.

C.  **Unprogrammed Enforcement Activities at VPP Sites.**

When AKOSH receives a complaint, or a referral other than from the AKOSH VPP on-site team, or is notified of a fatality, catastrophe, or other event requiring an enforcement inspection at a VPP site, the Assistant Chief of Enforcement must initiate the inspection following normal AKOSH enforcement procedures.

1. The Assistant Chief of Enforcement must immediately notify the Assistant Chief of Consultation or VPP coordinator of any fatalities, catastrophes or other accidents or incidents occurring at a VPP worksite that require an enforcement inspection; as well as of a referral or complaint that concerns a VPP worksite, including complaint inquiries that would receive a letter response. If the VPP is a federal site, the OSHA Alaska Area Office shall be notified.
2. The inspection will be limited to the specific issue of the unprogrammed activity. If citations are issued as a result of the inspection, a copy of the citation will be sent to the designated VPP Manager (Assistant Chief of Consultation). See AKOSH PD 08-12 & 12-01, (CSP 03-01-003, Voluntary Protection Programs (VPP): Policies and Procedures Manual, dated April 18, 2008). The Voluntary Protection Program (VPP) is designed to recognize and promote effective safety and health management. A hallmark of VPP is the principle that management, labor, and AKOSH can work together in pursuit of a safe and healthy workplace. A VPP participant is an employer that has successfully designed and implemented a health and safety management system at its worksite.

**NOTE:** See AKOSH PD 08-12 & 12-01 (CSP 03-01-003, Voluntary Protection Programs (VPP): Policies and Procedures Manual, dated April 18, 2008), for additional information.

V. **Strategic Partnerships.**

Organizations can enter into Strategic Partnerships with AKOSH to address specific safety and health issues. In these partnerships, AKOSH enters into extended, voluntary, cooperative relationships with groups of employers, employees, and employee representatives (sometimes including other stakeholders, and sometimes involving only one employer) in order to encourage, assist, and recognize efforts to eliminate serious hazards and to achieve a high level of employee safety and health.

**NOTE:** See Alaska Program Directives for Strategic Partnerships with AKOSH [http://labor.alaska.gov/lss/program_directives/PD_14-01.pdf](http://labor.alaska.gov/lss/program_directives/PD_14-01.pdf)
Appendix A – Request for Consultation and Training Services

This is a sample of the request form. For a fillable PDF form, go to the AKOSH website:

http://labor.alaska.gov/lss/forms/consultation_training_form.pdf
Program Formal Assistance Introduction

There are three basic methods for assessing Safety and Health Program effectiveness. This guide will explain each of them. It also will provide more detailed information on how to use these tools to evaluate each element and subsidiary component of a Safety and Health Program.

1. The three basic methods for assessing Safety and Health Program effectiveness:
   Checking documentation of activity;

2. Interviewing employees and supervisors at all levels for knowledge, awareness and perceptions; and

3. Reviewing site conditions and, where hazards are found, finding the weaknesses in management systems that allowed the hazards to occur or to be "uncontrolled."

Some elements of the Safety and Health Program are best assessed using one of these methods. Others lend themselves to assessment by two or all three methods.

Documentation

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

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

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

Employee/Supervisor Interviews

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

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

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

Site Conditions and Root Causes of Hazards

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

Looking at conditions and practices is a well-established technique for assessing the effectiveness of Safety and Health Programs. For example, let's say that in areas where personal protective equipment (PPE) is required, you see large and understandable signs communicating this requirement and all employees -- with no exceptions -- wearing equipment properly. You have obtained valuable visual evidence that the PPE program is working.

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

For example, let's say that during a review of conditions, you find a machine being operated without a guard on a pinch point. You shall not limit your response to ensuring that a guard is installed. Asking a few questions can reveal a lot about the safety program's management systems. Why was the guard missing? If the operator says he did not know a guard was supposed to be on the machine, follow up with questions about the existence of safe work procedures and/or training.

If he says that the guard slows him down, and that the Supervisor knows he takes it off, ask questions about the enforcement of rules, accountability, and the clarity of the worksite objective of putting safety and health first.
Oftentimes, a different lead question is appropriate. Has a comprehensive survey of the worksite been done by someone with enough expertise to recognize all potential and existing hazards?

Analyzing the root causes of hazards, while very helpful during a formal assessment is a technique that also lends itself to everyday use. Attempt to analyze causes whenever hazards are observed during a consultation.

The remainder of this appendix will identify the attributes of excellence found in each of the seven key elements of an effective Safety and Health Program.

The revision will be partially dependent upon input and suggestions from consultation staff.

**Attributes of Excellence of a Safety and Health Program**

I. **Hazard Anticipation and Detection**

1. A comprehensive baseline hazard survey has been conducted within the last 5 years.
   a. The comprehensive baseline hazard survey includes safety, health, and ergonomics.
   b. The surveys are conducted frequently enough to timely and effectively address hazards.
   c. The surveys are performed by competent and qualified individuals that can effectively and thoroughly understand the hazards of the industry.
   d. The survey results in an updated hazard list or survey report (action plan).
   e. The survey results in effective controls for hazards found.
   f. The survey drives immediate corrective action on items found.
   g. The survey tries to include outside personnel to help prevent tunnel vision and maintain objectiveness.
   h. The survey was completed by a certified specialist.
   i. The survey identified all serious hazards associated with the facility and resulted in appropriate hazard control programs.

2. Effective safety and health self-inspections are performed regularly.
   a. Inspections of the workplace are conducted in all work areas.
   b. Inspections identify new, reoccurring, or previously missed safety, health, and/or ergonomic hazards and/or failures in hazard control systems.
   c. Inspections are conducted at least quarterly at fixed worksites, weekly at rapidly changing sites, and as frequently as daily where necessary.
   d. Inspectors have adequate training in workplace safety, health, and ergonomics.
   e. Logs, checklist, or other type of written reports are used to document formal inspections.
f. All hazard findings are addressed as soon as practically possible.
g. Hazards identified do not appear on future inspections.
h. The responsibility for inspections rests with more than one person.
i. The responsibility for inspections is scattered throughout the organization.
j. Inspections are conducted by teams.
k. Appropriate time is provided to conduct the inspections.
l. Tools (such as digital cameras, palm pilots, and computers) are used in self-inspection process.

3. **Effective surveillance of established hazard controls is conducted.**
   a. Established hazard controls for safety, health, and ergonomics are in place and operational.
b. The hazard controls are prioritized with the emphasis on engineering controls, safe work practices, and administrative controls before PPE.
c. Employees understand the hazard control associated with their work areas.
d. Monitoring evaluation of hazard controls is ongoing and known to and by the work force.
e. Supervisors receive training in surveillance of established hazard controls.
f. At least some employees receive training in surveillance of established hazard controls.
g. Surveillance activity is required supervisory duty and is tracked in some fashion.
h. Some type of trend analysis of tracked surveillance activity is done.
i. Trend analysis of tracked surveillance activity results in improved performance of established hazard controls.

4. **An effective hazard reporting system exists.**
   a. A system for employee reporting of safety, health, and ergonomic hazards is in place and is known to all employees.
b. The system allows for the reporting of physical and behavioral hazards.
c. Corrective action is taken promptly on all confirmed hazards.
d. While waiting for final correction, the employer finds ways to protect those affected.
e. All personnel are aware that hazards can develop within existing jobs, processes and/or phases of activity.
f. The system provides for self-correction of hazards when possible.
g. Employees are provided positive reinforcement or incentive for using the system.
h. There is an informal method of hazard reporting for employees to report hazards to their supervisors.
i. There is a formal method available to employees to report hazards on a form to the safety department.
j. Reported hazards are collected and analyzed and used to set priorities and action planning on addressing hazards in the workplace.
k. There is a mechanism for formal and informal hazard reporting to promptly communicate (to the person reporting the hazard) the status and intended action regarding the reported hazard.
l. All hazards reported are communicated to the work force in some manner.
m. Few hazards are noted in the workplace.

5. **Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs.**
   a. Change analysis includes a review of safety, health, and ergonomic hazards.
   b. Changes in space, processes, materials, or equipment at the facility are planned.
   c. Affected personnel are made aware of planned changes prior to implementation.
   d. A comprehensive hazard review process exists and is used for all changes.
   e. The hazard review (analysis) process encourages recommendations for improvement, which are implemented prior to start-up.
   f. The analysis process involves competent, qualified specialists appropriate to the process being evaluated.
   g. There is a formal, written process for change analysis.
   h. Affected employees are involved in the change analysis.
   i. Change analysis procedures include revisions of Job Hazard Analysis (JHA), Standard Operation Procedures, lockout methods, PPE, and other program elements affected by the change.

6. **Accidents are investigated for root cause.**
   a. Workplace policy requires a thorough investigation of all accidents and incidents.
   b. All accidents and incidents are investigated as required by policy.
   c. All investigations are conducted by personnel trained in accident/incident investigation techniques.
   d. All investigations include input from all affected parties and witnesses, where possible.
   e. All investigations determine "root causes" and underlying factors.
   f. Recommendations designed to adequately address root causes, are made as a result of all investigations and result in prompt corrective action with the intent to prevent reoccurrence.
   g. Completed investigative reports are routed to appropriate levels of management and knowledgeable staff for review.
   h. Investigations are done by management and employees.
   i. Results of investigations are shared with the work force.
   j. Top management reviews all accidents and incidents to review if root cause was identified adequately.
   k. Standard forms are used to document all accidents and investigations.
   l. Top management participates in investigations.
7. **Safety Data Sheets (SDS) are used to reveal potential hazards associated with chemical products in the worksite.**
   a. Employees understand the hazards introduced to their jobs by chemical use.
   b. Hazards identified in SDSs are effectively controlled.
   c. Employees have seen and understand the SDSs applicable to the chemicals they use.
   d. Applicable SDS information is incorporated into written job hazard analysis forms.
   e. SDSs are periodically reviewed in order to determine if a safer product could be used, or if current JHAs address the hazard adequately.
   f. Information on the SDS is used by personnel performing change analysis to identify potential hazards related to new chemicals being introduced into the workplace.
   g. The Safety Committee reviews SDSs to address the prevention, elimination, and/or control of hazards posed by chemical products.

8. **Effective job hazard analysis is performed.**
   a. Job hazard analysis addresses safety, health, and ergonomic hazards.
   b. There are hazard analysis systems designed to address routine jobs, processes, or phase hazards in place at the facility.
   c. Hazard analysis systems identify or prompt corrective or preventive action to reduce or eliminate worksite hazards.
   d. All tasks, job processes, or phases of activity are analyzed.
   e. All job processes, or phases of activity are analyzed whenever there is a change, when a loss incident occurs, or on a schedule of no more than 3 years.
   f. Upon implementation of the corrective or preventive actions identified by the hazard analysis process, the written hazard analysis is revised to reflect those actions.
   g. Employees are involved in the hazard analysis process.
   h. Accident and incident investigation leads to job hazard analysis when appropriate.
   i. There is a standard and uniform format used to document job hazard analysis.
   j. JHAs are posted at workstations.
   k. Assessment tools and interviews are utilized in the hazard analysis process.

9. **Expert hazard analysis is performed.**
   a. The comprehensive hazard review process involves competent, qualified safety, health and/or ergonomic specialists appropriate to the workplace.
   b. All hazard analyses identify corrective or preventive action to be taken to reduce or eliminate the risk of injury or loss, where applicable.
   c. All corrective or preventive actions identified by the hazard analysis process have been implemented or addressed.
d. Hazard analysis surveys are routinely updated, using personnel competent in the fields of safety, industrial hygiene, ergonomics, and risk management.
e. Outside professional resources are taken advantage of (associations, insurance loss control, private and public consultants, etc.).
f. Findings of expert hazard analysis are shared with the work force.

10. **Incidents are investigated for root causes.**
   a. Workplace policy requires the reporting of all actual and "near miss" accidents.
   b. All investigations determine "root causes."
   c. All accidents and incidents are investigated as required by policy.
   d. Results of accident investigations are corrected immediately or scheduled for correction in the organization’s action plan.
   e. Accident investigators have received appropriate training.
   f. All accidents and incidents are reported as required by policy.
   g. Workplace policy requires a thorough investigation of all accidents and incidents.
   h. Personnel understand the definition of an incident in the workplace.
   i. Personnel in the workplace understand the importance of reporting incidences and do so.
   j. There is a formal incident reporting form.
   l. Hazard Prevention and Control.

11. **Feasible engineering controls are in place.**
   a. Safety, health and ergonomic hazard controls are in place at the facility.
   b. Hazard controls are selected in appropriate priority order, giving preference to engineering controls, safe work procedures, administrative controls, and personal protective equipment (in that order).
   c. Once identified, hazards are promptly eliminated or controlled.
   d. Management, supervision, and the safety committee understand and can explain the hazard controls in the correct priority.
   e. Employees understand and can explain the hazard controls in the correct priority.

12. **Effective safety and health rules and work practices are in place.**
   a. The rules are clearly written.
   b. The rules relate to the safety and health policy.
   c. The rules and work practices address potential safety, health and ergonomic hazards.
   d. Observations demonstrate that all employees are following safe work rules.
   e. Standards cover all work and workplaces at the facility and are readily available to all members of the work force.
   f. There are effective means of communicating rules to the work force, such as training classes, employee safety handouts, rules posted in the workplace, and one-on-one discussions between employees and supervisors.
g. Employees support the rules and monitor one another to ensure compliance.
h. Employees have input into the development of workplace safety rules.

13. Applicable OSHA-mandated programs are effectively in place.
   a. Required programs are fully in place and operational.
   b. Employees and management understand and support the need for mandated programs.
   c. Required programs are evaluated and updated at least annually.
   d. Employees are involved in the review.

14. Personal Protective Equipment (PPE) is effectively used.
   a. PPE assessment has been completed and documented.
   b. Employees understand the need for, use of, and care of PPE associated with their jobs.
   c. PPE onsite is appropriate to the hazards.
   d. Employees use the PPE that is provided.
   e. PPE is properly donned and kept appropriately clean.
   f. There is documented PPE training for all affected employees.
   g. The need for specific PPE in the workplace is adequately communicated by the means of training, postings, signs, JHAs, etc.
   h. The PPE is properly sized for each employee.

15. Housekeeping is properly maintained.
   a. Aisles and exit ways are clear and unobstructed.
   b. Housekeeping is a regular task rather than an afterthought.
   c. Routine processes, which generate waste, have housekeeping procedures built-in to them.
   d. Storage areas are kept in a clear and orderly condition.
   e. There is a written policy regarding housekeeping in the workplace and all personnel have been instructed in the policy and understand it.
   f. Supervisors enforce the housekeeping policy.
   g. There are specific and routine housekeeping inspections.
   h. Appropriate accountability measures are in place to address poor housekeeping.

16. The organization is properly prepared for emergency situations.
   a. All potential emergency situations that may impact the facility are identified.
   b. A facility plan to deal with all potential emergencies has been prepared in writing.
   c. The plan incorporates all elements required by law, regulation, and local code.
   d. The plan is written to compliment and support the emergency response plans of the community and adjacent facilities.
   e. The plan is current.
   f. The plan is tested regularly with drills and exercises.
g. Community emergency responders are involved, where appropriate, in the facility drills and exercises.

h. The plan is effective at limiting the impact of the emergency on the facility and the workforce.

i. Emergency communication systems are installed, operational, and redundant.

j. The communication systems are tested at regular intervals (at least monthly).

k. Emergency directions are available, correct, and accurate in all spaces, corridors, and points of potential confusion.

17. The organization has an effective plan for providing competent emergency medical care to employees and others present at the site.

a. The facility has a plan for providing emergency medical care to employees and others present on the site.

b. Competent emergency medical care is available on all shifts.

c. The emergency medical plan is followed when medical emergencies arise.

d. Emergency medical care is provided in accordance with standardized protocols.

e. Onsite emergency medical personnel are certified to at least the basic first aid and CPR levels.

f. Offsite providers of emergency medical care, when utilized, are medical doctors, registered nurses, paramedics, emergency medical technicians, or certified first responders.

g. There is an onsite nurse.

h. There are first aid personnel who are required to provide first aid as part of their job duties.

i. First aid training is offered to all personnel.

j. There are appropriate plans to direct outside emergency medical personnel into the workplace to the correct location.

k. First aid supplies are appropriate for the workplace, and there is a procedure to ensure they remain stocked.

l. All personnel are aware of the emergency medical plan and how to implement it, given their individual responsibilities.

m. There is a routine training class to review the emergency medical plan with personnel.

n. Outside contractors, vendors, and others are provided adequate instruction to ensure their emergency medical care while they are in the workplace.

18. Effective preventative maintenance (PM) is performed.

a. A preventative maintenance program is in place at the facility.

b. Maintenance recommendations from manufacturers or builders are being followed for all applicable facilities, equipment, machinery, tools, and/or materials.

c. The preventative maintenance system ensures that maintenance for all operations in all areas is actually conducted according to schedule.
d. Operators are trained to recognize maintenance needs and perform or order maintenance on schedule.

e. Predictive maintenance procedures are incorporated into the system.

f. The preventative maintenance procedures go beyond operation-related equipment to cover the maintenance of engineered hazard controls and emergency equipment as well.

g. There is a scheduled shutdown to address preventative maintenance issues.

h. Operators give positive remarks about the PM of the machines and equipment they operate.

i. There is a PM policy, which not only addresses the issue of production, but also address safety.

19. An effective procedure for tracking hazard correction is in place.

a. The tracking procedure flags and tracks safety, health and ergonomic hazards until they are adequately addressed.

b. There is a timetable for implementation of corrective action.

c. The system covers items identified from various sources, including self-inspections, employee recommendations and reports, Safety Committee, and maintenance logs.

d. Employees are aware of and comfortable using the system.

e. The hazard tracking system prompts feedback after the hazard is addressed.

f. The tracking hazard system uses a computerized spreadsheet format to identify hazards, assign responsibility for completing, completion dates, and follow-up.

g. Employees are allowed to initiate work orders to be placed on the hazard correction form involving safety and health.

h. A review of the tracking hazard form shows that hazards are being promptly corrected.

II. Planning and Evaluation

20. Workplace injury/illness data effectively analyzed.

a. A system exists that tracks safety, health, and ergonomic related trends at the facility.

b. The system addresses trailing indicators, including accidents, occupational injuries and illnesses, hazards identified, and complaints from employees and others.

c. The system addresses leading indicators of safety and health effectiveness, including employee attitudes and employee behaviors.

d. Affected personnel understand the need to systematically, accurately and consistently provide updated information to the system for tracking.

e. Trend data is consistently provided to all facility personnel.

f. All personnel are fully aware of safety, health, and ergonomic trends, causes, and means of prevention.
g. Trend data is utilized to drive improvement and prevention activities.

h. The Safety Committee and other employees participate in analyzing workplace injury/illness data.

i. Evaluation of the OSHA 300 Log and workers compensation data for soft tissue illnesses or injuries is completed at least annually.

21. **Hazard incidence data is effectively analyzed.**
   a. All written reports of inspections are retained for a period sufficient to show a clear pattern of inspections.
   b. Statistical summaries of all routine inspections are prepared, charted and distributed to all personnel so as to show status and progress at hazard elimination.
   c. The Safety Committee analyzes hazards to identify deficiencies in the safety and health management system.
   d. A method exists for systematic tracking of recommendations, progress reports, resolutions, and outcomes.
   e. The system provides for data collection and display as a means to measure the success of the system in resolving identified hazards.

22. **A safety and health goal and supporting objectives exist.**
   a. Safety, health and ergonomic goals and objectives exist in writing.
   b. The goals relate directly to the safety and health policy or vision.
   c. Objectives exist which are designed to achieve the goals.
   d. The goals and objectives are able to be evaluated and revised as needed.
   e. A reliable measurement system exists to indicate progress on objectives toward the goal.
   f. The measurement system is consistently used to manage work on objectives.
   g. The objectives can be easily explained by others within the workplace.
   h. Measures used to track objective progress are known to the work force.
   i. Goals are specific, measurable, achievable, result-oriented, and clear time frames.
   j. Management visibly communicates their support of the goals to the work force.
   k. There are concrete examples that the goals and objectives are being met.
   l. Employees had input into the development of goals and objectives.
   m. Goals and objectives are developed based on audits and analysis of the effectiveness of the Safety and Health Program, along with other safety and health related data.

23. **An action plan designed to accomplish the organization's safety and health objectives is in place.**
   a. A plan is in place to implement the objectives of the Safety and Health Program.
   b. The plan objectives are designed to achieve the stated goals.
c. The objectives relate to safety, health and ergonomic deficiencies identified in periodic assessments or comprehensive review.

d. Objectives in the action plan are clearly assigned to responsible individuals.

e. The action plan includes a measurement system to track progress on each objective.

f. Actions planned to accomplish objectives are specific and short-termed.

g. Employees are involved in the development of and implementation of the action plan.

h. Top management visibly supports the completion of the action plan.

i. Top management is involved in the development of and completion of the action plan.

j. The organization communicates the progress of the action plan to the work force and “celebrates” successes with the work force.

24. A review of in-place OSHA-mandated programs is conducted at least annually.

a. The review examines written materials, the status of goals and objectives, records of incidents, records of training and inspections, employee and management opinion, observable behavior and physical conditions.

b. The results of the review are documented and drive appropriate changes or adjustments in the program.

c. The review samples evidence over the entire facility or organization.

d. The results of the review are documented and drive appropriate changes or adjustments in the programs.

e. Employees are involved in the review.

f. The employer has a structured and scheduled system for conducting the review.

g. Findings are communicated to the work force.

25. A review of the overall safety and health management system is conducted at least annually.

a. A review of the management system includes safety, health, and ergonomics.

b. Reviews are used to make positive changes in policy, procedures and programs.

c. The review includes all facets of the facility.

d. The Safety and Health Program is reviewed at least annually.

e. The review examines written materials, the status of goals and objectives, records of incidents, records of training and inspections, employee and management opinion, observable behavior and physical conditions.

f. The review process drives correction of identified deficiencies.

g. Evidence exists that demonstrates that program components actually result in the reduction or elimination of accidents.

h. Positive findings are communicated and celebrated with the work force.

i. Top management is directly involved with the audit.

j. Employee representatives are involved in the audit.
III. Administration and Supervision

26. Safety and Health Program tasks are each specifically assigned to a person or position for performance or coordination.
   a. An individual or group is assigned responsibility for compiling and analyzing records for safety, health and ergonomic trends.
   b. All elements of the company's Safety and Health Program are specifically assigned to a job or position for coordination.
   c. Individuals within the company can describe the specific safety, health and ergonomic duties assigned to them.
   d. Assigned responsibility is documented.

27. Each assignment of safety and health responsibility is clearly communicated.
   a. The objectives are clearly assigned to responsible individual(s).
   b. Clear roles and responsibility are established.
   c. Assignments are in writing.
   d. Each assignment covers broad performance expectations.
   e. Personnel understand their responsibilities.

28. An accountability mechanism is included with each assignment of safety and health responsibility.
   a. Authority to meet assigned responsibilities exists for all personnel.
   b. Authority is granted in writing.
   c. Methods exist for monitoring performance of responsibilities.
   d. All personnel, including managers, are held accountable to follow the rules.
   e. Positive accountability systems are an integral part of the accountability mechanisms.
   f. Responsibilities are being met appropriately and on time.
   g. All personnel are held accountable for meeting their safety, health, and ergonomic responsibilities.
   h. Personnel meeting or exceeding responsibilities are appropriately reinforced for their behavior with positive consequences.
   i. Members of management at all levels consistently address the safety behavior of others by coaching and correcting poor behavior and positively reinforcing good behavior.

29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills and timely information to perform their duties.
   a. All personnel with program assignments are familiar with their responsibilities.
   b. Personnel with assigned safety, health, and ergonomic responsibilities have had appropriate training or mentoring to enable them to understand and meet those responsibilities.
   c. Personnel understand the programs or process to which they have been assigned.
d. Specific skills, knowledge, and information (for safety, health and ergonomic responsibilities) are documented to ensure that personnel assigned the responsibility have these needed qualities.

30. **Individuals with assigned safety and health responsibilities have the authority to perform their duties.**
   a. Personnel believe they actually have the authority granted to them.
   b. Personnel understand how to exercise the authority granted to them.
   c. Personnel do exercise the authority granted to them.
   d. Authority is exclusively within the control of the individual holding the responsibility.
   e. Authority is documented and there is a formal method to ensure personnel recognize their authority.

31. **Individuals with assigned safety and health responsibilities have the resources to perform their duties.**
   a. Adequate resources (personnel, methods, equipment, funds) to meet responsibilities are available to all affected personnel.
   b. Necessary resources are within the control of the individual holding the responsibility.
   c. Resources are being effectively applied by all personnel in order to meet responsibilities.

32. **Organizational policies promote the performance of safety and health responsibilities.**
   a. There is a policy that promotes safety, health and ergonomics.
   b. The policy is available in writing.
   c. The policy is clear and straightforward.
   d. The policy can be easily explained or paraphrased by others within the workforce.
   e. The safety and health policy fits within the context of other organizational values.
   f. The safety and health policy guides all employees in making a decision in favor of safety and health when apparent conflicts arise with other values and priorities.
   g. The policy provides for consequences that are Positive, Immediate, and Certain (PIC) from the perspective of the employee.
   h. The policy is appropriately communicated throughout the organization including new employee orientation.
   i. There is an incentive policy that promotes safety awareness and worker participation in safety related activities.

33. **Organizational policies result in the correction of non-performance of safety and health responsibilities.**
a. The policy statement goes beyond compliance to address the safety behavior of all members of the organization.
b. Failure to meet assigned responsibilities is addressed and results in appropriate coaching and/or negative consequences.
c. Accountability data is used to revise goals and objectives so as to facilitate continuous safety and health improvement.
d. Safe work rules are understood and followed as a result of training and accountability.
e. Methods exist for monitoring performance.

IV. Safety and Health Training

34. Employees receive appropriate safety and health training.
   a. An employee safety and health training program exists at the facility.
   b. The training covers all legally required subjects.
   c. The training covers safety, health and ergonomic hazards (awareness, location, identification, and protection or elimination).
   d. The training system ensures that the knowledge and skills taught are consistently and correctly applied by the employees.
   e. Employees are fully trained in the use of controls and methods to protect themselves in their work area.
   f. All members of the work force have been trained on the use of appropriate hazard analysis systems.
   g. All personnel involved in inspections have been trained in the inspection process and in hazard identification.
   h. Personnel can explain and demonstrate their role under the emergency medical plan.
   i. Personnel are trained in the use of emergency equipment available to them and can demonstrate the proper use of the equipment.
   j. Post-training knowledge and skills are tested or evaluated to ensure employee proficiency in the subject matter.
   k. The safety committee has effective safety, health and ergonomic training.
   l. Employees performing high-risk jobs or tasks, where the MSD hazard(s) are not eliminated and/or administrative or work-practice controls are used to reduce MSD incidence, are trained in ergonomic risk factors and descriptions of early signs and symptoms, with an emphasis on early reporting.

35. New employee orientation includes applicable safety and health information.
   a. Orientation includes information on safety, health and ergonomics.
   b. Orientation covers the facility safety system (policy, goals and objectives, operations, tools and techniques, responsibilities, and system measurement).
   c. Orientation covers the facility emergency procedures.
d. The orientation is provided to all new employees and all personnel working onsite, including vendors, temporary workers and contract workers prior to exposure to workplace hazards.

e. There is follow-up action to determine the retention of orientation training for new employees, and there are provisions for retraining when deficiencies are noted in the follow-up.

f. There is a formal and documented program, which is used for new employee orientation.

g. New employee orientation is reviewed in the annual Safety and Health Program audit.

36. **Supervisors receive appropriate safety and health training.**
   a. A supervisory training program addressing safety, health and ergonomics exists at the facility.
   b. The training is provided to all supervisors.
   c. Training is regularly evaluated for effectiveness and revised accordingly.
   d. Post-training knowledge and skills are tested or evaluated to ensure supervisory proficiency.
   e. Supervisors receive the same training as employees in their department.

37. **Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.**
   a. The training covers all subject matter delivered to employees.
   b. The training covers the facility safety system (policy, goals and objectives, operations, tools and techniques, responsibilities, and system measurement).
   c. The training covers supervisory safety, health and ergonomic responsibilities.
   d. The training system ensures that the knowledge and skills taught are consistently and are correctly applied by the supervisors.
   e. There is a formal and structured training program for supervisors.

38. **Safety and health training is provided to managers.**
   a. A management safety and health training program exists at the facility (where applicable).
   b. Safety, health and ergonomic training is provided to all managers.
   c. The training covers all subject matter delivered to employees and supervisors to the extent necessary for managers to evaluate employee and supervisory knowledge and skills and to reinforce or coach desired safety and health behaviors.
   d. Post-training knowledge and skills are tested or evaluated to ensure management proficiency in the subject matter.

39. **Relevant safety and health aspects are integrated into management training.**
   a. The training covers the facility safety system (management concepts and philosophies, policy, goals and objectives, operations, tools and techniques, and system measurement).
b. The training covers management safety, health and ergonomic responsibilities.
c. The training system ensures that the knowledge and skills taught are consistently and correctly applied by the managers.
d. The training system for all employees is regularly evaluated for effectiveness and is revised accordingly.
e. The training covers the reasons behind and the importance of a formal management of change (MOC) process to ensure that change is properly managed so as not to introduce unnecessary risk.
f. The training covers the importance of long-term safety continuity (safety succession planning) process to ensure the company maintains a continuous improvement-oriented safety culture while providing stability in health, safety, and ergonomic leadership roles.

V. Management Leadership

40. Top management policy establishes clear priority for safety and health.
   a. The safety and health policy is supported by senior management.
   b. The goals are supported by senior management and can be easily explained or paraphrased by others within the workplace.
   c. Members of the work force can give examples of management's positive leadership.
   d. Members of the work force credit management with establishing and maintaining positive safety values in the organization through their personal example and attention to the behavior of others.

41. Top management considers safety and health to be a line rather than a staff function.
   a. Production supervisors are held accountable for safety, health and ergonomics in their departments.
   b. All personnel are held accountable for their safety and health behaviors.
   c. Performance evaluations of individual supervisors take into account the safety and health performance of the employees under their control.
   d. Safety and health staff are utilized as a resource.
   e. Supervisors and employees take ownership for safety in their work area.
   f. Program elements are managed and administered by supervisors and employees.

42. Top management provides competent safety and health staff support to line managers and supervisors.
   a. Competent safety and health personnel are made available as a resource to assist line managers and supervisors.
   b. Clerical support is available as needed for safety and health related functions.
c. Safety, health and ergonomic issues are a priority topic during production meetings.
d. Outside resources such as trade associations, private and public consultants are obtained as necessary.
e. Safety and health staff are available as a resource.

43. Managers personally follow safety and health rules.
   a. Managers throughout the organization consistently follow the rules and behavioral expectations set for others in the workforce.
   b. Members of the work force perceive management to be consistently setting positive examples and can explain why they hold these positive perceptions.
   c. Managers give high priority to practicing safe and healthful behaviors and to personally leading by example.

44. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.
   a. Those with safety, health and ergonomic responsibilities are given the authority to meet those responsibilities.
   b. Delegated authority for safety and health is clearly assigned.

45. Managers allocate resources needed to properly support the organization’s safety and health system.
   a. Safety, health and ergonomic considerations are included in the budget.
   b. Top management ensures adequate resources are provided to meet safety, health and ergonomic responsibilities.
   c. Emergency equipment appropriate to the facility (including sprinkler systems, fire extinguishers, first aid kits, fire blankets, safety showers and eye washes, emergency respirators, protective clothing, spill control and clean-up material, chemical release computer modeling, etc.) is installed or available.
   d. Emergency equipment is distributed in sufficient quantity to cover anticipated hazards and risks, is operational, and is tested at regular intervals (at least monthly).
   e. In addition to budgeting for safety, management allocates personnel, personnel-effort, supplies, equipment, facilities, and services for safety.
   f. Management encourages mentoring and networking relationship with other SHARP or VPP companies, a local ASSE or similar health and safety networking organization.

46. Managers assure that appropriate safety and health training is provided.
   a. An employee safety, health and ergonomic training program exist at the facility.
   b. The training covers all legally required subjects.
   c. Training policies and procedures indicate that legally required elements are the minimum acceptable levels of training.
   d. Training procedures cover behavioral-based safety performance activities.
e. Management ensures the training is specific and applicable to the work task.
f. Managers use the annual program reviews to identify needed training.
g. Management performs follow-up to training to ensure the training is appropriate, understood, and being used, and driving the improvements desired.

47. **Managers support fair and effective policies that promote safety and health performance.**
   a. The employer provides opportunities and mechanism(s) for employees to influence Safety and Health Program design and operation.
   b. Safety, health and ergonomic policies promote positive behaviors while correcting deficient behaviors.
   c. Where applicable, written policies spell out rewards for safe and healthful work activities.
   d. Policies are established that link pay raises, bonuses, and promotions to personnel evaluations.
   e. Position descriptions are developed to assist employees in their understanding of their responsibilities.
   f. Safety incentive policies promote employee involvement in safety activities and do not discourage injury, illness and hazard reporting in any way.
   g. A Management of Change policy exists to ensure occupational health, safety and ergonomic hazards are evaluated prior to change implementation.
   h. A leadership succession process is in place to ensure long-term stability of health- and safety-related processes and procedures.

48. **Top management is involved in the planning and evaluation of safety and health performance.**
   a. Top management is routinely involved in activities related to planning and evaluating facility safety, health and ergonomic performance.
   b. Top management is held accountable for facility safety performance though their own performance evaluations.
   c. Top management is familiar with and understands the organization’s planning and evaluation efforts.
   d. Members of the work force perceive management to be exercising positive leadership.
   e. Top management is involved in regularly evaluating training for effectiveness.
   f. Top management ensures that the site Management of Change (MOC) processes address organizational changes (personnel or staffing), activity changes (processes, equipment, infrastructure, software), material changes (new or different chemicals, packaging or product) and changes to the SHMS (policies, procedures).

49. **Top management values employee involvement and participation in safety and health issues.**
a. Top management actively encourages employees to be involved in safety and health activities, including participation in local and regional networking and mentoring opportunities.
b. Management implements a process for employees for early reporting of symptoms.
c. Management encourages employees to report safety, health and ergonomic hazards.
d. Management can describe available avenues for employees to participate in safety and health activities.
e. Participation in the Safety Committee is respected and valued in the organization.
f. Supervisors and managers actively encourage use of the employee involvement systems and employees feel comfortable using those systems in all situations.
g. Several avenues have been established by upper management to solicit and gather employee input.
h. Top management ensures that the site Management of Change (MOC) processes address organizational changes (personnel or staffing), activity changes (processes, equipment, infrastructure, software), material changes (new or different chemicals, packaging or product) and changes to the SHMS (policies, procedures).

VI. Employee Participation

50. There is an effective process to involve employees in safety and health issues.
   a. There are multiple avenues for employee participation in safety, health and ergonomic issues.
   b. The avenues are well known, understood, and utilized by employees.
   c. The avenues and mechanisms for involvement are effective in reducing accidents and enhancing safe behaviors.
   d. Data related to key elements of safety and health performance are accumulated and displayed within the workplace to inform all personnel of progress being made.
   e. Employees throughout the company are aware of the methods to involve employees.
   f. There are open lines of communication between workers and forum meetings.
   g. A Safety Committee is in place and functional.
   h. That Safety Committee is structured in accordance with the Safety Committee rules.
   i. There are mandatory safety meetings.
   j. There is an open door policy.
   k. There is a suggestion box type program.
51. **Employees are involved in organizational decision-making in regard to safety and health policy.**
   a. Employees accept personal responsibility for ensuring a safe and healthful workplace.
   b. Employees have a substantial impact on the design and operation of the Safety and Health Program.
   c. Employees have significant input to the rules.
   d. Safety Committee members work with management to review and revise policies on safety, health and ergonomics.
   e. Employees are involved in annual program reviews.
   f. Employees are involved in change analysis.

52. **Employees are involved in organizational decision-making in regard to the allocation of safety and health resources.**
   a. Employee input is sought in regard to the future allocation of safety, health and ergonomic resources.
   b. The Safety Committee is given the opportunity to provide feedback on planned distribution of safety and health assets.
   c. The resource allocation goes beyond just budget, and includes allocation of personnel, supplies, equipment, facilities or services.

53. **Employees are involved in organizational decision-making in regard to safety and health training.**
   a. Employees are provided with the opportunity to develop and provide training to peers.
   b. Employees have the opportunity to evaluate and update training programs.
   c. The employer actively encourages employees to be involved in developing and delivering safety, health and ergonomic training plans for the facility.

54. **Employees participate in hazard detection activities.**
   a. Employees actively participate and contribute to discussions of hazard correction activity (generally at crew meetings).
   b. Employees have input in the development of inspection procedures and employee reporting systems.
   c. The hazard detection system provides rapid and regular feedback to employees.
   d. Employees are involved in the analysis of the job, process, or phase of activity that applies to their assigned work.
   e. All members of the work force have ready access to and can explain the key elements of the hazards analysis, which applies to their work.
   f. Personnel at all levels of the organization are routinely involved in safety and health inspections.
   g. Employees are active participants in the determination of collection methods, collection, analysis, and intervention selection for hazard detection activities.
55. **Employees participate in hazard prevention and control activities.**
a. Members of the affected work force actively participate in the comprehensive hazard review process.
b. Safety Committee members evaluate and/or orchestrate hazard prevention and control activities.
c. Workers have authority and feel free to refuse unsafe work.
d. Employees are involved in developing hazard prevention strategies and activities.
e. The facility actively supports and values employee participation in hazard prevention and control activities (such as control hierarchy, safe work rules and procedures, program evaluation, PPE usage, emergency planning and facility maintenance).
f. Employees are encouraged and do take action on self-correcting or minimizing risk.

56. **Employees participate in the safety and health training of co-workers.**
a. Employees are involved in the planning and preparing of safety, health and ergonomic training topics.
b. Employees conduct training classes.
c. Employees are involved in evaluating and updating training as needed.
d. Employees mentor with each other, using existing policies such as JHA or process hazard reviews.
e. Employees provide on-the-job training and coaching to co-workers.

57. **Employees participate in safety and health planning activities.**
a. Employees are active participants in the action planning process.
b. Workers are allowed access to information needed to make informed decisions.
c. Employees are active participants in evaluating the facility safety, health and ergonomic planning activities.
d. Company goals, objectives, and action plans are developed with employee involvement.
e. Employees participate in developing solutions.

58. **Employees participate in the evaluation of safety and health performance.**
a. The Safety Committee makes an annual review of the Safety and Health Program.
b. Employees are regularly involved in evaluating the safety policies for effectiveness and revising them accordingly.
c. Employee input is considered an important part of supervisory and management safety performance reviews.
d. As part of an annual review system, employees are interviewed or surveyed to gather their input.
Appendix C – Safety and Health Achievement Recognition Program (SHARP)

I. Program Overview.

The Safety and Health Achievement Recognition Program (SHARP) is a program that encourages employer self-sufficiency in safety and health management. SHARP is a recognition program that provides an incentive and road map for Alaskan employers to work with their employees to find and correct hazards, to develop and implement effective Safety and Health Programs, to continuously improve, and to become self-sufficient in managing occupational safety and health. A SHARP employer is defined as an employer who has successfully incorporated safety and health management principles into their workplace.

A. SHARP is a program of Alaska Occupational Safety and Health’s Consultation Services Section. The overall goal of SHARP is to:
   1. Recognize employers for their achievements in workplace safety and health management,
   2. Reduce workplace injuries and illnesses,
   3. Provide a means for showing other employers that occupational safety and health can work for everyone, and
   4. Encourage employers to rely less on consultation services and more on themselves moving them towards self-sufficiency in safety and health management.

B. Participation in the Alaska OSH SHARP program does not diminish existing employer and employee rights and responsibilities under the Alaska Safe Employment Act. Guidance in this document is intended for consultative staff to use with employers who have requested to become candidates for the SHARP.

C. Recognition Program. To promote effective safety and health program management, continuous improvement, and to provide models for others to follow, SHARP recognizes employers who implement effective Safety and Health Programs. Recognition is achieved by:
   1. Encouraging employers to use Alaska OSH consultation, technical, and training resources, and to involve their employees in establishing effective safety and health programs. SHARP employers are further encouraged to network with others and to become members of a private SHARP organization (the Alaskan SHARP Alliance), which is also devoted to safety and health improvement and networking.
   2. Providing for public recognition of employers and employees as models who have worked together successfully to establish effective Safety and Health
Programs. This includes awarding the employer a SHARP certificate of achievement signed by the Administrator of Alaska OSH, and using this recognition as a model for other Alaska employers.

D. Program Eligibility. Alaska employers who have been in business for more than one year are eligible to apply for SHARP regardless of size or type of business.

1. Prospective SHARP employers must have had a comprehensive consultation completed within the 12 months immediately prior to pursuing SHARP recognition.

2. The division will emphasize the benefits of SHARP to employers of 250 or fewer employees in high hazard industries.

SHARP Partnership Agreements will be used for larger sites, multi-location employers and certain service provider clients based on the following criteria.

a. Multi-Site SHARP Partnership agreements pertain to those employers with more than two physical locations.

b. Large Employer SHARP Partnership agreements are negotiable with employers who have between 251 and 500 employees. Large Employer SHARP Partnership agreements are required for those employers with more than 500 employees at a single location.

c. Service Provider SHARP Partnership Agreements are available for those companies who provide safety and health related services to multiple clients.

d. Leasing/Temporary Agency Partnerships are available for certain Leasing Agencies or Temporary Agencies who are committed to improving the workplace safety and health conditions where their leased or temporary employees work.

3. Successful SHARP candidates shall have a Days Away, Restricted or Transfer Rate (DART) that is below the most recently published BLS industry average for their Industrial Classification (NAICS). Note: Alaska rates may be used for comparison only after a discussion with the local field consultation manager. If the DART is not below the industry average, there shall be a downward trend in those rates over a three-to-five year history.

4. To obtain and maintain SHARP status, management commitment is essential. If a company pursuing SHARP is controlled by a parent corporation or agency, it is essential that those controlling the company understand the SHARP process and the commitment necessary to maintain SHARP status. If during any part of the process, adequate authority, resources and support are not provided, the
individual entity may not be able to attain or maintain SHARP status. Therefore, a discussion with the controlling corporation or agency shall occur during the SHARP evaluation process to determine their commitment to the process and to the entity pursuing SHARP.

5. Incentive Programs, if any, for a SHARP company must be positive and promote safety awareness and worker participation in safety-related activities. SHARP company incentive programs must not discourage injury, illness and hazard reporting in any way.

II. SHARP Commitment Letter.

Early in the SHARP process, employers must agree in writing to the following basic tenets of SHARP (a sample SHARP commitment letter can be found on the Alaska OSH website under SHARP Program). Follow-up visits toward SHARP certification, after the initial assessment, will not be completed until receipt of the SHARP commitment letter. The written agreement must be signed and sent to the local AKOSH field consultation manager. In the letter, the employer must agree to:

A. A comprehensive consultation survey of all conditions and operations at the establishment, including a complete safety and health systems review.

B. Involve employees in the development, operation, and improvement of all elements of the written workplace safety and health program as well as in the decisions that affect their safety and health. At union and non-union sites, if the employee representatives object to the site’s involvement in SHARP, the field consultation manager will advise the employer that the application cannot go forward until both labor and management agree on participation in SHARP.

C. Work diligently to accomplish the following:

1. Correct all identified safety and health hazards, and provide the local field consultation manager with written confirmation that each identified hazard has been corrected within an agreed upon time frame.

2. Develop, implement, or improve all elements of an effective safety and health management system at the site.

3. Work to maintain a downward trend in injury and illness Days Away, Restricted or Transfer (DART) rates over the most recent five (5) years.

4. Develop and maintain a written safety and health program.

5. Achieve an acceptable rating on the attributes of the AKOSH Safety and Health Program Assessment Tool.
D. Inform the local field consultation manager prior to making any changes in working conditions or work processes that might introduce new hazards into the workplace. “Changes” mean relocation of facilities, change of ownership or major organizational changes, additions to buildings, new processes, i.e., painting of parts rather than purchasing them already painted, new lines of machinery, etc. “Changes” do not include process changes at construction or other mobile sites.

E. Notify the local field consultation manager when all elements of SHARP have been fully implemented so a follow-up visit can take place.

III. SHARP Process.

SHARP is a process designed to identify the strengths and weaknesses of an employer’s occupational safety and health management system. The process normally starts with a written request from the employer. The request initiates an intake for a comprehensive consultation including an initial assessment, followed by a report with recommendations. The process includes one or more action plan meetings between the employer and consultant to identify and begin implementation of objectives designed to meet the goal of achieving SHARP certification.

A. Preparation. Once the employer has requested in writing, the initial pursuit of SHARP and has agreed to the basic tenants, the lead consultant will discuss the intended process with the local field consultation manager to ensure the necessary consultative disciplines are involved in the process.

The preparation for a SHARP consultation will follow the format outlined in Chapter 4 Section II (E) of this manual.

B. Conduct of a Visit. In the opening meeting the consultant will review the employer’s request for consultation assistance, and will review the program requirements (including the potential for multiple discipline consultations) with the employer to ensure the employer understands the commitment necessary to pursue SHARP.

As the SHARP process progresses from the hazard identification stage to the Safety and Health Program improvement stage, the employer will need to commit additional resources to develop and complete action plans. The employer will be informed that the consultant will remain available to coach the employer and employees to develop or improve any existing elements, and that Alaska OSH training resources are available to assist with skill development. Achieving SHARP, however, is the employer’s responsibility, and Alaska OSH’s
time on-site will shorten as the employer builds capacity toward being self-sufficient.

C. **Employee Participation.** Employers electing to pursue SHARP must be committed to developing a written Safety and Health Program that involves employees in significant ways that affect their safety and health. Employee representatives must be involved in the consultative process including hazard assessment and action plan formulation.

D. **Comprehensive Consultation.** A comprehensive consultation of the employer’s establishment must be conducted covering all operations, including a complete Safety and Health Program review. All hazards identified will be discussed and how the elements of an effective Safety and Health Program will address their continued correction and control.

1. For companies with mobile worksites that are in or working toward SHARP, the consultant shall evaluate a representative number of the mobile worksites during the comprehensive consultation process to ascertain the effectiveness of the company-wide Safety and Health Program.

2. Using the Safety and Health Program assessment, and following the guidance found in the Attributes of Excellence of a Safety and Health Program in Appendix B of this manual, the consultant will conduct an initial assessment of the employer’s Safety and Health Program and discuss with the employer the elements of an effective program.

3. Successful SHARP candidates must achieve an acceptable safety and health program effectiveness rating following the final assessment of their program. If the employer is weak in an area for which safety and health rules have yet to be adopted, such as ergonomics, or requires long-term investment or improvements, such as ventilation systems engineering, SHARP may be attained if the area needing improvement is part of a continuous improvement action plan.

4. Initial SHARP candidates shall have a three- to five-year injury and illness rate that is trending in a downward direction.

E. **Closing Conference.** The closing conference will be conducted according to the format outlined in Chapter 4 Section II (G) of this manual. In the closing meeting, the consultant will:

1. Describe the hazards identified during the consultation and which program elements would have prevented the hazard from occurring.
2. Discuss suggested methods of correction, time frames for correction, and any need for referrals to other section staff for hazards beyond the expertise of the consultant.

3. Describe the adequacies and areas needing improvement of the employer's Safety and Health Program.

4. Decide with the employer the extent to which additional short coaching sessions may be needed during the interim one year (or longer) period to facilitate and monitor the Safety and Health Program improvement process.

5. Develop a schedule for one or more visits, which are expected to become less frequent as the employer progresses toward self-sufficiency. During the SHARP process the consultant will remain available for contact with the employer, to help the SHARP applicant move forward.

6. Arrange to leave at least one copy of the completed Safety and Health Program Assessment (if already completed) with the employer so the employer can use it as a tool to work toward full program implementation.

7. Remind the employer that at the end of the implementation period, the employer is responsible for requesting a consultation for final, on-site evaluation for SHARP approval.

F. Written Report. After the consultant conducts the comprehensive consultation, the employer will be advised that a written report explaining the findings of the visit and confirming any correction periods will be provided at a later date.

1. The written report will follow the format outlined in Chapter 4 Section II (I) of this manual.

2. All reports must be reviewed by the Assistant Chief of Consultation or designee prior to mailing.

3. The written report will reflect the consultant's findings and recommendations for hazard correction, and necessary Safety and Health Program improvements.

4. If not already completed as in section III (E)(6) above, the written report shall include or reference the Safety and Health Program Assessment so the employer can use it to work toward SHARP approval.

G. Action Plan. After the employer has received the written report, the consultant will coach the employer to develop action plans that map out the employer's progress in implementing an effective Safety and Health Program, and other safety or health areas needing long term improvement.
1. The action plan(s) is developed by the employer following the initial comprehensive consultation. The consultant and employer together will discuss the elements of the action plan(s) and the specific time frames for achieving plan items.

2. An action plan outlines the specific steps that will be accomplished by the employer to merit SHARP approval. The action plan shall address, where applicable:

   a. The employer's correction of all identified safety and health hazards that require long term abatement methods, with time frames.

   b. The steps necessary for the employer to implement parts of an effective Safety and Health Program, with time frames.

   c. The steps needed to improve any other deficiencies found during the consultative visits.

H. Initial SHARP File. Prior to the consultant recommending approval, the consultant and the prospective employer must compile a SHARP file, documenting the employer and the consultative process. The following items are required in the SHARP file:

1. Executive Summary. A completed SHARP Packet Executive Summary sheet must be in the SHARP file. The Executive Summary will include:

   a. Company Description: A description of the company, their size, what they do, make or sell, their operations, organization, facilities or equipment. Comment on any interactions with AKOSH during the previous 3 years and/or any recent history including mergers, growth or downsizing. Include significant information about the workforce (turnover, pace of work, mobile employees, permanent or temporary, demographic information, training levels, etc.).

   b. Synopsis of the SHARP Process: A description of the SHARP process with this company, when it started, who was involved, what was accomplished. (Reference report numbers and dates of visits to create a clear picture of what the SHARP process entailed. Description shall be in chronological order.) Summarize the progress made by the company in terms of improvements made in the safety and health management system.

   c. Claims Data: Completed DART data for the most recent 3 completed years. For companies that are renewing SHARP, add the new year and continue to accumulate the data. Describe any anomalies or trends noted in claims data,
and discuss accident investigation procedures. If the rates are above the state average, justify the recommendation for SHARP approval.

d. Safety and Health Program Assessments: Describe the findings noted in the initial and final assessments of the company’s safety and health management systems. Note areas of program improvement. Note program strengths as well as weaknesses.

e. Action Plans: Reference or describe the results of last year’s action plan. Include any action items not completed. Describe action plans developed for the coming year.

**Note:** relationships to current assessment, as well as time lines, and responsibilities.

f. Consultants Recommendations: Consultants statement verifying serious hazards were abated (or effective abatement plans in effect with interim protection in place, with completion dates) and reason(s) why consultant(s) recommend this company be approved as (or to remain) a SHARP company.

2. **Assessments.** Include copies of the initial and final Safety and Health Program assessment forms, as well as any interim assessments conducted during the SHARP process.

3. **Reports/Verification.** Include copies of all the consultation reports generated during the SHARP process and verification that all hazards have been abated, or that action plans are in place to address the long term hazard abatement of complex items.

4. **Action Plans.** Include copies of all written action plans developed to address identified hazards and to work toward SHARP. Completed action plans shall include documentation on the status of individual action plan items.

5. **Employer Letters.** Include copies of all letters from the employer to AKOSH generated during the SHARP process, including the initial letter of commitment addressed to the local Field Consultation Manager, and the letter from the company requesting final SHARP evaluation.

6. **Supporting Documentation.** Additional supporting or explanatory documents may be included, as necessary or desired, which illustrate the level of excellence of the employers safety and health programs.
IV. **SHARP Approval and Certificate Issuance.**

When the consultant(s) have verified that the employer has met all of the requirements for SHARP approval and the SHARP file is completed, the SHARP file must be submitted to the local field consultation manager.

A. The local field consultation manager will verify that the SHARP file is complete and that the employer has met all of the requirements for SHARP approval before forwarding the SHARP Executive Summary with the approval recommendation to the consultation manager.

B. Upon receipt of the SHARP Executive Summary, the consultation manager or designee will review and may approve SHARP certification for the employer.

C. The initial SHARP certificate will normally be awarded to the employer by a member of the AKOSH management team. The consultant shall schedule the award ceremony at a time that is convenient to both the company and the AKOSH management person.

V. **Renewing SHARP/Continuous Improvements.**

SHARP recognition is granted in 12 month increments. To continue in SHARP, employers must apply for renewal during the last quarter of the approval year by contacting the local field consultation manager (or their designee). If contact has not been made by the renewal date, a letter will be sent informing the SHARP company that they must schedule a renewal evaluation within 30 days or they will be terminated from SHARP.

A. The lead consultant and the SHARP team will conduct an in-depth evaluation to ensure the Safety and Health Program is being effectively maintained and continuously improved. The consultant will evaluate three to five years of injury and illness data and look at trends, injury types and severity. Those employers with incidence rates above their industry averages must be evaluated on a case-by-case basis. In addition to reviewing injury and illness rates, the consultant will:

1. Conduct a hazard assessment of the facility, to verify that workplace hazards at the site remain under control.

2. Review accident and incident investigation reports from the current and previous year and evaluate trends from the most recent three years of their Injuries and Illness Logs.
   - Assess all 58 elements of the employer’s safety and health management program.
   - Evaluate the level and effectiveness of employee involvement in the site’s safety and health programs.
• Review and evaluate the detail and progress in the site’s action plans for the previous and upcoming years.
• Assess the site’s continuous improvement and their movement towards self-sufficiency.
• Assess the effectiveness of the safety committee.
• Review the site’s written safety programs for effectiveness.

B. Second-year SHARP evaluations will consist of a comprehensive consultation as specified in III (D) of this section. Recognizing that incidence rates fluctuate, AKOSH consultation will evaluate incidence rates as part of the criteria for evaluating third-year and subsequent SHARP renewals. The following approach will be applied to incidence rates of second-year and subsequent SHARP renewals.

1. Compare the SHARP employer’s DART to the most recently published BLS average total for all Alaska industries. If the DART is lower than the average, the company can be recommended for renewal.

2. If the SHARP company’s DART is above the Alaska all industry average, compare it to the BLS national industry average for the specific NAICS which they are classified under. If the DART is lower than the industry average for their NAICS, the company can be recommended for renewal.

3. If the SHARP company’s DART is above the national industry average for the specific NAICS, the consultant will average the company’s DART rates for the last three years and compare them to an average of the three most recently published rates for their industry. If the company’s three-year average rate is lower than the average of the three most recently published industry rates, the company can be recommended for renewal.

4. Some SHARP renewal applicants, with limited numbers of employees and/or hours worked, may use a fourth alternative method of calculating incidence rates. The alternative method allows the employer to use the best three out of the most recent four years’ injury and illness experience. The alternative method may only be used after discussion with the field consultation manager.

**Note:** To determine whether the employer qualifies for the alternative calculation method, do the following:

1. Using the most recent employment statistics (hours worked in the most recent calendar year), calculate a hypothetical lost workday case incidence rate for the employer assuming that the employer had two cases during the year;

2. Compare that hypothetical rate to the most recently published BLS lost workday case incidence rate averages for the industry; and
3. If the hypothetical rate (based on two cases) is equal to or higher than the BLS average for the firm’s industry, the employer qualifies for the alternative calculation method.

C. For second-year and subsequent SHARP evaluations, the consultant will coach the SHARP employer to take an active and ever increasing role in the SHARP evaluation process. Because the employer shall be making progress toward self-sufficiency, we expect that over time the employer will take more of the responsibility for activities associated with their continued improvement and Alaska OSH’s involvement will be limited. In the interest of continued improvement and self-sufficiency, encourage the SHARP worksite in the following:

1. Explain to the site contact person the calculations for determining DART and TRC rates and show them how to compare their rates against the published industry rates for their industry.

2. To develop, implement and maintain a management of change (MOC) program (or similar systematic process) and incorporate MOC training into their management training processes.

3. To develop and implement a safety program continuity plan (succession planning or similar systematic process) in order to help facilitate long term stability in safety and health processes. The safety continuity plan shall be designed to recruit and enlist promising employees, to develop their knowledge, skills, and abilities in order to prepare them to assume ever more challenging roles within the organization, so that as the organization loses key employees, the next generation of safety and health leadership is being groomed to step into new or vacated roles. Such a process is vital to a company in maintaining a continuous improvement oriented safety culture.

4. To develop networking and mentoring relationships with other SHARP or VPP companies, with the Alaska SHARP Alliance, with a local ASSE or other safety and health networking organization in order to keep abreast of current SHMS related information.

D. Renewal is dependent on the consultant’s assessment of continued program improvement and effectiveness. If all requirements for SHARP are verified as operating effectively by the consultant and improvement is verified, AKOSH will inform the employer that the employer’s renewal has been approved.

E. Subsequent SHARP Recommendations. Prior to the consultant recommending an employer for continuation in the SHARP program, the SHARP file that documents the employer and the consultative process must be updated. The subsequent SHARP file will include an updated executive summary, any new report(s), and
the most recent assessment form appended to the initial SHARP packet. Other updated information may be included where applicable.

F. Subsequent SHARP awards. Second-year and subsequent SHARP certificates will normally be awarded to the employer by a member of the consultation team.

G. File retention. Electronic copies of the Executive Summary and all S&HP Assessments will be electronically saved in the SHARP establishment’s folder located in the F drive and in OIS.

VI. Scheduled Inspection Deferral.

An employer who has been approved as SHARP for the second and subsequent years may be deferred from scheduled AKOSH inspections. Inspection deferral is awarded as an acknowledgment by the agency that enforcement resources would be better used at worksites where employees may be at higher risk of injury and/or illnesses.

A. Following the approval of second and subsequent year SHARP participation, the consultation manager will forward the approval to the manager of enforcement, who will defer the establishment from the scheduled inspection lists.

1. The scheduled inspection deferral (SHARP exemption) will be limited to one year, and must be renewed upon the next SHARP renewal. Once awarded, the scheduled inspection deferral may be renewed annually as long as the company continues to be approved for SHARP participation.

2. Upon graduation from the SHARP program, SHARP graduate companies will receive one final SHARP exemption that will last no more than three (3) years.

B. Alaska OSH will continue to conduct compliance inspections in the following categories: Imminent Danger, Fatality/Catastrophe, Serious Accidents, and Complaints/Referrals.

1. In the event of a compliance inspection with a serious or repeat citation, the local field consultation manager will determine whether or not an on-site visit shall be conducted to ensure that the safety and health management system is operating effectively.

   a. If an on-site visit is warranted, and the consultant believes there is a connection between a serious citation and reduced effectiveness of the safety and health management system, the consultant must recommend that the SHARP employer withdraw from the program.
b. If an on-site visit is warranted, and the consultant believes there is no connection, the employer must be counseled on how to prevent a recurrence.

2. If a willful citation is issued or there is evidence that the site’s SHARP information was falsified, the employer will be asked to withdraw from the SHARP program. If the employer does not voluntarily withdraw within 5 working days, participation will be terminated. The employer may reapply after 12 months.

VII. **Failure to Meet or Maintain Requirements.**

An employer's SHARP approval and/or inspection deferral will be terminated if the consultation manager, or the Alaska Chief of OSH determine the employer failed to meet, or maintain SHARP requirements.

A. If a SHARP employer fails to renew their SHARP status within two months of their scheduled renewal date, that employer will be automatically terminated from the program.

B. Except in egregious cases, the employer will be given the opportunity to withdraw from the program, rather than be terminated. Companies withdrawing from SHARP shall be encouraged to continue using SHARP criteria and to consider re-applying for SHARP in the future.

C. Conditional Approval. A SHARP facility that is meeting the spirit of SHARP participation, but falls short in certain areas during the renewal evaluation may be considered for a conditional approval. The conditional approval status must be discussed with the field consultation manager and a planned approach developed for the action plan process. SHARP employers who are not eligible for renewal or graduation will be given one of the following two choices:

1. The employer can agree to a time-specific conditional SHARP approval, not to exceed two years, during which time they will focus on completing an action plan aimed at ensuring they are eligible to renew at the end of that time-frame.

   a. If an extension to a conditional approval is recommended, the consultant and the field consultation manager must discuss the reasons behind the recommendation with the consultation manager.

   b. If a second conditional approval is recommended, at any time after the first conditions have been met, the consultant and the field consultation manager must discuss the reasons behind the recommendation with the consultation manager.
3. The employer will be asked to voluntarily withdraw from SHARP.

   **Note:** Conditional SHARP status does not maintain any exemptions from inspection.
Appendix D – Rate Calculations

I. Rate Calculations.

A. Annual Rate Calculation.

Annual rates are calculated by the formula \((N/EH) \times 200,000\) where:

- \(N\) = Sum of the number of recordable injuries and illnesses in the year.
- \(EH\) = total number of hours worked by all employees in the year.
- 200,000 = equivalent of 100 full-time employees working 40 hours per week, 50 weeks per year.

1. For the TRC, use the total number of cases listed on the OSHA 300 Log in columns:

   - Column H (Days away from work),
   - Column I (Job transfer or restriction), and
   - Column J (Other recordable cases).

   \[ N = H + I + J \]

2. For the DART, use the total number of cases resulting in days away from work, restricted work activity, and/or job transfer listed on the OSHA 300 Log in columns:

   - Column H (Days away from work) and
   - Column I (Job transfer or restriction).

   \[ N = H + I \]

B. Alternate Calculation Methods

3. 3-Year Rate Formula.
   a. 3-Year TRC Rate Formula

   \[ ((\text{Year 1 OSHA Log columns } H+I+J) + (\text{Year 2 OSHA Log columns } H+I+J) + (\text{Year ...} \right) \times 200,000 \]
3 OSHA 300 Log columns H+I+J) / (Year 1 hours + Year 2 hours + Year 3 hours)) x 200,000.

b. 3-year DART Rate Formula

((Year 1 OSHA Log columns H+I) + (Year 2 OSHA Log columns H+I) + (Year 3 OSHA 300 Log columns H+I) / (Year 1 hours + Year 2 hours + Year 3 hours)) x 200,000.

4. **Best 3 out of 4 years Rate Calculation Method.** To determine whether an employer qualifies for the best 3 out of 4 year calculation method, do the following:

   a. Using the most recent employment statistics (hours worked at the site in the most recent calendar year, including overtime hours), calculate a hypothetical TRC rate for the employer assuming that the employer had **two** cases during the year;

   b. Compare that hypothetical rate to the 3 most recently published years of BLS combined injury/illness rates for the industry; and

   c. If the hypothetical rate (based on **two** cases) is equal to or higher than the national average for the employer's industry for any of the most current BLS published rates, the employer qualifies for the best 3 out of 4 years calculation method. The DART and TRC rates may be calculated using the best 3 out of the most current 4 full calendar years of OSHA Form 300 data.

C. **Rounding Instructions.**
   
   You must round the rates to the nearest tenth following traditional mathematical rounding rules. For example, round 5.88 up to 5.9; round 5.82 down to 5.8; round 5.85 up to 5.9.

D. **Comparison to National Averages.**
   
   Compare the 3-year TRC and DART rates to the most recently published Bureau of Labor Statistics (BLS) national average (available online at http://www.osha.gov/oshstats/work.html) for the NAICS code for the industry in which the applicant is classified.

   These national averages, currently broken down by NAICS code, are found in "Table 1. Incidence rates of non-fatal occupational injuries and illnesses by industry" that BLS publishes each year.

5. In the "multi-year" calculations, both the DART and TRC have to be below the BLS rates for the same year.
6. If BLS rates are not available for both the DART and TRC, then use the next smallest NAICS code (i.e., six digit NAICS to a five digit NAICS).

7. If BLS rates are available for either the DART or TRC, then use the BLS data that is available.

Sample Calculations

A safety and health consultant visited XYZ Machine Shop (NAICS – 33271; SIC – 3599) and recorded the following OSHA 300 Log Information:

<table>
<thead>
<tr>
<th>Year</th>
<th># Employees</th>
<th>Hours Worked</th>
<th>Column H</th>
<th>Column I</th>
<th>Column J</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005</td>
<td>5</td>
<td>10,000</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>2004</td>
<td>7</td>
<td>14,000</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>2003</td>
<td>6</td>
<td>12,000</td>
<td>0</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>2002</td>
<td>8</td>
<td>16,000</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

***Note: The data above is used throughout the examples that follow.

1 Year Calculations

DART

DART = \frac{[(\text{Column H})2005 + (\text{Column I})2005]}{([\text{Column J})2005]} \times [200,000 \text{ Hours}]^* \
\times ([\text{Hours Worked})2005]

DART = \frac{[(0) + (1)]}{10,000} \times [200,000 \text{ Hours}]

DART = \frac{[20.0]}{10,000} \times [200,000 \text{ Hours}]

DART = [20.0]

TRC

TRC = \frac{[(\text{Column H})2005 + (\text{Column I})2005 + (\text{Column J})2005]}{([\text{Hours Worked})2005]} \times [200,000 \text{ Hours}]

TRC = \frac{[(0) + (1) + (0)]}{10,000} \times [200,000 \text{ Hours}]

TRC = \frac{[20.0]}{10,000} \times [200,000 \text{ Hours}]

TRC = [20.0]
Conclusion

The employer's **2005** DART and TRC rates of **20.0** are above the 2004 BLS DART and TRC data shown below.

<table>
<thead>
<tr>
<th>YEARS</th>
<th>DART</th>
<th>TRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005 Employer's Rates</td>
<td>20.0</td>
<td>20.0</td>
</tr>
<tr>
<td>2004 BLS Data</td>
<td>2.9</td>
<td>6.9</td>
</tr>
</tbody>
</table>

Alternate Rate Calculations

3-Year Calculations (Years 2005, 2004, & 2003):

**DART**

\[
\text{DART} = \left[ \frac{(\text{Columns H} + \text{I})_{2005} + (\text{Columns H} + \text{I})_{2004} + (\text{Columns H} + \text{I})_{2003}}{\text{(Hours-Worked)_{2005} + (Hours-Worked)_{2004} + (Hours-Worked)_{2003}}} \right] \times [200,000 \text{ Hours}] \\
\]

\[
\text{DART} = \left[ \frac{(0 + 1) + (0 + 0) + (0 + 0)}{(10,000) + (14,000) + (12,000)} \right] \times [200,000 \text{ Hours}] \\
\]

\[
\text{DART} = \left[ \frac{1}{36,000} \right] \times [200,000 \text{ Hours}] \\
\]

\[
\text{DART} = [5.6] \\
\]

**TRC**

\[
\text{TRC} = \left[ \frac{(\text{Columns H} + \text{I} + \text{J})_{2005} + (\text{Columns H} + \text{I} + \text{J})_{2004} + (\text{Columns H} + \text{I} + \text{J})_{2003}}{\text{(Hours-Worked)_{2005} + (Hours-Worked)_{2004} + (Hours-Worked)_{2003}}} \right] \times [200,000 \text{ Hours}] \\
\]

\[
\text{TRC} = \left[ \frac{(0 + 1 + 0) + (0 + 0 + 0) + (0 + 0 + 1)}{(10,000) + (14,000) + (12,000)} \right] \times [200,000 \text{ Hours}] \\
\]

\[
\text{TRC} = \left[ \frac{2}{36,000} \right] \times [200,000 \text{ Hours}] \\
\]

\[
\text{TRC} = [11.1] \\
\]
Conclusion

Using the 3-Year Calculation, the employer's DART and TRC rates of 5.6 and 11.1, respectively, are above the most recently available BLS data shown below.

<table>
<thead>
<tr>
<th>YEARS</th>
<th>DART</th>
<th>TRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005, 2004, &amp; 2003 Employers Rates</td>
<td>5.6</td>
<td>11.1</td>
</tr>
<tr>
<td>2004 BLS Data</td>
<td>2.9</td>
<td>6.9</td>
</tr>
<tr>
<td>2003 BLS Data</td>
<td>3.5</td>
<td>7.5</td>
</tr>
<tr>
<td>2002 BLS Data</td>
<td>3.3</td>
<td>7.5</td>
</tr>
</tbody>
</table>

Where an employer's DART and/or TRC rates exceed the most recently published BLS data for these two measures, consultants should determine if the employer would qualify for SHARP participation by using the best 3 out of 4 year calculation method. To determine if the employer is eligible to use this option: use the formula for the 3-year calculation as stated above and use an arbitrary value of "2" for the sum of Columns H + I for the last three years.

DART

\[
DART = \frac{[(\text{arbitrary sum value of } (2) \text{ for Columns } H + I \text{ for } 2005, 2004, 2003)] \times [200,000 \text{ Hours}]}{[(\text{Hours-Worked})2005 + (\text{Hours-Worked})2004 + (\text{Hours-Worked})2003]}
\]

\[
DART = \frac{[(2)] \times [200,000 \text{ Hours}]}{[(10,000) + (14,000) + (12,000)] \text{ Hours}}
\]

\[
DART = \frac{[(2)] \times [200,000 \text{ Hours}]}{[36,000] \text{ Hours}}
\]

DART = [11.1]

2004 BLS DART rate = [2.9]

Employer's arbitrary DART rate of 11.1 is above the 2004 BLS DART rate of 2.9; therefore, the employer would be eligible for the "3 out of 4 year rate" calculations.

Best Three out of Four Year Rate Calculations

Years 2005, 2004, & 2002 Data:
DART
DART = \[(\text{Columns H + I})2005 + (\text{Columns H + I})2004 + (\text{Columns H + I})2002\] x [200,000 Hours]
\[\text{(Hours-Worked)}2005 + (\text{Hours-Worked})2004 + (\text{Hours-Worked})2002\]
DART = \[\{(0 + 1) + (0 + 0) + (0 + 0)\} \times 200,000 \text{ Hours}\]
\[\{(10,000) + (14,000) + (16,000)\}] \times [200,000 \text{ Hours}]
DART = \[(1)\] \times [200,000 \text{ Hours}]
DART = 5.0

TRC

TRC = \[(\text{Columns H + I + J})2005 + (\text{Columns H + I + J})2004 + (\text{Columns H + I + J})2002\] x [200,000 Hours]
\[\text{(Hours-Worked)}2005 + (\text{Hours-Worked})2004 + (\text{Hours-Worked})2002\]
TRC = \[\{(0 + 1 + 0) + (0 + 0 + 0) + (0 + 0 + 0)\} \times 200,000 \text{ Hours}\]
\[\{(10,000) + (14,000) + (16,000)\}] \times [200,000 \text{ Hours}]
TRC = \[(1)\] \times [200,000 \text{ Hours}]
TRC = 5.0

Conclusion

The employer's DART rate of 5.0 is above the 2004 BLS DART rate of 2.9. The employer's TRC rate of 5.0 is below the 2004 BLS TRC rate of 6.9. Because at least one of the employer's injury and illness rates are above the BLS data, this combination of years would not make the employer eligible for SHARP. (See Table below.)

<table>
<thead>
<tr>
<th>YEARS</th>
<th>DART</th>
<th>TRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005, 2004 &amp; 2002</td>
<td>5.0</td>
<td>5.0</td>
</tr>
<tr>
<td>Employer's Rates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2004 BLS DATA</td>
<td>2.9</td>
<td>6.9</td>
</tr>
<tr>
<td>2003 BLS DATA</td>
<td>3.5</td>
<td>7.5</td>
</tr>
<tr>
<td>2002 BLS DATA</td>
<td>3.3</td>
<td>7.5</td>
</tr>
</tbody>
</table>

Years 2005, 2003, & 2002 Data:

DART

DART = \[(\text{Columns H + I})2005 + (\text{Columns H + I})2003 + (\text{Columns H + I})2002\] x [200,000 Hours]
\[\text{(Hours-Worked)}2005 + (\text{Hours-Worked})2003 + (\text{Hours-Worked})2002\]
DART = \[(0 + 1) + (0 + 0) + (0 + 0)\] \times [200,000 \text{ Hours}]
\[= ((10,000) + (12,000) + (16,000)) \text{ Hours}\]

DART = \[(1)\] \times [200,000 \text{ Hours}]
\[= 38,000 \text{ Hours}\]

DART = [5.3]

TRC

TRC = \[((\text{Columns H + I + J})2005 + (\text{Columns H + I + J})2003 + (\text{Columns H + I + J})2002) \times [200,000 \text{ Hours}]\]
\[= ((\text{Hours-Worked})2005 + (\text{Hours-Worked})2003 + (\text{Hours-Worked})2002)\]

TRC = \[\{(0 + 1 + 0) + (0 + 0 + 1) + (0 + 0 + 0)\}\] \times [200,000 \text{ Hours}]
\[= ((10,000) + (12,000) + (16,000)) \text{ Hours}\]

TRC = \[\{(2)\}\] \times [200,000 \text{ Hours}]
\[= 38,000 \text{ Hours}\]

TRC = [10.5]

Conclusion

The employer's DART and TRC rates of 5.3 and 10.5 respectively are both above the most recently available BLS Data. Therefore, this combination of years would not make the employer eligible for SHARP. (See Table below.)

<table>
<thead>
<tr>
<th>YEARS</th>
<th>DART</th>
<th>TRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>2005, 2003 &amp; 2002 Employer's Rates</td>
<td>5.3</td>
<td>10.5</td>
</tr>
<tr>
<td>2004 BLS DATA</td>
<td>2.9</td>
<td>6.9</td>
</tr>
<tr>
<td>2003 BLS DATA</td>
<td>3.5</td>
<td>7.5</td>
</tr>
<tr>
<td>2002 BLS DATA</td>
<td>3.3</td>
<td>7.5</td>
</tr>
</tbody>
</table>

Years 2004, 2003, & 2002 Data:

DART

DART = \[((\text{Columns H + I})2004 + (\text{Columns H + I})2003 + (\text{Columns H + I})2002) \times [200,000 \text{ Hours}]\]
\[= ((\text{Hours-Worked})2004 + (\text{Hours-Worked})2003 + (\text{Hours-Worked})2002)\]

DART = \[\{(0 + 0) + (0 + 0) + (0 + 0)\}\] \times [200,000 \text{ Hours}]

77
\[(14,000) + (12,000) + (16,000)] \text{ Hours}

\[\text{DART} = \frac{(0)}{42,000} \times [200,000 \text{ Hours}]\]

\[\text{DART} = [0.0]\]

\textbf{TRC}

\[\text{TRC} = \frac{((\text{Columns H + I + J})2004 + (\text{Columns H + I + J})2003 + (\text{Columns H + I + J})2002) \times (\text{Hours Worked}2004 + (\text{Hours Worked}2003 + (\text{Hours Worked}2002))}{200,000 \text{ Hours}}\]

\[\text{TRC} = \frac{((0 + 0 + 0) + (0 + 0 + 1) + (0 + 0 + 0)) \times (14,000) + (12,000) + (16,000]}{42,000} \text{ Hours}\]

\[\text{TRC} = [4.8]\]

\textbf{Conclusion}

The employer's DART and TRC rates are both below the most recently published BLS data. This combination of years would make the employer eligible for SHARP.

<table>
<thead>
<tr>
<th>YEARS</th>
<th>DART</th>
<th>TRC</th>
</tr>
</thead>
<tbody>
<tr>
<td>2004, 2003 &amp; 2002 Employer's Rates</td>
<td>0.00</td>
<td>4.8</td>
</tr>
<tr>
<td>2004 BLS Data</td>
<td>2.9</td>
<td>6.9</td>
</tr>
<tr>
<td>2003 BLS Data</td>
<td>3.5</td>
<td>7.5</td>
</tr>
<tr>
<td>2002 BLS Data</td>
<td>3.3</td>
<td>7.5</td>
</tr>
</tbody>
</table>

**Footnote: 200,000 hours = base for 100 equivalent full-time employees (working 40 hours per week, 50 weeks per year).**
Appendix E – Visit Case File Organization

I. **Introduction.**

Case Files must be maintained in a defined, uniform format, whether in a format acceptable to the Region, or in accordance to the requirements outlined here. This appendix provides a sample file structure for a case file comprised of printed materials. A project may organize case files in a different manner as long as all contents listed here are included in a consistent and organized fashion. Projects may maintain case files using printed and/or electronic media and are responsible for providing printed copies of these records upon request by OSHA and for meeting National Archives and Records Administration electronic recordkeeping requirements.

II. **Visit Case File Definition.**

A visit case file shall be composed of all essential documents relating to a single visit of an establishment. Separate initial visits of the same establishment shall be filed in separate visit case files. However, actions which form an essential part or continuation of the original visit, such as follow-ups, interim monitoring visits and training and assistance visits, shall be filed in the original case file. Simultaneous health and safety visits to the same establishment shall be filed separately if they constitute complete, separate visits. Materials, such as video or audiotapes, filed separately from the case file are still considered integral parts of the case file as are documentary materials maintained in electronic media.

III. **External File Structure.**

A. **Alphabetic Filing.** Use the alphabetic filing rules contained in OSHA Instruction ADM 1-1.12A.

B. **Label Preparation.** The file shall have a label listing at least the employer’s legal name.

IV. **Internal File Structure.**

A. **Electronic Documents.** If electronic files are maintained either in addition to or instead of paper files, the electronic documents relating to one case shall be maintained together as a unit.

B. **Forms and Notes.** All official forms and notes constituting the basic documentation of a case must be part of the case file. This material shall be attached to the RIGHT side of the case file folder in the order noted in paragraph V.A. All official forms and notes relating to follow-up visits shall be maintained in the same order, but shall be placed on top of the forms and notes relating to the original visit.
C. Correspondence. All correspondence relating to the case shall be attached to the LEFT side of the folder in reverse chronological order; that is, with the most recent correspondence on top. (See paragraph V.A. for a description of the types of materials included as correspondence). Forms and notes related to training and assistance visits shall be maintained on the left side on top of the initial visit file correspondence.

D. Mail Receipts. Mail receipts shall be attached to the documents to which they relate. Be sure information is not covered by the receipt. If a mail receipt cannot be placed on the back of the related document, place the receipt on a blank sheet of paper and staple the paper to the applicable document.

E. Miscellany. Miscellaneous visit case files documentation not clearly falling into either paragraph IV.B or IV.C above shall be filed as correspondence on the LEFT side of the folder. If too voluminous to fit easily into the visit case file folder, file the information in a separate location but note the location on the visit case file diary sheet. If an establishment folder has been started on a company establishment, worksite, etc., safety manuals and similar material shall be placed in the establishment folder and a cross-reference note placed in the visit case file diary sheet. These materials could include a list of competent persons, a list of employees trained or anything else related to safety or health matters in the company or establishment.

V. Filing Arrangement - Visit Case File Contents.

A. Forms and Related Documentation. The following listing is an itemization of the OSHA forms and related documentation which appears on the RIGHT side of the case file, IN ORDER FROM TOP TO BOTTOM. File amendments and any official notes with the forms to which they relate.

1. Written Report to Employer.
   a. Report of Hazards Found
   b. Employer Report of Action Taken
   c. Safety and Health Program Management
   d. Training Provided by the Consultant
   e. Monitoring Report (if applicable)

2. Hazard Form.
3. Visit Form.

4. Request Form.

5. OSHA 300 Log or data obtained to support injury and illness rates.

6. **NOTE:** File here those forms which describe or support hazard identified that will appear on the record of hazards.
   
   a. OSHA 91A Air Sampling Worksheet.
   
   b. OSHA 91B Air Sampling Report.
   
   c. OSHA 93 Direct Reading Report.
   
   d. OSHA 98 Screening Report.
   
   e. OSHA 92 Noise Survey Report.
   

7. Photo Mounting Worksheets to support the hazards identified. **NOTE:** File here those forms which do not result in a violation of OSHA standards. This includes related sampling data forms and continuation sheets.
   
   a. OSHA 91A Air Sampling Worksheet.
   
   b. OSHA 91B Air Sampling Report.
   
   c. OSHA 93 Direct Reading Report.
   
   d. OSHA 98 Screening Report.
   
   e. OSHA 92 Noise Survey Report.
   
   f. OSHA 99 Octave Band Analysis and Impact Noise

8. Technical Information. This includes information obtained from the establishment, to include: employer's safety and health reports, material safety data sheets, record of safety and health related training, and the like.

9. OSHA Establishment Compliance Record (from the OSHA website).

10. Field Notes.
11. Other Materials.

12. Video and Audiotape. These video and audiotapes are related to specific visits. Video and audiotapes are record material and are an integral part of the visit case file to which they relate.

B. Correspondence and Miscellaneous Information. The following is a list of the types of correspondence and miscellaneous case documentation which shall appear on the LEFT side of the case file.

1. Method of Filing. This material shall be FILED IN REVERSE CHRONOLOGICAL ORDER (i.e., with the most recent correspondence and other information on top). DO NOT file this material in the order in which it is listed below. The diary sheet and the forms in paragraphs V.A.6. (b) through (f) are an exception to the reverse chronological order rule.

2. Diary Sheet. This sheet is placed on the top of the material on the left side of the folder. The diary sheet may be used to note important telephone and face-to-face conversations, the date of important actions such as opening visit date, date report sent to employer, and any other activities deemed important enough to note on this summary of contacts. The diary sheet may also be used to document the receipt date of important correspondence, such as verification of abatement and extensions.

3. Abatement Information.
   a. Letter of abatement.
   b. Supporting documentation of abatement, (pictures, purchase orders, receipt of purchase, etc.).
   c. Letter to employer of past due abatement.
   d. Progress report of abatement.
   e. Documents for Extension of corrective measures.
   f. Letter referring employer to OSHA due to hazards overdue on abatement.

4. Informal Documentation. This includes memoranda to the file, memoranda of conversations, and similar informal documentation recording telephone calls, visits, meetings, e-mails and the like.
VI. **Numbering System for Forms.**

A. DO NOT organize the case file documentation into appendixes. You may use divider tabs to permit easy reference.

B. DO NOT page number the case file as a unit.

VII. **Subdivision of Visit Case Files.**

Elements of a visit case file such as extensive field notes, abatement information, and the like may be identified for easy reference using dividers with index tabs. This will allow consultants and others to quickly and easily find frequently referenced paperwork.

VIII. **Substitution of Records.**

Electronic media or videotape or audiotape may substitute for paper records in the case file. Further, any documentary materials listed above may be filed separately, such as video tapes and records maintained in electronic media. Records maintained in electronic media, in lieu of printing them out and filing them in the case file, must be maintained as a unit in an electronic document management system and clearly identified as part of the specific case file. The electronic system shall meet all NARA (National Archives and Records Administration) requirements for an electronic recordkeeping system.

IX. **Case File Disposition.**

For current case disposition instructions, see the On-site Consultation Program Limited Access Page.
## Appendix F – Checklist for On-site Review

<table>
<thead>
<tr>
<th>Operational Review of the Consultation Project</th>
<th>✓</th>
<th>√</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progress in meeting annual training plans</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>On-the-job evaluations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lapse time from request to delivery of service</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management reports (i.e., written reports pending, pending hazard corrections, number of requests, and visits pending)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hiring and vacancies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project expenditures and budgetary issues</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Monitoring of consultants' performance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Promotion of the Project's recognition and exemption program (SHARP)</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Marketing initiatives</td>
<td></td>
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<tr>
<td>Project's internal quality assurance program</td>
<td></td>
<td></td>
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<tr>
<td>Consistent use of the Safety and Health Program Worksheet (Revised OSHA Form 33) by all consultants</td>
<td></td>
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</tr>
<tr>
<td>Pertinent changes in the organization</td>
<td></td>
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</tr>
<tr>
<td>Performance issues carried over from previous review</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Items requiring action to correct deficiencies</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Criteria applying to all case files

<table>
<thead>
<tr>
<th>Requirement</th>
<th>✓</th>
<th>√</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are all field notes, observations, analyses, and other written documentation (such as hazard documentation, OSHA 300 logs, standard-required programs, safety and health management systems, site layouts) gathered prior to and during the hazard survey included in the case file?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the file contain an evaluation of the employer's safety and health management system (Safety and Health Program Assessment Worksheet Revised OSHA Form 33)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the Safety and Health Program Assessment Worksheet (Revised OSHA Form 33) contain evidence adequate to support the conclusions and recommendations made for each indicator?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If the purpose of the visit was to do formal training, was there: evidence in the file that either a hazard survey was performed or that a federal or state compliance officer, or private sector safety or health consultant had visited the site, within the 12 months preceding the date of request for the training?

<table>
<thead>
<tr>
<th>Event</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If the employer was granted an extension of the original assigned Correction-Due Date (CDD):</td>
</tr>
<tr>
<td></td>
<td>Was the request by the employer in writing?</td>
</tr>
<tr>
<td></td>
<td>Did the request include reasons why the correction was not completed in the established time frame?</td>
</tr>
<tr>
<td></td>
<td>Did the request include evidence that the employer is safeguarding employees against the hazard with interim protection during the correction period?</td>
</tr>
<tr>
<td></td>
<td>Does the Written Report to the Employer contain:</td>
</tr>
<tr>
<td></td>
<td>Summary of employer's request?</td>
</tr>
<tr>
<td></td>
<td>Scope of services provided?</td>
</tr>
<tr>
<td></td>
<td>Name of consultant?</td>
</tr>
<tr>
<td></td>
<td>Items of importance covered in the opening conference?</td>
</tr>
<tr>
<td></td>
<td>Description of the workplace and working conditions?</td>
</tr>
<tr>
<td></td>
<td>Comparison of the site's TRC and DART rates to the national industry average?</td>
</tr>
<tr>
<td></td>
<td>Consistent and proper classification of identified hazards, particularly serious hazards, including the corresponding applicable standards and codes and a statement that interim protection was recommended at the closing conference, if appropriate?</td>
</tr>
<tr>
<td></td>
<td>Appropriate recommendations for hazard correction and control, including technical advice as appropriate?</td>
</tr>
<tr>
<td></td>
<td>Standard Element Paragraphs (STEPs) modified to meet the employer's specific conditions?</td>
</tr>
<tr>
<td></td>
<td>Discussion of the relation of hazards found to deficiencies in the employer's safety and health management system, with appropriate site-specific recommendations?</td>
</tr>
<tr>
<td></td>
<td>Discussion of the employer's safety and health management system?</td>
</tr>
<tr>
<td></td>
<td>Appropriate summary of any training provided during the hazard survey?</td>
</tr>
<tr>
<td></td>
<td>Were there any delays documented from the request to the on-site visit, until the visit occurred?</td>
</tr>
<tr>
<td></td>
<td>Were there any delays documented from the closing conference to the issuance of the final report?</td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Did the OSHA OIS Visit Activity include the number of employees?</td>
<td></td>
</tr>
<tr>
<td>Were all serious hazards abated and documentation of abatement procedures included in the file?</td>
<td></td>
</tr>
</tbody>
</table>

**Additional Criteria Applying Only to Health Files:**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>H1.</td>
<td>Does the case file reflect appropriate sampling techniques?</td>
</tr>
<tr>
<td>H2.</td>
<td>Were the appropriate number of samples taken relative to the nature of the suspected hazard and the number of employees involved?</td>
</tr>
<tr>
<td>H3.</td>
<td>Were the appropriate sampling instruments used for the job?</td>
</tr>
<tr>
<td>H4.</td>
<td>Was there evidence of proper sampling instrument calibration either on the CDS forms or a separate calibration log?</td>
</tr>
<tr>
<td>H5.</td>
<td>Were the appropriate sampling techniques and practices followed?</td>
</tr>
<tr>
<td>H6.</td>
<td>Were the necessary sampling data recorded on sampling sheets and field notes?</td>
</tr>
</tbody>
</table>

**Additional Criteria Applying Only to SHARP Files (pertaining only to cases in which recognition has been granted):**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>S1.</td>
<td>Was a full service survey, addressing both safety and health hazards, completed?</td>
</tr>
<tr>
<td>S2.</td>
<td>Is there verification (written or observed on-site) that ALL hazards identified during the hazard survey were corrected?</td>
</tr>
<tr>
<td>S3.</td>
<td>Is there adequate documentation that the elements listed on the Safety and Health Program Assessment Worksheet (Revised OSHA Form 33) were implemented at the &quot;2&quot; level or above?</td>
</tr>
<tr>
<td>S4.</td>
<td>Are the employer’s TRC and DART rates below the industry average?</td>
</tr>
<tr>
<td>S5.</td>
<td>Is there evidence of operating history of at least one year?</td>
</tr>
</tbody>
</table>

**Additional Criteria Applying Only to Case Files Containing On-the-Job Evaluations**

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>J1.</td>
<td>Are all on-the-job evaluations conducted according to the project's internal quality assurance program?</td>
</tr>
</tbody>
</table>
#1 Recognition and Evaluation of Occupational Hazards

Possesses the knowledge, skills and abilities to adequately recognize and evaluate workplace safety and health hazards.

- **Possesses fundamental technical/legal and procedural knowledge.**
  - Demonstrates proficiency in the fundamentals of occupational safety and health.
  - Applies substantive knowledge of technical areas (e.g., electricity, machine guarding, hazardous materials, industrial toxicology, ergonomics, ventilation, fall protection, noise, respiratory protection).
  - Demonstrates proficiency in the anticipation, recognition, evaluation, control and management of occupational health hazards including chemical, physical, biological and ergonomic stressors.
  - Possesses a basic knowledge of OSHA, its mission, and the relationship between OSHA and 21(d) Consultation.
  - Understands and applies the relationship with enforcement requirements found in the FOM.
  - Recognizes apparent hazards and violations of regulations and standards (29 CFR 1910 and 29 CFR 1926); documents hazards, violations and abatements in accordance with OSHA and Consultation policies and procedures.
  - Aware of agencies and organizations, other than OSHA, that can be of assistance to the employer.

- **Plans and prepares for consultation visits.**
  - Researches site history, industry processes and hazards, abatement options, sampling methods and best practices.
  - Reviews inspection history, prior consultation visits, and verifies SIC/NAICS codes.
  - Inquires about safety and health hazards that may be present.
  - Charges, calibrates, and tests equipment and instruments to ensure that they are in proper working order for Consultation visits.

- **Conducts on-site visit.**
  - Conducts opening and closing conferences in a manner consistent with the CPPM.
  - Models safe behavior and work practices established at the worksite and/or as appropriate.
  - Recognizes when personal protective equipment is necessary, and how to correctly don and doff appropriate PPE.
  - Describes the hazard recognition and evaluation process to the employer.
  - Comprehends workflow.
✓ Conducts walk around inspections of worksites, reviewing safety and health programs and inspecting machine and equipment operations, environmental conditions, work practices and processes, protective devices and equipment and safety procedure.
✓ Ability to effectively interview management, supervisors, employee representatives and employees to acquire a wide range of information (e.g., specific details on hazardous operational processes and conditions information used to determine information on working conditions and information used to evaluate the total worksite environment.)
✓ Evaluates current work and written procedures (e.g., lockout, hazard communication program, etc.):
  ✓ Identifies, documents, and classifies hazards (i.e., serious, other-than-serious, imminent danger).
  ✓ Records field notes adequately.
  ✓ Uses instrumentation to measure safety hazards and health stressors.
  ✓ Conducts sampling/monitoring according to instrument instruction, established laboratory protocol/methodology, and according to recommended professional practice:
    • Identifies jobs or locations to sample
    • Develops a sampling plan
    • Obtains proper sampling media and equipment.
    • Collects and handles samples with technical accuracy
    • Records appropriate monitoring conditions

➢ Analyzes information related to consultation surveys:
  ✓ Understanding the assessment of instrument readings relative to safe/unsafe conditions and permissible limits.
  ✓ Reviews and utilizes laboratory results and determines if exposures exceed permissible and/or recommended limits (soil, mechanical integrity, stress testing, safety, etc.)
  ✓ Conducts/runs appropriate statistical tests (i.e., sampling and analytical error).
  ✓ Interprets all monitoring and related data accurately, in accordance with accepted Safety and Industrial Hygiene practice.

#2 Evaluate Safety and Health Management Systems

Possesses the knowledge, skills and abilities needed to evaluate an employer’s current safety and health management system and communicate appropriate recommendations to improve overall effectiveness.

➢ Possesses an understanding of safety and health management systems (management commitment and employee involvement; worksite analysis; hazard prevention and controls; safety and health training):
  ✓ Applies the Safety and Health Program Assessment Worksheet (Form 33).
Communicates the methods and benefits of the safety and health management system’s evaluation to management and employee.

Evaluates injury/illness data and related hazard analysis experience:
- Reviews available injury/illness (OSHA’s Form 300/301) and hazard identification records.
- Calculates Days Away, Restricted/Transferred (DART) and Total Case Rate (TRC) rates; compares these with industry averages (BLS data).
- Identifies injury/illness and hazard incidence trends (reports of unsafe conditions, near misses, etc.)
- Conducts injury/illness and hazard root cause analyses.

Evaluates other available performance measure records and information (loss data, absenteeism, turnover, quality program, interview results, etc.)

Reviews and evaluates safety and health management system activities:
- Gathers sufficient written, verbal and visual information to correctly rate the site’s performance of each Form 33 attribute.
- Completes the Form 33 for the site to capture the elements of a safety and health management system (i.e., hazard anticipation and detection; hazard prevention and control; planning and evaluation; administration and supervision; safety and health training; management leadership; and employee participation).

Recognizes and demonstrates the correlation between hazard/injury experience and safety and health management system deficiencies.

Communicates the evaluation of the safety and health management system to management and employees in a closing conference:
- Discusses, if applicable, suitability of the site for Pre-SHARP Deferral and SHARP (or VPP) and requirements to enter this program.

Prepares a report of findings and recommendations:
- Details findings and recommendations for improving program attributes as specified in the CPPM.
- Provides or refers employer to helpful resources.

#3 Provide Occupational Safety and Health Training

Possesses the knowledge, skills and abilities in order to provide effective formal and informal occupational safety and health training, either on-site or off-site.

Designs training programs by conducting research, needs analysis, and developing presentation material appropriate for intended audience:
Develops clear, measurable training objectives

Applies instructional design strategies to appropriate audiences:
  - Adult learning principles
  - Multi-cultural principles

Ensures that training and resource materials reflect current literature and industry trends.

- Develops training presentations:
  - Determines appropriate technology for training delivery (i.e., PowerPoint presentation, lecture, workshops, etc.)
  - Develops training handouts, job aids and reference materials

- Delivers effective training both on-site and off-site:
  - Networks (Partnerships) within OSHA and with other groups (ex. Small business Development Center) to provide and market comprehensive safety and health training.
  - Identify opportunities and needs for informal training during the visit and/or walk around.
  - Identify opportunities for and provides, if necessary, formal training based on the walk around.
  - Conducts training evaluation.

- Encourage employers to develop and train employees in safety and health areas:
  - Provides information on other possible training sources such as OSHA education centers

#4 Manage Program Processes and Reports

Possesses the knowledge, skills and abilities in order to integrate information collected in the field to an employer report, ensuring that appropriate technical information and policies are incorporated and that key information is transmitted to the appropriate information system.

- Ability to manages work processes:
  - Prioritize assignments.
  - Collects, timely records and schedules visits in accordance with office plan.
  - Manages case file load efficiently and ensures timely submission of reports.
  - Manages correspondence timely, including employer abatement responses, extension requests, requests for information.
  - Proficiently and accurately performs data entry requirements into appropriate information systems.

- Organizes and documents information for the written report and case file:
  - Effectively proficient with computer technology for research, visit data collection, and report preparation.
Organizes and consolidates documentation pertinent to case files in a logical or required format.

Prepares professional written reports to the employer covering all elements in accordance with current policy.

Documents interim protection, if applicable.

Ensures that all hazards identified are covered in the Report of Hazards, including an accurate and complete description of the hazard and location, including photographs if available.

Ensures that all hazards related to chemical overexposure are addressed (i.e., separate hazards for respiratory protection, overexposure and engineering controls, including action plans if appropriate).

Provides a summary and explanation of air and noise sampling results that is technically correct and easily understood, with comparisons to OSHA PELs and other recommended limits.

Applies Consultation Policies and Procedures:

Ensures that all policies are followed in accordance with 29 CFR 1908, On-site Consultation Cooperative Agreements, CPPM, and other applicable policy documents.

#5 Provide Hazard Prevention and Control Assistance

Possesses the knowledge, skills and abilities in order to effectively provide hazard prevention and control assistance to employers.

Provides assistance regarding developing hazard prevention and controls:

Ensure that controls are consistent with the OSHA Hierarchy of Controls.

Applies knowledge of manufacturing and construction processes, materials, tools, equipment and procedures to assist employer with developing engineering and work practice controls.

Assist employer in developing and implementing administrative and personal protective equipment controls.

Provides solutions or recommendations for interim protection.

Assists employer with developing action plan, if necessary.

Coordinates and seeks assistance regarding abatement plans when hazard control expertise is necessary.

Evaluates controls:

Provides technical assistance in evaluating hazard controls.

Establishes reasonable correction due dates and extensions.

Verifies correction of serious hazards on-site or in written verification from employer.

Determines need/priority for and conducts follow-up visits, if appropriate.
Possesses knowledge of OSHA abatement procedures:

- Conducts abatement assistance visits after citations.
- Provides abatement assistance in response to an enforcement phone call and/or fax.
- Possesses knowledge of OSHA enforcement policies and procedures to assist employers with OSHA Abatement, such as:
  - Petition for Modification of Abatement (PMA).

#6 Provide Off-site Technical Support

Possesses the knowledge, skills and abilities in order to provide effective off-site technical support.

- Research and respond to requests for assistance:
  - Proficient in the use of the Internet to research and provide accurate information.
  - Utilizes current literature, reference books, monographs, consensus standards, industry best practices, and other pertinent resources and/or networking opportunities to ensure quality of support services.
  - Awareness of agencies other than OSHA that can be of assistance.

- Effectively communicates technical information:
  - Communicates technical information in a manner which is easily understood.
  - Encourages employers and employees to communicate questions or concerns.
  - Respects the confidentiality of employer and/or employee questions.

#7 Promote OSHA Consultation Services

Possesses the knowledge, skills and abilities in order to effectively promote OSHA Consultation Services and communicates the value of a safe and healthful workplace to both the employees and employers.

- Looks for opportunities to market the Consultation Program:
  - To employers, trade associations, businesses and small businesses in high-hazard industries.
  - Within their own organization, associated state agencies and university programs.

- Recommends and applies effective marketing methods.

- Promotes and communicates the value of safe and healthful workplaces.

- Explains the program services and eligibility requirements on initial contact.

- Promotes SHARP.
#8 OSHA Consultant Professionalism

Models personal conduct and professional growth.

- Maintains the health and safety of the employers and employees as the guiding principle in all consultation activities.

- Fosters constructive, professional working relationships with others; is professional, flexible, and courteous, even when discussing or eliciting sensitive or controversial information.

- Recognizes and avoids conflicts of interest.

- Pursues professional growth and development opportunities:
  - Keeps current with industry trends through research and/or networking.
  - Considers own performance, proactively seeks and responds constructively to feedback from others, and applies this information to enhance performance and progress toward career goals.
  - Devotes substantial effort to increasing knowledge and skills and keeping up-to-date in the safety and health profession (e.g., by attending training courses, meetings, and conferences, reading professional publications, joining professional associations, seeking on-the-job training experiences, pursuing professional certification).
  - Provides on-the-job training and mentoring to less-experienced employees.
  - Takes initiative to seek new or additional responsibilities and challenges; continually applies greater levels of effort, persistence, and autonomy toward achievement of goals.

Training and Assistance Visits.

Training and Assistance Visits are primarily conducted to provide an employer with safety and health program assistance, training and education, and/or correction assistance. Training and Assistance Visits may be provided only after a hazard survey, such as initial consultation visit, an OSHA inspection, or a private consultant survey has been conducted within the past 12 months. The hazard survey must provide adequate foundation for conducting services through a training and assistance visit.

Program Assistance. Employers may request additional assistance with development of a Safety and Health Management Systems (SHMS) after the initial visit. This assistance will be documented through use of Safety and Health Assessment Form in OIS.

Formal Training. Consultants provide formal training in a classroom-like setting, following a syllabus a copy of which must be maintained in the case file. Additionally, a complete roster of all attendees must also be maintained in the case file. Formal training may take place on-site or off-site:
**On-site Training.** Training visits may only be conducted on-site when specifically requested by the employer and only in conjunction with or within 12 months of a hazard survey. If the training visit is subsequent to a hazard survey not conducted by the Consultation Project, the consultant must have access to the survey report and be able to confirm that serious hazards were or are being corrected. A copy of the hazard survey report should be included in the case file. The consultant must also conduct a brief walkthrough of the workplace to verify hazard corrections and review current conditions to determine that no new hazardous conditions exist.

**Off-site Training.** Off-site training is technical in nature and takes place at a location other than the employer’s place of business. It may be coded as either a visit or a Compliance Assistance Activity, based on the following criteria:

- If the off-site training is provided for a single employer and is directly connected to one or more hazards found during an initial or follow-up visit, it should be recorded in the OIS as a Visit Activity.

- If the off-site technical training is not directly related to an on-site visit (as specified in 2(a), above), it should be recorded in OIS as a Compliance Assistance Activity. A hazard survey is not a prerequisite for providing this service.

- If an employer requests Formal Training for the same day as an initial visit, the Formal Training may be counted as a separate Training and Assistance Visit in limited situations where it is cost effective to do so. If the Project would like to count the Formal Training as a separate visit, a closing conference must be held prior to the training. Additionally, the Project must send a separate letter to the employer describing the training, and retain all required documentation (preapproved syllabus and roster of attendees) in the case file.

**Informal Training.** Consultants may provide informal safety and health training to employers and employees as requested by the employer (after a hazard survey has been conducted). Informal training does not involve any planned preparation or a syllabus. Training should be tailored to specific safety and health hazards observed at the workplace. Informal training should typically be provided and documented during the initial visit, however, informal training may be provided during a training and assistance visit when the employer’s request also includes Program Assistance, Formal Training, or Correction Assistance.

**Training Documentation.**

**During the Initial Visit.** Training services provided during the initial visit must be included in the written report to the employer.
Following the Written Report. Training services provided after the written report has been sent to the employer must be followed up with a letter to the employer describing the training and a copy of the letter must be placed in the case file.

Training Log. The CPM must maintain a log of the formal training that has been scheduled, conducted, and/or cancelled for review by the Regional Office. The log should include formal training conducted individually by the Project and/or in coordination with other organizations.

Recording Training Time. Instructions for recording training activity can be found under the Time Tracking Activity in OIS guidance.

Trainers’ Qualifications.

Informal Training. To be qualified to provide informal training the consultant must have:

- Completed the Introduction to On-site Consultation Course (OSHA course 1500);
- Have subject-matter knowledge in the area of the training being offered and demonstrated the ability to conduct training.

Consultants should demonstrate their ability to conduct informal training before being authorized to conduct it on their own. That demonstration may involve a mentoring process, where the consultant observes an experienced consultant conduct informal training and demonstrates to the satisfaction of the Consultation Program Manager an understanding of the principles of the informal training process. The Consultation Program Manager should maintain records which will allow the Region to track who is authorized to conduct training during the biannual on-site monitoring.

Formal Training. To be qualified to deliver formal training, the consultant must meet all of the requirements for providing informal training in addition to all of the following:

- Be selected by the Assistant Chief of Consultation and Training to deliver formal training; and
- A minimum of 2 years previous experience conducting formal training for adults, or be trained as a trainer by an accredited institution.

Trainer’s Qualifications Waivers.

Based on the consultant’s prior work history and skill set, the Regional Administrator has the discretion to waive the requirements listed above in paragraphs IV.A – Trainer’s Qualifications: Informal Training and/or IV.B – Trainer’s Qualifications: Formal Training. To obtain such a waiver, the Consultation Program Manager must submit a written request to the Regional Administrator.
Resource-Related Considerations.

**Economies of Scale.** Off-site training leverages resources when one consultant can address a common training need for multiple employers.

**Training Coordination.** To avoid duplication of effort and to ensure the most efficient use of limited consultation resources, requests for off-site training approved by the Assistant Chief of Consultation and Training should be coordinated with other providers of similar or related training. In particular, the Assistant Chief of Consultation and Training should coordinate with Susan Harwood grantees, the OSHA Training Institute, OSHA Strategic Partnership Participants, Alliance members, and Small Business Development Centers. The Assistant Chief of Consultation and Training should also coordinate with OSHA’s Compliance Assistance Specialists and other regional or State personnel to assure that joint training sessions are conducted where appropriate. In addition, the CPM should maintain a log of the training that has been scheduled for review by the Regional Office.

Over Reliance on Consultants by Employers. Consultants should always encourage employers to develop their own training programs in order to reduce reliance on consultants and to ensure that the employer establishes a training capability for any new employees and/or annual employee refresher training.
### Safety and Health Program Assessment Worksheet

**Form 33**

<table>
<thead>
<tr>
<th>Request Number</th>
<th>Visit Number</th>
<th>Visit Date</th>
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</thead>
<tbody>
<tr>
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</table>

#### Legend:
- 0 = No
- 1 = No, Needs major improvement
- 2 = Yes, Needs minor improvement
- 3 = Yes
- NA = Not Applicable
- NE = Not Evaluated
- * = Stretch items Attribute of Excellence

#### Synthesis Item Score

<table>
<thead>
<tr>
<th>Hazard Anticipation and Detection Score</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hazard Prevention and Control Score</td>
<td></td>
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<tr>
<td>Planning and Evaluation Score</td>
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<tr>
<td>Administration and Supervision Score</td>
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<tr>
<td>Safety and Health Training Score</td>
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<tr>
<td>Management Leadership Score</td>
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<tr>
<td>Employee Participation Score</td>
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<tr>
<td>Total Score</td>
<td></td>
</tr>
<tr>
<td>Average Score</td>
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</table>

#### Hazard Anticipation and Detection

| 1. A Comprehensive, baseline hazard survey has been conducted within the past five (5) years | Score |
| Comments:                                                                                                                                                                        |
| 2. Effective safety and health self-inspections are performed regularly | Score |
| Comments:                                                                                                                                                                        |
| 3. Effective surveillance of establishment hazard controls is conducted. | Score |
| Comments:                                                                                                                                                                        |
| 4. An effective hazard reporting system exists. | Score |
| Comments:                                                                                                                                                                        |
| 5. Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs. | Score |
| Comments:                                                                                                                                                                        |
| 6. Accidents are investigated for root causes. | Score |
| Comments:                                                                                                                                                                        |
### Hazard Anticipation and Detection

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<th>Score</th>
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7. Safety Data Sheets are used to reveal potential hazards associated with chemical products in the workplace.

Comments:

8. Effective job hazard analysis is performed.

Comments:

9. Expert hazard analysis is performed.

Comments:

10. *Incidents are investigated for root causes.

Comments:

### Hazard Prevention and Control

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<th>Score</th>
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</table>

11. Feasible engineering controls are in place.

Comments:

12. Effective safety and health rules and work practices are in place.

Comments:

13. Applicable OSHA-mandated programs are effectively in place.

Comments:

14. Personal protective equipment is effectively used.

Comments:

15. Housekeeping is properly maintained.

Comments:

16. The organization is properly prepared for emergency situations.

Comments:

17. The organization has an effective plan for providing competent emergency medical care to employees and others present at the site.

Comments:

18. *Effective preventive maintenance is performed.

Comments:

19. An effective procedure for tracking hazard correction is in place.

Comments:

### Planning and Evaluation

<table>
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<tr>
<th>Score</th>
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</table>

20. Workplace injury/illness data are effectively analyzed.

Comments:

21. Hazard incidence data are effectively analyzed.

Comments:

22. A safety and health goal and supporting objectives exist.

Comments:

23. An action plan designed to accomplish the organizations safety and health objectives is in place.
## Planning and Evaluation

<table>
<thead>
<tr>
<th>Score</th>
<th>Comments</th>
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<tbody>
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24. A review of in-place OSHA-mandated programs is conducted at least annually.

25. *A review of the overall safety and health management system is conducted at least annually.

## Administration and Supervision

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26. Safety and health program tasks are each specifically assigned to a person or position for performance or coordination.

27. Each assignment of safety and health responsibility is clearly communicated.

28. *An accountability mechanism is included with each assignment of safety and health responsibility.

29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.

30. Individuals with assigned safety and health responsibilities have the authority to perform their duties.

31. Individuals with assigned safety and health responsibilities have the resources to perform their duties.

32. Organizational policies promote the performance of safety and health responsibilities.

33. Organizational policies result in correction of non-performance of safety and health responsibilities.

## Safety and Health Training

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34. Employees receive appropriate safety and health training.

35. New employee orientation includes applicable safety and health information.

36. Supervisors receive appropriate safety and health training.

37. *Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.
<table>
<thead>
<tr>
<th><strong>Safety and Health Training</strong></th>
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<tr>
<td>38. Safety and health training is provided to managers.</td>
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<td>39. <em>Relevant safety and health aspects are integrated into management training.</em></td>
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<th><strong>Management Leadership</strong></th>
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<tr>
<td>40. Top management policy establishes clear priority for safety and health.</td>
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<td>41. Top management considers safety and health to be a line rather than a staff function.</td>
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<td>42. <em>Top management provides competent safety and health staff support to line managers and supervisors.</em></td>
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<td>43. Managers personally follow safety and health rules.</td>
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<td>44. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.</td>
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<td>45. Managers allocate the resources needed to properly support the organizations safety and health system.</td>
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<td>46. Managers assure that appropriate safety and health training is provided.</td>
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<td>47. Managers support fair and effective policies that promote safety and health performance.</td>
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<td>48. Top management is involved in the planning and evaluation of safety and health performance.</td>
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<td>49. Top management values employee involvement and participation in safety and health issues.</td>
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<th><strong>Employee Participation</strong></th>
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<td>50. There is an effective process to involve employees in safety and health issues.</td>
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<td>51. Employees are involved in organizational decision making in regard to safety and health policies.</td>
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<td>52. Employees are involved in organizational decision making in regard to the allocation of safety and health resources.</td>
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<td>53. Employees are involved in organizational decision making in regard to safety and health training.</td>
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<td>54. Employees participate in hazard detection activities.</td>
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<td>55. Employees participate in hazard prevention and control activities.</td>
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<td>56. *Employees participate in the safety and health training of co-workers.</td>
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<td>57. Employees participate in safety and health planning activities.</td>
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<td>58. Employees participate in the evaluation of safety and health performance.</td>
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