Recordkeeping & Antiretaliation update

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Compliance Assistance Specialist

Occupational Safety and Health Administration

Mohawk Valley Environmental Information Exchange SUNY Poly Campus October 12, 2016

"Safety is not the absence of injuries. It is the reduction of risk and exposure to self and others."



Our Challenge

- At least 3 million, and possibly as many as 5 million workers are injured on the job every year.
- The number and rate of workplace injuries and fatalities are changing only marginally from year to year.
- We know less about, and are probably having an even smaller impact, on work illnesses.



What must we do to <u>dramatically</u> reduce the number of work injuries, illnesses and fatalities occurring in the US today?

Whatever we are doing now isn't enough

What must we to do to change the behavior of millions of employers?







OSHA INITIATIVES







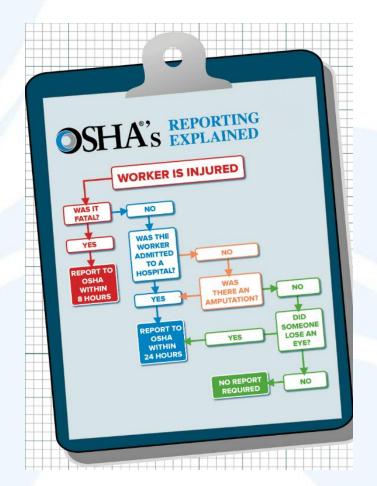






Report a fatality or severe injury

- All employers are required to notify OSHA when an employee is killed on the job or suffers a work-related hospitalization, amputation, or loss of an eye.
- A fatality must be reported within 8 hours.
- An in-patient hospitalization, amputation, or eye loss must be reported within 24 hours.





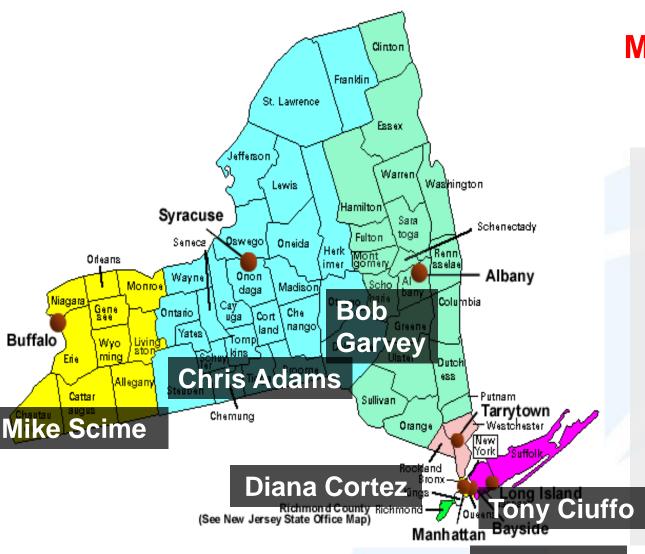
How can employers report to OSHA?

- During business hours, call the nearest OSHA office
- Or call the OSHA 24-hour hotline 1-800-321-6742 (OSHA)
- Electronically online at www.osha.gov
 - Be prepared to supply: Name of the establishment, location and time of the incident, names of employees affected, brief description of incident, and a contact person and phone number





NYS OSHA Area Offices



Main OSHA Number:

1-800-321-OSHA, 1-800-321-6742

Buffalo Area Office

(716) 551-3053

Syracuse Area Office

(315) 451-0808

Albany Area Office

(518) 464-4338

Tarrytown Area Office

(914) 524-7510

Manhattan Area Office

(212) 620-3200

Long Island Area Office

(516) 334-3344

Kay Gee

Updates to OSHA's Recordkeeping Rule

Changes to who keeps records

Industries classified by NAICS rather than SIC

 Updates the list of industries exempt from the requirement to routinely keep OSHA injury and illness records due to relatively low occupational injury and illness rates

 Firms with 10 or fewer employees in the previous year are still exempt from keeping OSHA records

Went into effect 1/1/15 (in federal states)

OSHA°

www.osha.gov/recordkeeping2014

Severe Injury Reporting



OSHA instituted the new reporting program to:

- Better target the Agency's compliance assistance and enforcement efforts in places where workers are at greatest risk
- **Engage more high-hazard employers** in identifying and eliminating serious hazards



Severe Injury Reporting



RAPID RESPONSE INVESTIGATION (RRI)

- Collaborative, problem-solving approach
- Invites an employer and an OSHA Area Office expert to work together toward shared goal:

Find and fix hazards, and improve overall safety



Severe Injury Reporting:

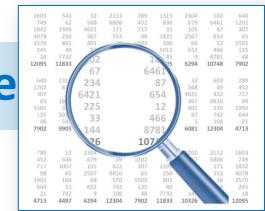
YEAR ONE FINDINGS



- 10,388 severe injuries reported, including
 2,644 amputations and 7,636 hospitalizations
- This is an average of 30 worker injuries every day of the year
- 1,500 amputations reported so far this calendar year
 - Average of 7 amputations per day for both 2015 and 2016
- Most reported injuries (62%) were addressed by employer investigation, not OSHA inspection



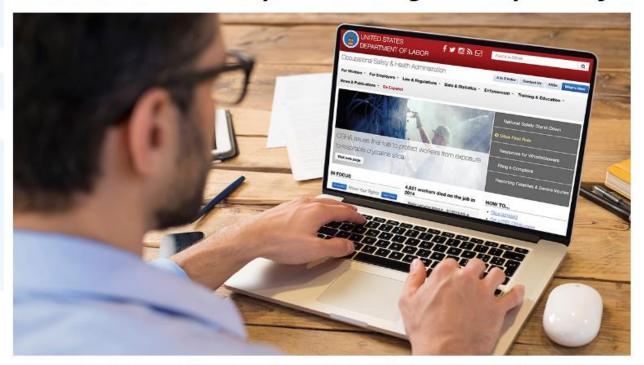
Improve Injury Tracking Rule



- Takes effect January 1, 2017
- No new data collection required; employers will send what they already have
- OSHA will make some of this data publicly available
- Most manufacturing, construction and utilities will be required to submit data.

https://www.osha.gov/recordkeeping/ finalrule/index.html

Final Rule Issued to Improve Tracking of Workplace Injuries and Illnesses



Provisions call for employers to electronically submit injury and illness data that they already record

Why is OSHA issuing this rule?

This simple change in OSHA's rulemaking requirements will improve safety for workers across the country. One important reason stems from our understanding of human behavior and motivation. Behavioral economics tells us that making injury information publicly available will "nudge" employers to focus on safety. And, as we have seen in many examples, more attention to safety will save the lives and limbs of many workers, and will ultimately help the employer's bottom line as well. Finally, this regulation will improve the accuracy of this data by ensuring that workers will not fear retaliation for reporting injuries or illnesses.

About

Read the Rule

Regulatory Text for Recordkeeping Standard - Part 1904 - [Amended]

Corrected Text

Fact Sheet

Frequently Asked Questions

Press Release

Blog by Deputy Secretary Chris Lu

Blog by Paul O'Neill

Related Links

Recordkeeping Webpage

Recordkeeping Forms

Examples of Rate-Based Incentive Programs Submitted to OSHA Regulatory Docket

"Our new rule will 'nudge' employers to prevent work injuries to show investors, job seekers, customers and the public they operate safe and well-managed facilities. Access to injury data will also help OSHA better target compliance assistance and enforcement resources, and enable 'big data' researchers to apply their skills to making

What does the rule require?

Who Does the Regulation Apply To?

 Establishments with 250 or more employees covered by the recordkeeping regulation

 Establishments with 20-249 employees in certain high-risk industries



NAICC	les des atme
NAICS	Industry
11	Agriculture, forestry, fishing and hunting
22	Utilities
23	Construction
31-33	Manufacturing
42	Wholesale Trade
4413	Automotive parts, accessories and tire stores
4421	Furniture stores
4422	Home furnishings stores
4441	Building material and supplies dealers
4442	Lawn and garden equipment and supplies stores
4451	Grocery stores



NAICS	Industry
4452	Specialty food stores
4521	Department stores
4529	Other general merchandise stores
4533	Used merchandise stores
4542	Vending machine operators
4543	Direct selling establishments
4811	Scheduled air transportation
4841	General freight trucking
4842	Specialized freight trucking
4851	Urban transit systems
4852	Interurban and rural bus transportation



NAICS	Industry
4853	Taxi and limousine service
4854	School and employee bus transportation
4855	Charter bus industry
4859	Other transit and ground passenger transportation
4871	Scenic and sightseeing transportation, land
4881	Support activities for air transportation
4882	Support activities for rail transportation
4883	Support activities for water transportation
4884	Support activities for road transportation
4889	Other support activities for transportation
4911	Postal service



NAICS	Industry
4921	Couriers and express delivery services
4922	Local messengers and local delivery
4931	Warehousing and storage
5152	Cable and other subscription programming
5311	Lessors of real estate
5321	Automotive equipment rental and leasing
5322	Consumer goods rental
5323	General rental centers
5617	Services to buildings and dwellings
5621	Waste collection
5622	Waste treatment and disposal



NAICS	Industry
5629	Remediation and other waste management services
6219	Other ambulatory health care services
6221	General medical and surgical hospitals
6222	Psychiatric and substance abuse hospitals
6223	Specialty (except psychiatric and substance abuse) hospitals
6231	Nursing care facilities
6232	Residential mental retardation, mental health and substance abuse facilities
6233	Community care facilities for the elderly
6239	Other residential care facilities
6242	Community food and housing, and emergency and other relief services
6243	Vocational rehabilitation services

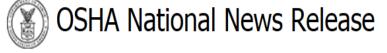
NAICS	Industry
7111	Performing arts companies
7112	Spectator sports
7121	Museums, historical sites, and similar institutions
7131	Amusement parks and arcades
7132	Gambling industries
7211	Traveler accommodation
7212	RV (recreational vehicle) parks and recreational camps
7213	Rooming and boarding houses
7223	Special food services
8113	Commercial and industrial machinery and equipment (except automotive and electronic) repair and maintenance
8123	Dry-cleaning and laundry services



Revised Standards

- 1904.35 Employee involvement
- 1904.36 Prohibition against discrimination
- 1904.41 Electronic submission of injury and illness records to OSHA
- Appendix A High-risk industries with 20-249 employees





U.S. Department of Labor

May 11, 2016

OSHA's final rule to 'nudge' employers to prevent workplace injuries, illnesses

New federal requirements take effect August 10, 2016

WASHINGTON - The U.S. Department of Labor's <u>Occupational Safety and Health Administration</u> today issued a <u>final rule</u> to modernize injury data collection to better inform workers, employers, the public and OSHA about workplace hazards. With this new rule, OSHA is applying the insights of behavioral economics to improve workplace safety and prevent injuries and illnesses.

OSHA requires many employers to keep a <u>record</u> of injuries and illnesses to help these employers and their employees identify hazards, fix problems and prevent additional injuries and illnesses. The Bureau of Labor Statistics reports more than three million workers suffer a workplace injury or illness every year. Currently, little or no information about worker injuries and illnesses at individual employers is made public or available to OSHA. Under the new rule, employers in high-hazard industries will send OSHA injury and illness data that the employers are already <u>required to collect</u>, for posting on the agency's website.

Just as public disclosure of their kitchens' sanitary conditions encourages restaurant owners to improve food safety, OSHA expects that public disclosure of work injury data will encourage employers to increase their efforts to prevent work-related injuries and illnesses.

"Since high injury rates are a sign of poor management, no employer wants to be seen publicly as operating a dangerous workplace," said <u>Assistant Secretary of Labor for Occupational Safety and Health Dr. David Michaels</u>. "Our new reporting requirements will 'nudge' employers to prevent worker injuries and illnesses to demonstrate to investors, job seekers, customers and the public that they operate safe and well-managed facilities. Access to injury data will also help OSHA better target our compliance assistance and enforcement resources at establishments where workers are at greatest risk, and enable 'big data' researchers to apply their skills to making workplaces safer."

The availability of these data will enable prospective employees to identify workplaces where their risk of injury is lowest; as a result, employers competing to hire the best workers will make injury prevention a higher priority. Access to these data will also enable employers to benchmark their safety and health performance against industry leaders, to improve their own safety programs.

To ensure that the injury data on OSHA logs are accurate and complete, the final rule also promotes an employee's right to report injuries and illnesses without fear of retaliation, and clarifies that an employer must have a reasonable procedure for reporting work-related injuries that does not discourage employees from reporting. This aspect of the rule targets employer programs and policies that, while nominally promoting safety, have the effect of discouraging workers from reporting injuries and, in turn leading to incomplete or inaccurate records of workplace hazards.

Using data collected under the new rule, OSHA will create the largest publicly available data set on work injuries and illnesses, enabling researchers to better study injury causation, identify new workplace safety hazards before they become widespread and evaluate the effectiveness of injury and illness prevention activities. OSHA will remove all personally identifiable information associated with the data before it is publicly accessible.

Under the new rule, all establishments with 250 or more employees in industries covered by the recordkeeping regulation must electronically submit to OSHA injury and illness information from OSHA Forms 300, 300A, and 301. Establishments with 20-249 employees in certain <u>industries</u> must electronically submit information from OSHA Form 300A only.

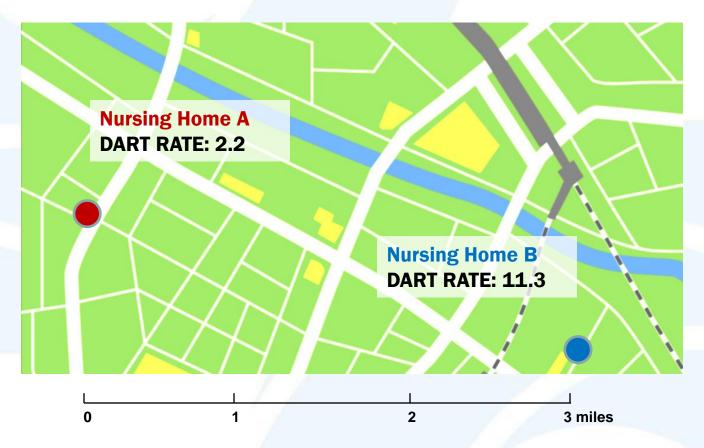








Where Would You Prefer to Work?

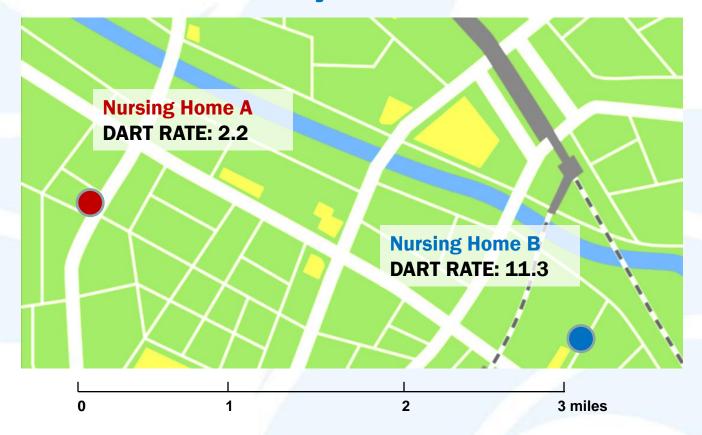


Injury rates can vary widely within same industry and city

DART Case Rate: Days Away, Restrictions, and Transfers



Which Would You Choose for Your Elderly Parent?



Injury rates can vary widely within same industry and city

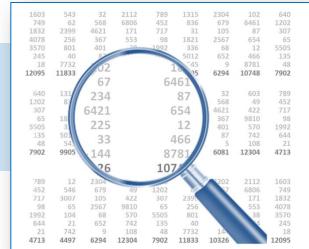
DART Case Rate: Days Away, Restrictions, and Transfers



Applying Principles of Behavioral Economics



- Responsible employers want to be recognized as leaders in safety
- Making data public will "nudge" employers to increase efforts to prevent injuries





1) Encourage employers to improve workplace safety and health to support their reputations as good places to work or do business with.

2) Data will be useful to employers who want to use benchmarking to improve their own safety and health performance.



- Online availability of establishment-specific information will allow employees to compare their own workplaces to the safest workplaces in their industries.
- 4) Access to this data will improve the workings of the labor market by providing more complete information to job seekers, and, as a result, encourage employers to abate hazards in order to attract more desirable employees.

- 5) Access to data will permit investors to identify investment opportunities in firms with low injury and illness rates.
- 6) Members of the public will be able to make more informed decisions about current and potential places with which to conduct business.



7) In large construction contracts, particularly those involving work contracted for by state and local governments, preference is often given to subcontractors with lower injury and illness rates.



No More Discouraging Injury Reporting!

- Goal is to make injury data complete and accurate.
- This can't happen if workers are discouraged from reporting or fear retaliation.
- The rule requires employers to have reporting procedures that are reasonable and do not discourage workers from reporting.
 - This includes retaliatory drug testing...i.e., drug testing only after a worker is hurt on the job

Rate-based Incentives Discourage Injury Reporting

COMPANY PLAN

No Injury Reports = Lottery for 40" Flat TV



MONTHLY BONUS!

— unless employees report an injury!

SAFETY BINGO

\$25 pot increases
each day for each
employee team
as long as there are <u>no</u>
<u>recordable injuries</u>





Don't Fail Your Team Mates!

Quarterly payouts are based on **everyone** meeting **low injury** reporting rates.

The fewer injuries reported, the more money you earn!





VPPPA Study Group Meeting Houston, TX - 2/21/13 Leading Indicators Brainstorming

- 1. Percent training completed vs required
- Percent of IH samples completed vs planned
- 3. Injury follow up within 72 hours
- 4. Number of SHMS system reviews
- Number of SHMS procedure reviews
- Percent of corrective actions completed by due date
- Percent of similar exposure group requirements completed versus required
- Progress on annual injury/illness reduction plan (action items complete)
- Number of job observations vs target per supervisor/manager or per number of hours worked
- 10. Number of near miss or concern reports
- Number of monthly safety management meetings / safety committee meetings
- 12. Quarterly snapshot program
- Number of safety critical preventative maintenance done
- Number of employees included on specific safety teams / elements
- Number of SSAs (serious safety events?) reviewed by hourly employees
- 16. Monthly management step up meetings
- 17. Risk identification and reduction
- 18. Safety committee monthly meeting
- Monthly safety work order day (% complete)
- Number of OFI days (safety/cost saving/process improvement)
- 21. Job coaching/mentoring
- Closing a safety work order within 30 days
- Competency skills complete before job change or assignment

- 24. Wellness program participation
- Incident investigations complete per schedule
- 26. Equipment and tool pre-use inspection
- 27. Pre-job briefings
- 28. Stretch and flex programs
- Safety contact tips/reminders sent around
- Supervisors and managers one on one on floor to talk about safety
- 31. Employee stop works
- 32. Safety fair participation
- Number of coaching sessions posttraining
- Safety related preventive maintenance completed on time
- 35. Number of concern reports
- Number of employees participating on teams
- 37. JSAs completed by hourly employees
- 38. Number of repeat findings
- Number of coaching sessions for employees who did not pass competency requirement
- 40. PPE usage
- Permit completeness

Still can
utilize
incentivize
programs
but for the
right things
- Leading
Indicators



VPP Memo #5

August 14, 2014

MEMORANDUM FOR REGIONAL ADMINISTRATORS, DIRECTORATES, AND FREE STANDING OFFICES

FROM: DAVID MICHAELS, PhD, MPH

SUBJECT: Revised VPP Policy Memorandum #5: Further Improvements to the Voluntary Protection Programs (VPP)

This memorandum replaces VPP Policy Memorandum #5: Further Improvements to the Voluntary Protection Programs (VPP) dated June 29, 2011, and includes regional guidance on evaluating safety and health incentive programs (See attached Appendix A).

This memorandum, which supplements the August 3, 2009 memorandum, "Improving the Administration of the Voluntary Protection Programs (VPP)," and subsequent VPP policy memoranda, clarifies actions for the Occupational Safety and Health Administration's (OSHA) Regions in implementing the Agency's continuing efforts to improve the administration of the VPP. The following instructions clarify policy and procedures for the review and evaluation of safety and health incentive programs at VPP applicant and participant worksites. These instructions are effective immediately.

OSHA Instruction CSP 03-01-003, VPP Policies and Procedures Manual, which became effective on April 18, 2008, addresses incentive programs within the context of an employer's proper and accurate recording of injuries and illnesses. Chapter VI Onsite Evaluations, Section III.B.1. Subsections b. and g. stress that incentive programs should promote safety awareness and worker participation in safety-related activities, and must not be the cause of under-reporting of injuries and illnesses. This memo clarifies implementation of this policy to ensure its consistent administration among the Regions.

Incentives That Promote Injury and Illness Reporting and Worker Involvement

A positive incentive program encourages or rewards workers for reporting injuries, illnesses, near-misses, or hazards; and/or recognizes, rewards, and thereby encourages worker involvement in the safety and health management system. Such an incentive program can be a good thing and an acceptable part of a VPP-quality safety and health management system. Examples of such positive incentives include providing tee shirts to workers serving on safety and health committees; offering modest rewards for suggesting ways to strengthen safety and health; or throwing a recognition party at the successful completion of company-wide safety and health training.

Disincentives That Discourage Injury and Illness Reporting and Worker Involvement

An incentive program that focuses on injury and illness numbers often has the effect of discouraging workers from reporting an injury or illness. When an incentive program discourages worker reporting or, in particularly extreme cases, disciplines workers for reporting injuries or hazards, problems remain concealed, investigations do not take place, nothing is learned or corrected, and workers remain exposed to harm. Disincentives to reporting may range from awarding paid time off to a unit that has the greatest reduction in incidence rates to rewarding workers with a celebratior for achieving an injury/rate reduction goal or maintaining an injury-and illness-free worksite for a period of time. A site whose incentive program has the potential to discourage worker reporting fails to meet the VPP's safety and health management system requirements.

Policy Implementation

New Applications. When faced with a VPP applicant's incentive program containing provisions that could discourage injury and illness reporting, the Regional VPP Manager during the initial application review or the VPP Evaluation Team during the onsite evaluation will advise the applicant of this incentive policy. The applicant may choose to make an immediate change to its incentive program that will bring the program in line with VPP policy. If the applicant needs more than a short/nominal period of time to eliminate the disincentive and/or to revise its program, it would be appropriate to designate this needed improvement as a Merit goal, assuming the applicant qualifies for Merit participation. If the applicant does not agree to make the needed change, the Region will recommend that the applicant withdraw its VPP application.

Reapprovals. If the Regional VPP Manager identifies a problem in the participant's incentive program during review of a Star participant's annual self-evaluation, or if a VPP Evaluation Team uncovers disincentives to injury and illness reporting during its document review and employee interviews, the participant will be given the opportunity to modify its incentive program with a 90-day item. Following the 90-day period during which the participant must eliminate the disincentive and/or revise its program, the Regional Administrator may choose to place the participant on Star One-Year Conditional status and require the participant to demonstrate one year of effective implementation of the program change. A participant's refusal to make the recommended improvement to its incentive program is grounds for VPP termination. The established termination procedures will apply, including the Regional Administrator's written notice of intent to terminate and the participant's right to appeal in writing to the Assistant Secretary.

Policy Guidance on Evaluating Incentive Programs

APPENDIX A

Policy Guidance on Evaluating Incentive Programs

Staff evaluating incentive programs, and in particular, corporate bonus programs should use the guidance outlined below in making final decisions regarding whether a program meets the intent of this Memorandum. OSHA does not want to exclude participants from VPP simply because an incentive program does not meet the intent of this memorandum. OSHA staff is encouraged to work with companies to modify their incentive programs and to craft a program that will work for the company and is aligned with the policy outlined in this Memorandum. OSHA will look closely at the organizational structure, incentive program structure, and the use of injury and illness rates in a calculated metric (e.g., overall EH&S metric) in determining compliance with this memo.

Incentive Program Structure	Organizational Level Rewarded	Action to be taken
Based solely on local worksite injury and illness rate outcomes (i.e. increase, decrease, etc)	Employee, Supervisor, Lower-Level Management	Requires program revision
	General Manager, Plant Manager	Evaluate on a case-by-case basis. Review injury and illness data and reporting practices for evidence of underreporting
	President, Vice Presidents	Review program but normally outside of the intent of Memo#5 and is acceptable
Based on a performance model that includes multiple worksites' injury and illness rates as one factor in the overall model	Employee, Supervisor, Site Management	Evaluate on a case-by-case basis. Review injury and illness data and reporting practices for evidence of underreporting
	Division/Sector Management, President, Vice Presidents	Review program but normally outside of the intent of Memo#5 and is acceptable
Based on Division/Unit overall performance that includes injury & illness rates across multiple locations as one factor in the overall model	All employees	Evaluate on a case-by-case basis. Review injury and illness data and reporting practices for evidence of underreporting
Based on a Corporate wide performance model that includes injury & illness rates as a one factor in the overall model	All employees	Review program but normally outside of the intent of Memo#5 and is acceptable



Decision Flowchart Does the company Stop and No Done have an incentive consider program? revising program Yes Yes Is it based solely on Does the program apply Yes site specific injury & to employees, supervisors illness rates? & first line managers? No Is it a corporate wide Yes No incentive program? How is the incentive determined? No What organizational level is Is it a division or unit How is the incentive affected? wide incentive determined? program? Can it be linked to a specific incident/site? Could any part of it Yes deter employees from Stop and reporting? consider revising Could any part of it deter program Yes employees from reporting? No No Program is not in violation of Memo#5

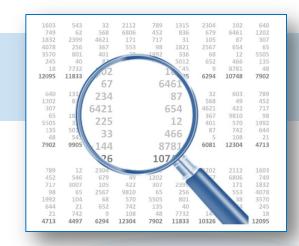
No More Discouraging Injury Reporting!

 Retaliation for simply reporting an injury or illness is a violation of the rule.





When Must Employers Act?



If you have 250 or more employees:

- **By July 1, 2017** submit 300A info
- **By July 1, 2018** submit 300A, 300, and 301 info
- Beginning in 2019 submit info every year by March 2

If you have 20-249 employees (certain high-risk industries):

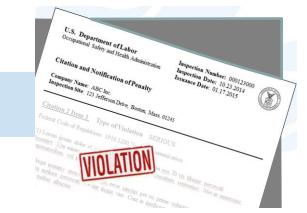
- **By July 1, 2017** submit 300A info
- **By July 1, 2018** submit 300A info
- ■Beginning in 2019 submit info every year by March 2

Anti-retaliation provisions go into effect November 1, 2016

OSHA Penalties Went Up

- OSHA adjusted its civil monetary penalties to account for inflation
- First time OSHA's penalties were adjusted since 1990
- New levels went into place August 1
- Increased penalties will help encourage employers to abate hazards before workers get hurt, and before OSHA inspects.



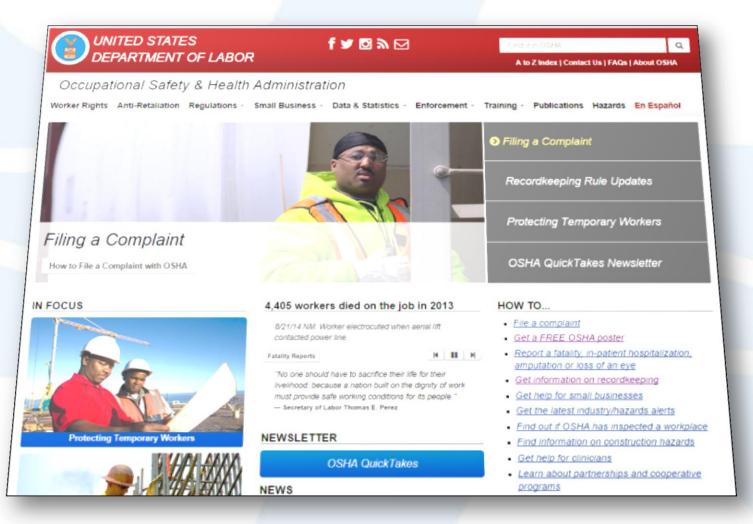


Penalty Adjustments

Level	Previous Maximum Penalty	Current Maximum Penalty
Serious	\$7,000 per violation	\$12,471 per violation
Other-Than-Serious	\$7,000 per violation	\$12,471 per violation
Willful or Repeated	\$70,000 per violation	\$124,709 per violation
Posting Requirements	\$7,000 per violation	\$12,471 per violation
Failure to Abate	\$7,000 per day unabated beyond the abatement date [generally limited to 30 days maximum]	\$12,471 per day unabated beyond the abatement date [generally
		limited to 30 days maximum]



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Multi-language Worker Outreach



OSHA *QuickTakes*



- Free OSHA e-newsletter delivered twice monthly to more than 110,000 subscribers
- Latest news about OSHA initiatives and products to help employers and workers find and prevent workplace hazards
- Sign up at www.osha.gov





OSHA's on Twitter @OSHA_DOL



Learn about:

- Coming events
- Resources
- Regulations



OSHA Consultation Programs

> Consultation Programs

- **➤ New York: NYS Department of Labor/OSHA**
- ➤ Syracuse, (315-479-3350), Keith Gillette, Gillette.Keith@dol.gov
- ➤ Buffalo, (716-847-7166), Greg Conrad, Conrad.Greg@dol.gov
- ➤ Albany, (518-457-2810), Bob Francis, Francis.Bob@dol.gov
- >www.labor.state.ny.us/workerprotection/safetyhe
 NYS Department of Labor alth/DOSH_ONSITE_Consultation.shtm





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