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<b>DIRECTIVE NUMBER:</b> CSP 02-00-002	<b>EFFECTIVE DATE:</b> January 18, 2008
<b>SUBJECT:</b> Consultation Policies and Procedures Manual	

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### ABSTRACT

**Purpose:** This instruction outlines the policy framework for administering the OSHA Consultation Program and revises and clarifies processes and procedures for administering and monitoring Consultation Projects.

**Scope:** OSHA-wide.

**References:** OSHA Instruction IRT 01-00-013 (ADM 1-1.29A), The IMIS Consultation Data Processing Manual;  
Safety and Health Program Management Guidelines (FR 54:3904-3916);  
Standard Element Paragraph (STEP) Manual (CNS 3.6)g;  
29 CFR 1908, Consultation Agreements.

**Cancellations:** OSHA Instruction CSP 02-00-001 (TED 3.6), Consultation Policies and Procedures Manual, August 6, 2001;  
OSHA Notice 04-08 (CSP 02) Consultation Policies and Procedures Manual, Chapter 2, November 24, 2004;  
OSHA Notice 04-05 (CSP 02) Consultation Policies and Procedures Manual, Chapter 3, August 25, 2004;  
OSHA Notice 04-06 (CSP 02) Consultation Policies and Procedures Manual, Chapter 4, August 25, 2004;  
OSHA Notice 04-07 (CSP 02) Consultation Policies and Procedures Manual, Chapter 5, August 25, 2004;  
OSHA Notice 04-09 (CSP 02) Consultation Policies and Procedures Manual, Chapter 6, November 24, 2004;  
OSHA Notice 06-05 (CSP 02) Consultation Policies and Procedures Manual, Chapter 7, December 14, 2006;  
OSHA Notice 06-06 (CSP 02) Consultation Policies and Procedures Manual, Chapter 8, December 14, 2006.

**State Impact:** This instruction is a Federal Program Change requiring State

implementation.

**Action Offices:** National, Regional, and Area Offices

**Originating Office:** Directorate of Cooperative and State Programs

**Contact:** Directorate of Cooperative and State Programs  
Office of Small Business Assistance  
Frances Perkins Building, Room N3660  
200 Constitution Avenue, NW  
Washington, DC 20210

By and Under the Authority of

Edwin G. Foulke, Jr.  
Assistant Secretary

## **Executive Summary**

This manual cancels and replaces OSHA Instruction CSP 02-00-001 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.

## **Significant Changes**

- Each of the Chapters previously changed through Notices has been substantially or completely included in this Revision to the Consultation Policies and Procedures Manual.
- In Chapter 8, a new program, the SHARP Pilot program, is instituted. Consultation Program Managers are given authority to propose pilot programs which would need to be approved by their Regional Administrators before implementation.
- Those Chapters previously identified as Chapters 8, 9, and 11, have been combined into the current Chapter 9.
- The information in Chapter 10 has been updated to be consistent with OSHA's current strategic goals.
- The Consultant Function Competency Statements have been added as Appendix K.
- Updates were made throughout this Manual to be consistent with current OSHA approved strategic goals and terminology.
- The definitions for full-service and limited service visits have been further clarified.
- The requirements for sites receiving a deferral from the Site Specific Targeting (SST) programmed inspection list have been further clarified. In order to receive a 90-day deferral from programmed inspections, a site must request a full-service comprehensive visit covering both safety and health.

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## Chapter 1

### Introduction

- I. **Purpose.** This instruction describes and implements the policies and procedures governing the administration and operation of the Consultation Program.
- II. **Scope.** This instruction applies to Consultation Programs funded under Section 21(d) of the Occupational Safety and Health Act of 1970 (OSH Act). Although private sector Consultation Programs funded under Section 23(g) grants are not subject to the specific policies and procedures documented here, they must operate programs that are at least as effective as the Consultation Programs funded under Section 21(d) of the OSH Act.
- III. **References.**
  - A. OSHA Instruction IRT 01-00-013 (ADM 1-1.29A), The IMIS Consultation Data Processing Manual, December 6, 1996.
  - B. Safety and Health Program Management Guidelines (FR 54:3904-3916).
  - C. Standard Element Paragraph (STEP) Manual (CNS 3.6), April 1993.
  - D. 29 CFR 1908, Consultation Agreements.
  - E. OSHA Instruction CPL 02-00-103, Field Inspection Reference Manual, September 26, 1994.
- IV. **Federal Program Change.** Notice of Intent and Adoption are Required. This instruction describes a Federal Program Change which revises and updates policies and procedures for the OSHA Consultation Program. States with OSHA approved State Plans must have written procedures for their on-site consultation programs and compliance policies relating to these programs as set out below.
  - A. **State Plans operating 21(d) Consultation Programs.** State plans which operate private sector consultation programs funded under section 21(d) are expected to follow the consultation procedures set out in this manual. As a Federal program change, those states need only respond to the changes to compliance policies and procedures, including changes to the recognition and exemption programs. Changes to the recognition and exemption programs which states are encouraged to incorporate into their programs include, but are not limited to:
    - 1. States may allow a deferral from programmed inspections for no more than 90 days for sites where the employer has requested an initial full-service comprehensive on-site consultation visit and a visit has been scheduled. See Chapter 7, section II.C.

2. States may assign a lower priority or defer programmed inspections at a site where a consultation visit is considered “in progress,” i.e., until completion of correction due dates. See Chapter 7, section III.
3. States may consider all employers, whether they are in high-hazard industries or not, for participation in SHARP and Pre-SHARP. Consideration for participation may also be extended to any employer that has at least one year of operating history at the worksite for which SHARP participation is sought, regardless of industry, and to larger employers following the priorities in Chapter 3. See Chapter 3, sections III. F. and G. and Chapter 8, section II.A.
4. States may use the alternative rate calculation method and override provision for calculating eligibility for participation in SHARP, which will impact both new and renewal SHARP sites. See Chapter 8, section II.D.2.
5. States may increase the duration of SHARP exemptions from OSHA programmed inspections for initial approval, from one year to up to two years. Thereafter, SHARP renewal exemptions may be for a period of up to three years. See Chapter 8, section II.G.

**B. States operating 23(g) Consultation Programs.** As set out in 29 CFR Part 1908, State plans operating private sector consultation programs funded under Section 23(g) must maintain consultation programs which are at least as effective as the provisions for 21(d) consultation programs in this manual. States operating 23(g) consultation programs must adopt revisions to their consultation procedures at least as effective as the following revisions in this manual. These States must also follow all revised IMIS coding instructions set out in this manual. In addition, these States must adopt changes to compliance policies and procedures at least as effective as those set out in this manual, including changes to the recognition and exemption programs, as discussed in section A, above.

1. Size Limitations. States with private sector consultation programs under section 23(g) should consider offering consultation services to larger employers, including franchise operations, as resources allow. See Chapter 3, sections III. F. and G.
2. Use of Safety and Health Program Assessment Worksheet (Form 33). States with private sector consultation programs funded under section 23(g) are encouraged to use the Form 33 to assess the employer’s safety and health management system. See Chapter 4, section II.B.

**C. Public Sector Consultation Programs.** Although public sector consultation programs are not funded under section 21(d) or directly subject to the requirements of 29 CFR Part 1908, States are encouraged to adopt revisions to their public sector consultation procedures comparable to the revisions in the 21(d) consultation program as established in this manual, to the extent feasible.

State public sector programs must also follow all revised IMIS coding instructions set out in this manual. States may, but are not required to, establish a recognition and exemption program for the public sector.

- D. **Submission Requirements.** States are required to notify OSHA within 60 days of the issuing of this Instruction whether they intend to adopt policies and procedures identical to those in this Instruction or different, at least as effective, policies and procedures. State policies and procedures must be adopted within 6 months of the issuing of this Instruction. States must provide documentation of adoption of identical policies and procedures (such as a cover sheet or notice to staff) or a plan change supplement documenting different policies and procedures within 60 days of adoption. The plan change supplement should note the differences from the comparable Federal provisions. The State also must either post its different policies and procedures on its State plan website and provide the link to OSHA or provide information on how a copy may be obtained. OSHA will post summary information on the State responses to this Instruction on its website.
- E. **General Requirements.** Section 21(d) of the Act and 29 CFR Part 1908 established requirements for State consultation and enforcement programs which remain in effect.
1. **Recognition and Exemption Programs.** All State programs (regardless of the source of funding) must offer, as part of their State plan, a recognition and exemption program to private sector employers at least as effective as the Federal recognition and exemption program set out in Chapter 8 of this manual.  
  
States may not grant exemptions from State plan inspections based on consultation activities that do not meet the requirements of Part 1908 or an at least as effective alternative.
  2. **Enforcement Policies.** All States (regardless of the source of consultation funding) must adopt enforcement policies at least as effective as the enforcement policies established by 29 CFR Part 1908, including:
    - a. the definition of a consultation visit “in progress” and its effect on inspection scheduling (§ 1908.6(h));
    - b. not initiating a complaint inspection based on a posted List of Hazards (§ 1908.6(e)(8));
    - c. employer confidentiality (§ 1908.6(h) and § 1908.7(a)(3));
    - d. limitations on the availability of the consultant’s written report (§ 1908.6(g)(2);

- e. deferral from inspections for applicants implementing an effective safety and health management system (§ 1908.7(b)(4)(i)(A)); and
- f. exempting recognition and exemption program participants from general schedule inspections (§ 1908.7(b)(4)(i)(B)).

**V. Significant Changes.**

- A. Each of the Chapters previously changed through Notices has been substantially or completely included in this Revision to the Consultation Policies and Procedures Manual.
- B. In Chapter 8, a new program, the SHARP Pilot program, is instituted. Consultation Program Managers are given authority to propose pilot programs which would need to be approved by their Regional Administrators before implementation.
- C. Those Chapters previously identified as Chapters 8, 9, and 11, have been combined into the current Chapter 9.
- D. The information in Chapter 10 has been updated to be consistent with OSHA's current strategic goals.
- E. The Consultant Function Competency Statements have been added as Appendix K.
- F. Updates were made throughout this Manual to be consistent with current OSHA approved strategic goals and terminology.
- G. The definitions for full-service and limited service visits have been further clarified.
- H. The requirements for sites receiving a deferral from the Site Specific Targeting (SST) programmed inspection list have been further clarified. In order to receive a 90-day deferral from programmed inspections, a site must request a full-service comprehensive visit covering both safety and health.

**VI. Action Information.**

**A. OSHA National Office.**

- 1. Directorate of Cooperative and State Programs. The Directorate of Cooperative and State Programs (DCSP), through the Office of Small Business Assistance (OSBA) in consultation with the Assistant Secretary, is responsible for the nationwide coordination and administrative oversight of the national OSHA Consultation Program. OSBA is responsible for establishing the policies and procedures that govern the operation,



monitoring, and evaluation of the Consultation Program. The Consultation Policies and Procedures Manual (CPPM) is the program's principal policy guidance document. OSBA is also responsible for providing program support and assistance to the Regions and the States.

2. Directorate of Enforcement Programs. The Directorate of Enforcement Programs (DEP) is responsible for the nationwide enforcement of occupational safety and health standards. DEP is responsible for developing the annual programmed inspection schedule, inspection priorities and selection criteria, and responding to complaints, fatalities and catastrophes.
  3. Directorate of Information Technology. The Directorate of Information Technology (DIT), through the Office of Management Data Systems (OMDS), is responsible for the design and administration of the Consultation Data System (CDS). This includes programming the Mandated Activity Report for Consultation (MARC), processing CDS information in the Integrated Management Information System (IMIS) and producing and distributing quarterly MARC, and other specialized reports as may be needed. OMDS also designs and writes the software programs which enable the OSHA Regional Offices and the States to query the IMIS database directly.
  4. Directorate of Administrative Programs. The Directorate of Administrative Programs (DAP), through the Office of Financial Management, Division of Grants Management, is responsible for the day-to-day financial management of the Consultation Program and the preparation of the annual instructions for the cooperative agreements and amendments. The Division of Grants Management also conducts an annual financial review of all agreement applications.
- B. **Regional Offices.** The OSHA Regions are responsible for monitoring and evaluating the State consultation projects within their respective Regions and for preparing the Regional Annual Consultation Evaluation Report (RACER). The Regions provide technical assistance and communicate Federal program direction to the State. The Regions are also responsible for maintaining communication between themselves and the Consultation Projects in their Region. Communication is an essential component of the Federal-State relationship.
- C. **States.** The States are responsible for operating and maintaining programs that effectively meet the objectives of the OSHA-funded Consultation Program, in accordance with 29 CFR 1908. The States are also responsible for submitting Annual Cooperative Agreements and developing a Consultation Annual Project Plan (CAPP) in accordance with their respective Federal or State Strategic Plan. A Consultation Program is required to evaluate itself annually by means of a Consultation Annual Project Report (CAPR) that is written in accordance with the monitoring and evaluation methods established in the CPPM.

## VII. Definitions.

- A. The OSH Act. The Occupational Safety and Health Act of 1970. 29 USC § 651 *et seq.*
- B. Action Plan for Inspection Deferral (Action Plan). The written plan, developed by the consultant and approved by the Consultation Project Manager, outlining the necessary achievements and time frames required for the employer to achieve SHARP status. The Action Plan is implemented by the employer.
- C. Assistant Secretary. The Assistant Secretary of Labor for Occupational Safety and Health.
- D. Compliance Assistance Authorization Act. Public Law 105-197 which codified the OSHA Consultation Program by amending Section 21 of the OSH Act.
- E. Compliance Officer. A Federal compliance safety or health officer (CSHO).
- F. Consultant. A state employee who provides consultation services under a 21(d) Cooperative Agreement.
- G. Consultation. All activities that may be provided to employers under the jurisdiction of a consultation cooperative agreement.
- H. Consultation Project Manager. The person who directs the day-to-day activity of a Consultation Project.
- I. Cooperative Agreement. The legal instrument which enables the States to collaborate with OSHA to provide consultation in accordance with 29 CFR, Part 1908.
- J. 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).
- K. Designee. The State official designated by the Governor to be responsible for oversight of a Cooperative Agreement.
- L. 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.
- M. Employee. A person employed at a worksite whose employer has requested consultation services and whose business affects interstate commerce.
- N. Employee representative. The authorized representative of employees at a site where there is a recognized labor organization representing employees.

- O. Employer. A person engaged in a commercial business with employees. This does not include the United States (except the United States Postal Service), any State, or political subdivision of a State.
- P. Hazard correction. The elimination or control of a workplace hazard in accordance with the requirements of applicable Federal or State statutes, regulations or standards.
- Q. 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.
- R. 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.
- S. Imminent danger. Any conditions or practices in a place of employment which are such that a danger exists that could reasonably be expected to cause death or serious physical harm, either immediately or before the danger can be eliminated through the procedures set forth in 1908.6(f)(1).
- T. Intervention. Consultation assistance provided away from an employer's worksite. This includes technical advice provided through telephone conversations and correspondence (including e-mail), speeches and presentations to stakeholders, off-site technical training, and targeted mailings.
- U. List of Hazards (Serious). The List of Hazards (Serious) consists of all serious 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.
- V. List of Hazards (Serious and Other-than-Serious). This is utilized by State Plans that require verification of correction of all hazards identified and for use with SHARP applicants.
- W. On-site Consultation. The process of walking through an employer's worksite, identifying hazards, 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.
- X. 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.

- Y. 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.
- Z. 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.
- AA. 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.
- BB. Programmed inspection. OSHA worksite inspections whose scheduling are based upon objective or neutral criteria.
- CC. 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 scheduling plans for safety and for health or special emphasis programs.
- DD. Recognition and exemption 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.
- EE. 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).
- FF. Scope of Visit. There are two visit scopes:
1. Full-service visit. An On-site Consultation visit that provides a complete comprehensive safety and health hazard assessment of all working conditions, equipment, and processes at the worksite for safety and/or health.
  2. Limited-service visit. A less comprehensive safety and health hazard assessment than that provided by a Full-service visit. An On-site Consultation visit that provides a focused assessment of a particular work process or type of hazard or a focused assessment that is conducted of only one discipline, safety or health.

- GG. 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 OSHA field instructions or approved State Plan counterpart, except that the element of employer knowledge may not be considered.
- HH. 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.
- II. 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).
- JJ. State. A State of the United States, as well as the District of Columbia, Puerto Rico, the Virgin Islands, or Guam.
- KK. 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).
- LL. 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.
- MM. 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.
- NN. 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 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 and/or the implementation of a safety and health management system.

4. Visit in Progress. A Consultation visit is "in progress" from the beginning of the opening conference to the end of the correction due dates (including extensions). A Consultation visit in progress takes precedence over a Programmed OSHA Inspection.
- OO. Written Report to the Employer. The confidential report provided by the Consultation Project 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.

## VIII. **Cancellations.**

- A. OSHA Instruction CSP 02-00-001 (TED 3.6), Consultation Policies and Procedures Manual, August 6, 2001.
- B. OSHA Notice 04-08 (CSP 02) Consultation Policies and Procedures Manual, Chapter 2, November 24, 2004.
- C. OSHA Notice 04-05 (CSP 02) Consultation Policies and Procedures Manual, Chapter 3, August 25, 2004.
- D. OSHA Notice 04-06 (CSP 02) Consultation Policies and Procedures Manual, Chapter 4, August 25, 2004.
- E. OSHA Notice 04-07 (CSP 02) Consultation Policies and Procedures Manual, Chapter 5, August 25, 2004.
- F. OSHA Notice 04-09 (CSP 02) Consultation Policies and Procedures Manual, Chapter 6, November 24, 2004.
- G. OSHA Notice 06-05 (CSP 02) Consultation Policies and Procedures Manual Chapter 7: Relationship to Enforcement, December 14, 2006.
- H. OSHA Notice 06-06 (CSP 02) Consultation Policies and Procedures Manual, Chapter 8, December 14, 2006.

## IX. **Background.**

Section 21(c) of the Occupational Safety and Health Act of 1970 (the OSH Act) directs the Secretary of Labor to establish programs for the education and training of employers and employees in the recognition, avoidance and prevention of unsafe and unhealthful working conditions in employments covered by the Act. On-site consultation can be provided without triggering the enforcement mechanisms of the Act. Federally funded on-site consultation was originally conducted only by states operating plans approved under Section 18 of the Act. In response to the demand for on-site consultation in Federal enforcement States, 29 CFR 1908 was first promulgated on May 20, 1975 (FR

40: 21935) to authorize Federal funding of on-site consultation activity by States under Federal OSHA's jurisdiction through Cooperative Agreements entered into under the authority of Sections 21(c) and 7(c)(1) of the OSH Act.

Part 1908 has been amended several times in the intervening years. It was amended on August 16, 1977 (FR 42: 41386) to clarify a number of provisions as well as to increase the level of Federal funding to ninety percent, a level that was considered necessary to provide a strong incentive for States to enter the program. Part 1908 was again amended on June 19, 1984, to further clarify various provisions, and to grant inspection exemptions to employers who meet specific requirements (FR 49: 25082).

The Occupational Safety and Health Compliance Assistance Authorization Act of 1998, Public Law 105-197, codified OSHA's Consultation Program and amended Section 21 of the OSH Act by adding a new subsection, (d). On October 26, 2000, 29 CFR Part 1908 was amended (FR 65: 64282) to ensure that employees would be allowed to participate in site visits, that employees would be informed of the results of site visits, that site visits would be conducted according to updated procedures, and that information obtained during site visits would be treated as confidential.

## **X. Consultation Program Operations.**

- A. Because consultation services are voluntary, an employer must request service and agree to certain obligations, primarily that the employer agrees to correct all serious hazards found during the consultation visit within an agreed-upon time frame. The details of the employer's obligations are discussed in Chapter 2.
- B. The consultation program is designed to assist employers in identifying and correcting serious hazards in the workplace. Priority in scheduling visits is generally given to small employers in high hazard industries. Consultation Projects also provide assistance to employers in developing safety and health management systems. However, this assistance must be linked to a hazard evaluation visit by either the Consultation Project, by OSHA enforcement, or by a private consultant. The Consultation Project must have access to the report of the visit before providing program assistance. In the case of off-site technical training, the Consultation Project Manager may provide specific training services that are not directly related to an on-site visit. Training and Interventions are discussed in Chapter 4.

## **XI. Consultation Program Administration.**

- A. **Partnership between OSHA and the States.** Cooperative Programs, including Consultation services, are an integral part of OSHA, complementing enforcement efforts to ensure safe and healthful working conditions in American workplaces. OSHA and its State partners, in accordance with the Government Performance and Results Act of 1993 (GPRA), operate under strategic plans that identify specific performance goals to be achieved by the Agency. The results of



compliance assistance activity are thus included in the overall results of OSHA-wide activity. With the implementation of GPRA, intra-agency partnership in planning and strategy takes place at two operational levels:

1. Partnership between Consultation and Enforcement. Consultation Project efforts are linked to Federal or State OSHA's strategic and performance goals. Consultation Project activities address the injuries and illness in the targeted industries or the causes of injuries, illnesses, or fatalities identified in the relevant strategic and annual performance plans. Consultation Projects work as equal partners with enforcement programs in implementing Federal or State strategic and annual performance plans.
2. Partnership between State Consultation Projects and Federal OSHA. Each Consultation Project develops an annual project plan based on the strategic and annual performance plans that it supports. The Consultation Annual Project Plan (CAPP) then becomes part of the Project's Cooperative Agreement and is subject to negotiation and approval by the Regional and National Offices. Once approved, the plan forms the basis for joint monitoring and evaluation of the Project's performance during the performance period.



## Chapter 2

### OSHA Cooperative Programs

- I. **Cooperative Programs.** DCSP offers a number of opportunities for employers and organizations to work cooperatively with OSHA. These Cooperative Programs (On-site Consultation, Alliances, Strategic Partnerships and Voluntary Protection Programs) offer a variety of services and benefits to participating organizations or employers. Each program is discussed in this Chapter along with the requirements for participation. Although the primary subject matter of this manual involves the Consultation Program, an overview of other OSHA cooperative programs is essential since consultants are actively involved in implementing these programs. States with OSHA-approved programs may have their own cooperative and voluntary compliance programs such as those discussed below, as well as additional programs. For more information regarding State Plan State cooperative programs, please visit <http://www.osha.gov/dcsp/osp/>.
- II. **On-site Consultation.** OSHA's premier cooperative program is a free and confidential consultation service largely funded (90/10) by Federal OSHA. OSHA's On-site Consultation Program is delivered by state governments using highly qualified occupational safety and health professionals to help employers: a) detect potential hazards at their worksite and b) establish and maintain safe and healthful workplaces. The Consultation Program is completely separate from OSHA's enforcement efforts and does not issue citations or propose penalties. Although the On-site Consultation Program does not issue citations or propose penalties, employers receiving consultation services are required to correct all identified hazards as a condition of receiving program services.

The Consultation Program offers a variety of services for small businesses, including: assisting 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 receive priority. On-site consultation visits include a walkthrough 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. 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. For additional information regarding OSHA's On-site Consultation Program visit <http://www.osha.gov/dcsp/smallbusiness/consult.html>.

- III. **Safety and Health Achievement Recognition Program (SHARP).** The Federal recognition and exemption program funded under Section 21(d) of the OSH Act is known as SHARP. Recognition and Achievement programs operating in States with approved State Plans may be known by other names, but the term SHARP is used in this Manual to refer to the basic minimum requirements of any recognition and exemption program administered by an OSHA Consultation Project, whether under State or Federal jurisdiction. SHARP provides incentives and support for employers to develop,

implement, and continuously improve their safety and health management systems. SHARP participation can provide immediate and long-term reduction of job-related injuries and illnesses. SHARP participants are exempted from OSHA programmed inspections and receive recognition on the OSHA website and publications. For additional information regarding SHARP, see Chapter 8 of this Manual or please visit <http://www.osha.gov/dcsp/smallbusiness/sharp.html>.

- IV. **Voluntary Protection Programs (VPP).** The Voluntary Protection Programs are designed to recognize and promote effective, systematic safety and health management. A hallmark of VPP is the principle that management, labor and OSHA work together in a spirit of cooperation and trust in pursuit of a safe and healthful workplace. VPP participants are worksites that have successfully designed and implemented outstanding safety and health management systems. OSHA approves qualified sites for one of three programs: Star, Merit and Star Demonstration. For more information on VPP, please visit <http://www.osha.gov/dcsp/vpp/index.html>.
- A. Star Program. The Star Program recognizes the safety and health excellence of worksites where employees are successfully protected from fatality, injury, and illness by the implementation of comprehensive and effective workplace safety and health management systems. These worksites are self-sufficient in identifying and controlling workplace hazards.
- B. Merit Program. The Merit Program recognizes worksites that have good safety and health management systems and that show the willingness, commitment, and ability to achieve site-specific goals that will qualify them for Star participation.
- C. Star Demonstration Program. The Star Demonstration Program recognizes worksites that have Star quality safety and health management systems that differ in some significant fashion from the VPP model and thus do not meet current Star requirements. A Star Demonstration Program tests this alternative approach to protecting employees to determine if it is as protective as current Star requirements.
- V. **Pre-SHARP.** An employer who meets all the initial eligibility requirements for SHARP, corrects all hazards identified during the consultation visit, and shows reasonable promise of achieving SHARP status within the time frames agreed upon with the Consultation Project Manager, may be approved as a Pre-SHARP participant. This Pre-SHARP status gives the employer a deferral from OSHA's programmed inspections. The deferral time frame recommended by the Consultation Project Manager, including extensions, must not exceed a total of 18 months from the expiration of the correction due date(s).
- VI. **OSHA Strategic Partnership Program (OSP).** An OSHA Strategic Partnership is an extended voluntary cooperative relationship between OSHA and groups of employers, employees, employee representatives, and/or other interested stakeholders designed to encourage, assist, and recognize efforts to eliminate serious hazards and achieve a high degree of employee safety and health. This program is available to all private sector

employers, associations, labor organizations and government agencies in locales where OSHA has jurisdiction. OSPs may address all hazards at partner worksites or one or more discrete hazards of particular concern. An OSP can assist partners in the reduction of injuries and illnesses through shared resources focused on the long-term development of effective safety and health management systems. OSPs are formalized through written agreements that last for a specified period of time. OSHA may offer up to a six-month deferral from programmed inspections to non-construction OSP participants upon their entry into a partnership. During the deferral period, the partner must commit to make workplace safety and health improvements or seek compliance assistance to improve workplace safety and health. For more information regarding OSPs, please visit <http://www.osha.gov/dcsp/partnerships/index.html>.

- VII. **Alliances.** OSHA created the Alliance Program to work with organizations to prevent workplace injuries, illnesses, and fatalities. Alliance participants are recognized by OSHA and others as proactive leaders in safety and health. The Alliance Program enables trade or professional organizations, businesses, labor organizations, educational institutions, and governmental agencies that share an interest in workplace safety and health to collaborate with OSHA to prevent injuries and illnesses in the workplace. OSHA and the interested party sign a formal agreement with goals that address training and education, outreach and communication, and promoting a national dialogue on workplace safety and health. OSHA recognizes these relationships on the website and includes them in published materials. Alliance Agreements do not include an enforcement component and Alliance participants do not receive an exemption or deferral from OSHA's programmed inspections.

## Chapter 3

### Promoting and Managing Consultation Services

- I. **Promoting Requests.** Consultation Project Managers must actively promote their services to employers, especially those targeted in OSHA's or the State strategic plan. Consultation Project Managers are encouraged to work with:

- Federal and State Enforcement Programs;
- Alliance Members;
- OSHA Strategic Partnership Program Participants; and
- Area Directors and their designated staff, including Compliance Assistance Specialists, to promote consultation services to those who may benefit from them.

States are encouraged to promote the availability of consultation services through a variety of methods and techniques, including broad-based mass media campaigns.

Where the Consultation Project Manager is encouraged to work with Alliance/Partnership participants, he/she should not assume the role of leadership with these relationships. In Federal states, if the Consultation Project Manager identifies an organization that would be an excellent ally, a referral should be made to the Regional Administrator explaining why he/she thinks pursuing an alliance or partnership would be beneficial to OSHA.

Direct solicitation involving face-to-face contact with employers, business associations (i.e. Chambers of Commerce), and cooperative ventures is also encouraged with other state agencies, (i.e., Small Business Development Centers county or municipal governments.)

Recognizing that each State has unique circumstances, OSHA recommends that States tailor their outreach activities to draw upon their own experience in promoting consultation, especially where positive results have been achieved. OSHA also encourages States to explore new promotional avenues to ensure that services are being provided to those employers who will most benefit from the consultation service. States with particularly effective promotional/outreach programs are encouraged to share their methods and strategies with others so the entire Consultation Program might benefit from their success.

- A. **Methods.** Speeches or presentations made to employer or employee groups to provide information about the consultation service are not considered training. These types of presentations must be recorded as an intervention on the Intervention Form (Form 66). The State may engage in other outreach activities such as the following:

1. Direct solicitation of employers.
2. Public presentations (trade shows, associations meetings, etc.).
3. Radio talk shows.
4. Cooperative training seminars.
5. Roundtable discussions.
6. Safety and health conventions.
7. Participation in association meetings.
8. Publications.
9. Web chat rooms or bulletin boards on safety and health.

**B. Cooperative Efforts.** States are encouraged to seek out and establish working relationships with professional safety and health societies.

1. Group Activities. The State may conduct cooperative activities with any recognized group so long as the primary intent and outcome is the enhancement of safety and health in the workplace.
2. Leveraging of Resources. OSHA encourages the Consultation Projects to pool their resources with recognized safety and health organizations to provide training or other outreach activities, with the understanding that no particular group is endorsed by either OSHA or the Consultation Program.

**C. Identifying Target Audiences.** To promote the Consultation Program effectively within the target audience, Projects should work closely with Federal or State enforcement authorities to identify those industries which are targeted in the Federal or State strategic plan and which are the subject of National or Local Emphasis Programs. The projects may:

1. Use State Workers' Compensation data whenever available.
2. Focus on industries in which significant occurrences such as fatalities, catastrophes and/or the issuance of major citations and/or penalties have recently taken place.
3. Work with new employers who are attempting to establish a business.
4. Concentrate on industries in which newly published standards are likely to have a major impact.

5. Use employer and employee organizations to generate requests for services.
  6. Design outreach activities targeted to those employers identified in the Consultation Annual Project Plan (CAPP) or the State Performance Plan.
- D. **Evaluating Promotional and Outreach Activities.** States should document, track and evaluate efforts to promote consultation services. Periodically, States should analyze and assess the impact of their promotional and outreach activities in generating inquiries and requests for consultative services from the target audience. A State's inability to effectively promote its consultative services to the target audience will be viewed as a significant problem warranting serious attention by State and Federal monitors. Where promotion or outreach is ineffective, new strategies must be developed and implemented to address this problem.
- II. **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 Consultation Project Manager must clearly explain the following information:
- A. **Independence.** The Consultation Program is independent of Federal or State OSHA enforcement.
  - B. **Cost.** Consultative services are provided at no cost to the employer and are supported by Federal and State funds.
  - C. **Confidentiality.**
    1. 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, 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 & Medical Records) or other applicable OSHA standards or regulations."
    2. 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.

- D. **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.
- E. **No Citations or Penalties.** Consultants do not issue citations or propose penalties.
- F. **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.
- G. **Hazard Correction.** The employer must correct all serious hazards in accordance with mutually agreed upon correction due dates and provide to the Consultation Project Manager documentation of the action taken to eliminate or control the hazards. Failure to do so will result in referral to enforcement. Employers should correct other-than-serious hazards in a timely manner but need not send verification of correction to the Consultation Project Manager, except for those employers wishing to participate in an exemption program like SHARP or Pre-SHARP.
- H. **Enforcement Inspection in Progress.** An enforcement inspection is considered in progress:
  - 1. From the time a compliance officer initially seeks entry to the workplace to the end of the closing conference.
  - 2. When right of entry is refused, the inspection is in progress until the Regional Administrator or State Designee seeks a warrant or determines that allowing a consultation visit to proceed is in the best interest of employees.
  - 3. During and following an enforcement inspection, no consultation visit may take place until it has been determined whether or not:
    - a. Any citations will be issued.
    - b. A citation has been issued and the contest period has expired.
    - c. Cited items have become final orders. If the consultant has reason to believe there are citations that have not become final orders, the Consultation Project Manager must contact the OSHA Area Office to determine the employer's status.
- I. **Enforcement Inspections Following Consultation Services.** The following conditions apply if an enforcement inspection occurs after consultation services have been provided.



1. 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.
  2. No Exemption from Citations. Regardless of the consultant's advice and written report to the employer, in a subsequent 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.
- J. **Participation in an Exemption Program.** If an employer satisfies all of the conditions required to participate in an exemption program administered under Section 21(d) (See Chapters 7 and 8), then that particular worksite may be exempt from programmed inspections for a period of up to two years upon initial approval or up to three years for subsequent renewal periods.
- K. **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 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.
- L. **Employer's Rights.** In addition to the obligations stated above, the employer also retains the following rights during and after a consultation visit:
1. 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.C. of this Chapter.
  2. 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 Consultation Project Manager 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.

3. 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 & Medical Records) or other standards.
4. 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.

III. **Prioritizing and Scheduling of Services.** The Consultation Project Manager must schedule consultation services according to a prioritizing method that focuses on the most serious deficiencies/hazards first, as defined by the following criteria:

- A. **Imminent Danger Situations or Congressional Designation.** First priority must be given to employers who indicate an imminent danger situation or are in industries (or indicate hazards) designated for higher priority by Congress.
- B. **Small, High-Hazard 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.
- C. **OSHA's Site-Specific Targeting (SST) Inspections.** Third priority must be given to small employers who are on OSHA's Site-Specific Targeting (SST) Inspection Plan. This plan is based on establishment-specific employer Days Away, Restricted or Transferred (DART) rate and Days Away from Work Injury and Illness (DAFWII) Case Rate. However if a site has received a Consultation Visit in the previous year, based upon the Site Specific Targeting Inspection Plan, they will only receive a priority below that of Small, High Hazard Employers, Section III, D.
- D. **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:
  1. 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.

2. 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).
  3. 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.
  4. 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.
  5. 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:
    - a. 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.
    - b. 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.
- E. **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.
- F. **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. The Consultation Project Manager should consider whether the corporate home office supports the safety and health management operations at the site or provides only minimal support.
- G. **Larger Employers.** The lowest priority should 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.

#### IV. **Managing Consultation Requests.**

- A. **Requests for Consultation Visits.** The Consultation Project Manager 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 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. See Sample Letter in Appendix A.
  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. 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 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, Consultation Project Managers 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.
- B. **Responding to Requests for Consultation.** When responding to requests for information or consultation visits, the individual taking the request must first explain the information outlined in Section II "Communicating Employer Obligations and Rights," located in this Chapter. Additionally, the individual should complete the OSHA Consultation Request Form (OSHA Form 20).

- C. **Determining the Type of Visit.** The Consultation Project Manager must determine the type of visit being requested based on the following criteria:

A visit is a(n):	if its purpose is:
Initial Visit	to provide a hazard assessment by a safety or health consultant. An initial visit must consist of an 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. Only one initial visit may be recorded by each discipline (safety or health) at the site within one year.
Training and Assistance Visit	to provide information or training to employers and their employees in hazard identification and correction or in safety and health program development. A training visit may only be provided in conjunction with a hazard assessment visit.
Follow-up Visit	to verify the correction of previously identified hazards and/or the implementation of a safety and health management system.

- D. **Determining the Scope of the Visit.** The Consultation Project Manager must determine the scope of the visit Full Service, or Limited Service based on the employer's request. For definitions of Full Service or Limited Service please see Chapter 1 Section VII (FF).
- E. **Determining Worksite-Sensitive Issues.** The Consultation Project Manager must evaluate the site-specific information from the Consultation Request Form (Form 20) and determine any special circumstances that the consultant should prepare for prior to entering the worksite, including:
1. Worksite Rules and Practices. The consultant must observe all of the employer's safety and health rules and practices, including safety clothing or other personal protective equipment.
  2. Immunizations or Other Special Entrance Requirements. Immunizations and other special entrance requirements must be observed. The Consultation Project Manager must ensure that the consultant has the proper immunizations for these situations.
  3. Personal Security Clearance. Where personal security clearances are required, the Consultation Project Manager must assign a consultant who has the proper clearances or ensure that appropriate ones are secured prior to the visit.

4. Classified Information and Trade Secrets. Any classified or trade secret information and/or personal knowledge of such information by State personnel must be handled in accordance with 29 CFR 1908.6(h).

## Chapter 4

### Visit-Related Requirements

#### I. Preparation for a Visit.

A. **Research.** Each consultant should review and analyze the data collected from the employer on the Request Form (OSHA Form 20). In addition, the following information should be reviewed prior to the visit:

1. Case File. The consultant should evaluate all available data for the worksite, including:
  - a. The case files of previous consultations at the establishment.
  - b. The employer's OSHA inspection history by conducting an establishment search on OSHA's IMIS database.
  - c. Typical hazards found under the North American Industrial Classification System (NAICS).
2. References. The consultant should refer to technical reference material about potential hazards and industrial processes that may be encountered and refer to any relevant standards.
3. Sampling Methods. Appropriate sampling methods should be reviewed based on past experience and information on the Request Form (OSHA Form 20) from prior Consultation visits as well as any prior enforcement inspection activity.

B. **Survey Materials and Equipment.** It is the responsibility of the Consultation Project Manager to ensure 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.

1. Forms and Handouts. The consultant should assemble all reports, forms and other materials in sufficient quantity to conduct the on-site survey. (See The IMIS Consultation Data Processing Manual, IRT 01-00-013).
2. Sampling Equipment. The Consultant should 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.
3. Consultant Safety and Health Considerations. All necessary personal protective equipment must be used. The Consultation Project Manager must ensure that the equipment is usable and that the consultant has been

trained in its use and limitations. This 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.

- C. **Visit Confirmation.** If an employer's requested visit is scheduled thirty days or more after the request date, the requesting employer shall be contacted within five 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.

II. **The Safety and Health Program Assessment Worksheet (Form 33).** OSHA developed the Safety and Health Program Assessment Worksheet Form 33 (the Worksheet) as a tool to be used by all consultants nationwide.

- A. **Definition.** The Safety and Health Program Assessment Worksheet is an evaluation tool to assess the employer's safety and health management system. Further, it can be used to provide information to an employer on the safety and health management system at one establishment and how it compares to other establishments in the same industry. The Worksheet is based on the 1989 Safety and Health Management Guidelines and consists of those elements or attributes used to evaluate a company's safety and health management system. A copy of the Worksheet along with assessment tips is located at Appendix J.
- B. **Worksheet Usage.** The Worksheet must be used by all 21(d) programs. States operating private sector consultation under 23(g) State Plan, may use the Worksheet, once the consultant has taken the training offered by the OSHA Training Institute. The Worksheet is not required for construction sites, but must be utilized when visiting a Construction company.
- C. **Worksheet Training.** Consultants should not attempt to complete the Worksheet and incorporate their findings in the official OSHA data system until they have received formal training on its use and the philosophy behind the attributes. Completion of the Worksheet requires specialized knowledge on how to evaluate the attributes (the safety and health management system elements) and in scoring those attributes. The accumulated data on all Worksheets is collected to establish industry norms, which are used to provide advice to employers and in developing OSHA policies. As a consequence, it is imperative that the data collected on each individual Worksheet is an accurate reflection of the employer's safety and health profile.
- D. **Procedures for Completing the Worksheet.** The Worksheet must be completed using the following criteria:
  - 1. If a SHARP site is being evaluated, or a site is being considered for pre-SHARP status, the Worksheet should be filled out completely.



2. If a site has requested program assistance, then those portions of the Worksheet which relate to the types of program assistance requested should be completed (i.e., if comprehensive, is requested, the entire Worksheet is completed; if only a specific type of assistance is requested, then only relevant portions of the Worksheet are completed). If no program assistance is requested, BUT the Consultant obtains information which would enable them to fill out a portion of the Worksheet, that portion should be completed. If no program assistance is requested and a Consultant does NOT obtain information necessary to complete a portion of the Worksheet, then that portion of the Worksheet should not be completed.
3. If a construction company is being evaluated the Worksheet should be utilized following the same criteria. If a Construction site is being evaluated, the Worksheet is not required, but can be used as an evaluative tool, following the rules above.

- E. **Worksheet Completion.** Consultants are responsible for completing the Worksheet whenever one is required. This can be done by using the web-based system, or, if the web application is not available, fill out a blank Worksheet until so that the information can be entered into the data system at a later date.

When consultants of different disciplines conduct an initial visit to the same establishment within 90 days of each other, a single Worksheet, representing the mutually agreed upon scores of both consultants, must be sent to the employer. The consultant who completes the first visit will initiate the Worksheet process, but leave the Worksheet in “draft” in the system. The first consultant will indicate in his/her report to the Employer that a Worksheet is pending, but will be submitted by the second consultant. The consultant of the other discipline (“second consultant”) will complete the Worksheet and include it in his/her Written Report.

In the event that there are different scores proposed by each consultant for the same attribute, a mutually agreed upon score will be entered onto the Worksheet, and submitted to the employer.

- F. **Worksheet Comments.** Although completion of the comment section of the Worksheet is optional, it is highly recommended that this section be used. First, to provide a rationale for the score. Second, to provide employers with meaningful recommendations on how to meet or improve on a specific attribute. Third, an employer may be disappointed because he/she has no guidance on which area to prioritize for action first to improve the overall safety and health profile of the establishment.
- G. **Scoring Method.** This scoring method is based on the data collected by the consultant. Only those attributes for which data has been collected during the visits may be scored. A quick summary of the scoring method for the attributes



follows:

**Zero** means that no safety or health procedures/policies are even partially present to correct this hazard. (No Activity).

**One** means that some safety or health procedures/policies are present although major improvements are needed. (Little Activity).

**Two** means that considerable safety or health procedures/policies are present with only minor improvements needed. (Most Activity Completed).

**Three** means that no additional safety or health procedures/policies are needed at this time. (No Additional Activity Needed).

In some instances no information is collected or observed on a particular attribute. When this is the case no score is required on the Worksheet and the score remains at the default value of "Not Evaluated" (N/E). Consultants and Consultation Project Managers should be aware that the collection of data impacts national norms for industries and national policy decisions. Therefore, only factually based scores should be recorded entered on the Worksheet and in the IMIS. Consultants are discouraged from "guessing" at the score; it is critical to have primary source documents, interview notes, or observations for all scores. No attribute may be modified or deleted and all attributes must be scored using the method outlined above.

- H. **Attributes to Score.** Although there is no nationwide policy concerning the minimum number of attributes to score on any single visit, States may set more stringent policies. The Consultation Project Manager may direct consultants to complete a specified number of attributes, or identify specific attributes, which must always be scored. Even though we must rely on your professional judgment, as you are our eyes and ears on-site, a high performing Consultation Project will score an average of 8-12 attributes per visit. It is critical that we collect data nationally on all aspects of an employer's safety and health management system; consultants are urged to score the Worksheet using a broad distribution of attributes and they should avoid the repetitive scoring of the same attribute during every visit, unless it is required by the state. Consultants are not limited to one section of the Worksheet; they can score any attribute for which they can find appropriate support (policy, procedure, observation or interview). Finally, we need to view this from the employer's perspective; receiving a Worksheet with 3-6 scored attributes out of 58 attributes can be discouraging and disappointing for the employer and may stifle creativity in the safety and health area.
- I. **Safety and Health Program Assessment.** The Worksheet does not replace the Safety and Health Program Assessment section of the Written Report. This section of the report is used to discuss the employer's overall safety and health

system. However, this section of the Written Report should be consistent with the Worksheet using the same seven subdivisions contained in the Worksheet.

III. **Required Structure of a Visit.** The on-site visit must proceed according to the following sequence.

- A. **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.
- B. **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/specific 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.
  - 1. **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 recorded in the case file notes.
  - 2. **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.

If:	then:
the site has a recognized employee representative	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 should 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.
the site has no recognized employee representative	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.

3. 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 should strongly recommend the benefits of a full service visit. If a visit is limited/specific 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, the consultant must re-evaluate the use of the Worksheet based on the criteria outlined in Section II of this Chapter.
  4. Employer's Obligations and Rights. The consultant must discuss the obligations and rights as outlined in Chapter 3, Section II A-L, which the employer must agree to in order for the consultation visit to continue.
  5. 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 should 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 IMIS.
- C. **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:

1. 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.
2. 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 note the hazard and the correction method in the field notes.
3. 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, and the date the interim protection must be in place.
4. Referrals. For full-service comprehensive 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/specific scope, the consultant must document all hazards, even if outside the visit scope, when the hazard is found in plain sight during the walkthrough.

D. **Closing Conference.** In the closing conference, the consultant must conduct the following activities:

1. 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.

2. 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.
  3. Additional On-site Visits. Discuss with the employer the extent to which additional on-site visits may be needed for training or for the verification of hazard correction.
  4. Training and/or Follow-up Visits. Develop a schedule with the employer for training and assistance or follow-up visits, as needed.
- E. **Transmitting the List of Hazards.** The Consultation Project Manager 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.

## Chapter 5

### Training and Assistance Visits

- I. **Training.** Consultants should help employers determine their training needs and may provide training to employers and employees concerning the anticipation, identification/recognition, control and/or elimination of hazards. The consultant may provide formal or informal training, as long as a hazard survey has been completed within the past 12 months. The training should be based on the employer's needs as described below.
  - A. **Formal Training.** Consultants provide formal training in a classroom-like setting, following a syllabus of which a copy 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:
    - 1. 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. 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.
    - 2. 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 an intervention, based on the following criteria:
      - a. 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 on the Visit Form (Form 30).
      - b. 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 as an intervention on the Intervention Form (Form 66). A hazard survey is not a prerequisite for providing this service.
  - B. **Informal Training.** Consultants may provide informal safety and health training to employers and employees while conducting a hazard survey. 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.

II. **Training Documentation.**

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

III. **Recording Training Time.** Instructions for recording training activity can be found in the IMIS Consultation Data Processing Manual (IRT-01-00-013).

IV. **Trainers' Qualifications.**

- A. **Informal Training.** To be qualified to provide informal training the consultant must have:
  - 1. Completed the Introduction to On-site Consultation Course (OSHA Course 1500);
  - 2. Completed the Evaluation of Safety and Health Management Systems Course (OSHA Course 2450); and
  - 3. Have subject matter knowledge in the area of the training being offered.
- B. **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:
  - 1. Be selected by the Consultation Project Manager to deliver formal training; and
  - 2. A minimum of 2 years previous experience conducting formal training for adults, or be trained as a trainer by an accredited institution.

V. **Resource-Related Considerations.**

- A. **Economies of Scale.** Off-site training leverages resources when one consultant can address a common training need for multiple employers.
- B. **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 Consultation Project Manager should be coordinated with other providers of similar or related training. In particular, the Consultation Project Manager should coordinate with Susan Harwood grantees, the OSHA Training Institute, OSHA Strategic Partnership Participants, Alliance members, and Small Business Development Centers. In addition, the Consultation Project Manager

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.

- C. **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.



## Chapter 6

### Documenting Consultation Services

- I. **The Written Report to the Employer (Written Report).** 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 must be concluded with a letter to the employer summarizing the activity. The information contained in the consultation written report is confidential and should 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.
- A. **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 should be sent to the employer without the results. As soon as the laboratory results are received, they must be sent to the employer as an addendum to the written report.
- B. **Responsibility for Preparing the Written Report.** The consultant who conducted the initial visit is responsible for the preparation of the written report. If more than one consultant participated in the visit, the consultant to whom the visit was initially assigned is responsible for preparing the written report and obtaining input from the other consultants.
- C. **Required Elements of the Written Report.** Projects are encouraged to use the report template providing by OSHA. However projects that desire to create and utilize their own template must include the following information:
1. Executive Summary. This section must include all of the following:
    - a. A summary of the employer's request;
    - b. The scope of the services provided;
    - c. The name of the consultant(s) conducting the visit;
    - d. Items of importance covered in the opening conference;
    - e. A description of the workplace and the working conditions;
    - f. A comparison of the site's DART and TRC rates to the national industry average; and
    - g. Items of importance covered in the closing conference.

2. Employer's Obligations and Rights. The report must include the information outlined in "Communicating Employer Obligations and Rights," located in Chapter 3, Section II A-L of this Manual.
3. 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.

4. Evaluation of Safety and Health Management System. In this section the consultant conducts an analysis of the employer's safety and health management system through the use of the Safety and Health Program Assessment Worksheet (the Worksheet). Although a template is provided, it is mandatory for this section to be specifically tailored to the worksite. All hazards observed (and reported on in paragraph (3), above) must be discussed as evidence of deficiencies in the safety and health management system. The consultant's recommendations to improve the existing safety and health management system must be included in this section. The Worksheet is divided into seven discrete areas which were derived from the 1989 Safety and Health Program Management Guidelines. A copy of the Worksheet can be found at Appendix J. The seven areas are outlined below for easy reference.
  - a. Hazard Anticipation and Detection. Current and potential hazards are identified through the use of a baseline hazard survey, job hazard analysis, and a self-inspection program. In addition, all accidents and incidents are investigated for the root causes.
  - b. Hazard Prevention and Control. Current and potential hazards detected are corrected or controlled in a timely manner. One should establish procedures for that purpose using the following measures: engineering and/or administrative controls, safe work practices, providing personnel protective equipment and clothing, and having a plan for emergencies at the worksite.
  - c. Planning and Evaluation. A review of the overall safety/health management system is conducted at least annually. Safety/health

goals exist and there is an action plan in place designed to accomplish the organization's objectives.

- d. Administration and Supervision. Assign and communicate responsibility for all aspects of the program, so that managers, supervisors, and the employees in all parts of the organization know what safety/health performance is expected of them.
  - e. Safety and Health Training. This includes teaching all personnel about the hazards to which they may be exposed and how to identify, prevent, and control those hazards. Managers and supervisors also need training in program management topics such as enforcing rules, conducting drills, and performing accident investigations.
  - f. Management Leadership. Management assigns safety and health responsibility and authority to supervisors and employees, and holds them accountable. Management leadership includes policy formulation, annual goal-setting and program review, and employee empowerment.
  - g. Employee Participation. Employee participation in processes/programs encourages employee involvement in the structure and operation of the program and in the decisions that affect their safety/health, so that they will commit their insight and energy to achieving the safety/health program goals and objectives.
- 5. Training Provided. A summary of both the formal and informal training which was conducted during the visit must be included in the report.
  - 6. Sampling Data. If sampling has been conducted, the appropriate template should be selected, including tables, forms and charts to display the results.
  - 7. 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.
  - 8. Safety and Health Program Assessment Worksheet (Worksheet). If the use of a Worksheet was required (See Chapter 4, Section II), it must be included as an appendix to the report.

- D. **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 Consultation Project Manager 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 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).**

- II. **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. The first page of the List of Hazards should be printed on the Consultation Project's letterhead. See Appendix B for a sample List of Hazards in the preferred format.
- III. **Case File.** At a minimum, each case file must include:
  - A. **Consultation Forms.** All Consultation forms (such as OSHA Forms 20, 30, 33, 40, and 66), field notes, observations, analyses, and other written documentation (such as hazard documentation, OSHA 300 logs), gathered prior to and during the hazard survey.
  - B. **Formal Training.** For formal training, evidence that either a hazard survey was performed by a Federal or State compliance officer or private consultant within the 12 months preceding the date of the requested training.
  - C. **Extensions.** Any extensions to the correction due date (request and response must be in writing) must be documented. The documentation must include an explanation of why correction was not completed in the established time frame and evidence that the employer is safeguarding employees against the hazard with interim protection during the correction period must be documented.
  - D. **Written Report.** The Written Report discussed in this Chapter.
  - E. **List(s) of Hazards.** The List(s) of Hazards provided to the employer, including all new Lists created as a result of approved extensions and revised correction due dates.

## Chapter 7

### Relationship to Enforcement

- I. **General.** OSHA's On-site Consultation Program is delivered by state governments using qualified occupational safety and health professionals to help employers: a) detect potential safety and health hazards at their worksite, and b) establish and maintain safe and healthful workplaces. The On-site Consultation Program is completely separate from OSHA's enforcement efforts and does not issue citations or propose penalties. However, the Consultation Program depends on having an effective OSHA Enforcement Program to compel employers to achieve compliance. Additionally, the Consultation Program relies on enforcement as a deterrent to ensure that employers rectify all identified hazards.
- A. **On-site Consultation Visit Priority.** A consultation visit "in Progress" has priority over OSHA compliance inspections pursuant to 29 CFR 1908.7(b), except in those instances provided below at Section III H. (1-4). 29 CFR 1908.7(b)(2)i-iv.
- B. **Visit "in Progress".** A consultation visit shall be considered "in Progress" with regard 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. 29 CFR 1908.7(b)(i).
- C. **Enforcement Activity.** OSHA may assign a lower priority for programmed enforcement activity to those worksites for which on-site consultation visits are scheduled. See Section II.C. and Section III. of this Chapter for exceptions.
- II. **Scheduling**
- A. **On-site Visit Request.** Employers seeking an on-site consultation visit must request and schedule an opening conference directly with the On-site Consultation Project in the state in which the worksite that will undergo the on-site visit is located.
- B. **On-site Visit Scheduling.** Once the employer has requested an on-site consultation visit, the scheduling of an on-site consultation visit shall be based upon the nature of the employer's request and the employer's placement within the Project's prioritization schedule. See Chapter 3: Promoting and Managing Consultation Services.
1. Current Federal/State Inspection Activity. Consultation personnel must ask the employer whether or not any Federal or State OSHA inspection/enforcement activity is currently taking place at the worksite. If the employer answers in the affirmative, then Consultation personnel should explain to the employer that no on-site consultation can take place

until the OSHA inspection/ enforcement activity is final and/or any cited item(s) have become final order(s).

2. Visit Date Confirmation. If an employer's requested visit is scheduled 30 days or more after the request date, Consultation personnel should contact the employer within 5 working days of the scheduled visit to confirm the visit date. When the employer is contacted to confirm the scheduled visit, Consultation personnel must once again verify that no Federal or State OSHA inspection activity is underway.

C. **Pre-Visit Deferrals.** Employers requesting an on-site consultation visit as a result of the worksite's inclusion on the OSHA Site-Specific Targeting (SST) program may be deferred from the SST inspection for the deferral period described within the current year's SST directive. See Site-Specific Targeting directive.

1. Deferral Requirements. Deferral is contingent upon the employer having requested **and** scheduled an initial full service comprehensive on-site consultation visit for safety **AND** health, see Site-Specific Targeting directive. See Chapter 2: OSHA Cooperative Programs of this manual. No extension of the deferral beyond the prescribed days (see current year's SST directive) is possible unless the consultation visit remains "in Progress." To receive the deferral, the Consultation Project should notify OSHA of the employer's name, the date of the request, and the date the visit is scheduled, as well as other information required under the current year's SST directive.
2. Project Resources. In the event that an employer requests an on-site visit which is beyond Project resources to initiate within 90 days of the date of the request, the CPM will inform the employer that a visit cannot be scheduled and that the employer will not be eligible for a deferral, See Chapter 3 III. F-G.
3. Withdrawal of On-site Consultation Visit Request. If the employer withdraws their request for an on-site consultation visit (after receiving a deferral), the CPM shall inform the Region accordingly and the deferral shall be void. The worksite may then be included in the OSHA programmed inspection list and be subject to enforcement inspection.

III. **On-site Consultation Visits and Enforcement.** On-site Consultation Projects shall determine the scope of the on-site consultation visit based upon the employer's request. An employer's worksite cannot be subject to concurrent consultation and enforcement-related visits. Enforcement may assign a lower priority to worksites receiving a consultation visit until the completion of the correction due dates and any extensions or the consultation closing conference, see 29 CFR 1908.7(b).

- A. **Full Service On-site Consultation Visits.** While a worksite is undergoing a full service on-site consultation visit for safety **and** health, programmed enforcement activity may not occur until after the end of the worksite's visit "in Progress" status.
- B. **Full Service Safety or Health On-site Consultation Visits.** An on-site consultation visit "in Progress" is discipline-related, whether for safety **or** health; programmed enforcement activity may not proceed until after the end of the worksite's visit "in Progress" status, and is limited to the discipline examined, safety or health.
- C. **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. 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).
- D. **Enforcement Follow-up and Monitoring Inspections.** If an enforcement follow-up or monitoring inspection is to be conducted 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 these instances, the consultant must halt the on-site visit until the enforcement inspection has been completed. In the event OSHA issues a citation as a result of the follow-up or monitoring inspection, an on-site consultation visit may not proceed regarding the newly cited item(s) until they have become final order(s).
- E. **On-site Consultation Follow-up and/or Training and Assistance Visits.** On-site consultation follow-up and/or training and assistance visits must be deferred if an OSHA enforcement inspection is to be conducted. The consultant may continue with follow-up and/or training and assistance activity only after enforcement inspection activity at the worksite is final and any cited item(s) have become final order(s).
- F. **Fatality/Catastrophe during Visit.** If a fatality or catastrophe (an incident involving the hospitalization of 3 or more employees) occurs during an on-site consultation visit, the consultant shall immediately terminate the visit. If on-site conditions permit, the consultant should remind the employer of their obligation under 29 CFR 1904.39 to notify OSHA enforcement of the incident.
- G. **Requirements of "in Progress" Status.** A consultation visit shall be considered to be "in Progress" from the beginning of the opening conference to the end of the correction due dates (including extensions). In order to maintain the status of "in Progress," the employer must meet the following conditions:



1. Posting the List of Hazards. Employers must prominently post the List of Hazards, once received, in a location where it can be readily observed by all affected employees. Employers must prominently post the List of Hazards a minimum of three working days and should not remove it until the hazards identified on the list are corrected. For the visit to remain “in Progress,” identified hazards may not remain uncorrected past their correction due date (past the original due date or the extended due date). See 29 CFR 1908.6(e)(8).
2. Hazard Correction. Employers must take action to eliminate exposure to hazards which, in the judgment of the consultant, presents an imminent danger as well as to correct all hazards identified as serious in order to maintain “in Progress” status. The employer must also provide documentation of the action(s) taken to eliminate or control the identified hazards to the On-site Consultation Project by fax, letter or e-mail.

H. **Termination of “in Progress” Status.** A visit “in Progress” is terminated when OSHA enforcement initiates any of the following:

1. Imminent danger investigation,
2. Fatality/catastrophe investigation,
3. Complaints, or
4. Other critical inspections as determined by the Assistant Secretary.

#### IV. **Post-Visit Hazard Correction and Verification.**

- A. **Hazard Correction.** Consultants must inform the employer that all serious hazards must be corrected in accordance with mutually agreed upon correction due dates and that they must provide to the CPM documentation of the action(s) taken to eliminate or control the hazards identified on the List of Hazards. In addition, consultants must inform employers that they should correct other-than-serious hazards in a timely manner, but are not required to send verification of the correction of these hazards to the CPM. Consultants also must inform employers that they may be cited for any serious or other-than-serious hazards identified during an OSHA enforcement inspection.
- B. **Correction Due Dates.** The consultant will recommend suggested correction due dates to the employer. The correction due dates must be the shortest interval within which an employer can reasonably be expected to correct the hazard. Factors such as an employer's economic and work capability may be considered in devising correction due dates. The correction due dates must be discussed and agreed upon during the closing conference. Any dispute regarding a correction due date needs to be directed to the CPM.

- C. **Extending Correction Due Dates.** An employer may request, and the CPM may grant, an extension of the time frame established for the correction of hazards identified on the List of Hazards. This extension may only be granted when the employer has met all of the following criteria: 1) demonstrated that a good faith effort has been made to correct the hazard within the established time frame, 2) shown evidence that correction has not been completed because of factors beyond the employer's reasonable control, and 3) shown evidence that the employer is taking all available interim steps to safeguard affected employees against the hazard during the correction period. Extensions to correction due date(s) will be approved for the shortest reasonable period of time.

1. Requests for extensions must:
  - a. Be in writing. If the extension was initially requested by phone, a confirmation of the request must be received either via fax, postal or electronic mail;
  - b. Contain the reason(s) why the hazard has not been corrected;
  - c. Contain the number of days needed for the extension; and
  - d. Describe and provide documentation of the interim protection provided to affected employees to protect them from the particular hazard(s).
2. Whenever an extension to a correction due date(s) is granted, a **new** List of Hazards must be prepared by the On-site Consultation Project indicating the hazards granted an extension and the revised date(s) of correction. The employer must then post the new List of Hazards for the required period, as described in Chapter 3, Section III.K.
3. For any hazard correction due date, whether initial or extended, of 90 days or greater, the On-site Consultation Project may require the employer to submit a Protection Plan of Action for each serious hazard.

- D. **Interim Protection(s).** Where a serious hazard(s) is identified and is not immediately corrected in the presence of the consultant, employers must provide interim protections when appropriate for affected employees at the worksite while the identified hazard(s) are being corrected. Interim protections include, but are not limited to, the following:

1. Engineering Controls. Engineering controls consist of, but are not limited to, substitution, isolation, ventilation and equipment modification.
2. Administrative Controls. Any procedure that significantly limits daily exposure by control or manipulation of the work schedule or manner in which work is performed is considered a means of administrative control.

The use of personal protective equipment (PPE) is not considered a means of administrative control.

3. Work Practice Controls. Work practice controls are one type of administrative control in which the employer modifies the manner in which the employee performs assigned work. Such modification may result in a reduction of exposure through such methods as changing work procedures, improving sanitation and hygiene practices, or making other changes in the way the employee performs the job.
4. Personal Protective Equipment (PPE) and/or Clothing. Providing the proper PPE to all affected employees and training them in the proper selection, use, and maintenance of the required PPE.

E. **Protection Plan of Action.** In circumstances where a consultant determines that an identified serious hazard(s) requires a complex correction solution(s) that may take more than 90 days to institute, the employer is required to submit an action plan. Circumstances that may require such an Action Plan may include, but are not limited to: a) extensive redesign requirements (such as the installation of a ventilation system) and/or b) factors delaying correction that are beyond the employer's control.

1. The date for submitting the Action Plan will be established by On-site Consultation personnel. A separate Action Plan must be submitted for each identified hazard.
2. The Action Plan, where appropriate, should:
  - a. Identify the hazard and steps to be taken to correct it,
  - b. Outline the anticipated long-term hazard correction procedures,
  - c. Include milestones (or a schedule) for correcting the hazard, and
  - d. Include information regarding how affected employees will be protected from the hazard or hazardous condition in the interim until hazard correction is completed.
3. The employer will provide written periodic progress reports on the status of the hazard correction process (the frequency of the reports is to be determined by the On-site Consultation Project, but not more than quarterly).

F. **Verification of Hazard Correction.**

1. Imminent Danger. Consultants shall ensure that all hazards that present an imminent danger to employees are corrected immediately. If not corrected immediately, the consultant shall refer the employer to enforcement.
2. Serious Hazards. Consultants shall verify that all hazards identified as serious are corrected within the time set forth in the correction due date(s).
  - a. The CPM will employ a tracking system to assure the timely verification of serious hazard corrections.
  - b. Serious hazards must be verified as having been corrected or eliminated within the correction due dates identified in the written report to the employer and the List of Hazards, or as outlined in the Action Plan. The following are the recognized verification methods:
    - i. On-site Verification. When a hazard correction has been witnessed by a consultant during the visit, the hazard will be considered corrected and then noted accordingly in the written report to the employer.

Consultants are required to provide a narrative and/or picture(s) to support the verification of the hazard correction.
    - ii. Off-site Verification. When a consultant is unable to verify the correction of a serious hazard before the conclusion of the visit, the consultant must inform the employer that they are required to provide written confirmation of the hazard correction along with full documentation to the On-site Consultation Project. Written verification may be faxed or sent via postal or electronic mail to the On-site Consultation Project. Written verification must include:
      1. A certification by the facility manager of the date that the hazard(s) was corrected or eliminated; and
      2. A description and/or picture (s) of the corrective method employed. The employer may also include copies of receipts for purchased equipment or services, and any other proof of hazard correction.
    - iii. Follow-up Visit. In addition to the above methods, On-site Consultation Projects may at their discretion conduct a follow-up visit to the worksite to verify the correction of those hazards identified on the List of Hazards.

G. **Referral to Enforcement.** An employer's refusal or failure to correct an imminent danger situation and/or identified serious hazards shall result in a referral to OSHA enforcement or the appropriate State plan enforcement office.

1. Referral to OSHA Enforcement or the appropriate State plan enforcement office will occur for the following:
  - a. Failure to Immediately Correct an Imminent Danger. If, during the course of conducting an on-site consultation visit the consultant observes an imminent danger situation, he/she must immediately inform the employer. If the employer refuses to correct or fails to eliminate the hazard immediately, the consultant will terminate the visit immediately and then make a referral to OSHA enforcement.
  - b. Serious Hazard(s) Not Corrected. When it is determined that an employer is no longer acting in good faith and/or is refusing to correct or eliminate a serious hazard within the established due date, including any extensions, a referral to enforcement must be made at that time.
2. Process for referral to OSHA Enforcement or the appropriate State plan enforcement office:
  - a. Consultant. The consultant conducting the visit shall notify the CPM immediately upon an employer's:
    - i. Refusal to correct or eliminate an imminent danger, or
    - ii. Refusal to correct or eliminate a serious hazard.
  - b. Consultation Project Manager. Upon determining that an employer is no longer acting in good faith and/or is refusing to correct identified hazards, the CPM will immediately notify the Regional Office.
  - c. Regional Administrator. The Regional Administrator will determine whether the employer is to be referred for enforcement action within five (5) days of the notification of hazard violation or within one (1) day if there is an imminent danger situation. The Regional Administrator will also notify the OSHA Area Director of the worksite's loss of "in Progress" status.

To assist the Regional Office in its determination, On-site Consultation Projects shall forward information regarding the worksite's identified hazards and the circumstances of the employer's refusal.

**H. Deletions and Deferrals.**

1. Pre-SHARP. If a worksite is in pre-SHARP status, that is, is in the process of meeting the criteria for SHARP, OSHA programmed inspections at the site may be deferred for up to 18 months while the employer is working to achieve recognition and exemption status. See 29 CFR 1908.7(b)(4)(i)(A).
2. SHARP. If a worksite achieves SHARP status, it is to be removed from OSHA's programmed inspection schedule for a period established by the On-site Consultation Project and approved by the Regional Administrator. See 29 CFR 1908.7(b)(4)(i)(B).

## Chapter 8

### OSHA's Safety and Health Achievement Recognition Program (SHARP), Pre-SHARP, and SHARP Demonstration

- I. **OSHA's On-site Consultation Program.** OSHA's On-site Consultation Program is a free and confidential consultation service largely funded by Federal OSHA. The On-site Consultation Program is delivered by state governments using highly qualified occupational safety and health professionals to help employers detect potential hazards at their worksite and to establish and maintain a safe and healthful workplace. SHARP is an exemption and recognition program administered by the On-site Consultation Program. Pre-SHARP is a deferral program granted to employers actively progressing toward the achievement of SHARP status and is also administered by the On-site Consultation Program.
- II. **Safety and Health Achievement Recognition Program (SHARP).** SHARP is designed to provide incentives and support to employers that implement and continuously improve effective safety and health management system(s) at their worksite. SHARP participants are exempted from OSHA programmed inspections. See 29 CFR 1908.7(b)(4).
  - A. **Employer Eligibility.** Employers who request a consultation visit may be considered for participation in SHARP. Priority for SHARP and Pre-SHARP participation will be given to employers with 250 or less employees onsite. Employers with 251 or more employees should be encouraged to participate in OSHA's Voluntary Protection Programs (VPP). In order to begin this process, Consultation Projects must inform employers that they must:
    1. Request a consultation visit that involves a full service safety and health hazard identification survey, including a comprehensive assessment of the worksite's safety and health management system; and
    2. Have at least one year of operating history at the particular worksite for which the employer is seeking SHARP participation.
  - B. **Program Requirements.** Consultation Projects should inform employers seeking SHARP approval that their worksites must:
    1. Receive a full-service safety and health consultation visit and a comprehensive review of their safety and health management system with all hazards found by the consultant(s) corrected;
    2. Receive a score of at least "2" on all 50 basic attributes of the Form 33. Additionally, all "stretch items" of the Form 33 must be scored. "Stretch items" are the safety and health attributes above the basic attributes of a foundational safety and health management system, such as employee participation in hazard prevention and control activities within the worksite;



3. Agree to notify the Consultation Project Manager (CPM) and request a subsequent on-site consultation visit when changes in working conditions or work processes occur that may introduce new hazards into the workplace;
  4. Have an injury/illness rate for the preceding year that meets the requirements outlined below; and
  5. Submit a request for SHARP participation to CPM.
- C. **1989 Safety and Health Program Management Guidelines.** Consultation Projects reviewing SHARP applicants should ensure that applicants implement, demonstrate, and maintain a safety and health management system. At a minimum, consultants should ensure that the major elements of the 1989 Safety and Health Program Management Guidelines (as measured by the Form 33) have been addressed. Although not a requirement for participation in SHARP, a written safety and health management system as described in the 1989 Safety and Health Program Management Guidelines should be recommended by consultants.
- D. **Injury/Illness Rates.** In order to establish the DART and TRC rates at their worksite, SHARP applicants must have at least one year of operating history at the particular worksite for which SHARP approval is requested. This section establishes the methods for calculating DART and TRC rates as well as the rate requirements for SHARP participants.
1. For all applicants, DART and TRC calculations will be based on the OSHA Form 300 information for the last full calendar year preceding the on-site evaluation. The calculated DART and TRC rates will be compared against the most recently published Bureau of Labor Statistics (BLS) rates for that industry. To qualify for SHARP, the applicant's DART and TRC rates must be below the published BLS industry average. See Appendices C and D for rate calculation formulas and examples.
  2. The following alternative calculation methods are available for those applicants whose calculated injury and illness rates are above the published BLS average if the calculation method above is used.
    - a. Where the applicant has at least three (3) years of operating history, the DART and TRC rate calculations may be based on the OSHA Form 300 information for the most recent three (3) full calendar years preceding the on-site evaluation. The calculated average DART and TRC rates for the last three years will be compared to the most recently published BLS national average for that industry. To qualify for SHARP, the applicant's average DART and TRC rates must be below the most recently published BLS industry averages. See Appendices C and D for rate calculation formulas and examples.

- b. For SHARP applicants for whom a single or a relatively small number of incidents would cause the applicant to be disqualified from SHARP when using the three-year rate calculation described above, DART and TRC rates may be calculated using the best three out of the most recent four full calendar years injury and illness data preceding the on-site evaluation. In determining whether an employer qualifies for the best three out of four year calculation method, Consultation Projects must do the following:
          - Using the most recent employment statistics (hours worked at the site in the most recent calendar year, including overtime hours), calculate hypothetical TRC and DART rates for the employer assuming that the employer had **two** cases during the year;
          - Compare the hypothetical rate to the three most recently published years of BLS combined injury/illness rates for the industry; and
          - If the hypothetical rate (based on **two** cases) is equal to or higher than the BLS average for the employer's industry for any of the most current BLS published rates, the employer qualifies for the best three out of four years calculation method.
3. CPMs may propose, and either Regional Administrators (RA) or the appropriate state official may approve, SHARP status in those rare instances where an applicant has rates equal to or slightly greater than the industry average after using the calculations above at II.D.1-2. In determining whether to grant an employer approval, the RA or state official in a state-plan state must consider the following factors:
  - a. Employer is currently a SHARP participant; and
  - b. Employer has a score of at least "2" on all 50 basic attributes of the Form 33, and the employer's score on all "stretch items;" and
  - c. Employer qualifies for the rate calculation at II.D.2(b) above, but, fails to meet either the DART or TRC rate requirements; and
  - d. The employer's history with the On-site Consultation Program.
4. Employers who meet all of the SHARP requirements, with the exception of the rate requirements, may be recommended for Pre-SHARP status. See Sections III-IV of this Chapter for Pre-SHARP eligibility and requirements.

**E. Consultation Project Responsibilities.**

1. Verification of Employer's Eligibility. The Consultation Project must ensure that the employer satisfies all SHARP participation criteria, and that all elements of an effective safety and health management system are fully operational. If hazards are found during the on-site evaluation, which reflect significant deficiencies resulting in a rating of 0-1 on the Form 33 evaluation of the employer's safety and health management system, the site cannot be recommended for SHARP approval. CPMs may not recommend SHARP approval until the deficiencies have been corrected and the CPM is confident that a worksite's safety and health management system will operate effectively.
2. Submission of SHARP Requests for Approval. After ensuring that the employer has met all of the requirements, the CPM must confirm the employer's interest in SHARP participation. The CPM must then submit the request to the Region via the web-based application for SHARP approval and provide verification of the employer's request for SHARP participation. If the web-based application is unavailable, the CPM must submit the following to the Region:
  - a. The CPM's recommendation for SHARP approval;
  - b. The site's DART and TRC rates, and the BLS national averages for that industry;
  - c. The date and type of each consultation visit conducted during the time the employer was working toward SHARP approval or renewal;
  - d. A copy of the completed Form 33 for the worksite's full service safety and health visit;
  - e. A copy of a mutually agreed upon Achievement Plan, which will provide an outline for the continuous improvement of the employer's safety and health management system; and
  - f. Verification of the employer's request for SHARP participation.
3. Notification of Approval. If the SHARP request is approved, the CPM must inform the employer of the duration of the exemption period.

- F. Regional Office Responsibilities.** For this Chapter, the terms Regional Office, or Regional Administrator, also include the appropriate State Official, for those sites operating in state-plan states. Upon receipt of written verification that the employer has met all of the SHARP program requirements, or through a completed SHARP application, the Regional Office will:

1. Provide the SHARP certificate to the employer. The certificate will include the company's name, location, and period of exemption;
2. Notify the appropriate OSHA Area Office of the worksite's status and facilitate the removal of the worksite from OSHA's Programmed Inspection Schedule for the approved exemption period;
3. Provide a copy of the certificate and the transmittal letter to the CPM for the case file; and
4. Submit a monthly update of SHARP activities to DCSP to ensure that the employer is added or removed from the national database appropriately.

**G. Duration of SHARP Status.**

1. All initial approvals of SHARP status will be for a period of up to two (2) years, commencing from the date the Regional Office approves an employer's SHARP application. After the initial approval, all SHARP renewals will be for a period of up to three (3) years.
2. The exemption period from OSHA programmed inspections will begin on the date that the Regional Office approves the employer's participation in SHARP.
3. During the participation period, participating employers must submit the following to the CPM:
  - a. A copy of the worksite's OSHA 300 log,
  - b. A copy of the worksite's Injury and Illness incident reports, and
  - c. Information regarding the completion of item(s) set forth in the achievement plan.

**NOTE: A site self-evaluation template is available at Appendix E; worksites will find this template a useful tool for documenting their progress in meeting their achievement plan.**

**H. Renewal Requirements.** Consultation Projects must inform employers seeking a SHARP site renewal that they must request a renewal visit within 180 days of expiration of the exemption status. The CPM may begin to process the employer's request for SHARP renewal provided that the steps outlined above, and the following steps have been taken:

1. The Consultation Project has provided a full service safety and health visit, and conducted a comprehensive program assessment to ensure that the safety and health management system has been effectively maintained or improved,

2. The Consultation Project has verified that the employer continues to meet all eligibility and program requirements, and
  3. The Consultation Project has received the employer's interim-year self-evaluation (see Appendix E) and OSHA 300 log data. The employer's interim-year self-evaluation is required as verification of the employer's continued eligibility, during renewal years.
- I. **Renewal Approval.** Renewal for SHARP participation must be approved by the Regional Office prior to the expiration of SHARP status to assure continued eligibility for exempt status. It is the responsibility of the CPM to ensure that renewal of SHARP status occurs before expiration of exempt status. If a SHARP site fails to request a renewal visit within 180 days of expiration of the exemption status, they can still receive a renewal at the Regional Administrator's discretion.
- J. **OSHA Inspection(s) at SHARP Worksites.** As noted above, employers that meet all the requirements for SHARP status will have the names of their establishments deleted from OSHA's Programmed Inspection schedule. However, pursuant to 29 CFR 1908.7(b)(4)(ii), the following types of incidents can trigger an OSHA enforcement inspection at SHARP sites:
1. Imminent danger,
  2. Fatality/Catastrophe or
  3. Formal complaints.
- III. **Pre-SHARP Status.** Those employers who do not meet the SHARP requirements, but who exhibit a reasonable promise of achieving agreed-upon milestones and time frames for SHARP participation, may be granted Pre-SHARP status. Upon achieving Pre-SHARP status, employers may be granted a deferral from OSHA Programmed Inspections.
- A. **Employer Eligibility.** Employers who request a consultation visit may be considered for participation in Pre-SHARP. In order to begin this process, Consultation Projects must inform employers that they must:
1. Request and receive a consultation visit that involves a full service safety and health hazard identification survey, including a comprehensive assessment of the worksite's safety and health management system.
  2. Have at least one year of operating history at the particular worksite for which the employer is seeking Pre-SHARP participation.
- B. **Pre-SHARP Requirements.** Consultation personnel shall inform employers that the following criteria must be met prior to **and** following the granting of Pre-SHARP status.

1. Initial Requirements.

- a. Receive a full service, comprehensive consultation visit that involves a complete safety and health hazard identification survey, including a comprehensive assessment of the worksite's safety and health management system;
- b. Post the List of Hazards identified by the consultant(s);
- c. Provide information regarding all hazards identified by the consultant(s) to employees;
- d. Correct all hazards identified by the consultant(s);
- e. Submit hazard correction verification to the Consultation Project;
- f. Inform employees of hazard correction(s); and
- g. Provide evidence of having the foundation of a safety and health management system.

2. Post Pre-SHARP Status Requirements.

- a. Implement the Action Plan developed with the consultant outlining the necessary achievements and time frames required for the employer to achieve SHARP status. The employer must provide timely progress reports to the Consultation Project Manager;
- b. Upon receipt of an approval letter from the Regional Administrator or CPM granting Pre-SHARP status, the employer must post the letter in a conspicuous area. At sites having recognized employee representative(s), the employer must notify the employee representative(s) of the employer's intention to participate in Pre-SHARP and involve the recognized employee representative in the process;
- c. Involve employees in the safety and health management system, including the implementation of the Action Plan;
- d. Agree to notify the Consultation Project Manager prior to making any changes in working conditions or work processes that might introduce new hazards into the workplace; and
- e. Agree to a full service, comprehensive consultation visit for safety and health at the end of the Pre-SHARP deferral period, which initiates the SHARP application process.

- C. **Deferral Time Frame.** The deferral time frame recommended by the Consultation Project Manager must not exceed a total of 18 months from the expiration of the latest hazard correction due date(s), including extensions.
- D. **Consultation Project Responsibilities.** The Consultation Project personnel must:
1. Assure verification of hazard correction of all hazards and compliance with requirements to post the List of Hazards and other employee information;
  2. Assist the employer in the development of an Action Plan to be implemented by the employer. The Action Plan must outline a goal, recommended method of correction, and an expected completion date for the 50 basic attributes of the Form 33 that received a score of less than "two;"
  3. Determine if the employer is capable of meeting all SHARP requirements within the deletion period, including DART rate and TRC requirements;
  4. Provide a signed notice of intent to participate in Pre-SHARP, to be posted by the employer;
  5. Provide to the Regional Office a letter or e-mail certifying that the employer exhibits reasonable promise of achieving the agreed-upon milestones within the deferral period;
  6. Provide to the Regional Office a copy of the employer's Form 33 evaluation, including an Action Plan;
  7. Recommend a deferral period (not exceeding a total of 18 months, including extensions, from the end of the latest hazard correction due date) to the Regional Office; and
  8. Request that the Regional Office terminate the employer's Pre-SHARP status if the employer fails to maintain Pre-SHARP requirements, or fails to meet SHARP requirements within the established time frame.
- E. **Regional Responsibilities.** The Regional Administrator may grant a deferral from OSHA programmed inspections for the period recommended by the Consultation Project Manager and notify the appropriate Area Office of the deferral. Prior to granting a deferral, the Regional Administrator must concur that:
1. The worksite has met or is likely to meet the applicable DART and TRC rate requirements;
  2. The employer has in place the foundation of a safety and health management system; and



3. The Action Plan adequately outlines the goal, recommended method of correction, and an expected completion date for each attribute of the Form 33 that received a score of less than "two."

F. **OSHA Inspection(s) at Pre-SHARP Worksites:** As noted above, employers that meet all the requirements for Pre-SHARP status may be granted a deferral from OSHA programmed inspections; however, the following types of incidents can trigger an OSHA enforcement inspection at Pre-SHARP sites:

1. Imminent danger;
2. Fatality/Catastrophe; or
3. Formal complaints.

#### IV. **General Employer and Consultation Project Obligations.**

A. **Fatalities or Catastrophes at SHARP or Pre-SHARP sites.** Consultants should advise employers that in the case of a fatality or catastrophe at a SHARP/Pre-SHARP site, the employer must notify the OSHA Area Office within eight (8) hours of the incident as required in 29 CFR 1904.39. Consultants must also inform employers that they must notify the CPM as soon as possible after notification of the incident. Until all citations have been issued, Consultation personnel are not permitted to discuss with the employer any issues related to the fatality or catastrophe or an OSHA enforcement inspection. After the enforcement investigation is concluded and/or all citations have been issued, the CPM must evaluate the SHARP/Pre-SHARP status of the worksite using the following criteria:

1. If no citation is issued, an on-site visit must be conducted to ensure that all elements of the safety and health management system continue to be effective.
2. If a serious or repeat citation is issued, a consultant must conduct an on-site visit to ensure that the alleged hazardous condition(s), which amounted to violation(s), have been corrected and that the safety and health management system is operating effectively.
  - a. If the CPM believes that a serious or repeat citation is connected to a diminution in the effectiveness of the company's safety and health management system, the CPM will recommend the employer's withdrawal from SHARP/Pre-SHARP.
  - b. If the CPM believes that there is no connection between the serious or repeat citation and the effectiveness of the employer's safety and health management system, the employer must be counseled on how to prevent a recurrence.

3. If a willful citation is issued or there is evidence that the site's application or interim self-evaluation is inaccurate, the employer will be asked to withdraw from the program. If the employer does not withdraw voluntarily within 5 working days, participation must be terminated. The employer may re-apply to the program 12 months after withdrawal or termination.

**B. Changes that May Affect a SHARP or Pre-SHARP Employer's Eligibility.**

1. **Relocation.** Consultants must inform employers planning to relocate their facilities that they must notify the Consultation Project sixty (60) days in advance of the move. Consultants must also visit the new site within thirty (30) days after the new site becomes operational to ensure that an effective safety and health management system is in place and that the employer still meets all the requirements for exemption or deferral. If this is not the case, the CPM must ask the employer to withdraw from the SHARP or Pre-SHARP program.
2. **Change in Ownership and Organizational Changes.** Whenever ownership or major organizational changes occur that may impact the effectiveness of the company's safety and health management system, the employer or employer representative must notify the consultation project. The CPM must then discuss the changes with the employer and schedule an on-site visit, if necessary.

**C. Failure to Maintain SHARP or Pre-SHARP Requirements.** If an employer fails to maintain the participation criteria outlined in this Chapter, the CPM should give the employer the opportunity to voluntarily withdraw from the program.

1. **Voluntary Withdrawal from the Program.** Any approved SHARP/Pre-SHARP participant may withdraw at any time. Withdrawal may occur as a result of plant closing, economic difficulty, change in management, or at the request of the employer or CPM. To withdraw, the employer must send a letter explaining the withdrawal and/or return the SHARP certificate to the CPM. The withdrawal is effective immediately upon receipt of the letter. The CPM will notify the Regional Office of the employer's withdrawal from SHARP/Pre-SHARP. Withdrawal from the Program will result in all program benefits including exemption or deferral status being withdrawn.
2. **Termination of Exemption or Deferral.** If an employer fails to maintain the participation criteria outlined in this Chapter and refuses the opportunity to voluntarily withdraw from the program, the CPM must request that the Regional Administrator terminate the employer's participation in SHARP/Pre-SHARP. The employer and the Area Office must be notified in writing when SHARP/Pre-SHARP participation is

terminated. The written notice to the employer must contain the reason(s) for the termination and outline the requirements for re-entry into the program.

- V. **SHARP Pilots.** SHARP Pilots enables OSHA to work with companies and industries to demonstrate the effectiveness of methods for achieving excellence in safety and health management systems that are potential alternatives to current SHARP requirements. All SHARP Pilot Programs must conform to the requirements of 29 CFR 1908.
- A. **Framework.** SHARP Pilots must be designed to meet one of the following requirements:
1. To test alternatives which, if successful, will allow previously ineligible sites to participate in SHARP.
  2. Exploring the application of SHARP in industries where OSHA lacks substantial experience.
  3. Testing alternative approaches that could improve current standards in safety and health management.
  4. Exploring other opportunities to develop innovations and improvements in safety and health management.
- B. **Duration.** SHARP Pilots programs will be approved for an agreed upon time period not to exceed 5 years.
- C. **Process Overview.** SHARP Pilots are designed in two parts. Pilots must be created by individual Consultation Projects and be submitted for review and approval by the Regional Administrator who has jurisdiction over that Consultation Project. If the Regional Administrator chooses to approve the Pilot, they will, in consultation with DCSP, administer the Pilot Program, and the approval of individual sites to the pilot. The Consultation Project will be responsible for collecting appropriate data, according to the structure of the Pilot and submitting it to the Regional Administrator.
- D. **Proposal Development.** Parties interested in developing proposals must work with the Regional Administrator. The proposal should delineate the policies that will run the program, explain what data gathering techniques will be utilized to evaluate the program, and explain how the pilot program will diverge from the standard requirements of SHARP. The proposal should be then be submitted for approval to the Regional Administrator who will have jurisdiction over the Pilot.
- E. **Approval of Applicants.** Once a SHARP Pilot Program has been approved by the Regional Administrator in consultation with DCSP, the Regional Administrator will have the authority to accept individual sites into the SHARP Pilot. All SHARP requirements except those specifically waived in the SHARP

Pilot should be prescribed for all applicants and SHARP Pilot members, including on-site evaluations, periodic annual reviews etc. In addition quarterly data collections, and other monitoring techniques should be applied. SHARP Pilot members will receive the same benefits as other SHARP sites (including deletion from program inspections). SHARP Pilot members will receive deletions for a period of up to one year from programmed inspections.

- F. **Outcome of a SHARP Pilot.** Once a SHARP Pilot is terminated, the Regional Administrator will direct an assessment of the goals of the pilot, including injury and illness information, the effect of various policy changes and other pertinent information. The Regional Administrator will share those findings with DCSP, as well as a recommendation as to whether the Pilot should be included in the general criteria for SHARP participation.

## Chapter 9

### Monitoring of Consultation Projects

- I. **Purpose.** The purposes of monitoring and evaluating Consultation Projects are the following:
  - A. Ensure and demonstrate the continued effectiveness of consultation services provided to employers,
  - B. Ensure Consultation Projects' compliance with the requirements of the OSH Act, 29 CFR 1908, and these policies and procedures,
  - C. Discover improvement areas and highlight best practices, and
  - D. Provide evidence-based findings for future policy development.
- II. **Evaluation Parameters.** The process is based on the following principles:
  - A. The focus of monitoring and evaluation is measuring a Project's results against the targets set in its Consultation Annual Project Plan (CAPP) and its contribution to the achievement of Federal or State annual performance goals.
  - B. Completion of Consultation visits including all required documentation in accordance with appropriate standards.
  - C. Project performance parameters captured by Mandated Activity Report for Consultation (MARC) standards.
  - D. Effectiveness of a Project's Internal Quality Assurance Program.
  - E. The monitoring and evaluation process will be performed jointly by the Projects and Federal OSHA. The process described in this manual identifies those activities which will be performed by Consultation Projects and those which will be performed by Federal OSHA. The monitoring process requires coordination between Regional consultation monitoring staff and State plan monitoring staff to ensure that Consultation Projects in State plan States are not subject to two unique sets of monitoring requirements.
- III. **Framework of the Monitoring/Evaluation Process.** The monitoring and evaluation of a Consultation Project's performance will be assessed through the following means:
  - A. **Consultation Management Reports (CMR).** This report contains management information on the operations of a Consultation Project, including efficiency measures and intermediate outcome measures. This is an optional report, provided to assist the Consultation Project in internal management processes. The

information can be gathered from the micro-to-host and other standard reports. See Appendix G.

1. The CMR contains monthly and year-to-date totals of MARC data. The report is available through micro-to-host reports.
2. The CMR is utilized by Consultation Project Managers as an internal management tool. It is also utilized to supplement the MARC as a source of information for evaluating potential problems related to carrying out mandated activities.

**B. Quarterly Discussions.** Federal and Project representatives must meet (or confer by telephone) at least once in every quarter to review the Project's progress on the CAPP (discussed further in Chapter 10) and the MARC, and address any issues or problems that arise. The Region must document the issues discussed and any commitments made during the quarterly discussions.

1. Purpose. Quarterly discussions provide an opportunity to assess Project performance on an on-going basis. This method of sharing information and conducting joint reviews of Project performance targets on a quarterly basis facilitates the annual evaluation process and permits early identification of potential issues or performance problems. It also identifies successful strategies that could be shared with other Projects.
2. Frequency and Timing of Quarterly Discussions. Scheduling of quarterly discussions should take into account the availability of quarterly data, the extent of any preliminary review needed, and submission deadlines for annual performance plans and evaluation reports. Discussions must occur at least quarterly, however, communication should not be limited to the quarterly discussions. Informal discussions, working sessions, and other meetings, for a variety of purposes including development of CAPPs, should be held as necessary. Quarterly discussions may take place in person or via telephone.
3. Focus of the Quarterly Discussions.

Quarterly Meeting	Timing	Agenda Items
First	October-November	<p>Discuss end-of-year data for the previous fiscal year, if available</p> <p>Review the details of and make any necessary adjustments to the Project's CAPP</p> <p>Review the Project's Internal Quality</p>

		<p>Assurance Program</p> <p>Agree upon a schedule for the year's quarterly discussions and upon due dates that permit submission of the CAPR to the National Office by January 15</p> <p>Coordinate the annual evaluation process and begin discussing evaluation reports for the previous fiscal year</p>
Second	January-February	<p>Review first quarter performance and mandated activities data to assess the Project's year-to-date progress toward its annual performance targets</p> <p>Discuss any new or previously unresolved issues/concerns.</p> <p>Discuss the findings of the evaluation reports for the previous fiscal year</p>
Third	April-May	<p>Discuss second quarter data, assessing the Project's year-to-date progress toward its annual performance targets</p> <p>Discuss any new or previously unresolved issues/concerns.</p> <p>Begin planning the targets and strategies to be included in the following year's CAPP</p>
Fourth	July-August	<p>Discuss third quarter data, assessing the Project's year-to-date progress toward its annual performance targets</p> <p>Finalize next fiscal year's CAPP</p> <p>Discuss any new or previously unresolved issues/concerns.</p>

4. Quarterly Discussion Topics. Examples of discussion topics include:
- a. Progress in meeting annual performance targets.
  - b. Status of Federal and State strategic or annual performance plans.
  - c. Review of mandated activity reports.



- d. Results of an on-site review or follow-up on issues arising from an on-site review.
  - e. Project's Internal Quality Assurance Program.
  - f. Issues that may relate to the Project's assurances or quality assurance program.
  - g. Effect of State policies and procedures or other impact factors.
  - h. Status of Project responses to prior evaluation reports.
  - i. Appropriate use of resources.
  - j. Upcoming Federal or State training courses.
  - k. Follow-up on commitments made during the previous quarterly discussion.
  - l. Any other issues of concern to either party.
5. Documentation. The Regional Consultation Project Officer (CPO) must maintain a written record of each quarterly discussion indicating the date, location, persons in attendance, a summary of the significant issues discussed, and the conclusions reached. Commitments made by either party, such as to supply information or assistance, should also be documented. The CPO must provide copies of quarterly discussion reports to the Project.

C. **Mandated Activity Report for Consultation (MARC) Report.** Consultation mandated activities are tracked via the Mandated Activity Report for Consultation (MARC) report. (See Appendix G for a complete list of the measures included in the MARC.) The MARC consists of the performance indicators; the expected performance standard, where applicable; and the Project's performance data.

- 1. Frequency. The MARC report is run quarterly for each Project and includes data for the most recent quarter and fiscal-year-to-date. The report is also available as a micro-to-host report to be run independently by a Consultation Project Manager.
- 2. Data Source. Most of the Project Performance data will be obtained from OSHA's Integrated Management Information System (IMIS); however, in some instances, the Consultation Project Manager will be required to submit data to the Regions.

3. Measurement Standard or Reference. A Project's performance is compared to criteria established by regulation or policy. These criteria are listed in the "Reference" column in the MARC and CMR.
  4. Guidelines for Use. Regional and Project staff should jointly review the Mandated Activity Report for Consultation (MARC) reports quarterly and discuss performance that does not meet the standard. Initial review by designated Federal and Project officials should take place before the quarterly discussion.
    - a. Initial Review. Any potential problem or shortfall in performance found during the initial review of the MARC data should be investigated by both Federal and Project reviewers to determine its significance, cause, and any necessary corrective actions.
    - b. Discussion of Findings. OSHA or, in the case of a joint review, OSHA and the Project, should present the findings and possible causes of any performance variances at the quarterly discussion. If additional analysis is required, OSHA and the Project should agree on how this will be done.
    - c. Further Review. Data collection and its review should be considered a joint responsibility whenever possible. The data sources to be used and the method of evaluation should be discussed at the quarterly discussion, as should issues of potential data accuracy, where appropriate.
    - d. Follow-up Action. If remedial action is required, OSHA and the Project should agree upon possible courses of action.
- D. **Annual Assurances (OSHA Restrictions and Conditions).** Maintenance of the fundamental program requirements listed in Appendix H must be assured through an annual commitment ("OSHA Conditions and Restrictions") from the State, to be included in the Cooperative Agreement. Effective implementation of the assurances is monitored by the Consultation Project through sound management practices that include an internal quality assurance program, use of data obtained from the CMR, and use of other available data. In the event that an activity or program element assured by the Project is not observed, the Region may conduct appropriate monitoring activities.
- E. **On-site Review.** An on-site review is a routine monitoring activity conducted by the Region to assess the quality of a Project's services and its quality assurance program. The Region must conduct a minimum of one on-site review every two years. Additional reviews may be conducted when a Project is experiencing program difficulties or for other reasons determined by the Regional Administrator.

1. Problems or potential problems in the general operational system identified during the On-site Review should be discussed during the On-site Review. The Region may interview the Consultation Project Manager and consultants regarding any concerns or apparent problems arising out of the On-site Review. (See Appendix I for an On-site Review checklist.)
2. Review of Operational Elements. The On-site Review should include a review of:
  - a. Training received by consultants,
  - b. On-the-job evaluations,
  - c. Lapse time from request to delivery of service,
  - d. Management reports (i.e., pending written reports, pending hazard corrections, number of requests, and pending visits),
  - e. Hiring and vacancies,
  - f. The Project's budget (i.e., project expenditures - this is not an audit),
  - g. Recent consultation project developments,
  - h. Verification of the monitoring of consultants' performance,
  - i. Promotion of the Project's recognition and exemption program (SHARP),
  - j. Marketing initiatives,
  - k. The Project's internal quality assurance programs,
  - l. The appropriate use of the Safety and Health Program Worksheet (Revised OSHA Form 33) by consultants,
  - m. The Consultant Function Competency Statements (Appendix K) can be another tool utilized to verify the performance, and training received by Consultants, and can be utilized both by the Consultation project for identification purposes, and by Federal OSHA for verification purposes, and
  - n. The selection and use of proper PPE.

3. Case File Review. Files should be selected randomly from all closed cases with closing conference dates in the nine months preceding the current on-site review.
  - a. Sample Size. The sample must include a minimum of 3 initial case files per consultant, up to a total of 36. For those projects with more than 12 consultants, the sample should include consultants who have the least experience or seniority on the job. At least two of the three case files selected per consultant must be cases where serious hazards were found. For Projects where case files are retained in field offices, the sample must be selected so that all field offices are represented in proportion to the number of case files they contribute to the total population.
  - b. Selecting the Sample. In order to determine the sample, some useful reports include the scan report – detail, the consultation report, and the standards frequency report, all of which are available in the micro-to-host reports. Selection should be made as follows: first, determine the total number of recognition-program cases; then:
    - i. If the total number of recognition-program case files is more than ten, randomly select ten of the recognition-program case files and then randomly select the remainder of the sample from the non-recognition-program case files.
    - ii. If the total number of recognition-program case files is less than ten, select them all, and then randomly select the remainder of the sample from the non-recognition-program case files.
    - iii. If the randomly selected non-recognition-program case files do not include at least five training case files, the sample should be increased by as many randomly selected training files as needed to total five.
4. Focus of the Case File Review (CFR). The quality of the following services provided by the Consultation Project should be evaluated on the basis of the case files. (See Appendix I for the criteria applying to Case File Review.) The Region must review and discuss the findings of the CFR with the Consultation Project Manager including:
  - a. Safety and health program assistance,
  - b. Identification and classification of hazards,

- c. Recommendations for hazard correction and control,
  - d. Relationship of hazards found to deficiencies in the employer's safety and health management system,
  - e. Training and education,
  - f. Exemption program evaluations,
  - g. Written reports to employers, and
  - h. Procedures for Extension processing.
5. Review of Recent Consultation Project Developments. The Region must review recent developments, which may include:
- a. Changes in staffing,
  - b. Recent developments within the Consultation Project or its larger organization (for example, State government or university) which may impact on the working conditions and staffing of the Consultation Project,
  - c. The progress of consultants and the Project in meeting the goals of their annual training plans,
  - d. Whether on-the-job evaluations are being conducted according to the schedule established in the Cooperative Agreement,
  - e. Budgetary issues, and
  - f. The status of previously discussed, analyzed, or corrected performance issues.
6. Closing Conference. A closing conference must be held with the CPM, in person or by telephone, to discuss the results of the On-site Review and to reach agreement on actions to be taken by the Project to correct any deficiencies. OSHA must inform the Consultation Project Manager that the findings will be reported in the Regional Annual Consultation Evaluation Report (RACER) and may provide a written list or summary of any deficiencies and recommendations for improvement with the CPM at the closing conference.
7. Documentation of the On-site Review. OSHA's documentation of the On-site Review must include a record of the total number of case files

available for review, a list of the case files contained in the sample, and a copy of the summary letter sent to the Consultation Project Manager.

- a. Summary Letter. Within 45 calendar days after the On-site Review, OSHA must send the Consultation Project Manager a letter documenting any deficiencies, recommendations, and time frames for addressing them. As a courtesy, a draft of this letter should be sent to the Consultation Project Manager prior to the official transmission so that the Consultation Project Manager may have a sufficient period to comment on the draft.
- b. Final Findings. Final findings must be included in the Regional Annual Consultation Evaluation Report.
- c. Follow-up to the On-site Review. Subsequent quarterly discussions with the Project should include appropriate follow-up to any issues raised in the On-site Review. Resultant programmatic changes or improvements to the program should be discussed and documented as part of the quarterly discussion.

F. **Other Evaluation Tools**. Additional evaluation tools, including Federal OSHA interviews with Consultation Project staff, case file reviews, and further analysis of issues identified in routine monitoring may be used as needed to address questions of Consultation Project performance in relation to its approved targets or its mandated responsibilities.

IV. **Annual Evaluation Reports**. Annual evaluation reports, described below, should be submitted via electronic methods (i.e., e-mail, CD-ROM, floppy disk).

A. **Consultation Annual Project Report (CAPR)**. Each Consultation Project must prepare a CAPR to summarize and analyze the progress made in attaining the targets it set out in its Consultation Annual Project Plan (CAPP). It may include a summary and evaluation of the Project's outcome data, including a summary of its quarterly progress updates, discussion of obstacles faced, and the reasons for not meeting projected targets. The CAPR is prepared after the end-of-year data have been compiled and is due annually on January 15. The CAPR will be used by OSHA's National Office when it prepares its annual report to the Congress in which the results of all of the Consultation Projects will be aggregated to summarize the national success of the Consultation Program.

1. Due Date. The Consultation Project Manager must submit the CAPR to the Regional Administrator by December 1 of each year. The Regional Administrator must forward all of the CAPRs in the Region to the National Office by January 15 of each year.
2. Contents. The CAPR must include the following elements:

- a. Executive Summary. The Executive Summary should highlight key contributions, put results into context with the State/Federal strategic plan and program budget, clarify program rationale and relationships between major program activities and intended results, identify successful and unsuccessful efforts, and the methods with which the program will revise strategies to achieve the desired results.
- b. Discussion of Results in Achieving CAPP Performance Goals. The discussion of results in achieving CAPP performance goals should include:
  - i. For each Federal or State annual performance goal addressed in the CAPP, the CAPR should contain a summary of results achieved by the Consultation Project. The strategies and activities used to achieve the targets set in the CAPP should be evaluated. Did these strategies work and were the activities used to implement these strategies effective? What modifications need to be made to the strategies and activities to more effectively reach the goals? Were there situations where external factors affected performance? Are there ways to coordinate with others or leverage resources or knowledge that would help to achieve the goals?
  - ii. Any specific performance measures relating to the Consultation Program or performance measures developed by the Consultation Project Manager should be analyzed in the CAPR. Did the results exceed expectations? By how much? Did activities and effort fall short of expectations? By how much?
  - iii. Finally, the measures themselves should be evaluated. Did the program evaluate the right things, did they measure things that they had direct control over, and were the data elements essential to measuring the effectiveness of the strategic goal, strategies and activities? What measurements were effective in gauging performance and which measurements were simply counts of activity? Did the project use the measurements to evaluate progress and adjust future implementation strategies?
- c. Special Accomplishments. These may be results that were far beyond expectations, successes that were achieved in areas, issues, or constituencies that had formerly been considered difficult or



unlikely. These may also outline the successes of a new methodology or activity that could be implemented in other states.

- d. Other Issues or Adjustments. Comment on these issues and describe proposed actions or adjustments:
  - i. Results relating to any state-specific initiatives, if there were any.
  - ii. Any areas where annual Project goals have not been met or other new issues have evolved.
- e. Internal Quality Assurance Program (IQAP). Describe the findings on each element of your internal quality assurance plan and discuss the measures you are taking or will take to make any needed improvements. See Paragraph IV., above, for the required elements of the IQAP.

B. **Regional Annual Consultation Evaluation Report (RACER).** This report is prepared by each Regional Office in conjunction with Consultation Project staff. The RACER analyzes the results attained by the Project and evaluates the Project's performance of its mandated activities. It includes documentation of any significant issues and recommendations for addressing them, as well as a summary of the reports of quarterly discussions.

- 1. Due Date. The Regional Office must submit each Project's RACER to the Directorate of Cooperative and State Programs by April 30 of each year.
- 2. Contents. The RACER must include the following elements:
  - a. Executive Summary. This section provides a bullet-point summary of the performance of the Consultation Project and any items on which the Project must take action for continuous improvement.
  - b. Assessment of the Consultation Project's Annual Performance in Relation to its Consultation Annual Project Plan. This section should include an analysis of the Project's performance as it relates to the projections and goals outlined in the Consultation Annual Project Plan. The Region's analysis should include evaluation of the Project's results presented by the Project in its CAPR. It may also include documentation of any significant issues and recommendations for addressing them, as well as a summary of the reports of quarterly discussions.
  - c. Assessment of Project's Performance of Mandated Activities. This section should evaluate the Project's continued performance of its

mandated activities, as determined by a review of MARC reports, the Project's Internal Quality Assurance Program, and, if an On-site Review was conducted that year, by the results of the On-site Review.

- d. Other Issues (Optional). The Region may wish to address or highlight additional issues regarding the Project's performance that were not included in the previous sections of the report.

- V. **Dispute Resolution Process.** Regions and Consultation Projects should resolve differences at the lowest organizational level possible. In the event that a Project and Region cannot agree on the resolution of an issue relating to program administration or the monitoring and evaluation system, either may seek resolution by the Assistant Secretary for Occupational Safety and Health through established channels.
- VI. **Development, Review, and Monitoring of Consultation Annual Project Plans.** The primary focus of monitoring and evaluation is the Consultation Annual Project Plan (CAPP), which identifies the strategies and activities to be undertaken by the project to support the strategic and annual performance plans of Federal or State OSHA in which it operates. CAPPs details are discussed in Chapter 10.
- VII. **Criteria for Acceptable Performance by the Consultation Project.** The following criteria will be used by Federal OSHA Regional monitoring staff to determine whether a Project's performance falls within the range of acceptability:
  - A. Monitoring must focus on evaluating a Project's performance against its own established performance targets outlined in the CAPP. An individual Project's performance should not be compared to the performance of other Projects.
  - B. In the absence of outcome-level data, the Region and the Project should jointly review resource information in conjunction with areas likely to provide an impact to determine the effectiveness of the Program.
  - C. All Projects are expected to achieve target goals outlined in the CAPP. In certain circumstances, substantial progress toward performance targets may constitute acceptable performance. Where progress has not been to an acceptable degree, either or both evaluation reports (see below) must contain an analysis of the factors contributing to the unexpected outcome and identification of necessary changes in strategy or project operations.
- VIII. **Required Elements of an Internal Quality Assurance Program.** Consultation Projects must operate internal quality assurance programs to ensure the maintenance of program requirements that are covered by assurances in the Project's Cooperative Agreement. A comprehensive quality assurance program must include systems to ensure:

- A. Training and supervising consultants through the use of:
    - 1. On-the-job evaluations,
    - 2. Review of work products,
    - 3. The Orientation for New Consultants course and mentoring for all new hires,
    - 4. E-cats and technical links found on the OSHA website, and
    - 5. In addition, the Consultation Function Competency Statements should be adhered to for training and orientation purposes. See Appendix K.
  - B. Communicating (verbally or in writing) to employers:
    - 1. Employer's obligations,
    - 2. The relationship of Consultation Programs to enforcement, and
    - 3. Program, State, or other policies and procedures.
  - C. Ensuring that hazards are identified, correction advice is offered to employers, and abatement is verified.
  - D. Program management that includes:
    - 1. Clearly written and regularly communicated policies and procedures,
    - 2. Use of data and other information to effectively manage the program,
    - 3. Individual accountability,
    - 4. Maintenance of program uniformity through regular communication, updates, and meetings,
    - 5. Promoting and marketing of consultation services to targeted employers and stakeholders, and
    - 6. Evaluating service delivery using random audits (and other optional evaluative tools such as surveys, questionnaires, focus groups, or training evaluations) to check for broad, programmatic trends in service delivery.
- IX. **Evaluation Reports.** Each year, the Region and the Consultation Project prepare reports documenting the Project's results with respect to its Consultation Annual Project Plan and its mandated activities. The Project prepares the Consultation Annual Project Report

(CAPR), and the Region prepares the Regional Annual Consultation Evaluation Report (RACER). The results reported in the CAPRs are aggregated by the National Office into a summary of Consultation Projects' activity, intermediate outcome, and outcome data, and are included in Federal OSHA's annual GPRA performance report to the Congress.

- X. **Further Analysis.** Issues identified for further analysis in the course of routine monitoring should be examined in terms of their impact on the effectiveness of a Consultation Project's operations. In addition to MARC and CMRs, customized IMIS host reports with limited selection criteria may be useful. Other approaches available to the Regional Administrator or State Designee include:
- A. **Interview.** An interview is a planned discussion to obtain information from specific Project staff, employers, employees, or other persons, apart from personal communication that occurs in the conduct of an On-site Review or as part of day-to-day communication with staff.
  - B. **Non-Routine Case File Review (CFR).** A non-routine case file review may be conducted to examine the documentation relating to a specific consultation visit. If a CFR is used in conjunction with an interview, it may serve to verify the observed Project activity.
  - C. **Other Sources of Information.** Sources of information other than those specified in this Chapter may include, but are not limited to, attendance at training sessions, examination of Project documents other than case files, review of equipment or laboratory facilities, and evaluation of sample analyses. The Region and the Project may determine other sources of information that may need to be accessed.
- XI. **Studies Initiated by the Assistant Secretary.** The Assistant Secretary for Occupational Safety and Health may initiate special studies of a Consultation Project to review recent activities or the implementation of consultation policies and procedures.

## Chapter 10

### The Consultation Annual Project Plan (CAPP)

- I. **Purpose.** This Chapter describes the Consultation Annual Project Plan (CAPP) that must be developed and submitted by a Consultation Project, in coordination with its Regional Offices, along with its annual Cooperative Agreement Application. The Chapter also discusses a CAPP's required components and the procedures and responsibilities for its development.
- II. **General Description.** The CAPP is a narrative that details the methods and specific activities a Consultation Project will implement in support of the OSHA Strategic Management Plan (SMP) and/or State Annual Strategic Performance Plan during the forthcoming year. It also documents the anticipated impact of these activities.
  - A. **CAPP.** The CAPP is the benchmark for the evaluation of a Consultation Project. The evaluation of a Project's performance is measured by its fulfillment of projected activities and its achievement of intended impact.
  - B. **Development Process/Procedures.** The development of the CAPP requires the cooperation and coordination of the Consultation Project Manager and OSHA Regional and/or Area Office. The process require extensive coordination and should be started early in the fiscal year to ensure its completion before the National Office due date.
- III. **Responsibilities.** Both Consultation Project Managers and Regional Officials have clear responsibilities during the CAPP development process. They are as follows:
  - A. **Consultation Project Manager.**
    - 1. Coordinate with Area or Regional officials to establish an agreed upon schedule for the submission of the CAPP and Cooperative Agreement application.
    - 2. Negotiate the elements of the CAPP with the Area or Regional official before its development.
    - 3. Develop the CAPP to include all agreed upon elements with the Area or Regional official.
    - 4. Submit a draft of the upcoming year's CAPP along with the draft Cooperative Agreement to the Regional Office in the third quarter of each fiscal year.
    - 5. Revise the draft CAPP as necessary after the receipt of comments from the Regional Office.

6. Submit the final CAPP along with the Cooperative Agreement to the Regional Office on or before the established due date.

**B. Area or Regional Project Officer.**

1. Establish a schedule with the Consultation Project Manager that permits the timely submission of the Cooperative Agreement application to the National Office.
2. Establish consensus on the elements of the CAPP with the CPM.
3. Review and provide feedback for the draft of upcoming year's CAPP and Cooperative Agreement.
4. Review the final CAPP along with the Cooperative Agreement.
5. Submit the CAPP and complete Cooperative Agreement application to the National Office along with a letter of endorsement.

**IV. Due Dates.** Each year, Consultation Project Managers and their Area or Regional officials must agree upon a schedule that permits sending the Cooperative Agreement application to the National Office by the due date.

**V. Establishment of Strategy and Activities.** The Consultation Project's activities are determined by the following:

- A. Projects under Federal jurisdiction, the CAPP must support Federal OSHA's strategic and annual performance plan.
- B. Projects in State Plan States, the CAPP must support the State's strategic and annual performance plan. It may also support Federal OSHA goals not covered by the State plan.

**VI. Content and Organization of the CAPP.** Each CAPP must include the following essential elements.

- A. **Overview of the Consultation Project.** Consultation Projects must submit a narrative of their program that must include the following:
  1. Organizational Chart. The chart must detail the entire Consultation Project personnel chart.
  2. Staffing Chart. A staff chart (as below) must contain the number of full and part-time staff employed by the Consultation Project, expressed in full-time equivalents (FTEs), for each category of staff. All Projects must

have at least four professional, full-time equivalents (FTEs) - two full-time safety specialists and two full-time industrial hygienists or their equivalents - in each Project's personnel plan, in addition to managerial and support personnel. All of the Project's consultants must be employed at least 50 percent of their time in the On-site Consultation Program and must spend at least 50 percent of their time engaged in consultation activity. Any deviation from this minimum must receive prior approval from the Director of DCSP. The numbers in the chart below are examples only.

<b>On-site Consultation Project Staff Category</b>		<b>Number of FTEs</b>
1.	Managerial Staff	0.75
2.	Consultants-Safety	2.50
3.	Consultants-Health	2.00
4.	100% State-Funded Consultants -Safety	0.50
5.	100% State-Funded Consultants-Health	0.50
6.	Clerical/Data Systems Support	2.00
7.	Marketing Staff	0.25
8.	Trainers	1.00
9.	Other (Identify)	0.25
<b>Total Number of FTEs</b>		<b>9.75</b>

3. Change(s) in Project's Status. Discuss any changes in the status of the Project, such as the organizational unit within which the Consultation Project is located or the structure of the unit or organization.

**B. Operational Description by Strategy, Activities, and Impacts.** List and discuss each of the applicable Federal or State annual performance goals to be supported by the Project, local emphasis programs, and special initiatives, including a description of each of the following elements:

1. Strategies. Describe the specific strategies that will be used to target results for that performance goal (for example, developing and promoting a Web-based chat room for discussion of safety and health program issues, or partnering with other State agencies to promote training around the State).



2. Activities. List the type and projected number of activities. These should correspond to the activities listed in the Projected Activity Chart.
3. Impacts. Describe the anticipated impact of performing the activities described.

The tabular format in "Operational Description by Strategy, Activities, and Impacts" contains all of the required information categories.

### Operational Description by Strategy, Activities, and Impacts

<b>Federal Area of Emphasis Statement</b>	<b>On-site Consultation Strategy</b>	<b>Description of Planned On-site Consultation Activities</b>	<b>Anticipated Impact of On-site Consultation Activities</b>
<b>Area of Emphasis</b>  <b>EXAMPLE:</b>  Reduce occupational hazards through direct interventions.	<b>EXAMPLE:</b>  <b>1.1. Improve targeting to maximize the impact of direct interventions.</b> <ol style="list-style-type: none"> <li>a. Annually analyze data to identify best targets for direct interventions.</li> <li>b. Annually communicate priorities and effective intervention approaches.</li> </ol> <b>1.2. Reduce hazards by intervening at targeted worksites.</b> <ol style="list-style-type: none"> <li>a. Provide on-site consultation services to high hazard worksites.</li> </ol> <b>1-3 Improve effectiveness of direct interventions.</b> <ol style="list-style-type: none"> <li>a. Analyze results and effectiveness of direct interventions to determine their impact on fatality, injury and illness rates.</li> <li>b. Identify and implement adjustments, including targeting new areas that will increase the impact of direct intervention activities.</li> </ol>	<b>Activity 1</b>  <b>EXAMPLE:</b>  Provide information here on # visits; will eventually be looking for # of hazards abated, if available.  <b>Activity 2</b>	<b>Result 1</b>  <b>EXAMPLE:</b>  Reduction of occupational hazards through direct interventions.  <b>Result 2</b>
<b>Area of Emphasis</b>		Activity 1 Activity 2	Result 1 Result 2
<b>Area of Emphasis</b>			
<b>Local Emphasis Program</b>			
<b>Special Initiative</b>			

- C. **Projected Program Activities and Visits.** Estimate the total number of consultation activities to be performed during the year covered by the project plan. The total number should detail the number of construction and non-construction visits, identifying whether it was a health or safety visit. Additionally, the projected visit estimates should be further subdivided by the emphasis industry and health and safety hazards. An estimate of the new, renewal, and pre-SHARP sites must also be provided. The tabular format in "Operating Plan" contains all of the required information categories.

### Operating Plan

ACTIVITY & AREAS OF EMPHASIS	Safety	Health	Total
<b>TOTAL VISITS</b>	0	0	0
Construction			0
Non-construction			0
<b>Area of Emphasis</b>			
<b>Emphasis Industries</b>	0	0	0
Emphasis Industry #1			0
Emphasis Industry #2			0
Emphasis Industry #3			0
Etc.			
<b>Emphasis Safety &amp; Health Hazards</b>	0	0	0
Emphasis Safety and Health Hazard #1			0
Emphasis Safety and Health Hazard #2			0
Etc.			0
			0
<b>Area of Emphasis Visits</b>	0	0	0
<b>Percentage of Total Visits</b>	#DIV/0!	#DIV/0!	#DIV/0!
<b>TOTAL SHARP SITES</b>	0		
New	0		
Renewal	0		
<b>TOTAL PRE-SHARP SITES</b>	0		
<b>Total Interventions (Form 66)</b>	0		

- D. **Strategy and Target(s) for Recognition and Exemption Program.** Describe the strategy for promoting the recognition and exemption program and identify the target number of participants agreed upon with the Region.
- E. **Changes to the Internal Quality Assurance Program.** Provide a detailed description of any changes to the means by which the Consultation Project ensures consistent and reliable consultation services. See Chapter 9, Section VIII, Required Elements of an Internal Quality Assurance Program.

F. **State Annual Performance Plan.** If the Consultation Project supports a State annual performance plan, attach a copy of the State's Annual Performance Plan.

VII. **Changes to the Consultation Annual Project Plan.** Once a CAPP is approved, formal revisions to it need not be made. However, modifications, including those to emphasis, strategy, or targeting, must be discussed in quarterly discussions and documented in the Regional Annual Consultation Evaluation Report.

## Appendix A

### Sample Letter to Employers Receiving Low Priority

Dear Employer:

Thank you for requesting an occupational safety and health consultation visit and for your interest in improving the worksite safety and health for your employees. Unfortunately, we are unable to provide consultation services to your company at this time. Our policies specifically require us to give first priority to requests from the smallest employers with the most hazardous conditions. However, we will keep your request on file in the event that we are able to provide services to you in the future.

Even though we are unable to provide services to you at this time, you are still responsible for providing a safe and healthful workplace for your employees. Therefore, I would encourage you to seek other sources of safety and health assistance available to employers in your industry (e.g., your insurance carrier).

OSHA provides several resources to assist employers achieve compliance. Compliance assistance information is posted on OSHA's website ([www.osha.gov](http://www.osha.gov)) which all employers can quickly access at no charge. A great number of OSHA publications and posters are available for downloading and/or mail order. The text of regulations and standards are readily available, as well as Letters of Interpretation, Fact Sheets, Frequently Asked Questions (FAQs), and Small Entity Compliance Guides.

OSHA also offers many publications that address specific hazards, standards, and industries. One of our most popular publications is OSHA's Small Business Handbook. Among its many features, the handbook contains an industry-specific checklist to help employers meet requirements of the Occupational Safety and Health Act of 1970.

Thank you for requesting assistance from the [name of consultation service]. If we can provide any further information, please feel free to contact us.

Sincerely,  
Consultation Project Manager

## Appendix B

### Sample List of Hazards

(Preferred Format)

#### LIST OF HAZARDS (SERIOUS)

**This List of Hazards must be posted, unedited, in a prominent place where it is readily observable by all affected employees for three (3) days, or until the hazards are corrected, whichever is later.**

**VISIT NUMBER: 515196904**  
**VISIT DATE(S): 08/06/07**

T & R Eye Center  
432 Main Street  
Dallas, TX 75003

This is a notification of serious hazards identified during the consultation visit. This notification is **not** a citation. The T & R Eye Center is a voluntary participant in the consultation program and has agreed to correct the hazards on this list within the correction due date(s) specified. The T & R Eye Center has also agreed to make information on other-than-serious hazards as well as corrective action proposed by the consultant available to employees upon request.

<b>ITEM</b>	0001	<b>STANDARD</b>	1910.0132(d)(01)
<b>INSTANCE</b>	A	<b>CORRECTION DUE DATE:</b>	08/23/04
<b>DESCRIPTION:</b> A list of job titles, any potential hazards associated with the job and what personal protective equipment, if any, would be needed to protect the employee from the hazard or hazards.			

<b>ITEM</b>	0002	<b>STANDARD</b>	1910.0151(c)
<b>INSTANCE</b>	A	<b>CORRECTION DUE DATE:</b>	08/23/04
<b>DESCRIPTION:</b> The eyewash station is placed correctly; however, only hot water can be accessed which would cause further injury to the eye(s). An eliminator valve plumbed into the system would eliminate this problem.			

## Appendix C

### Rate Calculations

#### I. Rate Calculations.

##### A. Annual Rate Formula.

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.

##### 1. 3-Year Rate Formula.

- a. 3-Year TRC Rate Formula

$$((\text{Year 1 OSHA Log columns H+I+J}) + (\text{Year 2 OSHA Log$$

$$\frac{\text{columns H+I+J} + (\text{Year 3 OSHA 300 Log columns H+I+J})}{(\text{Year 1 hours} + \text{Year 2 hours} + \text{Year 3 hours})} \times 200,000.$$

b. 3-year DART Rate Formula

$$\frac{((\text{Year 1 OSHA Log columns H+I}) + (\text{Year 2 OSHA Log columns H+I}) + (\text{Year 3 OSHA 300 Log columns H+I}))}{(\text{Year 1 hours} + \text{Year 2 hours} + \text{Year 3 hours})} \times 200,000.$$

2. **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.

1. In the "multi-year" calculations, both the DART and TRC have to be below the BLS rates for the same year.
2. 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).



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

## Appendix D

### Sample Calculations

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

Year	# Employees	Hours Worked	Column H	Column I	Column J
2005	5	10,000	0	1	0
2004	7	14,000	0	0	0
2003	6	12,000	0	0	1
2002	8	16,000	0	0	0

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

#### 1 Year Calculations

##### DART

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

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

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

$$\text{DART} = [20.0]$$

##### TRC

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

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

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

$$\text{TRC} = [20.0]$$

## Conclusion

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

YEARS	DART	TRC
2005 Employer's Rates	20.0	20.0
2004 BLS Data	2.9	6.9

## Alternate Rate Calculations

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

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

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

$$\text{DART} = \frac{[(1)]}{[36,000] \text{ Hours}} \times [200,000 \text{ Hours}]$$

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

### TRC

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

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

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

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

## 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.

YEARS	DART	TRC
2005, 2004 & 2003 Employers Rates	5.6	11.1
2004 BLS Data	2.9	6.9
2003 BLS Data	3.5	7.5
2002 BLS Data	3.3	7.5

*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. See, Appendix I.B.2 a-c.*

## DART

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

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

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

$$\text{DART} = [11.1]$$

$$2004 \text{ BLS DART rate} = [2.9]$$

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

$$\text{DART} = \frac{[(\text{Columns H} + \text{I})_{2005} + (\text{Columns H} + \text{I})_{2004} + (\text{Columns H} + \text{I})_{2002}]}{[(\text{Hours-Worked})_{2005} + (\text{Hours-Worked})_{2004} + (\text{Hours-Worked})_{2002}]} \times [200,000 \text{ Hours}]$$

$$\text{DART} = \frac{[(0 + 1) + (0 + 0) + (0 + 0)]}{[(10,000) + (14,000) + (16,000)] \text{ Hours}} \times [200,000 \text{ Hours}]$$

$$\text{DART} = \frac{[(1)]}{[40,000] \text{ Hours}} \times [200,000 \text{ Hours}]$$

$$\text{DART} = [5.0]$$

#### TRC

$$\text{TRC} = \frac{[(\text{Columns H} + \text{I} + \text{J})_{2005} + (\text{Columns H} + \text{I} + \text{J})_{2004} + (\text{Columns H} + \text{I} + \text{J})_{2002}]}{[(\text{Hours-Worked})_{2005} + (\text{Hours-Worked})_{2004} + (\text{Hours-Worked})_{2002}]} \times [200,000 \text{ Hours}]$$

$$\text{TRC} = \frac{[(0 + 1 + 0) + (0 + 0 + 0) + (0 + 0 + 0)]}{[(10,000) + (14,000) + (16,000)] \text{ Hours}} \times [200,000 \text{ Hours}]$$

$$\text{TRC} = \frac{[(1)]}{[40,000] \text{ Hours}} \times [200,000 \text{ Hours}]$$

$$\text{TRC} = [5.0]$$

### 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 on next page.)

YEARS	DART	TRC
2005, 2004 & 2002 Employer's Rates	5.0	5.0
2004 BLS DATA	2.9	6.9
2003 BLS DATA	3.5	7.5
2002 BLS DATA	3.3	7.5

### Years 2005, 2003, & 2002 Data:

#### DART

$$\text{DART} = \frac{[(\text{Columns H} + \text{I})_{2005} + (\text{Columns H} + \text{I})_{2003} + (\text{Columns H} + \text{I})_{2002}]}{[(\text{Hours-Worked})_{2005} + (\text{Hours-Worked})_{2003} + (\text{Hours-Worked})_{2002}]} \times [200,000 \text{ Hours}]$$

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

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

$$\text{DART} = [5.3]$$

#### TRC

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

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

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

$$\text{TRC} = [10.5]$$

#### 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.)

YEARS	DART	TRC
2005, 2003 & 2002 Employer's Rates	5.3	10.5
2004 BLS DATA	2.9	6.9
2003 BLS DATA	3.5	7.5
2002 BLS DATA	3.3	7.5

**Years 2004, 2003, & 2002 Data:**

**DART**

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

$$\text{DART} = \frac{[(0 + 0) + (0 + 0) + (0 + 0)]}{[(14,000) + (12,000) + (16,000)] \text{ Hours}} \times [200,000 \text{ Hours}]$$

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

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

**TRC**

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

$$\text{TRC} = \frac{[(0 + 0 + 0) + (0 + 0 + 1) + (0 + 0 + 0)]}{[(14,000) + (12,000) + (16,000)] \text{ Hours}} \times [200,000 \text{ Hours}]$$

$$\text{TRC} = \frac{[(1)]}{[42,000] \text{ Hours}} \times [200,000 \text{ Hours}]$$



TRC = [4.8]

### 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.

YEARS	DART	TRC
2004, 2003 & 2002 Employer's Rates	0.00	4.8
2004 BLS Data	2.9	6.9
2003 BLS Data	3.5	7.5
2002 BLS Data	3.3	7.5

**\*\*Footnote: 200,000 hours = base for 100 equivalent full-time employees (working 40 hours per week, 50 weeks per year).**

## Appendix E

### Interim-Year SHARP Site Self-Evaluation Template

1. **Safety and Health Management System Recommendations and Status:** SHARP participants are committed to continuing to maintaining and improving their Safety and Health Management Systems. Please explain what systems you are working to maintain or improve, or what recommendations you are acting on, and what actions you have taken with that program in the past year.
  - A. Program/Recommendations:  
Status:
  - B. Program/Recommendations:  
Status:
  - C. Program/Recommendations:  
Status:
  - D. Program/Recommendations:  
Status:
2. **Significant Events:** Please discuss below any significant events that have occurred over the past year and the steps that you have taken to ensure that your safety and health management system is operating effectively. (Include any fatalities, catastrophes, imminent danger incidents, recordable serious injuries and illnesses, complaints, OSHA inspections, and the results of all investigations and program changes made.)
  - A. Event:  
Correction:
  - B. Event:  
Correction:

3. **DART Rate and TRC Requirements:**

DART Rate Calculation			
Year	Hours Worked	Sum of Columns H and I*	Rate
Employer's Two-Year or Three-Year Rate			

BLS Average for NAICS _____ Percent Below the BLS Rate:
--

---

\*Form OSHA FORM 300

<b>TRC Calculation</b>			
<b>Year</b>	<b>Hours Worked</b>	<b>Sum of Columns H and I*</b>	<b>Rate</b>
Employer's Two-Year or Three-Year Rate BLS Average for NAICS _____ Percent Below the BLS Rate:			

4. Other Safety and Health Management System Improvements: Please outline improvements that you have made or activities you have engaged in to improve your safety and health management system.

## Appendix F

### Action Plan Template

#### Action Plan for Inspection Deferral Status

This Action Plan outlines the necessary achievements and time frames you must meet in order for your company to achieve SHARP status. The first page of the Action Plan for Inspection Deferral Status should be printed on the Consultation Project's letterhead. You must provide progress reports to the Consultation Project Manager and meet all specific requirements necessary to continue in inspection deferral status.

#### Employer Information

Employer:  
Address:  
City, State Zip Code:  
Visit Number:  
Visit Date(s):  
Last Correction Due Date:

#### TRC Rate and DART Goals

	TRC Rate	DART
Current Employer's Rate Data		
BLS Average for SIC _____		
Percent Above the BLS Rate:		

#### Safety and Health Management System Goals

##### Management Commitment and Employee Involvement:

Goal 1:  
Recommendations:  
To be completed by:

Goal 2:  
Recommendations:  
To be completed by:

##### Worksite Analysis:

Goal 1:  
Recommendations:

To be completed by:

Hazard Prevention:

Goal 1:

Recommendations:

To be completed by

Safety and Health Training:

Goal 1:

Recommendations:

To be completed by:

### **Participation Requirements**

All portions of this Action Plan must be completed by the conclusion of the deferral period granted by the [Regional Administrator or State Designee]. Based on your present TRC Rate, DART, and the goals and timeframes above, you must submit progress reports describing your activities and the completion of your goals on \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.

If you are not able to complete a goal in the determined timeframe, you must contact the Consultation Project Manager to request an extension of that specific goal. Please note that your Deferral Period may not exceed a total of 18 months, including extensions, from the last correction due date(s).

## Appendix G

### Mandated Activity Report for Consultation (MARC) and Proposed Consultation Management Reports (CMRs)

MARCs	
Measure	Standard
1. Percent of initial consultation visits conducted in high-hazard establishments	Not less than 90%
2. Percent of initial visits to small businesses	Not less than 90%
3. Percent of initial, follow-up, and training and assistance visits during which the consultant conferred with employees	100%
4A. Percent of serious hazards verified corrected in a timely manner (within 14 days of the latest correction due date)	100%
4B. Percent of serious hazards NOT verified corrected in a timely manner (greater than 14 days after the latest correction due date)	--
4C. Percent of serious hazards referred to enforcement	--
4D. Percent of serious hazards verified corrected (in original timeframe or onsite)	65%
5. Number of uncorrected serious hazards with correction date >90 days past due	--

CMRs	
Indicator	Reference
1. Percent of interventions by type	--
2. Percent of interventions by topic	--
3. Days from request to visit. 1 - 250 Employees Controlled 251- 500 Employees Controlled 500+ Employees Controlled	One-year, rolling average from month-to-month.
4. Percent of serious hazards. Safety Health Total	--
5. Percent of initial visits where hazards were found. Safety Health Total	--

6. Number of visits by type of visit.	Fixed-number, subject to negotiation
7. Average time per visit by type of visit.	--
8. Number of formal training sessions Visit-Related Non-Visit Related	Fixed-number, subject to negotiation
9. Number of backlogged requests (by type of service requested). Safety Health Total	--
10. Number of hazards (by hazard classification category).	--
11. Recognitions and Exemptions requested	Fixed number, subject to negotiation.
12. Recognitions and Exemptions granted	--
13A. Average number of days between opening conference and closing conference	--
13B. Average number of days between closing conference and written report Without Samples With Samples	20 days - Visits Without Samples 30 days - Visits With Samples
14. Average number of consultations per FTE	--
15. Time spent on consultation (by consultation categories on Form 50)	--
16. Time spent on program support (by program support categories on Form 50)	--

**Appendix H**  
**Program Assurances**  
**(OSHA Restrictions and Conditions)**

Maintenance of the following fundamental program requirements must be assured through an annual commitment ("OSHA Conditions and Restrictions") included in the Cooperative Agreement. For the most recent version of these Program Assurances, please see the current year's Cooperative Agreement.

1. Takes responsibility for encouraging employers to request consultative assistance and shall publicize the availability of its consultative service and the scope of the service that will be provided.
2. Explains to employers that the employer receiving On-site Consultation program services remains under statutory obligation to provide safe and healthful working conditions to their employees.
3. Explains to employers that no referrals will be made to OSHA enforcement unless the employer fails to eliminate a serious hazard identified by a consultant.
4. Explains to the employer the requirements for participation in the Safety and Health Achievement Recognition Program (SHARP).
5. Explains to employers requirements for attainment of Pre-SHARP status.
6. Assigns priority in scheduling to requests from businesses with the most hazardous operations, with primary attention to smaller businesses. Preference is given to the smaller businesses that are in high hazard industries or that have the most hazardous conditions at issue in the request.
7. Prepares appropriately for visits including making the appropriate provisions for the personal safety and health of the consultant(s) conducting the visit or activity.
8. Conducts a hazard survey consisting of an opening conference, an examination of those aspects of the employer's safety and health program that relate to the scope of the visit, a walk-through the workplace, and a closing conference.
9. Retains the right to confer with employees during an on-site visit.
10. During the opening conference, explains the relationship between On-site Consultation and enforcement and also explains the employer's obligation to protect employees if certain hazardous conditions are identified.
11. Focuses on-site activity primarily on those areas, conditions, or hazards within the requested scope of the visit.



12. During on-site activity, advises the employer of the employer's obligations and responsibilities under applicable Federal or State law and implementing regulations.
13. When identifying hazards, indicates to the employer, using the consultant's best judgment, whether the situation would be classified as a serious or other-than-serious hazard.
14. Informs the employer that the employer is obligated to take immediate action to eliminate employee exposure to a hazard that in the best judgment of the consultant, poses an imminent danger.
15. Establishes a time frame for the correction of each serious hazard identified during on-site activity, and provides the employer with a "List of Hazards", and advises the employer to post the "List" until the hazard is corrected or for three days, whichever is longer.
16. Ensures that employers granted extensions for the correction of serious hazards, demonstrate having made a good faith effort to correct the hazard within the established time frame; show evidence that correction has not been completed because of factors beyond the employer's control; and show evidence that the employer is taking all available interim steps to safeguard the employees against the hazard(s) during the correction period.
17. Informs the employer that the employer's failure to correct an identified serious hazard within the established time frame (or extension of the time frame) results in notification of the appropriate OSHA enforcement authority.
18. Ensures that the appropriate OSHA enforcement authority is notified, if an employer fails to take the action necessary to correct a serious hazard within the established time frame or any extensions granted.
19. Prepares and sends to the employer a written report containing substantive findings or recommendations
20. Preserves the confidentiality of information which identifies employers who have requested the services of the On-site Consultation Program as well as information pertaining to and/ or obtained during an on-site visit, such as the employers written report.
21. Preserves the confidentiality of information pertaining to commercial or trade secrets that may have been obtained during an on-site visit.
22. Conducts consultative activity independently of any OSHA enforcement activity.
23. Does not provide to OSHA the identity of, or files pertaining to, employers requesting On-site Consultation program services for any compliance inspection or scheduling activity, except in cases where the employer has failed to eliminate an imminent danger, failed to correct or eliminate a serious hazard, or the employer has elected to participate

in SHARP or a cooperative program that permits a deferral from enforcement inspections.

24. Assures that On-site Consultation visits already in progress have priority over OSHA compliance inspections except in the case of imminent dangers, fatality/catastrophe investigations, complaint investigations, or other investigations deemed critical by the Assistant Secretary.
25. Terminates on-site visits for imminent dangers, fatality/catastrophe investigations, complaint investigations, or other investigations deemed critical by the Assistant Secretary.
26. Does not conduct On-site Consultation visits while OSHA enforcement inspections are in progress. On-site Consultation activity shall only take place with regard to those citation items which have become final orders.
27. Explains to the employer that requirements pertaining to "serious" hazards apply equally to "other than serious" hazards for participation in SHARP.
28. Uses consultants who are employees of the State and are qualified under State requirements for employment in the field of occupational safety and health.
29. Applies minimum requirements for consultants that include the ability to recognize hazards and assess employee exposure and risk, knowledge of OSHA standards, knowledge of hazard correction techniques and practices, knowledge of workplace safety and health program requirements, skill in effective written and oral communication, and any additional degrees or experience required by the Assistant Secretary.
30. Maintains an organized system for monitoring the performance of consultants.
31. Submits narrative reports and compiles and submits data, such as IMIS data, that is needed for monitoring and evaluation purposes, as required, to the Regional Administrator.
32. Agrees to pay OSHA for mainframe processing services provided through the Integrated Management Information System (IMIS), based on quarterly bills. The fourth quarter payment will be based on an estimated bill. All bills must be paid upon receipt but no later than September 15th. Any adjustments between actual charges and estimates will be made in the first quarter of the following fiscal year, as necessary.
33. If participating in OSHANet, agrees to adhere to all requirements for such participation (including hardware and software specifications) and to pay OSHA for certain services provided, including telecommunication charges, an annual service fee for operation and maintenance costs, and annual user fees for remote access. (For items billed quarterly, the fourth quarter payment will be based on an estimated bill. All bills must be paid upon receipt no later than September 15th. Any adjustments between actual charges and estimates will be made in the first quarter of the following fiscal year, as necessary.)

34. If not participating in OSHANet, agrees to consult with the Directorate of Information Technology, and obtain written approval from DCSP, prior to expending Federal or State matching funds for the purchase of any data processing/computer equipment or software that will be used to connect (locally or remotely) to or provide information to OSHA. Desktop or laptop computers and software that will be used to access OSHA systems including the CSHO and On-site consultation PC and other applications, etc., must meet the minimum OSHA specifications. Specifications will be posted under the IT Help Desk on the Limited Access Page.
35. Agrees that all new desktop and laptop computers must be Microsoft (MS) Vista-ready but have MS Windows XP Professional operating system installed.
36. Agrees that all desktops and laptops that connect to the OSHANet must be configured with the OSHA image. Software that is not part of the OSHA standard image must be approved by the Directorate of Information Technology prior to purchase and once received must be approved for installation
37. Agrees that all OSHA system users will complete the Department of Labor Annual Computer Security Awareness Training (CSAT) within the timeframe prescribed by the Directorate of information Technology.
38. Agrees that all users of the OSHANet and other OSHA applications will sign annual Rules of Behavior.
39. Understands that all desktops, laptops and servers connected to the OSHANet are subject to an annual software audit to ensure compliance with Executive Order 13103, "computer Software Piracy," the U.S. Copyright Act, title 17 U.S.C., Department of Labor software management and acceptable use policy, and vendor software license agreements.
40. Understands that no section 21(d) or matching State funds may be expended for the purchase of internal peripherals or other modifications, except replacement parts, in conjunction with the NCR equipment, without prior approval from the Directorate of Information Technology. States must maintain an appropriate maintenance and repair contract for their NCR equipment.
41. Will not expend any 21(d) or matching state funds from this agreement to fund activities or provide services to farms with ten or fewer employees where there has been no temporary labor camp in the previous twelve months. (Only State Plan states may conduct visits on these farms, provided that 100% state funds are used, and the state has an accounting system in place to assure that no section 21(d) or matching funds are expended on these activities.)
42. Will not expend any 21(d) or matching State funds from this agreement to fund the purchase of equipment and/or to support programmatic efforts under the jurisdiction of and/or funded by another Federal agency.
43. Will ensure that any funding provided by another Federal agency related to safety and health training and/or equipment will not undermine 21(d) On-site Consultation activity.

44. States are encouraged to promote safety or health professional certification of their employees by a nationally recognized accrediting organization. Cooperative Agreement funds may be used to pay for the costs associated with a professional certification preparation course and the examination, including travel and per diem. No section 21(d) or matching State funds may be expended for costs associated with a second or subsequent attempt to obtain certification by employees who fail on their first attempt, except for the cost of the examination itself and related travel and/or per diem for a second attempt only. Certification costs cannot exceed the percentage of time for which an employee is dedicated to the grant/cooperative agreement.
45. No 21(d) or matching State funds may be expended for annual fees associated with maintaining professional certifications.
46. States agree to pay OSHA for costs associated with the conduct of OSHA Training Institute (OTI) training courses conducted for the State at the State's request. The State will pay for travel and per diem for OTI instructors, shipping charges, consultant trainer fees, equipment rental and training facility rental. All bills must be paid upon receipt but no later than September 15th. Any adjustments between actual charges and estimates will be made in the first quarter of the following fiscal year, as necessary.

## Appendix I

### Checklist for On-site Review

Operational Review of the Consultation Project:	✓   ✕	Comments
Progress in meeting annual training plans		
On-the-job evaluations		
Lapse time from request to delivery of service		
Management reports (i.e., written reports pending, pending hazard corrections, number of requests, and visits pending)		
Hiring and vacancies		
Project expenditures and budgetary issues		
Monitoring of consultants' performance		
Promotion of the Project's recognition and exemption program (SHARP)		
Marketing initiatives		
The Project's internal quality assurance program		
The consistent use of the Safety and Health Program Worksheet (Revised OSHA Form 33) by all consultants		
Pertinent changes in the organization		
Performance issues carried over from previous review		
Items requiring action to correct deficiencies		
<b>Criteria applying to all case files:</b>		
Requirement	✓   ✕	Comments
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?		
Does the file contain an evaluation of the employer's safety & health management system (Safety and Health Program Assessment Worksheet-Revised OSHA Form 33)?		
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?		
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 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?		
<p>If the employer was granted an extension of the original assigned Correction-Due Date (CDD):</p> <ul style="list-style-type: none"> <li>- Was the request by the employer in writing?</li>   <li>- Did the request include reasons why correction wasn't completed in the established time frame?</li>   <li>- Did the request include evidence that the employer is safeguarding employees against the hazard with interim protection during the correction period?</li> </ul>		
<p>Does the Written Report to the Employer contain:</p> <ul style="list-style-type: none"> <li>- summary of employer's request?</li>   <li>- scope of services provided?</li>   <li>- name of consultant?</li>   <li>- items of importance covered in the opening conference?</li>   <li>- description of the workplace and working conditions?</li>   <li>- comparison of the site's TRC and DART rates to the national industry average?</li>   <li>- 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?</li>   <li>- appropriate recommendations for hazard correction and control, including technical advice as appropriate?</li>   <li>- Standard Element Paragraphs (STEPS) modified to meet the employer's specific conditions?</li>   <li>- discussion of the relation of hazards found to deficiencies in the employer's safety and health management system, with appropriate site-specific recommendations?</li>   <li>- discussion of the employer's safety and health management system?</li>   <li>- an appropriate summary of any training provided during the hazard survey?</li> </ul>		

- items of importance covered in the closing conference?		
Were there any delays from the request to the onsite visit, until the visit occurred documented? Were there any delays from the closing conference to the issuance of the final report documented?		
Did the OSHA Form 30 include the number of employees interviewed?		
Were all serious hazards abated and documentation of abatement procedures included in the file?		
<b>Additional Criteria Applying Only to Health Files:</b>		
H1. Does the case file reflect appropriate sampling techniques?		
H2. Were the appropriate number of samples taken relative to the nature of the suspected hazard and the number of employees involved?		
H3. Were the appropriate sampling instruments used for the job?		
H4. Was there evidence of proper sampling instrument calibration either on the CDS forms or a separate calibration log?		
H5. Were the appropriate sampling techniques and practices followed?		
H6. Were the necessary sampling data recorded on sampling sheets and field notes?		
<b>Additional Criteria Applying Only to SHARP Files: (pertaining only to cases in which recognition has been granted)</b>		
S1. Was a full service survey, addressing both safety and health hazards, completed?		
S2. Is there verification (written or observed on-site) that ALL hazards identified during the hazard survey were corrected?		
S3. Is there adequate documentation that the elements listed on the Safety and Health Program Assessment Worksheet-Revised OSHA Form 33 were implemented at the "2" level or above?		
S4. Are the employer's TRC and DART rates below the industry average?		
S5. Is there evidence of operating history of at least one year?		
<b>Additional Criteria Applying Only to Case Files Containing On-the-Job Evaluations:</b>		
J1. Are all on-the-job evaluations conducted according to the project's internal quality assurance program?		

## **Appendix J**

### **Safety and Health Program Assessment Worksheet Blank Form 33 (pdf)**



## Appendix K

### Consultant Function-Competency Statements

#### **#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 FIRM
  - ✓ 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 walkaround 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 procedures

- ✓ 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 Management Guidelines (January 1989 – 54 FR 3904-3916)
  - ✓ 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 employees**

- ▶ **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 walkaround
  - ✓ Identify opportunities for and provides, if necessary, formal training based on the walkaround.
  - ✓ 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, Cooperative agreements, the 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 onsite 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.