ABSTRACT

Purpose: This Instruction revises and clarifies the overall framework of policy and procedure for administering the OSHA Voluntary Protection Programs.

Scope: This Instruction applies OSHA-wide.


State Impact: Notice of Intent required. See Chapter 1, Paragraph VII [State Adoption Summary]

Action Offices: National, Regional, and Area Offices.

Originating Office: Directorate of Cooperative and State Programs (DCSP).

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Assistant Secretary

Executive Summary

This Instruction cancels and replaces OSHA Instruction OSHA CSP 03-01-002. The purpose of the manual is to provide guidance concerning implementation of the Voluntary Protection Programs (VPP), including revised policies and procedures a) published as Federal Register Notice 68 FR 68475, December 8, 2003; b) affecting VPP participants covered under the Process Safety Management (PSM) standard; and c) enabling OSHA to employ an alternative reapproval process, the Compressed Reapproval Process to Recognize Sustained Excellence (CRP), for qualifying VPP Star participants.

Major Changes

- **Benchmark Rates.** This Instruction incorporates changes published in Federal Register Notice 68 FR 68475, December 8, 2003, that revised the benchmark injury and illness rates used within VPP.

- **Process Safety Management.** This Instruction modifies procedures for VPP applications, OSHA onsite evaluations, and annual participant self-evaluations for applicants/participants subject to OSHA’s Process Safety Management (PSM) standard.

- **Compressed Reapproval Process.** This Instruction introduces an alternative onsite reapproval process for Star participants who have demonstrated sustained excellence in safety and health systems management.

- **Other.** This Instruction removes template letters that OSHA periodically modifies and that are more appropriately disseminated through other means. It includes changes in the VPP recognition process. It also removes temporary instructions no longer applicable, and references to specific VPP affiliates. Minor editorial changes improve readability.
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Chapter I
Introduction

I. **Purpose.** This instruction revises and clarifies the overall policy framework for administering the OSHA Voluntary Protection Programs (VPP).

II. **Scope.** This instruction applies OSHA-wide.

III. **Cancellations.** OSHA Instruction CSP 03-01-002.

IV. **Significant Changes.**

   A. **Benchmark Rates.** This Instruction incorporates changes published in *Federal Register* Notice 68 FR 68475, December 8, 2003, that revised the benchmark injury and illness rates used within VPP.

   B. **Process Safety Management.** This Instruction modifies procedures for VPP applications, OSHA onsite evaluations, and annual participant self-evaluations for applicants/participants subject to OSHA’s Process Safety Management (PSM) standard.

   C. **Compressed Reapproval Process.** This Instruction introduces an alternative onsite reapproval process for Star participants who have demonstrated sustained excellence in safety and health systems management.

   D. **Other.** This Instruction removes template letters that OSHA periodically modifies and that are more appropriately disseminated through other means. It includes changes in the VPP recognition process. It also removes temporary instructions no longer applicable, and references to specific VPP affiliates. Minor editorial changes improve readability.

V. **References.**


VI. **Action Information.**

A. **Responsible Office.** Directorate of Cooperative and State Programs, Office of Partnerships and Recognition.

B. **Action Offices.** OSHA National, Regional, and Area Offices with responsibilities for administering the Voluntary Protection Programs.

C. **Information Offices.** State designees, OSHA Directorates of Enforcement Programs, Construction, Evaluation and Analysis, Training and Education, Office of Communications, and Office of the Solicitor.

VII. **Federal Program Change.** Notice of Intent Required. Adoption encouraged.

A. **General VPP requirements.** States were encouraged to establish their own Voluntary Protection Programs (VPP) parallel to the Federal VPP. All States with approved State Plans have established such programs, submitted the required Plan Change Supplement, and received OSHA’s approval either through a Federal Register notice or letter of approval.

States are expected to have policies and procedures in the form of a manual, a directive, or other documents for administering their approved Voluntary Protection Programs which must be available for review. Adoption of the changes in this manual is encouraged, but not required; notice of intent is required.

B. **Changes in this instruction.** This instruction is a Federal Program Change which provides updated guidance concerning implementation of the Voluntary Protection Program and implements revised policies and procedures regarding: (1) the benchmark injury and illness rates used with the VPP; (2) applicants/participants subject to the Process Safety Management (PSM) standard; and (3) an alternate on-site reapproval process for STAR participants who have demonstrated sustained excellence.

C. **Notice of Intent/Public Availability.** The State’s notice of intent must indicate whether the State will adopt these changes, and, if so, whether their policies will be identical to or different from the Federal.

1. If the State adopts policies and procedures that differ from the Federal, the State may either post its entire VPP policies and procedures documentation, including its response to these changes, on its State plan website and provide the link to OSHA or provide a copy (of its VPP policies and procedures and response to these changes) to OSHA and information on how the public may obtain a copy.
2. If the State’s VPP policies and procedures are identical to the Federal, and it adopts these identical changes, it must provide the dates of adoption of its VPP policies and procedures and of these changes to OSHA.

If the State does not adopt these changes, it still must make its VPP policies and procedures available in the manner noted above for policies that differ from the Federal. OSHA will provide summary information on the State responses to this instruction on its website.

VIII. Definitions.

A. 1-Year Conditional Goal. A target for correcting deficiencies in safety and health management system elements or sub-elements identified by OSHA during the onsite evaluation of a Star participant. Such deficiencies, which indicate that a site no longer fully meets Star requirements, must be corrected within 90 days, and the participant must then operate at the Star level for 1 year for the participant’s conditional status to be lifted. Failure to meet this requirement will result in termination from VPP.

B. 90-Day Items. Compliance-related issues that must be corrected within a maximum of 90 days, with effective protection provided to employees in the interim.

C. Annual Evaluation. A participant’s yearly self-assessment to gauge the effectiveness of all required VPP elements and any other elements of the participant’s safety and health management system.

D. Annual Submission. A document written by a participant and submitted to OSHA by February 15th each year, consisting of the following information: Updated names and addresses; the participant’s and applicable contractors’ injury and illness case numbers and rates, average annual employment and hours worked for the previous calendar year; a copy of the most recent annual evaluation of the participant’s safety and health management system; descriptions of significant changes or events; progress made on the previous year’s recommendations; Merit or 1-Year Conditional goals (if applicable); and any success stories. [See Appendix C for the Annual Submission Format.] Additionally, participants covered by the Process Safety Management Standard (PSM) will be required to respond to applicable questions from the annual VPP PSM questionnaire.

E. Applicable Contractor. A contractor whose employees worked at least 1,000 hours for a VPP participant in any calendar quarter within the last 12 months and are not directly supervised by the applicant/participant.
F. **Accepted Application.** An application that has been reviewed by the Regional Office -- or the National Office for certain Demonstration Program applications -- and found to be complete. Also referred to as a completed application.

G. **Backup Team Leader.** A member of an onsite evaluation team who provides assistance to the team leader and can assume his/her duties when necessary.

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

I. **Contract Employees.** Those individuals who are employed by a company that provides services under contract to the VPP applicant or participant, usually at the VPP applicant’s or participant’s worksite.

J. **Days Away, Restricted, and/or Transfer Case Incidence Rate (DART rate).** The rate of all injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer. This rate is calculated for a worksite for a specified period of time (usually 1 to 3 years). [See Appendix A.]

K. **Directorate of Cooperative and State Programs (DCSP).** The Directorate responsible for coordinating and overseeing OSHA’s VPP, located in OSHA’s National Office.

L. **DCSP Regional Coordinator.** A DCSP VPP staff member who is assigned to coordinate VPP-related Regional activities, including the review and processing of reports and resolution of policy issues.

M. **Federal Register.** The official Federal government publication, published by the Government Printing Office (GPO), in which OSHA announces the philosophy and criteria for VPP approval and participation in a public notice commonly referred to as the “VPP Federal Register Notice.”

N. **General Contractor.** A construction site owner or site manager who controls construction operations and has contract responsibility for assuring safe and healthful working conditions at a worksite.

O. **Injury/Illness Rates.** Numerical rates that represent recordable injuries and illnesses at a worksite and that are an important factor when OSHA assesses an applicant/participant’s qualification for VPP. [See VIII.J, above, and VIII.MM. below.]

P. **Mentoring.** The assistance that a VPP participant provides to another worksite to improve that location’s safety and health management system or prepare it for VPP application or participation.
Q. **Merit Goal.** A target for improving one or more deficient safety and health management system elements for a participant approved to the Merit program. A Merit goal must be met in order for a participant to achieve Star status.

R. **Merit Program.** The program within VPP designed for worksites that have demonstrated the potential and commitment to achieve Star quality, but that need to further improve their safety and health management system. OSHA gives a Merit Program participant specified Merit goals that it must meet in order to achieve Star status and continue within VPP.

S. **Onsite Assistance Visit.** A visit to an applicant or participant site by an OSHA VPP Manager, Compliance Assistance Specialist, or other non-enforcement personnel, to offer assistance to the applicant including help with their application, conduct a records review, and/or make general observations about the applicant’s safety and health management system.

T. **Onsite Evaluation.** A visit to an applicant or participant site by an OSHA onsite evaluation team to determine whether the applicant/participant qualifies to participate, continue participation, or advance within the VPP.

U. **Onsite Evaluation Report.** A document written by the OSHA onsite evaluation team and consisting of the site report and site worksheet [see Appendix D]. This document contains the team’s assessment of a applicant/participant’s safety and health management system and the team’s recommendation regarding approval of the applicant or reapproval of the participant in VPP.

V. **Onsite Evaluation Team.** An interdisciplinary group of OSHA professionals and sometimes other government employees who conduct onsite evaluations. The team normally consists of a team leader, a backup team leader, safety and health specialists, and other specialists as appropriate.

W. **Process Hazard Analysis (PHA).** For the purposes of this document, a PHA is an organized and systemic effort to identify and analyze the significance of potential hazards associated with the processing or handling of highly hazardous chemicals.

X. **Process Safety Management (PSM).** A reference to OSHA standard 29 CFR 1910.119 and 1926.64, which covers all employers who either use or produce highly hazardous chemicals exceeding specified limits.

Y. **PSM Application Supplement.** A series of questions designed to establish a basic understanding of a VPP applicant’s PSM policies and procedures. Applicants covered by the PSM Standard must submit responses to the PSM application supplement along with their VPP application.
Z. **PSM “Level 1” Auditor.** A PSM “Level 1” Auditor is an OSHA employee with experience in the chemical processing or refining industries.

1. Specific requirements for a PSM “Level 1” Auditor include:

   a. The OSHA Training Institute’s (OTI) Courses 3300, Safety and Health in the Chemical Processing Industries, and 3400, Hazard Analysis in the Chemical Processing Industries.

   b. Advanced training such as OTI Course 3410, Advanced Process Safety Management, or other equivalent specialized seminars in PSM.

   c. Prior experience with chemical industry safety. This experience should include experience obtained in any one of the following ways:

      - Through accident investigations in chemical, petrochemical or refinery plants involving fires, explosions and/or toxic chemical releases;
      - Through previous chemical inspections involving process safety management evaluations; or
      - Through previous chemical industry employment.

2. Special Government Employees may alternatively serve in the capacity of a PSM “Level 1” Auditor upon demonstrating training and experience equivalent to the above requirements.

AA. **PSM Questionnaire.** A document compiled annually using selected questions from OSHA’s Dynamic Inspection Priority Lists. The PSM Questionnaire is a supplemental document required from participants covered under the PSM standard as part of their Annual Submission.

BB. **Recommendations.** Suggested improvements noted by the onsite evaluation team that are not requirements for VPP participation but that would enhance the effectiveness of the participant’s safety and health management system. (Compliance with OSHA standards is a requirement, not a recommendation.)

CC. **Resident Contractor.** A company that provides ongoing, onsite services to a VPP applicant/participant.
DD. **Safety and Health Management System.** For the purposes of VPP, a method of preventing employee fatalities, injuries and illnesses through the ongoing planning, implementation, integration, and control of four interdependent elements: Management Leadership and Employee Involvement; Worksite Analysis; Hazard Prevention and Control; and Safety and Health Training.

EE. **Small Business.** A company having no more than 250 employees at any one facility, and no more than 500 employees nationwide.

FF. **Special Government Employee (SGE).** An employee volunteer from a VPP participant or corporation, knowledgeable in safety and health management system assessment, formally trained by OSHA in the policies and procedures of the VPP, and determined by OSHA to be qualified to perform VPP onsite evaluations, who participates as a team member on VPP onsite evaluations.

GG. **Star Demonstration Program.** The program within VPP that enables companies and/or worksites with Star quality safety and health protection to test alternatives to current Star eligibility and performance requirements. If a Star Demonstration Program is judged successful, its alternative ways to achieve safety and health excellence may lead to changes in VPP criteria.

HH. **Star Program.** The program within VPP designed for participants whose safety and health management systems operate in a highly effective, self-sufficient manner and meet all VPP requirements. Star is the highest level of VPP participation.

II. **State Plan.** A state-operated occupational safety and health program that has received approval and partial funding from Federal OSHA.

JJ. **Team Leader.** The OSHA staff person who coordinates the OSHA onsite evaluation team and ensures that all evaluation activities are performed. [See Chapter 6.II.C.2.]

KK. **Temporary Employees.** Employees hired on a non-permanent basis by the applicant/participant.

LL. **Termination.** Formal removal by OSHA of a VPP participant from the program.

MM. **Total Case Incidence Rate (TCIR).** A number that represents the total recordable injuries and illnesses per 100 full-time employees, calculated for a worksite for a specified period of time (usually 1 to 3 years). [See Appendix A.]

NN. **VPP Activity Log.** The monthly log of VPP activity that is submitted to DCSP by the Regional Offices. [See Appendix B.]
OO. **VPP Annual Data Spreadsheet.** The yearly report prepared by the VPP Manager and submitted to DCSP electronically that provides information on the annual TCIR and DART rates of participants.

PP. **VPP Application Status Report.** A monthly report prepared by the VPP Manager and submitted to DCSP that provides information on VPP applications, including the number of applications pending in the Region and the number of applicants whose onsite evaluation has not yet begun.

QQ. **VPP Approval Ceremony.** An event planned by the approved worksite and normally held at the site, where a representative from OSHA recognizes the participant’s achievement, presents the VPP plaque, and presents the VPP flag.

RR. **VPP Automated Data System (VADS).** A database that includes information on approved VPP participants (under Federal or state plan jurisdiction) and VPP applicants (under Federal jurisdiction).

SS. **VPP Manager.** The Regional staff person directly responsible for the day-to-day operations of the VPP in each Region.

TT. **VPP Participant Representative.** The person designated by an applicant or participant as the primary contact regarding VPP activity at the worksite.

UU. **Withdrawal.** Decision by the applicant or participant to discontinue pursuing or participating in the VPP.

VV. **Worksite.** For VPP purposes, a worksite is a location where work is performed by employees of an employer. [See Chapter 5.II.B.]

IX. **Background.** The Occupational Safety and Health Administration (OSHA) on July 2, 1982, announced establishment of the Voluntary Protection Programs (VPP) to recognize and promote effective worksite-based safety and health management systems. In the VPP, management, labor, and OSHA establish cooperative relationships at workplaces that are implementing or have implemented comprehensive safety and health management systems. Approval into VPP is OSHA’s official recognition of the outstanding efforts of employers and employees who have created exemplary worksite safety and health management systems. OSHA offers assistance to sites committed to achieving the VPP level of excellence.
The enabling legislation for VPP is Section (2)(b)(1) of the OSH Act, which declares the Congress’s intent “to assure so far as possible every working man and woman in the Nation safe and healthful working conditions and to preserve our human resources by encouraging employers and employees in their efforts to reduce the number of occupational safety and health hazards at their places of employment, and to stimulate employers and employees to institute new and to perfect existing programs for providing safe and healthful working conditions. . . .”

X. **VPP Principles.** The following principles are embodied in the Voluntary Protection Programs:

A. **Voluntarism.** Participation in VPP is strictly voluntary. The applicant who wishes to participate freely submits information to OSHA on its safety and health management system, goes above and beyond compliance with the OSH Act and applicable OSHA requirements, and opens itself to agency review.

B. **Cooperation.** OSHA has long recognized that a balanced, multifaceted approach is the best way to accomplish the goals of the OSH Act. VPP’s emphasis on trust and cooperation between OSHA, the employer, employees, and employees’ representatives complements the agency’s enforcement activity, but does not take its place. VPP staff and VPP participants work together to resolve any safety and health problems that may arise. This partnership enables the Agency to remove participants from programmed inspection lists, allowing OSHA to focus its inspection resources on establishments in greater need of agency oversight and intervention. However, OSHA continues to investigate valid employee safety and health complaints, fatalities, catastrophes, and other significant events at VPP participant sites.

C. **A Systems Approach.** Compliance with the OSH Act and all applicable OSHA requirements is only the starting point for VPP participants. VPP participants develop and implement systems to effectively identify, evaluate, prevent, and control occupational hazards so that injuries and illnesses to employees are prevented. Star participants, in particular, are often on the leading edge of hazard prevention methods and technology. As a result, VPP worksites serve as models of safety and health excellence, demonstrating the benefits of a systems approach to employee protection. NOTE: Federal agencies participating in VPP also must comply with Executive Order 12196 and 29 CFR 1960, in addition to Section 19 of the OSH Act.
D. Model Worksites for Safety and Health. OSHA selects VPP participants based on their written safety and health management system, the effective implementation of this system over time, and their performance in meeting VPP requirements. Not all worksites are appropriate candidates for VPP. At qualifying sites, personnel are involved in the effort to maintain rigorous, detailed attention to safety and health. VPP participants often mentor other worksites interested in improving safety and health, participate in safety and health outreach and training initiatives, and provide OSHA with input on proposed policies and standards. They also share best practices and promote excellence in safety and health in their industries and communities.

E. Continuous Improvement. VPP participants must demonstrate continuous improvement in the operation and impact of their safety and health management systems. Annual VPP self-evaluations help participants measure success, identify areas needing improvement, and determine needed changes. OSHA onsite evaluation teams verify this improvement.

F. Employee and Employer Rights. Participation in VPP does not diminish employee and employer rights and responsibilities under the OSH Act and, for Federal agencies, under 29 CFR 1960 as well.

XI. Categories of Participation. VPP consists of:

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.

XII. The Elements. To qualify for VPP, an applicant/participant must operate a comprehensive safety and health management system that includes four essential elements and their sub-elements. These elements, when integrated into a worksite’s daily operations, can reduce the incidence and severity of illnesses and injuries:
A. Management leadership and employee involvement.

B. Worksite analysis.

C. Hazard prevention and control.

D. Safety and health training.
Chapter II
Responsibilities

I. Introduction. This chapter describes OSHA’s responsibilities for managing the Voluntary Protection Programs (VPP). These responsibilities must be carried out by the identified individual or his/her designee.

II. Assistant Secretary. The Assistant Secretary is responsible for all decisions relating to approval of new participants, approval of moving from the Merit Program to the Star Program, approval of Star Demonstration Programs, lifting of 1-Year Conditional status, granting a second term in the Merit Program, and termination of participation.

III. Directorate of Cooperative and State Programs (DCSP). DCSP is responsible for:

A. Policies and Procedures. DCSP must develop, interpret, and revise, as needed, policies and procedures for the administration and management of the VPP, including the Federal Register Notices and the VPP Policies and Procedures Manual.

B. Review of Applications and Onsite Evaluation Reports. DCSP must:

1. Assist regions in the review of VPP applications, when requested. DCSP also must review applications for Star Demonstration Programs and other Pilot programs in accordance with the terms of a particular Star Demonstration/Pilot.

2. Review all onsite evaluation reports for new participants and spot-check Regional Administrators’ recommendations or reapprovals to ensure that national formatting requirements are met and evidence that the VPP requirements are met is clearly documented.

3. Prepare appropriate documentation for the Assistant Secretary’s decisions and signature.

4. Notify the appropriate VPP Manager of the Assistant Secretary’s final decision.

5. Forward copies of the following documents to the worksite, appropriate labor unions, Regional Administrator, VPP Manager, and other affected offices.
   a. Assistant Secretary’s approval or congratulatory letter.
   b. The onsite evaluation report for newly approved participants.
C. **Support.** DCSP must:

1. Provide regions with program support when requested and when resources are available.

2. Assist in the development of Star Demonstration Programs and make recommendations to the Assistant Secretary concerning approval.

3. Respond to Congressional inquiries and provide information to the public upon request.

D. **State Plan Changes.** DCSP must consider proposed change supplements relating to VPP in state plans, in accordance with the State Plan Policies and Procedures Manual, STP 2-0.22B.

E. **Maintenance of Records and Data.** DCSP must:

1. Maintain a public file on all approved participants that includes:
   a. The General Information section from the application.
   b. DCSP Director's memorandum to the Assistant Secretary requesting approval of a VPP onsite evaluation report.
   c. Onsite evaluation reports.
   d. The Assistant Secretary's letter to the participant (which includes notification of a copy sent to any and all collective bargaining agents).
   e. Congressional and Gubernatorial letters.
   f. Any formal correspondence to and from the Regional Administrator, the VPP participant, or the public.

2. With support from the Directorate of Information Technology (DIT), develop and maintain a comprehensive national database of VPP participants' information including, but not limited to, name, location, contact person, telephone number, approval date, VPP status, TCIR and DART rate, union information if applicable, and number of employees.

3. Generate and distribute to appropriate offices monthly VPP information, including:
a. VPP Onsite Evaluation Log.

b. VPP Application Status Log.


d. SGE Usage Report.

e. Regular information updates for the OSHA VPP web site.

f. Monthly information for inclusion in publications.

g. Monthly information for inclusion in OSHA’s Government Performance and Results Act (GPRA) and Strategic Plan reports.

IV. Directorate of Training and Education. The Directorate of Training and Education, in coordination with DCSP, must develop and deliver training curricula for OSHA staff nationwide and Special Government Employees (SGEs) in the knowledge and skills required to effectively administer the VPP.

V. Regional Administrators. Regional Administrators are responsible for the overall management of the VPP in their jurisdictions. The Regional Administrator must:

A. Meet VPP goals and objectives established by the Assistant Secretary.

B. Ensure that VPP Managers have access to resources and expertise as needed to effectively manage the program.

C. Review all VPP onsite evaluation reports. Make recommendations or decisions for participation, as appropriate. (For the Regional Administrator’s approval authority, see Chapter 7.I.A.2.)

D. Forward the onsite evaluation report plus recommendation or decision to DCSP.

E. Review any requests to extend the period between onsite evaluations for a participant and determine whether the extension will be granted.
F. Develop Star Demonstration Programs for review by DCSP and approval by the Assistant Secretary, as necessary.

G. Actively promote the VPP.

H. Attend, whenever possible, VPP ceremonies and conferences.

I. **VPP in State Plans.**
   1. Work with states that operate OSHA-approved state plans to establish, implement, or expand their VPPs.
   2. State Plan Submissions: Review and process State Plan submissions for VPP, including any revisions, in accordance with Chapter I, Section VII. Federal Program Change, and the State Plan Policies and Procedures Manual, STP 2-0.22b.

VI. **VPP Managers.** VPP managers are responsible for the day-to-day management of the VPP at the Regional level. They must develop and maintain a working knowledge of the VPP and must:

A. **Application Processing.** Review and process applications to the VPP in accordance with Chapter 5. In addition:
   1. Provide application information and assistance to interested employers, employee groups, and other parties such as trade associations, state and local governments.
   2. Obtain from the OSHA website and review the applicant’s OSHA inspection history to determine its eligibility for VPP.
   3. Forward to DCSP copies of the general information sections of completed applications.

B. **Onsite Evaluations.**
   1. Ensure that an onsite evaluation is conducted within 6 months of accepting an application.
   2. Schedule onsite evaluations, taking into consideration due dates, deadlines, priorities, and coordination with company officials.
3. Inform the Area Director so that the participant can be removed from the programmed inspection list. Such removal may occur no more than 75 days prior to the onsite evaluation.

4. Ensure that an onsite evaluation report is drafted onsite, including a preliminary recommendation for the Regional Administrator’s consideration.

5. Determine, in coordination with DCSP, whether an application to participate in a Star Demonstration Program has sufficient merit to warrant an onsite evaluation, and make recommendation to DCSP.

C. Approval.

1. Ensure completion of onsite evaluation reports.

2. Forward to DCSP onsite evaluation reports and Regional Administrators’ memos regarding their recommendations or reapproval decisions.

3. Inform applicants of the Assistant Secretary’s decisions regarding approval.

4. Inform the Area Director of the participant’s approval.

D. Annual Submissions from VPP Participants. (See Appendix C.)

1. Ensure that each VPP participant’s annual submission is received by February 15th of each year. On a case-by-case basis, additional time, not to exceed 45 days, may be negotiated by the VPP Manager and a company’s VPP representatives. If, after 45 days, the annual submission has not been received, the participant may be asked to withdraw from the program.

2. Review the annual submissions and:

   a. Request an explanation from the participant if a substantial increase (or decrease) in rates or some problem with the program evaluation is noted.

   b. If an unresolved serious problem is evident, make arrangements with the company for an onsite assistance visit.

3. As a courtesy, notify the participant in writing that the annual evaluation submission has been received. Note any areas of concern.
4. Complete, and return via e-mail, the VPP Annual Data Spreadsheet to DCSP by March 30th.

E. Reapproval.

1. Track current VPP participants and ensure that onsite evaluations to determine a recommendation for reapproval are scheduled and conducted in accordance with Chapter 6.II.A.

2. Obtain the Regional Administrator’s approval for any requests to extend with just cause the period between onsite evaluations.

3. Any approved extensions of time between onsite evaluations must be documented and copied to both DCSP and the Regional case file.

F. Withdrawal or Termination. Upon receiving a withdrawal letter from a participant, or upon termination of a participant, the VPP Manager must:

1. Remove the participant’s application, onsite evaluation reports, approval letters, and annual evaluations from the public file.

2. Notify the Area Director of the withdrawal or termination so that the worksite may be returned to the programmed inspection list, if applicable, at the time of the next inspection cycle.

3. Notify the Regional Administrator and DCSP in writing of any withdrawals or terminations and the reason(s) for withdrawal.

G. Special Circumstances.

1. Discuss any change in ownership, organization, and union representation (if applicable) with the participant representative, and schedule an onsite visit if needed to evaluate the change’s impact. Forward to DCSP any resultant updates to the participant’s information.

2. Coordinate and review any formal or non-formal complaints, referrals, fatalities or catastrophes, accidents or incidents, and resultant inspection reports or letters. (See Chapter 8.)

H. Ongoing Assistance. The VPP manager will be available to assist participants as needed, e.g., when changes occur at the worksite that may affect continued participation.
I. **Maintenance of Participant Files.** The VPP manager must maintain a public file of all approved participants in the Region and make available to the public on request:

1. VPP application and amendments.
2. Onsite evaluation reports.
3. Regional Administrator’s letter of recommendation and the Regional Administrator’s transmittal memoranda to Assistant Secretary (via the Director of DCSP).
4. Assistant Secretary’s and Regional Administrator’s approval letters.
5. Notification to the appropriate Area Director(s) removing an approved participant from the general inspection list.
7. Related formal correspondence.

J. **VPP in State Plans.**

1. Refer inquiries regarding VPP in state plans and any applications to the appropriate State Designee.
2. Encourage State plans to update DCSP with general participant information and end-of-year information regarding new and existing VPP participants.
3. Ensure that updated promotional materials and changes to policy or procedures are promptly distributed to State Designees.

VII. **OSHA Area Directors.** In addition to being knowledgeable about the VPP and its participants, the Area Director must:

A. **Inspection Deferral.**

1. Ensure that programmed inspections of applicants are deferred for no more than 75 days prior to their scheduled onsite evaluation.
2. Remove approved participants from any programmed inspection lists for the duration of participation, unless a participant chooses otherwise.
3. Return participants that have withdrawn or been terminated to the programmed inspection list, if applicable, at the time of the next inspection cycle.

B. Upon the Regional Administrator’s request, the Area Director must assign properly trained compliance officers (CSHOs) and/or Compliance Assistance Specialists (CASs) to serve as VPP team members or team leaders.

C. The Area Director must use routine procedures for conducting complaint, referral, and/or fatality/catastrophe investigations at VPP worksites and:
   1. Notify the VPP Manager when a complaint (including an informal complaint responded to by letter) is received from a VPP participant and of the subsequent disposition of the complaint. (See Chapter 8.)
   2. Immediately notify the VPP Manager of any fatalities, catastrophes or other accidents, or incidents requiring enforcement that occur at a VPP worksite.
   3. Send the VPP Manager a copy of any report resulting from an enforcement case.

D. Promoting VPP. In promoting VPP, Area Directors must:
   1. Respond completely and promptly to public inquiries about VPP.
   2. Promote VPP publicly and within OSHA by:
      a. Giving speeches and presentations and attending VPP ceremonies.
      b. Ensuring that CSHOs are knowledgeable about VPP requirements and objectives and encouraging them to identify possible candidates.
      c. Referring likely VPP candidates to the VPP Manager.
      d. Maintaining communication with VPP participants about OSHA standards and policies, training needs, and outreach.
      e. Supporting Regional VPP activity to the greatest extent possible.
   3. Encourage VPP participants, where appropriate, to assist OSHA with accomplishing the Agency’s mission, e.g., ask VPP participants to “sell” the value of safety and health to sites on the Site-Specific Targeting (SST) list.
4. Notify the VPP Manager of each VPP outreach.
Chapter III
Requirements for Star, Merit, Resident Contractor, Construction Industry, and Federal Agency Worksites

I. Introduction. This chapter details requirements for the Star and Merit programs as well as the unique requirements for the construction industry, for Federal agencies, and for resident contractors at VPP participants.

II. The Star Program. The Star Program recognizes the very best workplaces that are in compliance with OSHA regulations and that operate outstanding safety and health management systems for employee protection. All of the VPP requirements, published in Federal Register Notice 65 FR 45650-45663 and detailed below, must be in place and working effectively for at least 1 year prior to Star approval.

A. Term of Participation. There is no limit to the term of participation in Star, as long as a participant continues to meet all Star requirements and to maintain Star quality.

B. Injury and Illness History Requirements. Evaluate the applicant/participant’s injury and illness history by using a 3-year total case incidence rate (TCIR) and a 3-year days away, restricted, and/or job transfer incidence rate (DART rate) (See Appendix A.). The 3-year TCIR and DART rates must be below at least 1 of the 3 most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by the Bureau of Labor Statistics (BLS). Compare both rates to a single year.

An alternative rate calculation may be used for eligible smaller worksites using their best 3 out of the most recent 4 years of incidence rates. (See Appendix A)

C. Comprehensive Safety and Health Management System Requirements. The following safety and health management system elements and sub-elements must be implemented. For small applicants/participants, at the discretion of the onsite team, some of the requirements may be implemented and documented less formally.

1. Management Leadership and Employee Involvement.

   a. Management Commitment. Management demonstrates its commitment by:
• Establishing, documenting, and communicating to employees and contractors clear goals that are attainable and measurable, objectives that are relevant to workplace hazards and trends of injury and illness, and policies and procedures that indicate how to accomplish the objectives and meet the goals.

• Signing a statement of commitment to safety and health.

• Meeting and maintaining VPP requirements.

• Maintaining a written safety and health management system that documents the elements and sub-elements, procedures for implementing the elements, and other safety and health programs including those required by OSHA standards.

• Identifying persons whose safety and health responsibility includes carrying out safety and health goals and objectives, and clearly defining and communicating their responsibilities in their written job descriptions.

• Assigning adequate authority to those persons who are responsible for safety and health, so they are able to carry out their responsibilities.

• Providing and directing adequate resources (including time, funding, training, personnel, etc.) to those responsible for safety and health, so they are able to carry out their responsibilities.

• Holding those assigned responsibility for safety and health accountable for meeting their responsibilities through a documented performance standards and appraisal system.

• Planning for typical as well as unusual/emergency safety and health expenditures in the budget, including funding for prompt correction of uncontrolled hazards.

• Integrating safety and health into other aspects of planning, such as planning for new equipment, processes, buildings, etc.

• Establishing lines of communication with employees and allowing for reasonable employee access to top management at the worksite.
• Setting an example by following the rules, wearing any required personal protective equipment, reporting hazards, reporting injuries and illnesses, and basically doing anything that they expect employees to do.

• Ensuring that all employees (including contract employees) are provided equal, high-quality safety and health protection.

• Conducting an annual evaluation of the safety and health management system in order to:
  - Maintain knowledge of the hazards of the worksite.
  - Maintain knowledge of the effectiveness of system elements.
  - Ensure completion of the previous years’ recommendations.
  - Modify goals, policies, and procedures.

b. **Employee Involvement.** Employees must be involved in the safety and health management system in at least three meaningful, constructive ways in addition to their right to report a hazard. Avenues for employees to have input into safety and health decisions include participation in audits, accident/incident investigations, self-inspections, suggestion programs, planning, training, job hazard analyses, and appropriate safety and health committees and teams. Employees do not meet this requirement by participating in incentive programs or simply working in a safe manner.

• Employees must be trained for the task(s) they will perform. For example, they must be trained in hazard recognition to participate in self-inspections.

• Employees must receive feedback on any suggestions, ideas, reports of hazards, etc. that they bring to management’s attention. An applicant/participant must provide documented evidence that employees’ suggestions were followed up and implemented when appropriate and feasible.
All employees, including new hires, must be notified about participation in VPP and employees’ rights (such as the right to file a complaint) under the OSH Act. Orientation training curriculum must include this information.

Employees and contractors must demonstrate an understanding of and be able to describe the fundamental principles of VPP.

c. **Contract Employee Coverage.** Contract employees must be provided with safety and health protection equal in quality to that provided to employees.

- All contractors, whether regularly involved in routine site operations or engaged in temporary projects such as construction or repair, must follow the safety and health rules of the host.

- VPP participants must have in place a documented oversight and management system covering applicable contractors. Such a system must:
  - Ensure that safety and health considerations are addressed during the process of selecting contractors and when contractors are onsite.
  - Encourage contractors to develop and operate effective safety and health management systems.
  - Include provisions for timely identification, correction, and tracking of uncontrolled hazards in contractor work areas.
  - Include a provision for removing a contractor or contractor’s employees from the worksite for safety or health violations. Note: A worksite may have been operating effectively for 1 year without actually invoking this provision if just cause to remove a contractor or contractor’s employee did not occur.

- **Injury and Illness Data Requirements.**
  - Nested contractors (such as contracted maintenance workers) and temporary employees who are supervised by host site management are governed by the host’s safety and health management system and are, therefore, included in the host’s rates.
Management must maintain copies of the TCIR and DART rate data for all applicable contractors based on hours worked at the worksite. (See Appendix A.)

Participants must report all applicable contractors’ TCIR and DART rate data to OSHA annually.

- **Training.** Managers, supervisors, and non-supervisory employees of contract employers must be made aware of:
  - The hazards they may encounter while on the worksite.
  - How to recognize hazardous conditions and the signs and symptoms of workplace-related illnesses and injuries.
  - The implemented hazard controls, including safe work procedures.
  - Emergency procedures.

**d. Safety and Health Management System Annual Evaluation.** There must be a system and written procedures in place to annually evaluate the safety and health management system. The annual evaluation must be a critical review and assessment of the effectiveness of all elements and sub-elements of a comprehensive safety and health management system. An annual evaluation that is merely a workplace inspection with a brief report pointing out hazards or a general statement of the sufficiency of the system is inadequate for purposes of VPP qualification.

- The written annual evaluation must identify the strengths and weaknesses of the safety and health management system and must contain specific recommendations, time lines, and assignment of responsibility for making improvements. It must also document actions taken to satisfy the recommendations.

- The annual evaluation may be conducted by participant employees with managers, qualified corporate staff, or outside sources who are trained in conducting such evaluations.

- At least one annual evaluation and demonstrated corrective action must be completed before VPP approval.
The annual evaluation must be included with the participant’s annual submission to OSHA. Appendix C provides a suggested format.

2. Worksite Analysis. A hazard identification and analysis system must be implemented to systematically identify basic and unforeseen safety and health hazards, evaluate their risks, and prioritize and recommend methods to eliminate or control hazards to an acceptable level of risk. Through this system, management must gain a thorough knowledge of the safety and health hazards and employee risks. The required methods of hazard identification and analysis are described below.

a. Baseline Safety and Industrial Hygiene Hazard Analysis. A baseline survey and analysis is a first attempt at understanding the hazards at a worksite. It establishes initial levels of exposure (baselines) for comparison to future levels, so that changes can be recognized. Systems for identifying safety and industrial hygiene hazards, while often integrated, may be evaluated separately. Baseline surveys must:

- Identify and document common safety hazards associated with the worksite (such as those found in OSHA regulations or building standards, for which existing controls are well known), and how they are controlled.

- Identify and document common health hazards (usually by initial screening using direct-reading instruments) and determine if further sampling (such as full-shift dosimetry) is needed.

- Identify and document safety and health hazards that need further study.

- Cover the entire worksite, indicate who conducted the survey, and when it was completed.

The original baseline hazard analysis need not be repeated subsequently unless warranted by changes in processes, equipment, hazard controls, etc.
b. **Hazard Analysis of Routine Jobs, Tasks, and Processes.** Task-based or system/process hazard analyses must be performed to identify hazards of routine jobs, tasks, and processes in order to recommend adequate hazard controls. Acceptable techniques include, but are not limited to: Job Hazard Analysis (JHA), and Process Hazard Analysis (PHA).

- Hazard analyses should be conducted on routine jobs, tasks and processes that:
  - Have written procedures.
  - Have had injuries/illnesses associated with them or have experienced significant incidents or near-misses.
  - Are perceived as high-hazard tasks, i.e., they could result in a catastrophic explosion, electrocution, or chemical overexposure.
  - Have been recommended by other studies and analyses for more in-depth analysis.
  - Are required by a regulation or standard.
  - Any other instance when the VPP applicant or participant determines that hazard analysis is warranted.

c. **Hazard Analysis of Significant Changes.** Hazard analysis of significant changes, including but not limited to non-routine tasks (such as those performed less than once a year), new processes, materials, equipment and facilities, must be conducted to identify uncontrolled hazards prior to the activity or use, and must lead to hazard elimination or control.

If a non-routine or new task is eventually to be done on a routine basis, then a hazard analysis of this routine task should subsequently be developed.
d. **Pre-use analysis.** When a worksite is considering new equipment, chemicals, facilities, or significantly different operations or procedures, the safety and health impact to the employees must be reviewed. The level of detail of the analysis should be commensurate with the perceived risk and number of employees affected. This practice should be integrated in the procurement/design phase to maximize the opportunity for proactive hazard controls.

e. **Documentation and Use of Hazard Analyses.** Hazard analyses performed to meet the requirements of c. or d., above, must be documented and must:

   - Consider both health and safety hazards.
   - Identify the steps of the task or procedure being analyzed, hazard controls currently in place, recommendations for needed additional or more effective hazard controls, dates conducted, and responsible parties.
   - Be used in training in safe job procedures, in modifying workstations, equipment or materials, and in future planning efforts.
   - Be easily understood.
   - Be updated as the environment, procedures, or equipment change, or errors are found that invalidate the most recent hazard analyses.

f. **Routine Self-Inspections.** A system is required to ensure routinely scheduled self-inspections of the workplace. It must include written procedures that determine the frequency of inspection and areas covered, those responsible for conducting the inspections, recording of findings, responsibility for abatement, and tracking of identified hazards for timely correction. Findings and corrections must be documented.

   - Inspections must be made at least monthly, with the actual inspection schedule being determined by the types and severity of hazards.
   - The entire worksite must be covered at least once each quarter.
• Top management and others, including employees who have knowledge of the written procedures and hazard recognition, may participate in the inspection process.

• Personnel qualified to recognize workplace hazards, particularly hazards peculiar to their industry, must conduct inspections.

• Documentation of inspections must evidence thoroughness beyond the perfunctory use of checklists.

g. Hazard Reporting System for Employees. The applicant/participant must operate a reliable system that enables employees to notify appropriate management personnel in writing—without fear of reprisal—about conditions that appear hazardous, and to receive timely and appropriate responses. The system can be anonymous and must include timely responses to employees and tracking of hazard elimination or control to completion.

h. Industrial Hygiene (IH) Program. A written IH program is required. The program must establish procedures and methods for identification, analysis, and control of health hazards for prevention of occupational disease.

• IH Surveys. Additional expertise, time, technical equipment, and analysis beyond the baseline survey may be required to determine which environmental contaminants (whether physical, biological, or chemical) are present in the workplace, and to quantify exposure so that proper controls can be implemented.

• Sampling Strategy. The written program must address sampling protocols and methods implemented to accurately assess employees’ exposure to health hazards. Sampling should be conducted when:
  - Performing baseline hazard analysis, such as initial screening and grab sampling.
  - Baseline hazard analysis suggests that more in-depth exposure analysis, such as full-shift sampling, is needed.
Particularly hazardous substances (as indicated by an OSHA standard, chemical inventory, material safety data sheet, etc.) are being used or could be generated by the work process.

Employees have complained of signs of illness.

Exposure incidents or near-misses have occurred.

It is required by a standard or other legal requirement.

Changes have occurred in such things as the processes, equipment, or chemicals used.

Controls have been implemented and their effectiveness needs to be determined.

Any other instance when the VPP applicant or participant determines that sampling is warranted.

- **Sampling Results.** Sampling results must be analyzed and compared to at least OSHA permissible exposure limits (PELs) to determine employees’ exposure and possible overexposure. Comparison to more restrictive levels, such as action levels, threshold limit values (TLVs), or self-imposed standards is encouraged to reduce exposures to the lowest feasible level.

- **Documentation.** The results of sampling must be documented and must include a description of the work process, controls in place, sampling time, exposure calculations, duration, route, and frequency of exposure, and number of exposed employees.

- **Communication.** Sampling results must be communicated to employees and management.

- **Use of Results.** Sampling results must be used to identify areas for additional, more in-depth study, to select hazard controls, and to determine if existing controls are adequate.
• **IH Expertise.** IH sampling should be performed by an industrial hygienist, but initial sampling, full-shift sampling, or both may be performed by safety staff members with special training in the specific procedures for the suspected or identified health hazards in the workplace.

  - **Procedures.** Standard, nationally recognized procedures must be used for surveying and sampling as well as for testing and analysis.

  - **Use of Contractors.** If an outside contractor conducts industrial hygiene surveys, the contractor’s report must include all sampling information listed above and must be effectively communicated to site management. Any recommendations contained in the report should be considered and implemented where appropriate. Use of contractors does not remove responsibility for the IH program, including identification and control of health hazards, from the VPP applicant or participant.

i. **Investigation of Accidents and Near-Misses.** The applicant/participant must investigate all accidents and near-misses and must maintain written reports of the investigations. Accident and near-miss investigations must:

  - Be conducted by personnel trained in accident investigation techniques. Personnel who were not involved in the accident or who do not supervise the injured employee(s) should conduct the investigation to minimize potential conflicts of interest.

  - Document the entire sequence of relevant events.

  - Identify all contributing factors, emphasizing failure or lack of hazard controls.

  - Determine whether the safety and health management system was effective, and where it was not, provide recommendations to prevent recurrence.

  - Not place undue blame or reprisal on employees, although human error can be a contributing factor.

  - Assign priority, time frames, and responsibility for implementing recommended controls.
• The results of investigations (to include, at a minimum, a description of the incident and the corrections made to avoid recurrence) must be made available to employees on request, although the actual investigation records need not be provided.

j. **Trend Analysis.** The process must include analysis of information such as injury/illness history, hazards identified during inspections, employee reports of hazards, and accident and near-miss investigations for the purpose of detecting trends. The results of trend analysis must be shared with employees and management and utilized to direct resources; prioritize hazard controls; and determine or modify goals, objectives, and training to address the trends.

3. **Hazard Prevention and Control.** Management must ensure the effective implementation of systems for hazard prevention and control and ensure that necessary resources are available, including the following:

a. **Certified Professional Resources.** Access to certified safety and health professionals and other licensed health care professionals is required. They may be provided by offsite sources such as corporate headquarters, insurance companies, or private contractors. OSHA will accept certification from any recognized accrediting organization.

b. **Hazard Elimination and Control Methods.** The types of hazards employees are exposed to, the severity of the hazards, and the risk the hazards pose to employees should all be considered in determining methods of hazard prevention, elimination, and control. In general, the following hierarchy should be followed in determining hazard elimination and control methods. When engineering controls have been studied, investigated, and implemented, yet still do not bring employees’ exposure levels to below OSHA permissible exposure limits; or when engineering controls are determined to be infeasible, then a combination of controls may be used. Whichever controls an applicant/participant chooses to employ, the controls must be understood and followed by all affected parties; appropriate to the worksite’s hazards; equitably enforced through the disciplinary system; written, implemented, and updated by management as needed; used by employees; and incorporated in training, positive reinforcement, and correction programs.
• **Engineering.** Engineering controls directly eliminate a hazard by such means as substituting a less hazardous substance, by isolating the hazard, or by ventilating the workspace. These are the most reliable and effective controls.

  ▪ **Protective Safety Devices.** Although not as reliable as true engineering controls, such methods include interlocks, redundancy, failsafe design, system protection, fire suppression, and warning and caution notes.

• **Administrative.** Administrative controls significantly limit daily exposure to hazards by control or manipulation of the work schedule or work habits. Job rotation is a type of administrative control.

• **Work Practices.** These controls include workplace rules, safe and healthful work practices, personal hygiene, housekeeping and maintenance, and procedures for specific operations.

• **Personal Protective Equipment (PPE).** PPE to be used are determined by hazards identified in hazard analysis. PPE should only be used when all other hazard controls have been exhausted or more significant hazard controls are not feasible.

c. **Hazard Control Programs.** Applicants and participants must be in compliance with any hazard control program required by an OSHA standard, such as PPE, Respiratory Protection, Lockout/Tagout, Confined Space Entry, Process Safety Management, or Bloodborne Pathogens. VPP applicants and participants must periodically review these programs (most OSHA standards require an annual review) to ensure they are up-to-date.

  • Participants who are covered by the PSM standard must additionally submit answers to all applicable questions found in the VPP PSM Application Supplement. Answers must address all PSM-covered operations.

d. **Occupational Health Care Program**

  • Licensed health care professionals must be available to assess employee health status for prevention, early recognition, and treatment of illness and injury.
• Arrangements for needed health services such as pre-placement physicals, audiograms, and lung function tests must be included.

• Employees trained in first aid, CPR providers, physician care, and emergency medical care must be available for all shifts within a reasonable time and distance. The applicant or participant may consider, based on worksite conditions, providing Automated External Defibrillators (AEDs) and training in their use.

• Emergency procedures and services including provisions for ambulances, emergency medical technicians, emergency clinics or hospital emergency rooms should be available and explained to employees on all shifts. Also see paragraph h, below.

e. **Preventive Maintenance of Equipment.** A written preventive and predictive maintenance system must be in place for monitoring and maintaining workplace equipment. Equipment must be replaced or repaired on a schedule, following manufacturers’ recommendations, to prevent it from failing and creating a hazard. Documented records of maintenance and repairs must be kept. The system must include maintenance of hazard controls such as machine guards, exhaust ventilation, mufflers, etc.

f. **Tracking of Hazard Correction.** A documented system must be in place to ensure that hazards identified by any means (self-inspections, accident investigations, employee hazard reports, preventive maintenance, injury/illness trends, etc.) are assigned to a responsible party and corrected in a timely fashion. This system must include methods for:

  • Recording and prioritizing hazards, and

  • Assigning responsibility, time frames for correction, interim protection, and follow-up to ensure abatement.

g. **Disciplinary System.** A documented disciplinary system must be in place. The system must include enforcement of appropriate action for violations of the safety and health policies, procedures, and rules. The disciplinary policy must be clearly communicated and equitably enforced to employees and management. The disciplinary system for safety and health can be a subpart of an all-encompassing disciplinary system.
h. Emergency Preparedness and Response. Written procedures for response to all types of emergencies (fire, chemical spill, accident, terrorist threat, natural disaster, etc.) on all shifts must be established, must follow OSHA standards, must be communicated to all employees, and must be practiced at least annually. These procedures must list requirements or provisions for:

- Assessment of the emergency.
- Assignment of responsibilities (such as incident commander).
- First aid.
- Medical care.
- Routine and emergency exits.
- Emergency telephone numbers.
- Emergency meeting places.
- Training drills, minimally including annual evacuation drills. Drills must be conducted at times appropriate to the performance of work so as not to create additional hazards. Coverage of critical operations must be provided so that all employees have an opportunity to participate in evacuation drills.
- Documentation and critique of evacuation drills and recommendations for improvement.
- Personal protective equipment where needed.

4. Safety and Health Training

a. Training must be provided so that managers, supervisors, non-supervisory employees, and contractors are knowledgeable of the hazards in the workplace, how to recognize hazardous conditions, signs and symptoms of workplace-related illnesses, and safe work procedures.

b. Training required by OSHA standards must be provided in accordance with the particular standard.
c. Managers and supervisors must understand their safety and health responsibilities and how to carry them out effectively.

d. New employee orientation/training must include, at a minimum, discussion of hazards at the worksite, protective measures, emergency evacuation, employee rights under the OSH Act, and VPP.

e. Training should be provided for all employees regarding their responsibilities for each type of emergency. Managers, supervisors, and non-supervisory employees, including contractors and visitors, must understand what to do in emergency situations.

f. Persons responsible for conducting hazard analysis, including self-inspections, accident/incident investigations, job hazard analysis, etc., must receive training to carry out these responsibilities, e.g., hazard recognition training, accident investigation techniques, etc.

g. Training attendance must be documented. Training frequency must meet OSHA standards, or for non-OSHA required training, be provided at adequate intervals. Additional training must be provided when changes occur in work processes, new equipment, new procedures, etc.

h. Training curricula must be up-to-date, specific to worksite operations, and modified when needed to reflect changes and/or new workplace procedures, trends, hazards and controls identified by hazard analysis. Training curricula must be understandable for all employees.

i. Persons who have specific knowledge or expertise in the subject area must conduct training.

j. Where personal protective equipment (PPE) is required, employees must understand that it is required, why it is required, its limitations, how to use it, and maintenance.

III. Merit Program. The Merit program recognizes participants that have good safety and health management systems but must take additional steps to reach Star quality. If OSHA determines that an employer has demonstrated the commitment and possesses the resources to meet Star requirements within 3 years, the employer may enter the Merit program with set goals for reaching Star.
A. Injury and Illness History Requirements. The TCIR and DART rates must be calculated and compared to the industry average in the same manner as for the Star Program, except that the 3-year rates do not have to be below the industry average. The following restrictions apply:

1. If the participant has either or both the TCIR and DART rate above the industry average, the participant must set realistic, concrete goals for reducing both rates within 2 years and must specify the methods (approved by the VPP Manager) to be used to accomplish the goals.

2. It must be programmatically and statistically feasible for the participant to reduce its TCIR and DART rates to below the industry average within 2 years.

B. Comprehensive Safety and Health Management System Requirements. The basic elements and sub-elements described for Star participation (Management Leadership and Employee Involvement, Worksite Analysis, Hazard Prevention and Control, Safety and Health Training) must all be operational or, at a minimum, in place and ready for implementation by the date of approval. In addition, all minimum requirements (MRs) must be met. (See Appendix D.)

C. Merit Goals. If the onsite evaluation team recommends participation in the Merit program, the participant must then complete a set of goals in order to maintain Merit status and qualify for the Star Program.

1. Merit goals must address Star requirements not presently in place or aspects of the safety and health management system that are not up to Star quality.

2. Methods for improving the safety and health management system that will address identified problem areas must be included in Merit goals.

3. Correction of a specific hazardous condition must be a 90-day item, not a Merit goal. However, when a safety and health management system deficiency underlies a specific hazardous condition, then corrections to the system must be included as Merit goals.

4. Reducing a 3-year TCIR or DART rate to below the national average is not, by itself, an appropriate Merit goal. Corrections to safety and health management system deficiencies underlying the high rate must be included in the Merit goals.
D. Term of Participation. The length of term is dependent on the time necessary to accomplish Merit goals; however, initial approval to Merit will be for a single term not to exceed 3 years. [See Chapter 6.VII C.2.]

1. A participant must meet Star rate requirements within the first 2 years of its Merit participation. This is to afford an additional year’s experience, for a total of no more than 3 years to gain Star approval.

2. A Merit participant qualifies for Star when it has met its Merit goals, Star rate requirements, and when all other safety and health elements and sub-elements are operating at Star quality.

3. A Merit participant may qualify for the Star Program before the end of its Merit term if the participant meets all conditions in 2., above.

IV. Resident Contractors. Contractors working at a VPP worksite may apply to VPP. The requirements for the resident contractor are identical to those of VPP generally, with the following additions:

A. The host must be an approved VPP (Star or Merit) participant before the resident contractor may submit its application. In addition, the resident contractor must have a minimum of 12 months on site before submitting an application.

B. The type of work being conducted by the resident contractor must be evaluated to determine the appropriate industry classification.

1. If the resident contractor is fulfilling a function that would normally be filled by the host (such as general maintenance), then the resident contractor should be assigned the host’s industry classification.

2. If the resident contractor is independent and would not normally be associated with the host’s industry or service, then the contractor’s own industry classification should be assigned.

C. If the resident contractor has less than 3 years on site, apply the injury and illness history requirements for construction. [See V.A., below.]

D. The resident contractor’s participation, once approved, is contingent upon the host’s continued participation in VPP.

E. A general contractor (GC) of a large construction project at an approved VPP worksite can submit a separate application for VPP. The requirements for construction apply.
F. Replacement of an Approved Resident Contractor. When a VPP resident contractor at a VPP worksite is replaced by a new resident contractor, whether VPP approval will transfer to the new resident contractor depends on several factors.

1. VPP status can transfer if 75% or more of the employees remain employed with the new resident contractor and if the new resident contractor:
   a. Submits a new letter of management commitment,
   b. Submits a new self-evaluation, and
   c. Receives a satisfactory OSHA onsite evaluation within 12 months (6 months is preferred).

2. A new VPP application is required if fewer than 75% of the employees remain employed with the new resident contractor.

G. Continuing VPP status of an approved subcontractor to the initial resident contractor depends on the status of the new resident contractor.

1. If VPP status transfers to the new resident contractor, as in F1., above, the subcontractor maintains its VPP status.

2. If the new resident contractor is required to submit a new VPP application, as in F2., above, the subcontractor must withdraw from VPP and then reapply after approval of the new resident contractor.

V. VPP Requirements for the Construction Industry. A construction applicant must be the general contractor (GC), owner, or an organization that provides overall management at a worksite, controls site operations, and has ultimate responsibility for assuring safe and healthful working conditions at the worksite. The project must have been in operation for at least 12 months prior to approval. Construction applications cover individual sites only.

A. Injury/Illness History.

1. To qualify for the Star Program, the applicant/participant’s TCIR and DART rate (including all subcontractor employees) from worksite inception until time of application must be below the national average for the industry classification.
2. If an applicant/participant has rates which exceed the BLS average for its NAICS, then the general contractor may qualify for the Merit program if the company-wide 3-year TCIR and DART rate are below the national average.

The applicant/participant may use nationwide employment data, or may designate, with OSHA approval, an appropriate geographical area to determine employee coverage.

B. Comprehensive Safety and Health Management System Requirements. The requirements for the Star and Merit programs are identical to those of VPP generally, with the following additions:

1. Safety and Health Management System Evaluation. The evaluation must be conducted annually and immediately prior to completion of construction. If a construction company does not provide the final evaluation, OSHA will not consider subsequent VPP applications for other worksites operated by that company.

2. Routine Self-Inspections. These inspections must cover the entire worksite at least weekly, due to the changing nature of construction sites.

3. The applicant or participant is responsible for ensuring the correction of any identified hazards, including those created by subcontractors.

4. General Contractors must make subcontractors and their employees aware of the VPP application or participation and of their rights, roles and responsibilities. Evidence that all subcontractors at the worksite recognize these conditions is necessary and may include:

   a. The contractual agreement.
   
   b. A written statement of willingness to cooperate.
   
   c. Attendance at safety meetings.
   
   d. Orientation sessions for incoming subcontractor employees.
5. **Employee Involvement.** Employees at construction sites must be involved in safety and health at the worksite to the degree practical based on the time they will spend on site. Examples of short-term involvement include attending daily toolbox talks on safety and health, and participating in daily self-inspections. The more time they spend on site, the more involvement OSHA expects. The onsite evaluation team will judge the sufficiency of employee involvement through interviews and observations.

VI. **VPP for Federal Agencies.** Federal agency worksites that are covered by 29 CFR 1960 and fall under OSHA’s jurisdiction are eligible to participate in the VPP.

A. Requirements for Federal agencies are identical to those of VPP generally, with the following additions:

1. In addition to complying with 29 CFR 1910 or 1926, Federal agency worksites must also be in full compliance with 29 CFR 1960.

2. Federal worksites must notify their Designated Agency Safety and Health Official (DASHO) in writing of their intent to apply to the VPP and must submit a copy of that written notification with their application.

3. Federal worksites must make available to the OSHA onsite evaluation team their agency’s current Annual Occupational Safety and Health Report to the Secretary of Labor. Any applicable elements should be noted and corrected.

4. Federal worksites must make available to the OSHA onsite evaluation team copies of their OSHA 300 logs or equivalent forms for the most recent three calendar years.

5. Federal worksites must not have any open Notices.

6. Federal worksites may be subject to strict contract language and regulations governing selection and removal of contractor employees, making it contractually impossible to pre-screen particular contractors based on injury/illness rates. In such cases, OSHA may accept alternative strategies to assure employee safety and health protection.

B. **Injury/Illness History.** Federal agency worksites must keep, in addition to their Federal Occupational Injury and Illness Log, OSHA 300 logs for the previous 3 calendar years. These will be compared to their private sector counterparts.
Chapter IV
Star Demonstration Programs

I. Purpose of Star Demonstration Programs. Star Demonstration Programs enable 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 Star requirements. OSHA may approve Star Demonstration Programs for such purposes as:

A. Exploring the application of VPP in industries where OSHA lacks substantial experience.

B. Testing an alternative approach that, if successful, will allow previously ineligible constituents to participate in VPP.

C. Exploring the feasibility of VPP in worksites with joint Federal agency oversight in the area of safety and health management, such as nuclear power plants.

D. Exploring the feasibility of permanently establishing a new level or type of participation in VPP.

E. Experimenting with an alternative approach that, if successful, will be an improvement over current standards in safety and health management.

F. Exploring other opportunities to develop innovations and improvements in safety and health management.

II. Term of Program. Star Demonstration Programs will be approved for an agreed upon period of time not to exceed 5 years.

III. Process Overview. Star Demonstration Programs are established in a two-phase process. First, a Star Demonstration Program proposal is developed for consideration by the Assistant Secretary. If the Assistant Secretary approves the proposal as a new Star Demonstration Program, appropriate candidates may apply to participate in that particular Star Demonstration Program.

IV. Proposal Development. Parties interested in developing proposals must work with the Director of Cooperative and State Programs or the Regional Administrator, one of whom will take the lead as the primary point of contact with the proposing party.
A. Who May Submit a Proposal. Either OSHA or any stakeholder may propose a Star Demonstration Program. In addition to individual worksites, proposals may come from corporations, unions, or other organizations, for example, a group of small businesses that have joined to provide a complete system of safety and health protection for affected employees.

B. Proposal Components. At a minimum, proposals must include a detailed description of the proposed Star Demonstration Program, including a discussion of:

1. The desirability of establishing the proposed program, and how it would serve the goals of VPP.

2. The alternative approach(es) to be tested, including proposed methodology and potential benefits.

3. Star requirements, if any, that will not be met while testing the alternative approach(es).

4. Measures to be put in place to ensure that all employees and contractors will receive the protection of a Star quality safety and health management system.

5. System to evaluate the Star Demonstration Program to determine its success or failure.

C. Exceptions to Star Requirements. A Star Demonstration Program proposal may include exceptions to normal Star requirements, so long as all employees and contractors continue to receive Star quality protection.

1. Alternative methods of implementing the four basic elements may be the subject of a Star Demonstration Program.

2. If appropriate to the testing of an alternative approach, an applicant may not be required to address all the specific sub-elements that comprise each basic element.

3. OSHA will consider other proposed exceptions to normal Star requirements.

V. Review and Approval of Star Demonstration Program Proposals. The National and affected Regional Offices jointly review all Star Demonstration Program proposals using the above criteria. The review process is as follows:
A. The Review Process.

1. The Regional Administrator and the Director of Cooperative and State Programs must discuss the merits and disadvantages of the proposal.

2. OSHA’s lead contact with the proposing party, either the Director of Cooperative and State Programs or the Regional Administrator, must prepare for DCSP a written program description and recommendation regarding the advisability of pursuing the proposed program.

3. The Director of Cooperative and State Programs must decide whether it is advisable to pursue the proposed program. [See B., below] If it appears advisable, the next step is for OSHA’s lead to negotiate program-specific requirements with the proposing party.

B. Recommendation. If the Director of Cooperative and State Programs decides to recommend approval of the proposed program, he/she must forward the recommendation to the Assistant Secretary. If the Director of Cooperative and State Programs decides that the proposal should not be approved, he/she must provide the affected Regional Administrators with a detailed explanation of why the proposed Star Demonstration program is being rejected, and the OSHA lead contact must provide this detailed explanation to the proposing party.

C. The Assistant Secretary’s Decision. Upon receiving a recommendation to approve from the Director of Cooperative and State Programs, the Assistant Secretary must decide whether to approve the proposed program.

1. If approved, the Star Demonstration Program is opened to applications on the day it is announced to the public. DCSP announces new Star Demonstration Programs to the public by means such as fact sheets, press releases, and OSHA’s web site.

2. If the Assistant Secretary decides against approval, the Director of Cooperative and State Programs must provide the affected Regional Administrators with an explanation of why the proposed program has been rejected, and the OSHA lead contact will provide this explanation to the proposing party.

VI. Approval of Applicants in Star Demonstration Programs.

A. Application Review. OSHA will review applications and determine if they meet the requirements of the particular Star Demonstration Program. If deemed complete and acceptable, an onsite evaluation will be scheduled.
B. **Onsite Evaluations.** Onsite evaluations must be conducted according to the general procedures described in Chapter 6, except that:

1. Any specific requirements unique to the particular Star Demonstration Program must also be considered.

2. Three recommendation options are available to the onsite evaluation team: approval to the Star Demonstration Program, approval directly into the Star Program [see Chapter 6.VII.B.2], or denial.

C. **Approval to Participate.** The Assistant Secretary will decide whether to approve the applicant to the Star Demonstration Program. The official approval date is the date of the Assistant Secretary’s approval letter.

D. **Term of Participation.** Participants may be approved for a period of time agreed upon in advance of the approval. This period may not exceed 5 years, which is the maximum length of time a Star Demonstration Program may operate.

E. **Frequency of Onsite Evaluations.** Onsite evaluations must be conducted according to the procedures described in Chapter 6 and must occur at least every 12-18 months.

VII. **Outcome of a Star Demonstration Program.**

A. **Regional Comment Period.** After the expiration of a Star Demonstration Program, the Director of Cooperative and State Programs must request and consider an analysis of program results from affected Regional Administrators. The Regional Administrators must submit their comments no more than 90 days after the expiration of the program.

B. **Report to the Assistant Secretary.** Based on the comments submitted by affected Regional Administrators, the Director of Cooperative and State Programs must prepare and submit to the Assistant Secretary a recommendation on changing Star requirements to include or be replaced by the Star Demonstration Program requirements. The Director must submit the recommendation no more than 60 days after the end of the Regional Administrators’ comment period.

C. **Assistant Secretary’s Decision.**

1. If the Assistant Secretary decides to change Star requirements:

   a. The changes become effective on the day they are announced to the public by DCSP by such means as, for example, fact sheets, a press release, or OSHA’s web site.

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b. Star Demonstration Program participants may begin the process of seeking Star Program approval.

c. If less than 18 months have passed since a participant’s last onsite evaluation, that participant may be approved to Star status automatically. The official approval date is the day the Star requirement changes became effective.

d. If more than 18 months have passed since a participant’s last onsite evaluation, an evaluation must be conducted before the participant can be recommended for Star status. The official approval date is the day of the Assistant Secretary’s approval letter.

2. If the Assistant Secretary decides that the Star Demonstration was not successful, the participants will not qualify for Star status, and their VPP participation must end.

VIII. Termination of a Star Demonstration Program.

A. OSHA must terminate a Star Demonstration Program or a Star Demonstration Program participant when the demonstration period has expired or if the program is:

1. Likely to endanger employees.

2. Unlikely to result in changes to Star requirements.

3. Unlikely to result in the creation of a new type or level of VPP participation.

B. If the Assistant Secretary decides to terminate a Star Demonstration Program or Star Demonstration Program participant, the Director of Cooperative and State Programs must prepare and distribute a memorandum explaining the reasons for the termination to:

1. All affected Regional Offices.

2. All affected Star Demonstration Program participants.

3. Other affected stakeholders such as corporate headquarters or unions.
Chapter V

The Application Process

I. Eligibility and Program Requirements

A. Eligibility. The VPP accepts applications from general industry in the private sector, maritime and construction worksites, and from Federal agency worksites that have implemented a safety and health management system meeting the requirements of 29 CFR 1960. VPP accepts applications from owners and site managers who control worksite operations and have ultimate responsibility for assuring safe and healthful working conditions at the worksite. VPP also accepts applications from resident contractors at participating VPP worksites. Applications for participation are subject to the following conditions.

1. Employees’ Support of Participation. Employees must support participation in VPP. Requirements vary according to whether the applicant/participant has a recognized employee representative, as explained in the Federal Register 65 FR 45650, July 24, 2000.

2. OSHA Inspection History. If OSHA has inspected an applicant worksite in the 36 months preceding the application, the inspection, abatement, and any other history of interaction with OSHA must indicate good faith attempts by the employer to improve safety and health at the worksite. This includes verification of correction of all serious violations. In addition, the existence of any of the following at the worksite precludes participation in VPP:

   a. Open enforcement investigations.
   b. Pending or open contested citations or notices under appeal at the time of application.
   c. Affirmed willful or 11(c) violations during the 36 months prior to application.
   d. Unresolved, outstanding enforcement actions such as long-term abatement agreements or contests.

OSHA history pertaining to a non-VPP worksite of the same company will not adversely affect VPP participation, unless it is determined that a corporate decision, program, or policy which applies to all company worksites does not meet OSHA standards.
**B. Program Requirements.** Applicants must understand and agree, through assurances, to fulfill program requirements for participation in the VPP.

1. Applicants must assure that:

   a. The applicant will comply with the Act and, in the case of Federal agencies, 29 CFR 1960, and will correct in a timely manner all hazards discovered through self-inspections, employee notification, accident investigations, an OSHA onsite review, process hazard reviews, annual evaluations, or any other means. The applicant will provide effective interim protection as necessary.

   b. Worksite deficiencies related to compliance with OSHA requirements and identified during the OSHA onsite review will be corrected within 90 days, with interim protection provided to employees.

   c. Employees support the VPP application.

   d. VPP elements are in place, and the requirements of the elements will be met and maintained.

   e. Employees, including newly hired employees and contract employees when they reach the worksite, will have the VPP explained to them, including employee rights under the program and under the Act or 29 CFR Part 1960.

   f. Employees performing safety and health duties as part of the applicant's safety and health management system will be protected from discriminatory actions resulting from their carrying out such duties, just as Section 11(c) of the Act and 29 CFR 1960.46(a) protect employees who exercise their rights.

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

   h. The information listed below will be maintained and available for OSHA review to determine initial and continued approval to the VPP:

      - Written safety and health management system.


• All documentation enumerated in Chapter 6.IV.A.

• Any agreements between management and the collective bargaining agent(s) concerning safety and health.

• Any data necessary to evaluate the achievement of individual Merit or 1-Year Conditional goals.

i. Each year by February 15, each participant must send its annual evaluation submission to the appropriate VPP Manager (See Appendix C). Sites covered under the PSM Standard must additionally complete the PSM Questionnaire.

j. Whenever significant organizational, ownership, union, or operational changes occur, such as but not limited to a change in management, takeover, or merger, the participant will provide OSHA within 60 days a new statement of commitment signed by both management and any authorized collective bargaining agents, as appropriate.

2. The applicant must demonstrate a willingness to follow through on all assurances.

3. Employees must be aware of the recourse available to them if management fails to fulfill any of these assurances. This may include rescinding their support of VPP participation or exercising the right to file an OSHA complaint.

II. Preparing the Application.

A. Pre-application Assistance. The VPP Manager may visit a prospective applicant’s site to offer assistance in the application process or before scheduling the onsite evaluation to obtain additional information or clarification of information provided in the application.

B. Single or Multiple Applications. In most cases, a single VPP application is sufficient. Exceptions may occur, such as the following circumstances:

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<thead>
<tr>
<th>If:</th>
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<th>Then:</th>
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<tr>
<td>The applicant operates at a worksite where operations are physically separated but where a single, effective onsite evaluation is still feasible.</td>
<td>All applicant employees are covered by a single safety and health management system.</td>
<td>A single application is required.</td>
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<tr>
<td>The applicant is the General Contractor of a construction worksite where subcontractor employees are also covered by the same safety and health management system.</td>
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<td>Less than 50 percent of the predominant work* performed by employees is performed at off-site location(s), for example, the sales force of a manufacturing company.</td>
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<td>The applicant has multiple operations.</td>
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<tr>
<td>More than 50 percent of the predominant work* performed by employees is performed at off-site location(s).</td>
<td>The application is to the Mobile Workforce or other affected Demonstration Program.</td>
<td>A single application is required.</td>
</tr>
<tr>
<td>The applicant’s operations are separated by distances that would prevent an effective, single onsite evaluation.</td>
<td>All employees may or may not be covered by a single safety and health management system.</td>
<td>More than one application is required.</td>
</tr>
<tr>
<td>More than one employer at a single worksite is applying for VPP (for example, an office building).</td>
<td>N/A</td>
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*Follow the directions in the North American Industrial Classification System (NAICS) Manual to determine the predominant work and the appropriate NAICS code. If questions still exist, contact OSHA’s National Office, Directorate of Information Technology.*
C. **Confidentiality.** During the application process, prior to program approval, the application and all related information is confidential and, therefore, must be used solely for VPP-related activities. Only applications of approved participants will be kept in a public file. If an applicant withdraws, the original application and related documents must be returned. The assigned VPP Manager’s marked working copy will be held in the appropriate Regional Office for 1 year in order to respond to any questions the applicant may have.

III. **Application Records.** The VPP Manager must submit updated application information to DCSP monthly, using the VPP Application Status Report and the VPP Activity Report. [See Appendix B.]

IV. **Procedures for Receipt and Review of Applications.**

A. The VPP Manager must process applications as received, except as instructed below:

1. **Priority One.** The highest priority must be assigned to worksites that are specifically identified by OSHA for VPP participation to support agency-wide initiatives outlined in the Strategic Plan. Worksites also may be selected because they represent a potentially useful demonstration of the VPP concept in non-traditional workplaces. In addition, the Region may decide to select particular worksites for special attention because, for example, they have the potential to serve as good role models for key regional industries or they represent locally successful “turnaround” companies.

2. **Priority Two.** Second level priority must be given to those worksites whose participation would increase the number of small establishments in the program. A worksite is considered a small employer if it has no more than 250 employees at any one facility, and no more than 500 employees in the corporation nationwide.

3. **Priority Three.** The third level of priority must be assigned to worksites whose participation in VPP would increase the industrial diversity of the program. Whenever possible, give priority to worksites in industries other than SIC 28 (Chemicals and Allied), SIC 26 (Pulp, Paper and Allied), SIC 30 (Plastics and Foams), and SIC 22-23 (Textiles and Apparel), because these industries on a national basis are well represented already. In determining the priority for a worksite, however, the Region should take into consideration the VPP sites under its jurisdiction. Thus, it might be appropriate to provide priority to a chemical plant applicant if there are no other representatives of this industry in the Region.
4. **Priority Four.** Fourth level priority must be given to applicants in those industries that already have VPP participants. Preferential treatment should be provided to those worksites that, based on an assessment of the application and other factors, appear to have a greater likelihood of achieving Star status during the initial onsite evaluation. (However, applicants that do not meet Star requirements will not be rejected.)

B. **Original Application.** Upon receipt of an application, the VPP Manager must stamp it with the date received and reserve it for placement in the public file, should the applicant be approved to VPP.

C. **Acknowledgment and Record of Receipt.** The VPP Manager must notify the applicant by letter or e-mail of receipt of the application within 15 working days. The acknowledgment must also include the name and telephone number of the VPP Manager or a designee.

D. **Regional Office Review.** The VPP Manager must oversee the application review process. The VPP Manager may delegate the review of individual applications to other OSHA personnel trained to perform this function (e.g., VPP Coordinators, Compliance Assistance Specialists). The reviewer must determine if the application includes all required information listed in the most recent VPP application instructions, if the applicant is eligible for onsite review, to pinpoint any major deficiencies, and to notify the applicant that the identified deficiencies must be rectified prior to application acceptance. In general, application review should include an examination of the following:

1. **General Information.** Ensure that the general information includes but is not limited to: the applicant’s worksite name, address, key contact personnel and titles, corporate identification, collective bargaining agent contact information, number of employees and contractor employees, type of work performed, and products produced.

2. **Injury and Illness Rates.** The rates supplied in the application must be examined as follows:

   a. For general industry, the reviewer of the application must calculate the 3-year total case incidence rate (TCIR) for injuries and illnesses, using data from the last 3 complete calendar years. Similarly, calculate the 3-year days away, restricted, and/or job transfer (DART) rate. [See Appendix A.]
b. For construction, calculate rates for the life of the worksite if less than 3 years. At a minimum, the most recent 12 months is required, and the data must include all employees of contractors and subcontractors on the worksite. (On construction worksites, all contractors are considered worksite employees for the purpose of rate calculations, and, therefore, are included in the applicant/participant’s rates).

c. Evaluate the applicant/participant’s injury and illness history by using a 3-year total case incidence rate (TCIR) and a 3-year days away, restricted, and/or job transfer incidence rate (DART rate) (a minimum of 1-year rates for construction). (See Appendix A.) The 3-year TCIR and DART rates must be below at least 1 of the 3 most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by the Bureau of Labor Statistics (BLS). Compare both rates to a single year.

An alternative rate calculation may be used for eligible smaller worksites using their best 3 out of the most recent 4 years of incidence rates. (See Appendix A)

d. The reviewer must determine if the applicant’s injury and illness rates are low enough to warrant an onsite review.

3. Safety and Health Elements. The reviewer must determine if the application describes how the applicant is meeting the VPP requirements, addressing each of the elements and sub-elements of an effective safety and health management system listed in Chapter III and as outlined below.

a. Management Leadership and Employee Involvement. The applicant must describe top-level management leadership in the applicant/participant’s safety and health management system. Note: Management must clearly describe its commitment to meeting and maintaining the requirements of VPP. The applicant must also describe how employees are involved in safety and health.

b. Worksite Analysis. The applicant must describe methods used to recognize, identify, and analyze hazards. Effective worksite analysis provides the information managers and employees need for a thorough understanding of all hazardous situations to which they may be exposed.
c. **Hazard Prevention and Control.** The applicant must describe and give examples of how hazards are addressed, including preventative maintenance, occupational health care program, emergency preparedness, and hazard elimination employing the hierarchy of controls.

d. **Safety and Health Training.** The applicant must describe its formal and informal safety and health training program for managers, supervisors, and employees. The information must include training protocols and schedules of training.

4. **Assurances.** The reviewer must determine that the application contains a signed statement of assurances and that all of the required assurances have been included. [See I.B., above.]

5. **Additional Attachments.** The reviewer must determine if the application contains the required additional attachments, as follows:

   a. Copy of top-level safety policy.
   
   b. Organization chart.
   
   c. Most recent annual evaluation.
   
   d. Site map.
   
   e. Signed statement of union support, if applicable.
   
   f. VPP PSM Application Supplement, if applicable.

E. **Discussion with the Applicant.** The appropriate program choice may need to be discussed with the applicant.

1. **Possible Merit Candidate.** If the applicant’s 3-year injury and illness rates are at or above the national average for the applicant/participant’s industry, and/or the applicant has not had all of the required elements for Star in place for 1 year, the applicant must be contacted about the possibility of qualifying for Merit.

2. **Possible Star Demonstration Program Candidate.** If an applicant, due to the nature of the work or the worksite, cannot meet all the requirements for Star or Merit, but appears to have a safety and health management system at Star quality, the applicant should be viewed as a possible Star Demonstration Program candidate. [See Chapter 4.]
F. **DCSP Review.** DCSP will review an application at the request of a Region or if required by a Star Demonstration Program.

G. **Incomplete Applications.** If the application is considered incomplete, the VPP Manager must notify the applicant, noting the missing elements and requesting that the missing information be submitted within 90 days. If the additional information is not provided within that time, the application must be returned to the applicant. It can be resubmitted when completed.

H. **Ineligible Applications.** If it is clear that the applicant cannot qualify for VPP, the VPP Manager must ask the applicant to withdraw the application within 30 days. If the application is not withdrawn, the VPP Manager must return the application with a letter indicating the reasons the application was denied by OSHA and forward a copy of the letter to DCSP.

I. **Voluntary Withdrawal of an Application.** An applicant may withdraw the application by notifying the Regional Administrator. The withdrawal is effective on the date the notification is received. Then:

1. The VPP Manager must:
   a. Determine the cause of withdrawal and notify DCSP on the Monthly VPP Activity Log.
   b. Return the original application to the applicant within 10 working days. If the application had already been accepted, the VPP Manager must retain a working copy for 1 year, for use in responding to questions that may arise.

2. The Regional Administrator must acknowledge the withdrawal by letter, giving the official withdrawal date. The letter must include a statement that OSHA will entertain re-application if circumstances change. A copy of the letter must be sent to DCSP.

J. **Decision to Conduct the Onsite Evaluation.** Once an application is accepted, the VPP Manager must:

1. Notify the applicant--by letter or e-mail in a timely manner--that an onsite evaluation will be conducted. However, no onsite evaluation may be conducted until all enforcement actions have been closed.
2. Notify the appropriate Area Office so that the applicant can be removed from any programmed inspection lists, effective no more than 75 days prior to the scheduled onsite review.
Chapter VI
Onsite Evaluations

I. Purpose. An onsite evaluation consists of a thorough evaluation of a VPP applicant’s or participant’s safety and health management system in order to recommend approval or reapproval. Onsite evaluations are carried out by a team consisting of OSHA staff acting in a non-enforcement capacity and other qualified team members.

II. Preparation for Onsite Evaluations.

A. Scheduling Onsite Evaluations. Onsite evaluations must be scheduled according to the priorities described in Chapter 5.IV.A. For new applicants, an onsite evaluation must be conducted within 6 months of the receipt of a completed application. For participants, onsite evaluations must be conducted as follows:

1. **Star Participants.** The first evaluation must be conducted between 30 and 42 months following initial approval. Thereafter, onsite evaluations must be completed within 60 months of the preceding onsite evaluation.

2. **1-Year Conditional Star Participants.** The onsite evaluation must be conducted within 15 months (90 days plus 1 year’s experience operating at Star level) after the participant was placed on conditional status.

3. **Merit Participants.** The first onsite evaluation must be conducted 18 to 24 months following initial approval (18 months is preferred). If the participant is reapproved at the Merit level, another onsite evaluation must be performed at the end of the participant’s Merit term.

4. **Star Demonstration Program Participants.** The frequency of onsite evaluations for a Star Demonstration Program participant is every 12 to 18 months.

5. **Scheduling Exceptions.**

   a. Onsite evaluations must be conducted earlier than normal scheduling requirements when:

      • Significant changes have occurred in management, process(es), or product(s) that may require evaluation to ensure the participant is maintaining a VPP quality safety and health management system.

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OSHA has learned of significant problems, such as increasing injury and illness rates, serious deficiencies described in the participant’s annual evaluation of its safety and health management system, or deficiencies discovered through OSHA enforcement activity resulting from an employee complaint, fatality, catastrophe, or other event.

b. An onsite evaluation may be conducted earlier when requested by a participant.

B. Arrangements with the Applicant/Participant. Arrangements for the onsite evaluation must be coordinated by the team leader, who must contact the applicant or participant (site representative) to:

1. Set the date for the onsite evaluation and explain the onsite evaluation process.

2. Inform the site representative of the documents that must be reviewed by the onsite evaluation team. OSHA 300 logs may be requested in advance of the onsite evaluation, if appropriate.

3. The VPP Manager or team leader must inform the employer if a Special Government Employee (SGE) will be used as a member of the onsite evaluation team. The employer must agree with this arrangement.

4. Employee Representation. Where collective bargaining agents are involved, the team leader must tell the site representative that such agents must be included in the initial and closing conferences and allowed the opportunity to accompany the onsite evaluation team on the worksite walkthrough. Similar employee involvement must be encouraged at non-collective bargaining worksites.

5. Medical Access Order (MAO). The VPP Manager or team leader must prepare and submit a Medical Access Order (MAO) Request Form to the OSHA Office of Occupational Medicine. This form can be downloaded electronically on the OSHA Intranet web page at www.osha-slc.gov/dts/oom/mao.html. The VPP Manager must then direct the applicant or participant to post the MAO in a prominent place at the worksite for at least 15 working days prior to the onsite evaluation.
If the applicant/participant did not receive the MAO prior to the onsite evaluation, the team leader must direct the applicant or participant to post a copy immediately after the opening conference. The posting must include a notice advising employees to inform management of any objection to their medical records being reviewed, in confidence, by OSHA employees.

C. The Onsite Evaluation Team.

1. Team Composition. Team composition is based on the size of the worksite and nature of the process, and must include at least (a) through (c) below. Applicants/participants who fall under the PSM Standard must also include (d).

a. Team Leader.

b. Safety Engineer or Safety Specialist.

c. Industrial Hygienist.

d. PSM “Level 1” Auditor

e. Backup Team Leader.

f. Additional Safety or Health Specialists, including others with knowledge and skills appropriate to the worksite.

g. Special Government Employees (SGEs). Refer to the latest SGE Policies and Procedures Manual for guidance on selecting, requesting, and utilizing OSHA SGEs.

h. Star Demonstration Program Coordinator. A Star Demonstration Program coordinator from the National Office may participate in Star Demonstration Program onsite evaluations, as requested.

2. Selection of the Team. The team leader must formally request team members. This may be done by e-mailing the proposed onsite evaluation schedule to OSHA Area Directors and SGEs.

a. Basic Qualifications. All team members must have at least the following:

- Thorough knowledge of VPP policy.
• OSHA Course 2450, Evaluation of Safety and Health Management Systems, or other formal classroom training in evaluating safety and health management systems (for OSHA personnel only).

• OSHA Course 5450, Special Government Employee Training Course (for SGEs personnel only).

• Working knowledge and understanding of safety and health management systems.

• In addition, one person (not including SGEs) on the team must have a safety and health job classification, for example, Safety and Occupational Health Specialist 0018.

b. **Team Leader.** The team leader must meet the qualifications in a., above, plus have experience on three onsite evaluations, including once as a team member, once as a backup team leader, and once as a team leader in training (with a qualified team leader as backup team leader).

c. **Compliance Officers.** OSHA personnel whose current duties include enforcement responsibilities in the Area Office having jurisdiction over the worksite may be assigned to a VPP onsite team. However, as a general rule, such personnel may not subsequently engage in enforcement activity at the worksite for 2 years or until the worksite is no longer a VPP participant, whichever comes first. The Regional Administrator, on a case-by-case basis, may choose to override this 2-year requirement.

3. **Preparing the Onsite Evaluation Team.**

a. **In Advance.** The team leader must supply the team with the following information in advance of arrival at the worksite to be evaluated.

• **VPP History.** For new applicants, team members must be given relevant sections of the application and the most recent self-evaluation. For current participants, team members must be given a copy of the participant’s last onsite evaluation report. Ensure that any Merit or 1-Year Conditional goals to be evaluated are provided.
• **Inspection History.** Team members must be given the inspection history and a summary of past interactions between the applicant and OSHA.

• **Any Documents Obtained with the Application.** If any records were submitted in advance of the onsite evaluation, these should be shared with team members.

• **PSM Application Supplement and/or PSM Questionnaire, where applicable.**

b. **Preparation Required of Onsite Evaluation Team Members.** In advance of the onsite evaluation, team members must prepare in the following ways:

• **Review.** When feasible, team members must carefully review the application and any previous onsite evaluation reports.

• **Onsite Evaluation Report Format.** Team members must familiarize themselves with the onsite evaluation report format to ensure they understand what information they will be responsible for obtaining during the onsite evaluation. [See Appendices D and E.]

• **Interview Questions.** Team members must carefully review the interview questions in preparation for conducting onsite interviews. [See Appendix F.]

• **Personal Protective Equipment (PPE).** Team members must equip themselves with any PPE, such as safety shoes and safety glasses, required for the onsite evaluation (unless they have been informed that PPE will be provided).

c. **Onsite.** Once the team has arrived at the location, the team leader must hold a strategy meeting with all team members to prepare the team for the onsite evaluation and to make assignments.

III. **Conducting the Onsite Evaluation.** This Section describes the standard onsite evaluation process and, at E. below, provides an alternative onsite evaluation protocol for qualifying participants seeking reapproval. For all onsite evaluations, the three primary methods of evaluation are document review, walkthrough, and interviews. Additional activities that must occur are the opening conference, daily briefings, report preparation, and closing conference.
Onsite evaluations include an evaluation of each element and sub-element of the applicant/participant’s safety and health management system (see Chapter III) by following the procedures in Section III.A.-D. below. At the conclusion of the onsite evaluation, the onsite evaluation team must provide the Regional Administrator with its recommendation, that is, the applicant/participant’s suitability for participation or continued participation in VPP, and the appropriate program/level.

For current VPP participants who demonstrate a sustained commitment to safety and health excellence, as described in section III.E. below, OSHA may choose to employ a Compressed Reapproval Process to Recognize Sustained Excellence (CRP) onsite evaluation. At the conclusion of the CRP, the onsite evaluation team must provide the Regional Administrator with its recommendation, that is, the participant’s suitability for continued participation in VPP.

A. Opening Conference. The opening conference with the employer and employee representatives will set the stage for the onsite evaluation, letting everyone know what to expect and what assistance the team will need. During this session the onsite evaluation team should be able to get a sense of the extent of commitment that exists at the worksite. The team leader must convey the following information:

1. **Balanced Approach.** Describe OSHA’s view of the Voluntary Protection Programs and VPP’s importance to OSHA’s approach to balancing cooperative programs and enforcement.

2. **Purpose.** Clearly state the purpose of the onsite evaluation.

3. **Full Disclosure.** Indicate that the onsite evaluation team expects the applicant/participant will adhere to the signed full disclosure assurances submitted with the application.

4. **Schedule.** Outline the schedule for the onsite evaluation.

5. **Interviews.** State that arrangements must be made to conduct private interviews with supervisors, union representative(s), maintenance personnel, recordkeepers, occupational health staff, and randomly selected employees, including contractor employees (if any).

6. **Responding to Hazards.** Explain the differences between the walkthrough and an enforcement or consultation visit, as well as the hazard correction requirements detailed in V., below.
7. Status. Explain how the onsite evaluation team will keep the site representative updated daily on the progress of the onsite evaluation. When the onsite evaluation is completed, the VPP onsite evaluation team will discuss its findings with the site representative so that the recommendations are clearly understood.


B. Document Review. The applicant/participant’s written safety and health management system must describe how each of the requirements outlined in Chapter 3 are being met. The documents listed below are part of the written safety and health management system. The documentation of the system must be site specific. On a case-by-case basis for small businesses, some documentation need not be in writing, provided that all employees have the same clear understanding of the particular policy. This will be verified by the onsite evaluation team.

1. Injury/Illness Data. The following documents must be reviewed to verify that the applicant/participant is properly and accurately recording injuries and illnesses.

   a. Summary of Occupational Injuries and Illnesses.

      • Review data for the most recent complete 3-year period, current year-to-date, and for any applicable contractors.

      • Recalculate the total case incidence rate (TCIR) and the days away, restricted, and/or transfer case incidence rate (DART rate) using the instructions found in Appendix A.

   b. Incentive Programs. The review of incentive programs must focus on ensuring that any incentive programs in operation are not based solely on providing awards to employees for the reduction or absence of safety or health incidents. Instead, these programs should be innovative, positive, and promote safety awareness and employee participation in safety-related activities. The onsite evaluation will focus on the incentive program’s potential impact on the accuracy of reporting, injury and illnesses data.

   c. First Reports of Injury.
d. Accident and Near-Miss Investigation Reports. Verify that all accidents and near-misses are properly reported and investigated, and that all injuries and illnesses resulting from an accident are properly recorded.

e. First-Aid Reports. Verify that the first-aid incidents are properly categorized as such, and are not causing possible over-reporting.

f. Team-selected medical surveillance reports, such as audiometric testing records, respirator fittest records, etc. [See II.B.4., above.]

g. Any cause for under- or over-reporting, such as lack of training in OSHA recordkeeping requirements, an incentive program, misdiagnosis of an injury or illness, etc., must be addressed. Discuss any discrepancies or omissions with the recordkeeper. Determine corrective actions, and recalculate the 3-year TCIR and DART rate, if necessary.


a. Management’s statement of commitment to safety and health.

b. Written goals and objectives for safety and health.

c. Annual safety and health evaluation.

d. Job descriptions.

e. Performance standards and appraisals (these reviews must be performed in a manner that protects confidentiality and anonymity).

f. Resource documents including budget projections.

3. Employee Involvement.

a. Safety and health committee minutes, if applicable.

b. Self-inspection forms and records, accident investigations, hazard analyses, and employee reports of hazards.

c. Documents attesting to union support, if applicable.

4. Worksite Analysis.
5. **Hazard Prevention and Control.**

   a. Hazard control programs required by OSHA standards (such as Lockout/Tagout, Hazard Communication, Respiratory Protection, Process Safety Management, Bloodborne Pathogens, Confined Space Entry, Emergency Response, etc.).

   b. Preventive maintenance program, maintenance schedule, and examples of work orders.

   c. Engineering studies to verify that any over-exposures to health hazards were adequately addressed and controlled following the hierarchy of controls.

   d. Hazard correction/work order and tracking reports.
e. Safety rules, examples of safe work procedures and practices.

f. Disciplinary system, including a review of policy.

6. Training.

a. New employee and contractor orientation curricula.

b. Training curricula related to required OSHA standards.

c. Additional safety and health training curricula to verify that personnel performing hazard analysis and accident investigation are trained to do so. Also to verify that information from hazard analysis, accident reports, etc., are incorporated into training.

d. Training attendance records and tracking method.

7. Any other related documents that support and verify that VPP requirements are being met.

C. Walkthrough.

1. Scope. The onsite evaluation team must walk through the worksite to understand the type of work performed and to gain a sense of overall work conditions. An orientation tour is conducted with the entire onsite evaluation team on the first day of the onsite evaluation. The remainder of the onsite evaluation must include a walkthrough of the entire worksite, unless the size of the worksite or nature of the process does not allow for it, in which case a representative sampling of all major operating areas and supporting activities must be covered.

a. Contractors. The onsite evaluation team must review areas where work is performed by contract employees to ensure that they are provided equally effective protection.

b. Hazard Analysis. The safety and health specialists must examine the worksite in sufficient detail to understand the types of hazards that exist and to determine that such hazards are controlled systematically by the safety and health management system.

c. Problem Areas. The onsite evaluation team must examine areas where site reports of the following indicate that uncontrolled hazards may be present:
Baseline hazard analysis.

Trends in injuries or illnesses.

Employee complaints or concerns.

Recurring accidents.

Health hazard surveys.

Self-inspections.

d. Informal Interviews. During the walkthrough (and at other times, as appropriate) the onsite evaluation team must question randomly selected employees (including contract employees) privately at their workstations about prescribed work procedures, hazards to which they may be exposed, and their knowledge of how to protect themselves from hazards, including how to use and maintain their personal protective equipment. The team must keep track of the number of employees interviewed, but employee names and addresses must not be recorded. [See Appendix F.]

2. General Industry Safety and Health Review. The safety specialist/engineer and industrial hygienist must:

a. Follow the process flow where possible. Focus on areas where document review and/or interviews indicate that uncontrolled safety and health hazards may be present.

b. Look for evidence that hazards are appropriately controlled following the hierarchy of controls. [See Chapter 3.II.C.3.b.]

c. Identify and note any uncontrolled hazards that must be corrected. Ensure that a responsible member of management takes notes, as well, and agrees on a reasonable time period for correction.

d. If uncontrolled hazards are present, determine the causative deficiencies in the safety and health management system.

e. Relate hazards seen in the work areas to safety and health management system improvements that would control the hazards and prevent recurrence.
f. Inform the team leader of findings at the end of each day.

3. The safety specialist/engineer and industrial hygienist must follow the procedures above and make every attempt to view all areas of construction covered by the application. If the entire worksite is not viewed, ensure that all types of construction work in progress are seen.

4. Process Safety Review. A process safety review is required at all worksites producing or using highly hazardous chemicals. The review must be conducted in accordance with the Process Safety Management (PSM) Directive by a PSM “Level 1” Auditor (or SGE equivalent) who must select one or more complete processes and follow the process flow. Elements of the review should include:
   
a. Review process hazard analysis and operating procedures.

b. Check process lines as necessary to verify documented system protection.

c. Ask questions concerning system failure procedures during informal interviews with appropriate operator, maintenance, and contract personnel.

d. Review training records.

e. Look for evidence that all considerations have been addressed and that management has identified and is controlling all hazards and potential releases.

f. Verify the answers provided by the applicant/participant to the questions found in the PSM application supplement that are most appropriate to the facility’s operations (new approvals only).

   g. Ask and verify answers for the questions from recent Dynamic Inspection Priority Lists that are most appropriate to the facility’s operations.

D. Interviews.

1. Formal Interviews. Private formal interviews are conducted in a private area away from the workstation to ascertain the extent of safety and health involvement and program awareness of managers, supervisors, employees, and contractors.
2. Informal Interviews. Informal interviews are conducted at employees’ workstations during the walkthrough and at other times, as appropriate. [See C.1.d., above.]

3. Persons to Be Interviewed.

a. Managers. A representative number of managers must be interviewed to ascertain the depth of management leadership in the safety and health management system.

b. Supervisors. A representative number of supervisors must be interviewed.

c. Line Employees. Conduct employee interviews with those individuals involved in the actual process or production at the worksite to verify aspects of the safety and health management system.

d. Occupational Health Care Professionals.

e. Maintenance Personnel. Maintenance personnel should be interviewed. At chemical plants making or using highly hazardous chemicals, they must be interviewed.

f. Recordkeepers. The person responsible for keeping injury and illness records must be interviewed to ensure that records are properly kept and that the recordkeeper understands the requirements and interpretations.

g. PSM Coordinator (or equivalent). A person responsible for overseeing PSM processes on site.

h. Contract Employees.

- Temporary Employees. Temporary employees who are supervised by the applicant company's employees must be selected for formal interviews to establish the quality of safety and health protection afforded them.
**Other Contract Employees.** Contract employees who work under their own company's supervision must be interviewed to determine whether they are aware of all the hazards to which they are exposed, and whether they are protected by a safety and health management system equal in quality to the applicant's. Representatives from each craft should be interviewed, where possible.

4. **Selecting Persons to be Interviewed.** The selection of persons to be interviewed must be made by the onsite evaluation team, not by the employer. The team must be flexible in choosing the most reasonable method of selection, given the characteristics of the worksite and any concerns expressed by the employer. Methods for selecting employees for interviews include:

a. Identifying the most hazardous areas, selecting employees at random from those areas, and conducting informal interviews in these areas during the walkthrough.

b. For formal interviews, the team leader may select appropriate employees at random from an employee roster or using a random selection protocol.

5. **Scheduling Formal Interviews.** Formal interviews lasting at least 15 minutes must be conducted in a manner that minimizes disruption. The number of formal interviews is up to the team leader, based upon the size and nature of the worksite and whether a new applicant or current participant is being evaluated.

6. **Use of Interview Questions.**

a. The reviewers must assure each interviewee that responses will be treated confidentially, and that no single answer they give will influence the team’s recommendation. [See Appendix F for suggested interview questions.]

b. Notes (without names or addresses) should be made of employees’ responses to interview questions and other comments. These notes later will be used to support the team’s recommendation and the Agency’s decision.

E. **Compressed Reapproval Process to Recognize Sustained Excellence (CRP).** For Star participants seeking continued participation and meeting all requirements detailed in 1. below, OSHA may choose to employ a CRP evaluation.
1. **Eligibility Requirements.** To qualify for a CRP evaluation, the participant must meet each of the following requirements and conditions:

   a. The participant is in compliance with all Assurances as described in Chapter V, Section I.B.

   b. The participant’s most recent Annual Evaluation was complete and demonstrated VPP-quality safety and health excellence.

   c. The participant must be in good standing at the Star level, that is, cannot be Star Conditional or under a Rate Reduction Plan.

   d. The participant has experienced no work-related fatalities or catastrophes since the most recent VPP onsite evaluation.

   e. The participant has not received willful, repeat, or high gravity serious citations since the most recent VPP onsite evaluation.

2. **Additional Eligibility Requirements.** To qualify for a CRP evaluation, the participant also must meet each of the following requirements and conditions. However, these involve a judgment by the VPP Manager/Coordinator that may disqualify the participant for a CRP.

   a. The participant’s most recent 3-year injury and illness rates (TCIR and DART) must meet Star requirements. However, the VPP Manager/Coordinator may determine that irregularities within rates that otherwise meet this requirement (for example, rates that trend up) warrant a comprehensive onsite evaluation.

   b. The VPP Manager/Coordinator determines that the participant’s OSHA complaint history and findings since its most recent VPP onsite evaluation do not indicate the need for a comprehensive onsite evaluation. In making this determination, the VPP Manager/Coordinator will consider the participant’s size, complexity, and work culture.

   c. The participant has notified OSHA of changes in management, ownership, or bargaining unit status in accordance with the Assurance described in Chapter V, Section I.B.1.j. The VPP Manager/Coordinator determines that the changes do not warrant a comprehensive onsite evaluation.
3. **Notification.** The onsite evaluation Team Leader will notify the participant of OSHA’s decision to perform a CRP when making arrangements to perform the evaluation. The Team Leader will also inform the participant that the CRP may be expanded into a comprehensive onsite evaluation if more information is required to make a decision regarding continued VPP participation.

4. **Scope.** In general, the conduct of a CRP evaluation will parallel the standard onsite evaluation delineated in this Section’s first paragraph and A-D, above, except:
   a. **Opening/Closing Conference.** The Opening and Closing Conferences should focus on changes since the most recent VPP onsite evaluation and the information covered in the most recent annual evaluation.
   b. **Document Review.** The review of the participant’s written safety and health management system should focus on new and changed policies and procedures and highly hazardous operations (e.g., LOTO, Confined Space, PSM).
   c. **Site Walkthrough.**
      - The CRP evaluation must include a walkthrough of the entire worksite that pays special attention to any changes in equipment, process flow, and/or operating procedures.
      - For participants who produce or use highly hazardous chemicals, as defined in OSHA’s Process Safety Management (PSM) regulations, a process safety review must be conducted by a team member qualified to evaluate PSM in accordance with VPP procedures. The findings of this review must be included on the Onsite Evaluation Worksheet.
   d. **Employee/Management Interviews.** The emphasis should be on conducting informal interviews. Formal interviews should still be conducted with key personnel (e.g., site manager, recordkeepers, union stewards) as well as some employees.

5. **Documenting the Onsite Evaluation.** Only the VPP elements identified as Minimum Requirements (MR) in Appendix D, as well as PSM, where
applicable, need to be reviewed and documented in the Onsite Evaluation Worksheet. Where appropriate, documentation should mention highly hazardous operations (e.g., LOTO, Confined Space) and new/changed elements within the participant’s safety and health management system.

6. **Switching from the CRP to the Standard Evaluation Process.** The onsite Team Leader may decide to switch from the CRP to the standard evaluation process (as described in Sections A.-D. above) if more information is needed to make a decision regarding a participant’s continued participation in VPP. The Team Leader should inform both the OSHA Regional office and the participant of this decision.

IV. **Discussion of Findings.**

A. **Daily Debriefings.** At the end of each day, the onsite evaluation team must meet privately to discuss members’ findings. The team leader is responsible for organizing the findings and conducting daily briefings with the management and employees.

B. **Uncontrolled Hazards.**

1. **Informing Management.** As hazards are found and discussed during the walkthrough, the onsite evaluation team must add them to a written list of the uncontrolled hazards identified. This list will be used when the team briefs management at the end of the day.

2. **Hazard Correction.** OSHA expects that every effort will be made by the applicant/participant to correct identified hazards before the closing conference. If hazard correction cannot be accomplished before the conclusion of the onsite evaluation, the onsite evaluation team and management must discuss and agree upon correction methods and time frames.

   a. **90-Day Items.** The applicant/participant may be given a maximum of 90 days to correct uncontrolled hazards, as long as interim protection is provided. These “90-day Items” must be corrected before the final onsite evaluation report can be processed. [See also Section XII.]

   Management must provide the team leader with a signed letter indicating how and when the correction will be made. The team leader may decide to return to the worksite to verify the correction.
b. If after repeated attempts to reach agreement, management refuses to correct a situation that endangers the safety and health of employees, that situation must be referred to the Assistant Secretary for review and enforcement action, if necessary.

C. **Deficiencies in the Safety and Health Management System.** Where the team detects deficiencies in the safety and health management system, even when physical hazards are not present, the onsite evaluation team must document these deficiencies as goals for correction, recommendations for improvement, or both.

1. **Goals.** If the system deficiency is a requirement for VPP at the Star level, it must become the subject of a goal (either Merit or 1-Year Conditional). Implementation of goals is mandatory for VPP participation. Time frames, interim protection, and methods of achieving goals must be discussed and agreed to with management.

2. **Recommendations.** If improvement of the system deficiency is not necessarily a requirement for VPP, but will improve employee safety and health at the worksite, the improvement must be a recommendation. Implementation of recommendations is encouraged but is not mandatory for VPP participation.

V. **Final Analysis of Findings.** When the documentation review, the walkthrough, and employee interviews have been completed, the onsite evaluation team must meet privately to review and summarize its findings. The team leader must facilitate the discussion and assist the team members in drawing conclusions about the quality of the applicant/participant’s safety and health management system, based on their findings.

A. In analyzing their findings, the onsite evaluation team must consider the following:

1. Observations made in the work areas.

2. The nature of injuries or illnesses recorded on the Summary of Occupational Injuries and Illnesses and reflected in the First Report of Injury data.

3. The degree to which implementation of written programs has been verified.

4. Responses to formal and informal interviews. The reviewer must look for an overall pattern in the perceptions of managers, supervisors, employees, and contract employees regarding worksite conditions and the safety and health management system. Employee responses that are supported by information obtained by document review, observation, or other employee interviews should carry the most weight.
5. When the applicant or participant is very small or in a low-hazard industry, some of the requirements for formality may be relaxed (for example, informal programs or scaled-down documentation), providing that a strong case can be made to support the effectiveness of the safety and health management system.

B. If the team’s analysis of findings fails to produce consensus on specific issues or the overall recommendation, the team leader should contact Regional management for guidance. This should occur before holding the closing conference and sharing the team findings and recommendation with the applicant/participant.

VI. **Recommendations for First-time Participation.** In the final private meeting prior to the closing conference, the onsite evaluation team must reach consensus on their recommendation for program participation. If they cannot reach consensus, they should consult with the Regional or National Office or both.

A. **General Applicants.** The onsite evaluation team must decide among the following recommendations:

1. **Star.** When the onsite evaluation team finds that an applicant’s safety and health management system meets all VPP requirements at Star quality, a recommendation for participation in the Star Program must be made.

2. **Merit.**

   a. When the onsite evaluation team finds that an applicant’s safety and health management system falls short of Star quality in one or more elements requiring long-term goals for correction, but does meet the requirements for Merit participation [See Chapter 3.III.], a recommendation for one 3-year (maximum) term of Merit Program participation must be made.

   b. **Merit Goals.** The team leader, with input from the team members and applicant/participant representatives, must develop Merit goals that relate to deficiencies in Star quality discussed in the onsite evaluation report. [See Chapter 3.III.C.]

3. **Withdrawal of Application.** The onsite evaluation team must recommend withdrawal of the application if the applicant does not meet the requirements for either the Star or Merit Programs.
B. Star Demonstration Program Applicants. The onsite evaluation team must determine whether employees are being protected by a Star quality program. If they are not receiving such protection, the onsite evaluation team must recommend withdrawal of the application. If employees are receiving Star quality protection, the team must decide among the following alternatives:

1. The applicant has met all the requirements for the Star Demonstration Program and, where applicable, the special aspects of the applicant’s safety and health management system are suitable for incorporation into Star requirements, if they prove successful. The team must recommend approval to the Star Demonstration Program.

2. The applicant has met all the requirements for the Star Program, and the onsite evaluation team has determined that no additional requirements are needed for this industry, part of industry, or operation. The team must recommend approval to the Star Program without further testing or demonstration.

3. The applicant needs to make some changes for its participation in the Star Demonstration Program to be useful.

VII. Recommendations for Participants. The onsite evaluation team must decide among the following recommendations:

A. Star Participants.

1. Recommendation for Star Reapproval. When the onsite evaluation team has judged that the participant’s safety and health management system continues to meet all Star Program requirements, the team must recommend reapproval to the Star Program upon satisfactory completion of any 90-day items.

2. Recommendation for 1-Year Conditional Participation in the Star Program. The onsite evaluation team must recommend conditional Star Program participation for 1 year (dating from the end of the 90-day deferral period) when the participant meets the conditions of both a. and b., below:

   a. The participant’s safety and health management system has fallen below Star quality in one or more safety and health management system requirements and those requirements can be satisfactorily met during a 90-day deferral of decision.
b. **1-Year Conditional Goals.** The team leader, with input from the team members and participant representatives, must establish goals to be accomplished in order for the participant to return to full Star status. The 1-Year Conditional goals must meet the same criteria listed for Merit goals. [See VII.A.2., above.]

3. **3-year Rates Above the National Average.**

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<tr>
<th>If:</th>
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<tr>
<td>The participant’s 3-year rates are above the national average, and an onsite evaluation has been conducted.</td>
<td>The participant must be placed on 1-Year Conditional status. The RA may also allow a 2-year rate reduction plan to provide the participant more time to reduce its rates to below the national average.</td>
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<tr>
<td>The participant’s 3-year rates are above the national average, and an onsite evaluation has not been conducted.</td>
<td>The participant must be placed on a 2-year rate reduction plan approved by the RA.</td>
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In both cases, OSHA and the participant must determine the safety and health management system deficiencies related to the high rates. The 1-Year Conditional goals, rate reduction plans, or both must address the deficiencies, correction methods, and time frames. Quarterly reports to OSHA are due during the year.

4. **Withdrawal.** The onsite evaluation team must recommend withdrawal from VPP if a Star participant is deficient in one or more requirements and any of the following apply:

a. Agreement cannot be reached on correction.

b. Correction cannot be accomplished within a 90-day deferral of decision.

c. The participant has not made good faith effort on agreed-upon corrections.

B. **1-Year Conditional Star Participants.**
1. **Lifting of 1-Year Conditional Status.** If all 1-Year Conditional goals have been met and the safety and health management system has been restored to Star quality, then the onsite evaluation team must recommend lifting the 1-Year Conditional status and returning the participant to full Star Program participation.

2. **Withdrawal.** If all 1-Year Conditional goals have not been met, the onsite evaluation team must recommend that the participant withdraw from the program. A former Star participant cannot be returned to the Merit Program.

C. **Merit Participants.**

1. **Recommending Approval to the Star Program.** When the onsite evaluation team has judged that the Merit participant has met all agreed-upon goals, including Star requirements, the team must recommend approval to the Star Program. This may occur at the regularly scheduled onsite evaluation or earlier if the participant requests that OSHA return ahead of schedule.

2. **Merit Reapproval.**

   a. **When the First 3-Year Merit Term Has Not Expired.** If a Merit participant is progressing satisfactorily, and the participant has agreed with OSHA on resolution of any problems and is acting in good faith, then the team must recommend reapproval at the Merit level. Because the first term has not expired, the Regional Administrator can approve the onsite evaluation team’s recommendation for reapproval.

   b. **When the First 3-Year Merit Term Has Expired.** If, due to unanticipated unique circumstances, a Merit participant has not met all agreed-upon goals or Star requirements, then the onsite evaluation team may recommend a second term in Merit, with new goals. Second terms in Merit are very rare and must be approved by the Assistant Secretary.

3. **Automatic Termination.** Automatic termination must occur if a Merit participant has not met all agreed-upon goals, including Star requirements, and one of the following situations exists:

   a. The first 3-year term has expired and there are no extenuating circumstances.

   b. The participant has already had a second Merit approval.
c. The first 3-year term has not expired, but the participant either is not making a good faith effort to achieve goals, or has serious problems and has either refused or failed to resolve them in a reasonable period of time.

D. Star Demonstration Programs. The onsite evaluation team must assess the effectiveness of the alternate criteria being used, in addition to the criteria used to measure Star participation.

1. When the onsite evaluation team judges that the participant’s safety and health management system continues to meet all requirements at Star level, the team must recommend continuation as a Star Demonstration Program participant upon satisfactory completion of any 90-day items.

2. If the participant has failed to maintain Star level, the team must recommend that the participant be asked to withdraw.

3. The Regional Administrator must review the onsite evaluation report and recommend to the Assistant Secretary one of the following:

   a. Reapprove participation in the Star Demonstration Program;

   b. Recommend changes to the Star Program to include the alternate measures being demonstrated; or

   c. Terminate the Star Demonstration Program due to lack of tangible results.

VIII. Closing Conference. The findings of the onsite evaluation team, including its recommendation to the Regional Administrator, must be presented to management and appropriate employee representatives before the team leaves the worksite. During the closing conference, the team leader must review:

   A. Findings. Review the team’s findings, addressing each of the major VPP elements as outlined in Chapter 3. Also review the injury and illness rates and how they compare to the industry national average.

   B. The Onsite Evaluation Team’s Recommendation to the Regional Administrator. Discuss and support the onsite evaluation team’s recommendation to the Regional Administrator so that the applicant or participant has a clear idea of how it measures up to the requirements of VPP.
C. **90-day Items.** Review all uncorrected hazards, expected correction methods, and time frames.

D. **Goals.** Review 1-Year Conditional or Merit goals and time frames for correction.

E. **Recommendations.** Review any recommendations made by the onsite evaluation team for improvement of the applicant/participant’s safety and health management system.

F. **Responsibilities.** Remind the applicant/participant of its responsibilities under Chapter 5, Assurances, and Chapter 7, Withdrawal Process.

**IX. The Onsite Evaluation Report.**

A. **Purpose of the Report.** The onsite evaluation team must write a report documenting the onsite evaluation to substantiate the team’s recommendation to the Regional Administrator and Assistant Secretary for approval or reapproval of the applicant/participant into VPP. If the applicant/participant is approved or reapproved, the report and worksheet will become an official record in the public file along with the application, and will provide baseline data for future evaluation purposes. The report must include the following information:

1. Verification of the application information submitted by an applicant.
2. Documentation of the qualifications for participation.

B. **Writing the Onsite Evaluation Report.** All attempts must be made to complete a draft report before leaving the worksite. The draft report must reflect the consensus of the onsite evaluation team. Each team member must complete the sections of the onsite evaluation report assigned by the team leader, following the format in Appendix D.

1. **Review of the Draft Onsite Evaluation Report.** Once the draft is complete, the team must review it and make any needed changes.
2. **Presentation of the Draft Onsite Evaluation Report.** If the draft onsite evaluation report is completed onsite, the draft must be presented at the closing conference. If the draft report is not presented at the time of the closing conference, the team leader must advise the applicant approximately when the draft report will be available for review.
3. **Applicant/Participant’s Comments and Revised Draft Report.** After the draft report is presented, the team leader must allow the applicant or participant 30 days to review and comment on the draft report. A revised version of the onsite evaluation report must be prepared by the team leader following receipt of the applicant/participant’s comments.

C. **Star Demonstration Program Reports.** Onsite evaluation reports of Star Demonstration Program applicants/participants must describe in detail the departures from Star requirements and the rationale for their use, and explain how the alternatives provide Star quality employee protection.

D. **Completing the Final Onsite Evaluation Report.** The team leader must compile the final report and submit it to the VPP Manager and/or Regional Administrator for processing.

E. **Deferral of Final Onsite Evaluation Report Due to Uncorrected Hazards.** The final report may be deferred from submission to the Regional VPP Manager, Regional Administrator, or both if uncorrected hazards are still present at the worksite after the closing conference or after the team leaves the worksite.

F. **Deferral Period.** The final report may be deferred for up to 90 days from the closing conference or until the applicant/participant has corrected all uncontrolled hazards identified by the onsite evaluation team, whichever occurs first.

X. **Correction of Remaining Hazards.**

A. **Hazard Correction Plan.** Within a week of the closing conference, the applicant/participant must document in a letter to the VPP Manager or his/her designee any hazard correction plans (this can be the list of 90-day items) and dates that have been agreed to. This letter will be kept on file until a correction letter [see XII.A.] is received.

B. **Verification of Hazard Correction.**

1. When the applicant/participant has corrected the hazards, it must send a signed letter to the VPP Manager or his/her designee indicating how and when the corrections were made.

2. The team leader, VPP Manager, or Regional Administrator may decide to conduct a return visit to verify the corrections. The findings of this visit must be written in a correction letter and kept on file. The correction letter may be made available to a onsite evaluation team at a later date.
C. Finalizing the Onsite Evaluation Report. When hazard correction has been verified, the team leader must remove any lists of uncorrected hazards from the final report before submitting the report to the Regional Administrator.

D. Failure to Correct Hazards by End of Deferral Period. If the deferral period has expired, the applicant/participant has not corrected the hazards, and the Regional Administrator has made every attempt to resolve the problem in a manner consistent with the cooperative spirit of the VPP, then:

1. The VPP Manager or Regional Administrator must inform the applicant or participant that the matter is being referred to the Assistant Secretary. The referral, detailing the hazard(s) and the cooperative efforts made by the Region to achieve resolution, must be sent to DCSP for concurrence.

2. The Assistant Secretary must review the situation and make a decision regarding enforcement action. If the Assistant Secretary decides that all cooperative efforts have failed and that OSHA must ensure hazard correction, he/she must send a memorandum to the Regional Administrator instructing the Regional Administrator to inform the appropriate Area Office to take enforcement action. [See Chapter 8.]

3. For withdrawal, termination, and reapplication procedures, refer to Chapter 7.IX.
Chapter VII
Participation Decisions and Management

I. Report Processing. After an onsite evaluation has been conducted and the onsite evaluation report has been completed, the VPP Manager must coordinate clearance of the report through the appropriate Regional Office.

A Final Decision on Participation. All decisions are based on the onsite evaluation, final evaluation report, and recommendations.

1. In each of the following cases, the Regional Administrator must recommend an action to the Assistant Secretary, and the Assistant Secretary must decide on the course of action regarding:
   a. Approval of new participants.
   b. Approval from the Merit Program to the Star Program.
   c. Approval of Star Demonstration Programs and participants.
   d. Lifting of a Star participant’s 1-Year Conditional status.
   e. Approving a second term to Merit participants.
   f. Withdrawal or termination of participation.

2. In each of the following cases the Regional Administrator has responsibility to:
   a. Reapprove (or not approve) participation in the Star program.
   b. Reapprove (or not approve) participation in the Merit Program if the first Merit term has not expired.
   c. Place a Star participant on 1-Year Conditional status.

B. Transmittal to DCSP. No later than 30 working days following the completion of the final onsite evaluation report, the Regional Administrator must transmit the following documents to the Director of Cooperative and State Programs for concurrence. See Appendix D for document templates.
1. A hardcopy or faxed version of a transmittal memo from the Regional Administrator to the Director, DCSP, clearly stating the Regional Administrator’s recommendation or decision for approval or reapproval. It must contain:

a. Noteworthy aspects of the applicant/participant’s safety and health management system that the DCSP can highlight for the Assistant Secretary.

b. The name, title, and address of the person to whom the Assistant Secretary’s approval/reapproval letter should be addressed.

c. The name of the designated contact person, if this person is not the VPP Manager.

d. Where there are collective bargaining agents at the worksite, the names and addresses of these agents.

e. In the case of a reapproval, the approval letter that was sent from the Regional Administrator to the participant, following the format of the Assistant Secretary’s letter.

2. An electronic version of the final onsite evaluation report, including the VPP report approval request, site report, site worksheet, site information sheet, and team composition report.

C. DCSP Review.

1. Pertinent participant information must be entered into the National VPP Automated Data System (VADS).

2. A technical and editorial review must be conducted by experienced DCSP staff.

3. The VPP Manager must be notified if revisions or additions are needed.

II. Preparing a Recommendation Package.

DCSP must prepare and submit a recommendation to the Assistant Secretary within 10 working days of receipt of the onsite evaluation report and signed Regional Administrator’s memorandum. It must contain the following documents:
A. A cover memorandum, drafted by the DCSP staff, that briefly sketches the applicant company's background and provides injury and illness rates, onsite evaluation team findings and recommendations, DCSP concurrence or nonconcurrence, and a request for action on the report recommendation.

B. An onsite evaluation report that recommends a new approval or lifting of a participant’s 1-Year Conditional status. (Onsite evaluation reports that recommend a participant’s reapproval within a program are sent to the participant by the Regional Administrator with his/her reapproval letter and, therefore, are not sent to the participant again when the Assistant Secretary recognizes the reapproval.)

C. A letter drafted by the DCSP staff, from the Assistant Secretary to the company official listed on the RA memo, notifying the company of OSHA’s decision for VPP participation. For applicants/participants with collective bargaining agents, copies of the letter must be prepared for these officials as listed on the Regional Administrator memorandum. The letter must be one of the following two types:

1. Approval Letter. For initial approvals, approval from the Merit Program to the Star Program, and lifting of 1-Year Conditional status, the letter must state that the Assistant Secretary concurs with the Regional Administrator’s recommendations for participation, and is pleased to either approve the applicant into the VPP, approve the participant into Star, or return the participant to full Star status.

2. Congratulatory Letter. For reapproval, the letter must state that the Assistant Secretary is pleased to learn that the Regional Administrator has reapproved participation in the VPP.

III. Final Onsite Evaluation Report and Participation Date. When the final onsite evaluation report is sent to the applicant/participant with the Assistant Secretary’s letter announcing the participation decision, approval becomes final.

A. For new approvals, approvals from the Merit Program to the Star Program, lifting of a Star participant’s 1-Year Conditional status, or the approval of a second Merit term, the effective date is the date the Assistant Secretary’s approval letter is signed.

B. For reapprovals, or placing a Star participant in 1-Year Conditional Star status, the effective date is the date the Regional Administrator’s reapproval letter is signed.

IV. Notification.
A. When the Assistant Secretary’s approval or congratulatory letter is signed, DCSP must immediately:

1. Mail the letter and the final onsite evaluation report to the participant. This mailing constitutes official notification that the participant has been approved for participation in VPP.

2. Notify the VPP Manager.

B. Upon learning from DCSP of the approval of an applicant/participant, the VPP Manager must:

1. As a courtesy, inform the company of the approval and its effective date.

2. Inform the applicant/participant that an official letter of approval or congratulations will be sent by mail immediately, and that the award plaque and flag will be available in approximately 1 month.

3. Inform the applicant/participant that an award ceremony may be held and that OSHA officials may be requested to make a formal presentation.

V. Award Plaques and Flags. OSHA awards newly approved participants a plaque and flag. Reapproved Star and Star Demonstration participants who have not already received the plaque redesigned in 2007 (and containing reapproval plates) are awarded a plaque.

A. Plaques. It is the VPP Manager’s responsibility to arrange for the ordering and awarding of plaques.

1. OSHA will present to all new Merit participants a personalized plaque measuring 12” x 10”. In the event a Merit participant receives approval for a second Merit term, the participant may choose to display the Assistant Secretary’s congratulatory letter.

2. OSHA will present to all new Star, Star Demonstration, and Mobile Workforce Demonstration participants a personalized plaque measuring 15” x 12” that recognizes the initial achievement on a main plate, and also includes 10 small screw-on plates to commemorate subsequent reapprovals. Following each Star, Star Demonstration, or Mobile Workforce Demonstration reapproval, the VPP Manager or Coordinator should inform the participant that it is entitled to engrave the reapproval date onto one of the small plates. No other information should be included on the reapproval plates. Engraving the small plates is the responsibility of the participant.
3. Upon reapproval, OSHA will present the 15” x 12” Star, Star Demonstration, or Mobile Workforce Demonstration plaque with reapproval plates to any participant who has not received this plaque previously. This provision is expected to be applicable through calendar year 2012, by which time all active Star, Star Demonstration, and Mobile Workforce Demonstration participants should have received the 2007 version of the VPP plaque.

B. Flags. OSHA awards participants newly approved to a program a flag appropriate to that program. The VPP Manager must maintain an inventory of flags.

VI. Approval Ceremonies. Upon notification of approval, a site representative should contact the VPP Manager to schedule the ceremony.

A. The Regional Administrator or the highest level Regional representative available must make the presentation. The Area Office Director may represent the Regional Administrator.

B. The participant may send an invitation to the appropriate Area Director, any Area Office personnel who were responsible for recruiting the participant for VPP, as well as higher level OSHA officials. The onsite team may also be included on the invitation list. In addition, the VPP Manager should suggest other potential invitees such as local political officials, other area companies that might be potential VPP candidates, and local VPP liaison. If a participant requests a National Office level OSHA representative or a specific official, the VPP Manager must relay that request to the DCSP in writing (e-mail is acceptable).

C. The VPP participant may consult the Regional VPP staff for assistance with any press releases, and the VPP Manager should give the company names and telephone numbers of other VPP participants that have had good media coverage.

D. The Regions are strongly encouraged to issue a press release.

VII. Withdrawal. Participants may withdraw of their own accord or may be asked by OSHA to withdraw from VPP. In either case, the VPP Manager must determine the cause of withdrawal and notify the Regional Administrator and DCSP of the reason and date of withdrawal.

A. Participant Decides to Withdraw. Any participant may choose to withdraw at any time after approval, following the procedures in C. below.

B. OSHA Requests Withdrawal.
1. OSHA must request that a participant withdraw from VPP if the Agency determines that the participant is no longer meeting the requirements for VPP participation.

2. When a Participant’s Location Changes.

   a. If 75 percent or more of the employees remain with the employer, and the Regional Office jurisdiction remains the same, then the participant can maintain its VPP status, but must:
      - Submit a new letter of management commitment.
      - Submit a new self-evaluation including a comprehensive baseline hazard analysis
      - Receive a satisfactory OSHA onsite evaluation within 12 months (6 months is preferred).

   b. If fewer than 75 percent of the employees remain with the employer and/or the new location is under a different Regional Office jurisdiction, then the participant must withdraw and reapply.

C. Withdrawal Process. The participant must write a letter addressed to the Regional Administrator and to the attention of the VPP Manager, stating that it is withdrawing from the program, with the reasons for withdrawal, effective on the date of the letter.

   1. The Regional Administrator must send the participant a letter acknowledging the withdrawal, with a copy to the Director of Cooperative and State Programs. The letter must also state:
      a. That the VPP flag and plaque are invalid and must no longer be used.
      b. That the company’s application, onsite evaluation reports, approval letters, and annual evaluations will be removed from the public file.
      c. That the establishment must be returned to the programmed inspection list, if applicable, at the time of the next inspection cycle.
      d. That OSHA will consider a reapplication to VPP if and when eligibility requirements are met. [See IX., below.]
D. Notification of Area Office. If applicable, the Regional Administrator must notify the appropriate Area Director that the withdrawn participant is no longer participating in the VPP and must be returned to the programmed inspection list for the next inspection cycle.

VIII. Termination. OSHA may terminate a participant from the VPP for failure to maintain the requirements of the program. Except where employees appear to be at serious risk, termination by OSHA must occur only when all efforts for assistance have been exhausted. An example is when OSHA has identified one or more serious problems and recommended technologically feasible solutions, but the participant has refused.

Termination may also occur when evidence exists that the trust and cooperation among labor, management, and OSHA, upon which approval was based, no longer exist, or when OSHA requests a participant to withdraw and it does not.

Other possible reasons for VPP participation ending include: a Merit term of approval has expired without a recommendation or approval for a second term; construction work has been completed; or resident contractor participation is no longer possible because the host no longer participates in VPP. If a resident contractor leaves the hosting VPP participant’s worksite, the resident contractor will no longer be in the VPP.

OSHA must handle the termination of a VPP participant as follows:

A. Notice of Intent to Terminate. The Regional Administrator, through the VPP Manager, must notify DCSP, the participant, and union representative(s) in writing of OSHA’s intent to terminate participation in the VPP.

B. Appeal Process. The participant has 30 days from the receipt of the notice to appeal the intent to terminate. It must provide to the Assistant Secretary, through the Regional Administrator, in writing, the reasons why it should not be removed from the VPP. Upon review of the participant’s justifications for continued participation, the Assistant Secretary in consultation with the Regional Administrator and DCSP must make the final decision.

1. If the Assistant Secretary decides to terminate:

   a. Termination Package. The Regional Administrator through the VPP Manager must send all of the following to DCSP for concurrence:

      • A memorandum explaining the reason(s) for termination of participation.
Any documents supporting the decision that have not already been reviewed by DCSP staff.

b. DCSP Concurrence. The Director of Cooperative and State Programs and the VPP staff must review the package and, after concurrence, transmit it to the Assistant Secretary along with a letter to the participant for the Assistant Secretary's signature. The letter must inform the participant of the termination decision and its consequences [as per VII.C.1., above] and the requirements for reinstatement.

c. Notification of Termination. Once the Assistant Secretary has signed the termination letter:

- DCSP must notify the VPP Manager immediately by telephone.
- DCSP must notify the Regional Administrator by memorandum that the former participant must be returned to the programmed inspection list, if applicable, 30 days following the date of the termination letter.
- The Regional Administrator must notify the Area Office immediately.

2. If the Assistant Secretary finds the participant’s appeal valid, the participant may continue in VPP.

IX. Reinstatement. Reinstatement requires reapplication. See table below for time frames.

<table>
<thead>
<tr>
<th>If: An applicant withdraws its application or a participant withdraws from the program of its own accord.</th>
<th>And: OSHA Inspection History conditions and Assurances are met [See Chapter 5].</th>
<th>Then: Reapplication can occur at any time.</th>
</tr>
</thead>
<tbody>
<tr>
<td>An applicant withdraws its application or a participant withdraws from the program due to an OSHA enforcement inspection.</td>
<td></td>
<td>Reapplication can occur when all enforcement activity is closed.</td>
</tr>
<tr>
<td>An applicant withdraws its application or a participant withdraws from the program due to withdrawal of union support.</td>
<td></td>
<td>Reapplication can occur when a new letter of union support is received by the Regional VPP Manager.</td>
</tr>
<tr>
<td>OSHA terminates a participant.</td>
<td>N/A</td>
<td>The site must wait 3 years to reapply.</td>
</tr>
</tbody>
</table>
Chapter VIII

Enforcement Activity at VPP Worksites

I. Additional VPP Assessment. This chapter describes the procedures followed by OSHA in the event of enforcement activity at a VPP applicant's or participant's worksite. Two types of enforcement activity trigger additional VPP assessment:

A. Unprogrammed OSHA Inspections. Unprogrammed inspections occur in response to all referrals, formal complaints, fatalities, and catastrophes.

B. Other Accidents or Events. Other accidents or events, whether or not injuries or illnesses have occurred and whether or not normal enforcement procedures apply to the situation, may trigger reassessment. OSHA may reassess the participant's safety and health management system if there is reason to believe that a serious deficiency exists that would have an impact on the participant's continued qualification for VPP.

II. OSHA Personnel. As a general rule, a Compliance Officer who served as a VPP onsite team member may not conduct an enforcement inspection at that VPP participant for the following 2 years or until the participant is no longer in VPP, whichever occurs first. The Regional Administrator, on a case-by-case basis, may choose to override this 2-year requirement.

III. VPP Activity.

A. If the event that triggers enforcement activity occurs during the time between application and onsite evaluation, the onsite evaluation must be postponed until the enforcement case is closed. If there already is an open enforcement case at a worksite when the Area Director is notified by a VPP Manager of a pending onsite evaluation, the Area Director must inform the VPP Manager of the enforcement activity so that the VPP evaluation can be postponed.

B. If the event that triggers enforcement activity occurs during the time between the scheduling and the beginning of an onsite evaluation, the VPP onsite visit must be postponed until the enforcement case is closed.

C. If the event that triggers enforcement activity occurs during the VPP onsite evaluation, VPP onsite team members must not switch to an enforcement capacity. They must contact the local Area Office, and the VPP onsite must cease until the enforcement case is closed.
IV. Initiation of Enforcement Activity.

A. When an Area Office receives a complaint, a referral other than from the onsite team, or is notified of a fatality, catastrophe, or other event requiring enforcement occurring at a VPP worksite, the Area Director must initiate an inspection following normal OSHA enforcement procedures.

B. When an Area Office receives a referral from the VPP onsite team, the Area Director must notify the participant and the Assistant Secretary. Enforcement action may be initiated only after the Assistant Secretary approves such action.

V. Notification.

A. The Area Office must immediately notify the VPP Manager of any fatalities, catastrophes or other accidents, or incidents requiring enforcement that occur at a VPP worksite, as well as when a referral or complaint is received from a VPP worksite, including informal complaints that receive responses by letter.

B. If the VPP Manager is the first person to be notified by the participant of an event requiring enforcement, the VPP Manager must instruct the participant to contact the appropriate Area and/or Regional office.

C. Fatalities, catastrophes, and accidents or incidents involving significant publicity: If the event is catastrophic in nature, involves a fatality or multiple fatalities, and/or is highly visible with press coverage, then it is appropriate to contact the Director of Cooperative and State Programs. Press inquiries must be referred to the Regional Administrator and/or designated OSHA spokesperson.

1. Upon being informed of the event, the VPP Manager must immediately provide a description of the event, by e-mail and/or telephone, to all of the following:

   a. The Office of the Assistant Secretary for OSHA.
   b. The Regional Administrator.
   c. Director of Cooperative and State Programs (DCSP).
   d. Director of the Office of Partnerships and Recognition within DCSP.
2. The description of the fatality, catastrophe, or other significant event must include the following information:

   a. Participant name.
   b. Current VPP status.
   c. Number of years in VPP.
   d. Last evaluation date.
   e. Last approval date.
   f. Date of event.
   g. Involved parties (employee, contractor, or both).
   h. Nature of event if known.
   i. IMIS inspection number.

3. As soon as it is available, the VPP Manager must fax a copy of the Fatalities/Catastrophe (FATCAT) Report to DCSP, attention Director, Office of Partnerships and Recognition.

4. As pertinent information relating to the event and its cause(s) becomes available, the VPP Manager must update the Office of the Assistant Secretary; the Director, Cooperative and State Programs; and the Director, Office of Partnerships and Recognition.

VI. Inspection Results. When enforcement activity is complete:

A. The Area Office must send the VPP Manager a copy of all reports resulting from enforcement activity.

B. The VPP Manager must review any reports of investigations triggered by referrals, formal or non-formal complaints, or letters written by the Area Office concerning conditions at the VPP worksite, fatalities/catastrophes, and other accidents or incidents requiring enforcement or involving publicity.

C. The VPP Manager and Regional Administrator must assess whether deficiencies in the participant’s safety and health management system led to the event and, if so, must use their professional judgment and discretion to determine one of the following courses of action:
1. In cases where there are no obvious systemic errors in the participant’s safety and health management system, the participant was cooperative with the investigation, OSHA issued no willful violations, all cited hazards were abated, and VPP elements continue to be in place, a phone call with the participant is sufficient to:

   a. Obtain assurances that management and unions (if applicable) remain committed to VPP.

   b. Note any improvements in the participant’s systems, policies, procedures, and/or hazard controls.

   c. Determine whether the participant remains qualified for VPP participation.

2. In cases where there were minor systemic errors/failures in the participant’s safety and health management system or incorrect/inappropriate hazard control(s) selected, and where there may or may not have been fatalities, the participant was cooperative with the investigation, OSHA issued no willful violations, and all cited hazards were abated, but where VPP elements may not be in place, the VPP Manager must visit the participant to:

   a. Review conditions pertaining to the event.

   b. Obtain assurances that management and unions (if applicable) remain committed to VPP.

   c. Determine if the participant remains qualified for VPP participation.

3. In cases where the enforcement inspection leads to concerns about major failures in the participant’s safety and health management system, or a fatality or multiple fatalities occurred indicating that VPP elements are not in place, or the participant is due for reapproval, an onsite evaluation must be conducted to:

   a. Review all safety and health management system elements.

   b. Obtain assurances that management and unions (if applicable) remain committed to VPP.
c. Determine if the participant remains qualified for VPP participation.

4. In cases where willful violations were issued and upheld, the participant’s participation will not automatically be terminated; however, the VPP Manager will closely review the case. If it is obvious that the participant no longer meets the requirements of VPP, then an onsite is not necessary, and procedures for withdrawal or termination outlined in Chapter 7 apply.

VII. Documentation and Submission of Assessment. The VPP Manager must prepare a report of findings as follows:

A. If a telephone interview or onsite visit was conducted in the case of VI.C.1. or 2. respectively, above, the VPP Manager must prepare and submit a simplified report to the RA detailing the findings and recommendation for participation, withdrawal, or termination.

B. If an onsite evaluation was conducted in the case of VI.C.3., above:

1. The VPP Manager must prepare and submit a full onsite evaluation report to the RA detailing the findings and recommendation for participation, withdrawal, or termination.

2. The VPP Manager must also submit a Significant Event Report (see Appendix B) to DCSP within 30 calendar days from the completion of the visit or a 90-day items period. (If a FATCAT report has been submitted, attach it and complete non-duplicative entries on Significant Event Report.)

VIII. Decision to Continue Participation or Recommend Withdrawal or Termination.

A. In the case of VI.C.1 or 2, above, the Regional Administrator may approve the participant’s continued participation. The RA must forward a memorandum to the Director of Cooperative and State Programs describing his/her decision. No further action is necessary. If the RA decides that termination is required, the procedures in Chapter 7 must be followed.

B. In the case of VI.C.3., above, the Regional Administrator must make a recommendation regarding the participant’s continued participation. The RA must forward a memorandum describing his/her recommendation to DCSP. DCSP must forward the Regional Administrator’s memorandum to the Assistant Secretary.
1. If the Assistant Secretary decides that termination is required, the procedures in Chapter 7 must be followed.

2. If the Assistant Secretary decides that the participant may continue its participation, the RA will be notified. After being notified of the Assistant Secretary’s decision, the RA must:
   a. Notify the participant of the Assistant Secretary’s decision, and no further action is necessary, or
   b. Reapprove the participant according to procedures in Chapter 7, if the purpose of the onsite was also to determine reapproval.

IX. Confidentiality. Information gathered during the VPP assessment cannot be used by the Area Office for any enforcement activity at the worksite unless the worksite has refused to correct hazards found by the VPP team, the team has recommended enforcement action, and the Assistant Secretary has initiated such action.
Appendix A
Instructions for Calculating Injury and Illness Rates

I. Definitions.

A. Total Case Incidence Rate (TCIR). Total number of recordable injuries and illness cases per 100 full-time employees that an applicant/participant has experienced in a given time frame.

B. Days Away, Restricted, and/or Transferred (DART) Case Incidence Rate. Number of recordable injuries and illness cases per 100 full-time employees resulting in days away from work, restricted work activity, and/or job transfer that an applicant/participant has experienced in a given time frame.

II. Review of Rates. New applicants and current participants are required to calculate annual rates and 3-year rates for the last 3 complete calendar years. Use information recorded in the OSHA 300 log.

VPP onsite teams will calculate the applicant/participant’s rates for the previous 3 full calendar years and year-to-date. When reviewing participants, the VPP onsite teams also will review the rates of each applicable contractor.

III. Contractor Rates.

A. Copies of each applicable contractor’s hours worked and injury and illness data pertaining to the applicant/participant must be maintained by management. (See glossary for definition of applicable contractor).

B. Injury and illness data for temporary and contractor employees who are regularly intermingled with the owner’s employees and under direct supervision by management must be included in the applicant/participant’s rates.

IV. Construction Sites. Construction applicants must provide TCIR and DART rates. All employees, including all subcontractors who worked at the worksite, must be included in the calculation. The rates must reflect experience from time of worksite inception until time of application, but must be at least 12 months. The applicant/participant’s NAICS code is determined by the type of construction project, not individual trades.

V. Rate Calculations.

A. Annual rates are calculated by the formula (N/EH) x 200,000 where:

\[ N = \text{Sum of the number of recordable injuries and illnesses in the year} \]
For the TCIR use the total number of injuries plus illnesses.

For the DART rate use injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer.

\[ EH = \text{total number of hours worked by all employees in the year, including temporary employees and contractors directly supervised by applicant/participant.} \]

200,000 = equivalent of 100 full-time employees working 40 hours per week, 50 weeks per year.

B. 3-Year TCIR Calculation. To calculate 3-year TCIR, add the number of all recordable injuries and illnesses for the past 3 years and divide by total hours worked for those years. Multiply the result by 200,000.

\[ \left[ (\#\text{inj} + \#\text{ill}) + (\#\text{inj} + \#\text{ill}) + (\#\text{inj} + \#\text{ill}) \right] \times 200,000 \]

\[ \frac{\text{hours} + \text{hours} + \text{hours}}{} \]

C. 3-year DART Rate Calculation. To calculate 3-year DART rates, use the same formula as in B. above, except add the number of all recordable injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer for the past 3 years.

\[ \left[ (\#\text{DART inj} + \text{ill}) + (\#\text{DART inj} + \text{ill}) + (\#\text{DART inj} + \text{ill}) \right] \times 200,000 \]

\[ \frac{\text{hours} + \text{hours} + \text{hours}}{} \]

D. 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.

VI. Comparison to National Averages. Compare the 3-year TCIR and DART rate to any one of the three most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by the Bureau of Labor Statistics (BLS).

A. These national averages, currently broken down by NAICS code, are found in the Table of Incidence Rates of Non-fatal Occupational Injuries and Illnesses by Industry of the BLS Occupational Injuries and Illnesses Bulletin that BLS publishes each year.

B. To calculate the percent above or below the national average, do the following:

\[ \frac{\text{Site rate} - \text{BLS rate}}{\text{BLS rate}} \times 100 \]
VII. Alternative Calculation for Small Worksites.

A. An alternative rate calculation is available to worksites where a single or relatively small number of incidences would cause the worksite’s disqualification when using the normal 3-year rate calculation.

B. If the following criteria are met, the TCIR and DART rate calculations can be based on the best 3 out of the most recent 4 complete calendar years’ injury and illness incidence experience.

   1. Using the most recent calendar year’s hours worked, calculate a hypothetical TCIR assuming that the employer had two cases for the year.

   2. Compare the hypothetical rate to the 3 most recently published years of BLS combined injury/illness Total Case Incidence Rates for the industry.

   3. If the hypothetical rate is equal to or higher than the BLS rate in at least 1 of the 3 years, the employer qualifies for the alternative rate calculation method.

The following tables may be used in calculating rates and comparing them to the national averages. A separate Table 2 should be used for each applicable contractor, and the information should pertain to the worksite experience only, not the contractor’s entire company.
<table>
<thead>
<tr>
<th>Year</th>
<th>Total Work Hours</th>
<th>Total Number of Injuries and Illnesses</th>
<th>Total Number of Injury &amp; Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Years Ago (annual)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Years Ago (annual)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Last Year (annual)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3-Year Totals &amp; Rates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BLS Rates for NAICS code</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 1 (most recently published)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 2 (prior to Year 1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 3 (prior to Year 2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent above or below BLS year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>National Average (select the most advantageous single year; compare both your 3-year rates with that year’s average rates)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year</td>
<td>Total Work Hours</td>
<td>Total Number of Injuries and Illnesses</td>
<td>Total Number of Injury &amp; Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer</td>
</tr>
<tr>
<td>-------------------</td>
<td>------------------</td>
<td>----------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>3 Years Ago</td>
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<tr>
<td>2 Years Ago</td>
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<td>Last Year</td>
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</table>
Appendix B
Regional Activity Reports

I. VPP Program Data.

A. Data Submitted to the National Office.

1. As part of the ongoing process of maintaining current statistics and data on all approved VPP participants, VPP Managers must ensure that the following information is received in the National Office monthly. On the last business day of each month, report forms and other updates must be sent to the National Office via fax or e-mail to the attention of the Director, Office of Partnerships and Recognition.

   a. VPP Activity and Report (VPP Log) [See Attachment 1]
   c. Significant Incident Report [See Attachment 2]

2. VPP Managers must ensure that they complete and send the annual data spreadsheet via e-mail to the National Office by March 30 of each year.

II. Voluntary Protection Programs Automated Database System (VADS). The Voluntary Protection Programs Automated Database System (VADS) is a database that includes approved VPP participants (Federal and state-plan jurisdiction) and Federal jurisdiction VPP applicants. A record is maintained for each participant with corporate, company, worksite, and onsite information. VADS is maintained by the National Office and is accessible only to authorized users.

VADS contains information on all of the worksites that are now or previously were in the VPP. This data is stored in a three-tiered structure in the system. Once an application to the VPP is accepted, a copy of the application’s general information section must be submitted to the National Office so that a record can be created in VADS to store pertinent data for the specific worksite, such as name of worksite, location, SIC or NAICS code, rates history, onsite history, etc.

III. Data Charts. On a monthly basis, DCSP generates monthly aggregate data charts/statistics that reflect current totals of all approved VPP participants (Federal and State). The data charts reflect the growth of VPP since its inception, the size (# of employees) of VPP participants, VPP participants by region, union and non-union participants, industry types in the VPP, and other pertinent information about the program.
<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>State</th>
<th>SIC (4 Digits)</th>
<th>NAICS (6 Digits)</th>
<th>Status (List)</th>
<th>Date Rec'd</th>
<th>Date Read</th>
<th>Date Accepted</th>
<th>**Date Delayed</th>
<th>Delay Code (List)</th>
<th>Onsite Date</th>
<th>90 Day Item Date</th>
<th>SGE(s) Used</th>
<th># of SGEs</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

**FOR DELAY CODES**
- R = Delay in Scheduling of Pre-Approval Onsite Requested by Applicant

For ALL Applicants /Participants

| < 6 Months Old + Unread: Total Unread | 0 |
| < 6 Months + Incomplete Total Incomplete | 0 |

* OSHA ARCHIVE DOCUMENT *
NOTICE: This is an OSHA ARCHIVE Document, and may no longer represent OSHA policy.
<table>
<thead>
<tr>
<th>Category</th>
<th>Total Participant</th>
<th>A = Administration Delay</th>
<th>O = Other (NOTE HERE)</th>
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<tbody>
<tr>
<td>&lt; 6 Accepted but No Onsite</td>
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<tr>
<td>&lt; 6 Months Total</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>&gt; 6 Months Old + Unead:</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&gt; 6 Months + Incomplete</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>&gt; 6 Mos Accepted</td>
<td>BACKLOG</td>
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<td></td>
</tr>
<tr>
<td>&lt; 6 Months Total</td>
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<td></td>
</tr>
<tr>
<td>Grand Total</td>
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<table>
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<th>Category</th>
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<th>Total Complete</th>
<th>Sites with SGEs</th>
<th># of SGEs Used</th>
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<td>0</td>
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</tr>
<tr>
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<tr>
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<tr>
<td>&gt; 6 Months + Incomplete</td>
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<tr>
<td>Grand Total</td>
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</table>

* OSBA ARCHIVE DOCUMENT *
NOTICE: This document is presented here as historical content, for research and review purposes only.
INSTRUCTIONS FOR COMPLETING THE VPP ACTIVITY REPORT (VPP LOG)

Column 1 -- enter the name of the applicant.

Column 2 – enter the city of the applicant.

Column 3 – enter the state of the applicant.

Column 4 -- enter the 4 digit Standard Industrial Classification (SIC) code of the applicant.

Column 5 – enter the 6 digit North American Industry Classification System (NAICS) code of the applicant.

Column 6 -- enter the application status code from those available in the dropdown menu.

Column 7 -- enter the date you received the application.

Column 8 – enter the date you read the application.

Column 9 -- enter the date you accepted the application.

Column 10 -- enter any dates of delay in scheduling/conducting the pre-approval onsite.

Column 11 -- enter the appropriate Reason for Delay code from those listed in the footnote.

Column 12 -- enter the date the onsite is scheduled.

Column 13 -- enter the date any 90-day items are due.

Column 14 -- enter YES or NO if any SGE’s were used on the onsite evaluation.

Column 15 – enter the number of SGE’s used on the onsite evaluation.

All other fields are automatically calculated based on the data provided in Columns 1 – 15.
## Significant Incident Report

**Date Submitted:** ____________

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<th>Site Name:</th>
<th>Region:</th>
<th>Investigation Type:</th>
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<td></td>
<td>Accident [ ]</td>
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<tr>
<td></td>
<td></td>
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<td></td>
<td>Complaint [ ]</td>
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<td>Other [ ]</td>
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<table>
<thead>
<tr>
<th>Site Address:</th>
<th>SIC/NAICS:</th>
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<th>Classification:</th>
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<td>Incident [ ]</td>
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<td>Catastrophe [ ]</td>
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<table>
<thead>
<tr>
<th>Mishap Date:</th>
<th># Employees:</th>
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<th>Investigation Date:</th>
<th># Applicable Contractors:</th>
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<tr>
<th>IMIS Reference #:</th>
<th>Years in VPP:</th>
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<thead>
<tr>
<th>Lead Investigator:</th>
<th>Citations (Y/N):</th>
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<table>
<thead>
<tr>
<th>Area Office:</th>
<th>VPP Program @ Time:</th>
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<table>
<thead>
<tr>
<th>Onsite Evaluation Date:</th>
<th>Press Coverage (Y/N):</th>
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<table>
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<tr>
<th>Citations:</th>
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<tbody>
<tr>
<td># of Injuries:</td>
</tr>
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<td># of Fatalities:</td>
</tr>
<tr>
<td>VPP Report (Y/N):</td>
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<tr>
<td>Persons Affected:</td>
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<table>
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<tr>
<th>Recommendations/Comments:</th>
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<table>
<thead>
<tr>
<th>Program Recommendation:</th>
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**Onsite Evaluation Date:** The date of the VPP evaluation conducted in response to the event. This includes the date of the phone call if that is what is done.

**Citations:** We are interested in the nature of the citations, i.e., Serious, Willful, Other-Than Serious, for example 2 Serious and 1 Other-Than-Serious.

**Persons Affected:** The answer can be employee, contractor or both.

**Recommendation/Comments:** This section is very important and is used to describe the rationale for the basis for your recommendation for participation.

**Program Recommendation:** Several choices including: Continued Star, Continued Merit, Conditional, Withdrawal.
Appendix C
Format for Annual Submissions

Participation in the VPP requires each participant to annually evaluate the effectiveness of its safety and health management system. The evaluation must include assessments of the effectiveness of all elements and sub-elements of the participant’s safety and health management system. [See the July 24, 2000 VPP Revisions, Federal Register, Volume 65, No. 142, Section III.F.5.a. (8) Safety and Health Program Evaluation. See also Chapter 3 of this Instruction for a complete description of the elements and sub-elements of a safety and health management system.]

The most comprehensive evaluation includes reviewing written programs, walking through the workplace, and interviewing employees. During this process participants should be answering the following questions relating to each element and sub-element of their safety and health management system:

1. Is it comprehensive?
2. Is it operating effectively and meeting established goals and objectives?
3. What improvements can be made to make it even more effective?
4. What goal modifications should be made for the upcoming year?

A self-evaluation is not a compliance audit. It is a critical review of all of the elements of the safety and health management system, including a review of participant and applicable contractors’ injury and illness data and trends.

The VPP revisions (published in the Federal Register of July 24, 2000) require program participants to submit their annual evaluation to their OSHA VPP Manager by February 15 of each year. OSHA expects the evaluation to include participant and applicable contractors’ injury and illness data, progress towards Merit or 1-Year Conditional goals (if applicable), and success stories. OSHA uses the information to update records and statistics, to showcase successes related to implementation of the VPP requirements, and to demonstrate that participants are committed to continuously improving employee safety and health at their facilities.

Additionally, participants that fall under OSHA’s Process Safety Management (PSM) standard must provide responses to all applicable questions found in the PSM Questionnaire. The responses must cover all PSM operations at the site.

The following is a suggested format.

C-1
Suggested Format for Site’s Annual Submission

Section A: Summary Sheet

<table>
<thead>
<tr>
<th>Site Name:</th>
<th>Calendar Year</th>
<th>Date Submitted</th>
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</table>

**Corporate Information**

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<thead>
<tr>
<th>Name/Address</th>
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<tbody>
<tr>
<td>Phone:</td>
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</table>

**Site Information**

<table>
<thead>
<tr>
<th>Address</th>
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<tbody>
<tr>
<td>Phone:</td>
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</table>

**Plant Manager**

<table>
<thead>
<tr>
<th>Site VPP Contact</th>
<th>NAICS / SIC</th>
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**FAX**

<table>
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<tr>
<th>e-mail</th>
<th>VPP Status</th>
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**# Applicable Contractors**

<table>
<thead>
<tr>
<th># Site Employees</th>
<th>Total</th>
<th>Total Hours Worked</th>
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</table>

<table>
<thead>
<tr>
<th>Site Injury &amp; Illness Rate** (Last Yr.)</th>
<th>TCIR:</th>
<th>DART:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Applicable Contractor** (name)</td>
<td>TCIR:</td>
<td>DART:</td>
</tr>
<tr>
<td>Applicable Contractor** (name)</td>
<td>TCIR:</td>
<td>DART:</td>
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</table>

**Union Name**

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<tr>
<th>Site Representative</th>
<th>Address:</th>
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<th>Local:</th>
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<tbody>
<tr>
<td>Phone:</td>
<td>Fax:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>E-mail:</th>
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</thead>
</table>

* Enter Average Employment figure as recorded in worksite’s own records.

**Obtain from tables in Section B below. If you have more than one applicable contractor or union, copy and attach additional summary sheets.
Section B: Injury & Illness Rate Information

Please copy and submit separate tables (example below) for:

1. All site employees including temporary and contract employees who are directly supervised by site management,

2. Each applicable contractor’s employees (contractor whose employees worked 1,000 hours or more in any calendar quarter). Report contractor injury and illness experience only for work at your site.

<table>
<thead>
<tr>
<th>Recordable Non-fatal Injury and Illness Case Incidence Rates</th>
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<tbody>
<tr>
<td>1</td>
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<tr>
<td>---</td>
</tr>
<tr>
<td>Year</td>
</tr>
<tr>
<td>Last Year</td>
</tr>
<tr>
<td>Most recent published BLS rate for NAICS code</td>
</tr>
</tbody>
</table>

% above or below National Average

| column 2: Insert the total person hours worked for the year (not an estimate). |
| column 3: Insert the total number of OSHA recordable injuries and illnesses for the year. |
| column 4: \((\text{TCIR}) = (\text{total recordable non-fatal injuries and illnesses } \div \text{total hours worked}) \times 200,000\) |
| column 5: Insert the total number of OSHA recordable injuries and illnesses involving days away from work, restricted work activity, and/or job transfer. |
| column 6: \((\text{DART rate}) = (\text{total recordable non-fatal injuries and illnesses resulting in days away, restricted work activity, and/or job transfer } \div \text{total hours worked}) \times 200,000\) |

BLS data: Insert the TCIR and DART rates for your industry from BLS’s Table of Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry. Find the table at [www.BLS.gov](http://www.BLS.gov) or obtain from your Regional VPP Manager.

Compare your rates to BLS: Calculate the percent above or below the BLS national average for your TCIR and DART rates using the formula: \([((\text{Site rate} - \text{BLS rate}) \div \text{BLS rate}) \times 100]\)

If your rates have increased since last year you must identify and describe the contributing factors and corrective actions taken in the body of the evaluation of each related element and sub-element in Section D, below. If your 3-year rates are now above the national average, you must submit a rate reduction plan based on your findings. Contact your Regional VPP Manager to discuss the terms of your rate reduction plan.

Section C: Significant Changes or Events

Describe the impact of any significant changes (management, corporate buy-outs, etc.) and events (fatality, catastrophe, accident, complaints, etc.) and steps taken to ensure or restore employee safety and health.

Section D: Narrative Evaluation of Safety and Health Management System

In narrative form, assess the effectiveness of each of the four elements and their sub-elements in your safety and health management system. They are:
1. Management Leadership and Employee Involvement
   a. Management Commitment to Safety and Health Protection and to VPP Participation
   b. Policy
   c. Goals, Objectives, and Planning
   d. Visible Top Management Leadership
   e. Responsibility and Authority
   f. Line Accountability
   g. Resources
   h. Employee Involvement
   i. Contract Employee Coverage
   j. Written Safety and Health Management System

2. Worksite Analysis
   a. Hazard Analysis of Routine Jobs, Tasks, and Processes
   b. Hazard Analysis of Significant Changes, New Processes, and Non-Routine Tasks
      - Including pre-use analysis and new baselines
   c. Routine Self-Inspections
   d. Hazard Reporting System for Employees
   e. Industrial Hygiene Program
   f. Investigation of Accidents and Near-Misses
   g. Trend/Pattern Analysis

3. Hazard Prevention and Control
   a. Certified Professional Resources
   b. Hazard Elimination and Control Methods
      - Engineering Controls
      - Administrative Controls
      - Work Practice Controls and Hazard Control Programs
      * Safety and Health Rules and Disciplinary System
      - Personal Protective Equipment
   c. Process Safety Management (if applicable)
   d. Occupational Health Care Program
   e. Preventive/Predictive Maintenance
   f. Tracking of Hazard Correction
   g. Emergency Preparedness

* OSHA ARCHIVE DOCUMENT *
NOTICE: This is an OSHA ARCHIVE Document, and may no longer represent OSHA policy.
4. Safety and Health Training
   a. Managers
   b. Supervisors
   c. Employees
   d. Emergencies
   e. PPE

For each sub-element include a description of:

1. Improvements made since the previous year and completion of the previous year's recommendations.

2. Any deficiencies identified, recommendations for improvement, the person(s) responsible for fulfilling each new recommendation, target dates for their completion, and the data/information reviewed to assess the effectiveness of the sub-element.

Section E: Summary Chart of Merit or 1-Year Conditional Goals

Please fill in the table below, using as many rows as necessary to summarize all of the goals currently awaiting completion of implementation, either from the previous year or the current year.

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<thead>
<tr>
<th>Goal</th>
<th>Status</th>
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<tbody>
<tr>
<td>Goal 1:</td>
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<tr>
<td>Goal 2:</td>
<td></td>
</tr>
<tr>
<td>Goal 3:</td>
<td></td>
</tr>
</tbody>
</table>

Section F: Success Stories

Please describe any success stories related to the implementation of VPP requirements. Include anecdotal as well as statistical evidence of improvements, non-routine safety and health activities, outreach, etc.
Appendix D
Onsite Evaluation Report Format

VPP SITE REPORT
Recommending
STAR APPROVAL
for

Company Name
City, State

Month X, 20xx

Report Date
Month X, 20xx

Evaluation Team
Name, Team Leader
Name, Backup Team Leader
Name, Safety Specialist
Name, Hygienist
Name, SGE
I. Purpose and Scope of Review

- Name
- Location
- Date of evaluation
- Purpose of evaluation (Star approval, Merit approval, Demo approval)
- VPP Team Members
- VPP Volunteers

II. Methods of Data Collection

- Information on which report is based (application, previous reports, walkthrough, on site documentation, etc.)

III. Employees at the Worksite

- Number of employees
- Contract employees and/or temporary employees
- Collective bargaining agent(s) representing the employees
- Number of interviews conducted with different types of employees

IV. The Worksite

- NAICS and SIC Codes
- Description (one location or many, acreage, age, primary structures, etc.)
- Basic description of processes, products, and applications
- Housekeeping

V. Worksite Hazards

- Site hazards
- Covered under Process Safety Management
  - Provide a brief description of how the questions from the PSM application supplement, PSM Questionnaire, and/or the Dynamic Inspection Priority Lists most applicable to the site were asked and verified.

VI. Injury and Illness Rates

- Rates - TCIR, DART
- Comparisons to BLS industry averages

VII. OSHA Activity

- Prior OSHA inspection activity
- Relationship with OSHA
VIII. Elements of the VPP Review/Program Changes

- Bulleted summary of VPP Elements with a reminder that all aspects of the Safety and Health program meet the VPP requirements as set forth in CSP (Refer to the VPP Site Worksheet for specifics).
  - Management, Leadership, and Employee Involvement
  - Worksite Analysis
  - Hazard Prevention and Control
  - Safety & Health Training
    - For Reapproval evaluations, discuss significant program or site changes since the last visit. A bulleted list is acceptable.

IX. Areas of Excellence

- Bulleted list and description of best practices (e.g., machine guarding, ergonomics, lockout/tagout, employee involvement)

X. Recommendation for Participation

- Recommendation

XI. Goals

- Merit goals (if relevant)
- 1-Year Conditional goals (if relevant)
A review of the OSHA 300 logs was made. The following are the total incidence and lost workday case rates since 20xx:

<table>
<thead>
<tr>
<th>Year</th>
<th>Hours</th>
<th>Total # of Cases</th>
<th>TCIR</th>
<th>Number of Cases Involving Days Away from Work, Restricted Activity or Job Transfer</th>
<th>DART Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>20xx</td>
<td></td>
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<tr>
<td>20xx</td>
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<tr>
<td>20xx</td>
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<tr>
<td>Total</td>
<td></td>
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<tr>
<td>BLS National Average for 20xx (NAICS XXXXXX)</td>
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<tr>
<td>20xx YTD</td>
<td></td>
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</tbody>
</table>

For the period 20xx-20xx, the site’s:

- Total Case Incidence Rate (TCIR) is X.X (XX% above/below the 20xx BLS industry averages for NAICS XXXXXX).
- The Days Away from Work, Restricted Activity or Job Transfer (DART) case incidence rate is X.X (XX% above/below the 20xx BLS industry averages for NAICS XXXXXX).

The information on the OSHA 300 Logs supports the information provided in the application, and the company’s first report of injury forms support the data in the logs. The [Company, Position Title] is responsible for the entries to the OSHA 300 Log and verified the accuracy of the records. The [Position Title] understands the recordkeeping requirements. Based upon interviews conducted with management and employees, the logs accurately reflect the injury and illness experience at this plant.

There [were/were not] temporary employees at the worksite at the time of the team’s visit. Injuries or illnesses experienced by temporary employees under the direct supervision of [Company] are recorded on the worksite’s OSHA 300 Log. There were X temporary employee injuries recorded on the worksite’s OSHA 300 Log for 20xx.
VPP SITE WORKSHEET

Recommending

STAR APPROVAL

for

Company Name

City, State

Evaluation Date
Month x, 20xx

Report Date
Month x, 20xx

Evaluation Team
Name, Team Leader
Name, Backup Team Leader
Name, Safety Specialist
Name, Hygienist
Name, SGE
## Section I: Management Leadership & Employee Involvement

### A. Written Safety & Health Management System

**A1.** Are all the elements (such as Management Leadership and Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training) and sub-elements of a basic safety and health management system part of a signed, written document? (For Federal Agencies, include 29 CFR 1960.) If not, please explain.

- 

**A2.** Have all VPP elements and sub-elements been in place at least 1 year? If not, please identify those elements that have not been in place for at least 1 year.

- 

**A3.** Is the written safety and health management system at least minimally effective to address the scope and complexity of the hazards at the site? (Smaller, less complex sites require a less complex system.) If not, please explain. **MRØ.**

- 

**A4.** Have any VPP documentation requirements been waived (as per FRN page 656, paragraph F5a4)? If so, please explain.

- 

### B. Management Commitment & Leadership

**B1.** Does management overall demonstrate at least minimally effective, visible leadership with respect to the safety and health program (considering FRN items F5 A-H)? Provide examples. **MR Ø.**

**B2.** How has the site communicated established policies and results-oriented goals
### Section I: Management Leadership & Employee Involvement

#### C. Planning

<table>
<thead>
<tr>
<th></th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1.</td>
<td>How does the site integrate planning for safety and health with its overall management planning process (for example, budget development, resource allocation, or training)?</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>C2.</td>
<td>Is safety and health effectively integrated into the site’s overall management planning process? If not, please explain.</td>
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</tbody>
</table>

#### B3. Do employees understand the goals and objectives for the safety and health program?

- [ ] Interview
- [ ] Observation
- [ ] Doc Review

#### B4. Are the safety and health program goals and objectives meaningful and attainable? Provide examples supporting the meaningfulness and attainability (or lack there of if answer is no) of the goal(s). (Attainability can either be unrealistic/realistic goals or poor/good implementation to achieve them.) (See: TED Chapter 3 II C1a)

- [ ] Interview
- [ ] Observation
- [ ] Doc Review

#### B5. How does the site measure its progress towards the safety and health program goals and objectives? Provide examples.

- [ ] Interview
- [ ] Observation
- [ ] Doc Review
### Section I: Management Leadership & Employee Involvement

<table>
<thead>
<tr>
<th>D. Authority and Line Accountability</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>D1.</strong> Does top management accept ultimate responsibility for safety and health in the organization? (Top management acknowledges ultimate responsibility even if some safety and health functions are delegated to others.) If not, please explain. <strong>MRØ.</strong></td>
</tr>
<tr>
<td><strong>D2.</strong> How is the assignment of authority and responsibility documented and communicated (for example, organization charts, job descriptions)?</td>
</tr>
<tr>
<td><strong>D3.</strong> Do the individuals assigned responsibility for safety and health have the authority to ensure that hazards are corrected or necessary changes to the safety and health management system are made? If not, please explain. <strong>MRØ.</strong></td>
</tr>
<tr>
<td><strong>D4.</strong> How are managers, supervisors, and employees held accountable for meeting their responsibilities for workplace safety and health? (Annual performance evaluations for managers and supervisors are required.)</td>
</tr>
<tr>
<td><strong>D5.</strong> Are adequate resources (equipment, budget, or experts) dedicated to ensuring workplace safety and health? Provide examples. <strong>MRØ.</strong></td>
</tr>
<tr>
<td><strong>D6.</strong> Is access to experts (for example, Certified Industrial Hygienists, Certified Safety Professionals, Occupational Nurses, or Engineers), reasonably available to the site, based upon the nature, conditions, complexity, and hazards of the site? If so, under what arrangements and how often are they used?</td>
</tr>
</tbody>
</table>
## Section I: Management Leadership & Employee Involvement

### E. Contract Employees

<table>
<thead>
<tr>
<th>E1. Does the site utilize contractors? Please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</thead>
<tbody>
<tr>
<td>E2. Were there contractors onsite at the time of the evaluation?</td>
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<tr>
<td>E3. When selecting onsite contractors, how does the site evaluate the contractor’s safety and health programs and performance (including rates)? (See: TED Chapter 3 IV 3-19)</td>
<td></td>
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<tr>
<td>E4. Are contractors and subcontractors at the site to maintain effective safety and health programs and to comply with all applicable OSHA and company safety and health rules and regulations? If so, please provide examples.</td>
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<tr>
<td>E5. Does the site’s contractor program cover the prompt correction and control of hazards in the event that the contractor fails to correct or control such hazards? Provide examples. <strong>MRØ</strong>.</td>
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<td>E6. How does the site document and communicate oversight, coordination, and enforcement of safety and health expectations to contractors?</td>
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<tr>
<td>E7. Have the contract provisions specifying penalties for safety and health issues been enforced, when appropriate? If not, please explain.</td>
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<tr>
<td>E8. How does the site monitor the quality of the safety and health protection of its contract employees?</td>
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<tr>
<td>E9. If the contractors’ injury and illness rates are above the average for their industries, does the site have procedures that ensure that all employees are provided effective protection on the worksite? If not, please explain.</td>
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<tr>
<td>E10. Do contract provisions for contractors require the periodic review and analysis of injury and illness data? Provide examples.</td>
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<tr>
<td>E11. Based on your answers to the above items, is the contract oversight minimally effective for the nature of the site? (Inadequate oversight is indicated by significant hazards created by the contractor, employees exposed to hazards, or a lack of host audits.) If not, please explain. <strong>MRØ</strong>.</td>
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</table>
### Section I: Management Leadership & Employee Involvement

#### F. Employee Involvement

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<thead>
<tr>
<th>Number</th>
<th>Question</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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<tbody>
<tr>
<td>F1.</td>
<td>How were employees selected to be interviewed by the VPP team?</td>
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<td>F2.</td>
<td>How many employees were interviewed formally? How many were interviewed informally?</td>
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<tr>
<td>F3.</td>
<td>Do employees support the site’s participation in the VPP Process?</td>
<td>MRØ</td>
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<tr>
<td>F4.</td>
<td>Do employees feel free to participate in the safety and health management system without fear of discrimination or reprisal? If so, please explain.</td>
<td>MRØ</td>
<td></td>
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<tr>
<td>F5.</td>
<td>Please describe at least three ways in which employees are meaningfully involved in the problem identification and resolution, or evaluation of the safety and health program (beyond hazard reporting). (See: FRN Chapter 3 Paragraph II.C.1.b)</td>
<td></td>
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<tr>
<td>F6.</td>
<td>Are employees knowledgeable about the site’s safety and health management system? If not, please explain.</td>
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<tr>
<td>F7.</td>
<td>Are employees knowledgeable about the VPP program? If not, please explain.</td>
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<tr>
<td>F8.</td>
<td>Are the employees knowledgeable about OSHA rights and responsibilities? If not, please explain.</td>
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<tr>
<td>F9.</td>
<td>Do employees have access to results of self-inspection, accident investigation, appropriate medical records, and personal sampling data upon request? If not, please explain.</td>
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</table>
**Section I: Management Leadership & Employee Involvement**

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**90-Day Items:** *(Delete this section for final transmittal to National Office)*

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**Best Practices:**

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**Comments including Recommendations** *(optional)*

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**Documents Referenced, Programs Reviewed** *(optional):*

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<td>2.</td>
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</tbody>
</table>
### Section II: Worksite Analysis

#### A. Baseline Hazard Analysis

<table>
<thead>
<tr>
<th>A1.</th>
<th>Has the site been at least minimally effective at identifying and documenting the common safety and health hazards associated with the site (such as those found in OSHA regulations, building standards, etc., and for which existing controls are well known)? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MRØ</td>
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<tr>
<td>A2.</td>
<td>What methods are used in the baseline hazard analysis to identify health hazards? (Please include examples of instances when initial screening and full-shift sampling were used. See FRN page 45657, F5.B.2.b)</td>
<td>Yes or No</td>
<td>Interview</td>
<td>Observation</td>
<td>Doc Review</td>
</tr>
<tr>
<td>A3.</td>
<td>Does the site have a documented sampling strategy used to identify health hazards and assess employees’ exposure (including duration, route, and frequency of exposure), and the number of exposed employees? If not, please explain.</td>
<td>Yes or No</td>
<td>Interview</td>
<td>Observation</td>
<td>Doc Review</td>
</tr>
<tr>
<td>A4.</td>
<td>Do sampling, testing, and analysis follow nationally recognized procedures? If not, please explain.</td>
<td>Yes or No</td>
<td>Interview</td>
<td>Observation</td>
<td>Doc Review</td>
</tr>
<tr>
<td>A5.</td>
<td>Does the site compare sampling results to the minimum exposure limits or are more restrictive exposure limits (PELs, TLVs, etc.) used? Please explain.</td>
<td>Yes or No</td>
<td>Interview</td>
<td>Observation</td>
<td>Doc Review</td>
</tr>
<tr>
<td>A6.</td>
<td>Does the baseline hazard analysis adequately identify hazards (including health) that need further analysis? If not, please explain.</td>
<td>Yes or No</td>
<td>Interview</td>
<td>Observation</td>
<td>Doc Review</td>
</tr>
<tr>
<td>A7.</td>
<td>Do industrial hygiene sampling data, such as initial screening or full shift sampling data, indicate that records are being kept in logical order and include all sampling information (for example, sampling time, date, employee, job title, concentrated measures, and calculations)? If not, please explain the deficiencies and how they are being addressed.</td>
<td>Yes or No</td>
<td>Interview</td>
<td>Observation</td>
<td>Doc Review</td>
</tr>
</tbody>
</table>
### Section II: Worksite Analysis

#### B. Hazard Analysis of Significant Changes

<table>
<thead>
<tr>
<th>Question</th>
<th>How Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1. When purchasing new materials or equipment, or implementing new processes, what types of analyses are performed to determine their impact on safety and health? Is it adequate?</td>
<td>Yes or No</td>
</tr>
<tr>
<td>B2. When implementing/introducing non-routine tasks, materials or equipment, or modifying processes, what types of analyses are performed to determine their impact on safety and health? Is it adequate?</td>
<td>Yes or No</td>
</tr>
</tbody>
</table>

#### C. Hazard Analysis of Routine Activities

<table>
<thead>
<tr>
<th>Question</th>
<th>How Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>C1. Is there at least a minimally effective hazard analysis system in place for routine operations and activities? <strong>MRØ.</strong></td>
<td>Yes or No</td>
</tr>
<tr>
<td>C2. Does hazard identification and analysis address both safety and health hazards, if appropriate? If not, please explain.</td>
<td>Yes or No</td>
</tr>
<tr>
<td>C3. What hazard analysis technique(s) are employed for routine operations and activities (e.g., job hazard analysis, HAZ-OPS, fault trees)? Are they adequate?</td>
<td>Yes or No</td>
</tr>
<tr>
<td>C4. Are the results of the hazard analysis of routine activities adequately documented? If not, please explain.</td>
<td>Yes or No</td>
</tr>
</tbody>
</table>
## Section II: Worksite Analysis

### D. Routine Inspections

<table>
<thead>
<tr>
<th>Question</th>
<th>How Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>D1. Does the site have a minimally effective system for performing safety and health inspections (i.e., a minimally effective system identifies hazards associated with normal operations)? If not, please explain. <strong>MR Ø.</strong></td>
<td>Yes</td>
</tr>
<tr>
<td>D2. Are routine safety and health inspections conducted monthly, with the entire site covered at least quarterly (for construction: entire site weekly)?</td>
<td>Yes</td>
</tr>
<tr>
<td>D3. How do inspections use information discovered through the baseline hazards analysis, job hazard analysis, accident/incident analysis, employee concerns, sampling results, etc.?</td>
<td>Yes</td>
</tr>
<tr>
<td>D4. Are those personnel conducting inspections adequately trained in hazard identification? If not, please explain.</td>
<td>Yes</td>
</tr>
<tr>
<td>D5. Is the routine inspection system written, including documentation of results? If not, please explain.</td>
<td>Yes</td>
</tr>
<tr>
<td>D6. Do the written routine inspection reports clearly indicate what needs to be corrected, by whom, and by when? If not, please explain.</td>
<td>Yes</td>
</tr>
<tr>
<td>D7. Did the VPP team find hazards that should have been found through self-inspection? If so, please explain.</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Section II: Worksite Analysis

E. Hazard Reporting

<table>
<thead>
<tr>
<th></th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</thead>
<tbody>
<tr>
<td>E1.</td>
<td>Does the site have a reliable system for employees to notify appropriate management personnel in writing about safety and health concerns? Please describe.</td>
<td></td>
<td></td>
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<tr>
<td>E2.</td>
<td>Do the employees agree that they have an effective system for reporting safety and health concerns? If not, please explain.</td>
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<tr>
<td>E3.</td>
<td>Is there a minimally effective means for employees to report hazards and have them addressed? If not, please explain. <strong>MRØ.</strong></td>
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</table>

F. Hazard Tracking

<table>
<thead>
<tr>
<th></th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</thead>
<tbody>
<tr>
<td>F1.</td>
<td>Does the hazard tracking system address hazards found by employees, hazard analysis of routine and non-routine activities, inspections, and accident or incident investigations? If not, please explain.</td>
<td></td>
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<tr>
<td>F2.</td>
<td>Does the tracking system result in hazards being corrected and provide feedback to employees for hazards they have reported. If not, please explain.</td>
<td></td>
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<tr>
<td>F3.</td>
<td>Does the tracking system result in timely correction of hazards with interim protection established when needed? Please describe.</td>
<td></td>
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<tr>
<td>F4.</td>
<td>Does a minimally effective tracking system exist that results in hazards being controlled? If not, please explain. <strong>MRØ.</strong></td>
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</tbody>
</table>
**Section II: Worksite Analysis**

### G. Accident/Incident Investigations

<table>
<thead>
<tr>
<th>G1. Is there a minimally effective system for conducting accident/incident investigations, including near-misses? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</thead>
<tbody>
<tr>
<td>MR</td>
<td></td>
<td></td>
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<table>
<thead>
<tr>
<th>G2. Are those conducting the investigations trained in accident/incident investigation techniques? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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<thead>
<tr>
<th>G3. Describe how investigations discover and document all the contributing factors that led to an accident/incident.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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<tr>
<th>G4. Were any hazards discovered during the investigation previously addressed in any prior hazard analyses (e.g., baseline, self-inspection)? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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### H. Safety and Health Program Evaluation

<table>
<thead>
<tr>
<th>H1. Briefly describe the system in place for conducting an annual evaluation.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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<tr>
<th>H2. Does the annual evaluation cover the aspects of the safety and health program, including the elements described in the Federal Register? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>H3. Does the annual evaluation include written recommendations in a narrative format? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>
### Section II: Worksite Analysis

<table>
<thead>
<tr>
<th>H4.</th>
<th>Is the annual evaluation an effective tool for assessing the success of the site’s safety and health system? Please explain.</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>H5.</td>
<td>What evidence demonstrates that the site responded adequately to the recommendations made in the annual evaluation?</td>
<td></td>
</tr>
</tbody>
</table>

---

| I1. | Does the site have a minimally effective means for identifying and assessing trends? MRØ |  |
| I2. | Have there been any injury and/or illness trends over the last three years? If so, please explain. |  |
| I3. | If there have been injury and/or illness trends, what courses of action have been taken? Are they adequate? |  |
| I4. | Does the site assess trends utilizing data from hazard reports or accident/incident investigations to determine the potential for injuries and illnesses? If not, please explain. |  |
# Section II: Worksite Analysis

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<table>
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## 90-Day Items

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## Best Practices

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## Comments including Recommendations *(optional)*

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## Documents Referenced, Programs Reviewed *(optional)*

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<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>How Assessed</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------------------------------</td>
<td>--------------</td>
</tr>
<tr>
<td>Section III: Hazard Prevention and Control</td>
<td>Yes or No</td>
</tr>
<tr>
<td>A. Hazard Prevention and Control</td>
<td>Interview</td>
</tr>
<tr>
<td>A1. Does the site select at least minimally effective controls to prevent exposing employees to hazards. MR ⊕</td>
<td>Observation</td>
</tr>
<tr>
<td>A2. When the site selects hazard controls, does it follow the preferred hierarchy (engineering controls, administrative controls, work practice controls [e.g., lockout/tagout, bloodborne pathogens, and confined space programs], and personal protective equipment) to eliminate or control hazards? Please provide examples, such as how exposures to health hazards were controlled.</td>
<td>Doc Review</td>
</tr>
<tr>
<td>A3. Describe any administrative controls used at the site to limit employee exposure to hazards (for example, job rotation).</td>
<td></td>
</tr>
<tr>
<td>A4. Do the work practice controls and administrative controls adequately address those hazards not covered by engineering or administrative controls? If not, please explain.</td>
<td></td>
</tr>
<tr>
<td>A5. Are the work practice controls (e.g., lockout/tagout, bloodborne pathogens, and confined space programs) recommended by hazard analyses implemented at the site? If not, please explain.</td>
<td></td>
</tr>
<tr>
<td>A6. Are follow-up studies (where appropriate) conducted to ensure that hazard controls were adequate? If not, please explain.</td>
<td></td>
</tr>
<tr>
<td>A7. Are hazard controls documented and addressed in appropriate procedures, safety and health rules, inspections, training, etc.? Provide examples.</td>
<td></td>
</tr>
</tbody>
</table>

*D-19

* OSHA ARCHIVE DOCUMENT *
NOTICE: This is an OSHA ARCHIVE Document, and may no longer represent OSHA policy.
**Section III: Hazard Prevention and Control**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
<tbody>
<tr>
<td>A8. Are there written employee safety procedures including a disciplinary system? Describe the disciplinary system.</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>A9. Has the disciplinary system been enforced equally for both management and employees, when appropriate? If not, please explain.</td>
<td></td>
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</tr>
<tr>
<td>A10. Does the site have minimally effective written procedures for emergencies (TED 3-16 3h)? MRØ</td>
<td></td>
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<tr>
<td>A11. Are emergency drills held at least annually?</td>
<td></td>
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</tr>
<tr>
<td>A12. Does the site have a written preventative/predictive maintenance system? If not, please explain.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A13. Did the hazard identification and analysis (including manufacturers’ recommendations) identify hazards that could result if equipment is not maintained properly? If not, please explain.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A14. Does the preventive maintenance system adequately detect hazardous failures before they occur? If not, please explain.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A15. How does the site select Personal Protective Equipment (PPE)?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A16. Do employees understand the limitations and uses of PPE? If not, please explain.</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
## Section III: Hazard Prevention and Control

<table>
<thead>
<tr>
<th>A17. Did the team observe employees using, storing, and maintaining PPE properly? If not, please explain.</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>A18. Is the site covered by the Process Safety Management standard (29 CFR 1910.119)? If yes, please answer questions A19-A21 below. Additionally, please complete either onsite evaluation supplement A or B, and onsite evaluation supplement C. If not, skip to section B. MR⊙</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>A19. Which chemicals that trigger the Process Safety Management (PSM) standard are present? MR⊙</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</thead>
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<table>
<thead>
<tr>
<th>A20. Which process(es) were followed from beginning to end and used to verify answers to the questions asked in the PSM application supplement, the PSM Questionnaire, and/or the Dynamic Inspection Priority Lists? MR⊙</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</table>

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<tr>
<th>A21. Verify that contractor employees who perform maintenance, repair, turnaround, major renovation or specialty work on or adjacent to a covered process have received adequate training and demonstrate appropriate knowledge of hazards associated with PSM, such as non-routine tasks, process hazards, hot work, emergency evacuation procedures, etc.? Please explain. MR⊙</th>
<th>Yes or No</th>
<th>Interview</th>
<th>Observation</th>
<th>Doc Review</th>
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</thead>
</table>
### Section III: Hazard Prevention and Control

<table>
<thead>
<tr>
<th>B. Occupational Health Care Program and Recordkeeping</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>B1.</strong> Describe the occupational health care program (including availability of physician services, first aid, and CPR/AED) and special programs such as audiograms or other medical tests used.</td>
</tr>
<tr>
<td><strong>B2.</strong> How are licensed occupational health professionals used in the site’s hazard identification and analysis, early recognition and treatment of illness and injury, and the system for limiting the severity of harm that might result from workplace illness or injury? Is this use appropriate?</td>
</tr>
<tr>
<td><strong>B3.</strong> Is the occupational health program adequate for the size and location of the site, as well as the nature of hazards found here? If not, please explain.</td>
</tr>
</tbody>
</table>
### Section III: Hazard Prevention and Control

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### 90-Day Items

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### Best Practices

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### Comments including Recommendations *(optional)*

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### Documents Referenced, Programs Reviewed *(optional)*

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</table>
### Section IV: Safety and Health Training

<table>
<thead>
<tr>
<th>A. Safety and Health Training</th>
<th>How Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A1.</strong> What are the safety and health training requirements for managers, supervisors, employees, and contractors?</td>
<td>Yes</td>
</tr>
<tr>
<td>A2. Who delivers the training?</td>
<td>Yes</td>
</tr>
<tr>
<td>A3. How are the safety and health training needs for employees determined?</td>
<td>Yes</td>
</tr>
<tr>
<td>A4. Does the site provide minimally effective training to educate employees regarding the known hazards of the site and their controls? If not, please explain.</td>
<td>Yes</td>
</tr>
<tr>
<td>A5. What system is in place to ensure that all employees and contractors have received and understand the appropriate training?</td>
<td>Yes</td>
</tr>
<tr>
<td>A6. Who is trained in hazard identification and analysis?</td>
<td>Yes</td>
</tr>
<tr>
<td>A7. Is training in hazard identification and analysis adequate for the conditions and hazards of the site? If not, please explain.</td>
<td>Yes</td>
</tr>
<tr>
<td>A8. Does management have a thorough understanding of the hazards of the site? Provide examples that demonstrate their understanding.</td>
<td>Yes</td>
</tr>
</tbody>
</table>
**Section IV: Safety and Health Training**

1.  
2.  

**90-Day Items** *(Delete this section for final transmittal to National Office)*

1.  
2.  

**Best Practices**

1.  
2.  

**Comments including Recommendations (optional)**

1.  
2.  

**Documents Referenced, Programs Reviewed (optional)**

1.  
2.
VPP REPORT APPROVAL REQUEST

DATE: [leave blank]

TO: [NAME], ASSISTANT SECRETARY

FROM: [NAME], DIRECTOR, Directorate of Cooperative and State Programs

SUBJECT: [Action requested, for example, Star approval]

Applicant/Participant: [Name, City, State]

Industry: [NAICS industry title]

Region:

Injury/Illness Data: 

<table>
<thead>
<tr>
<th>Rate</th>
<th>Percent above/below BLS Industry Average</th>
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<tbody>
<tr>
<td>TCIR xx.x</td>
<td>xx% [above or below]</td>
</tr>
<tr>
<td>DART xx.x</td>
<td>xx% [above or below]</td>
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</tbody>
</table>

NAICS Code: 
SIC:

Employees: Number of employees (including temporary):
Number of contract employees:
Total:

Union(s): [Name and Local Number. If no unions, insert Not Applicable]

ACTION REQUESTED: If you agree with the attached, please sign the enclosed approval letter. For more information about the site, please contact the Office of Partnerships and Recognition to obtain a copy of the VPP Site Worksheet.

COMMENTS: [Include PSM status, Corporate Facility Onsite Process (C-FOP) where applicable, Fortune 500 where applicable, and any other comments.]
VPP TEAM COMPOSITION DATA SHEET

Name of Company: 

Site Address: 

Small Employer (<250 employees onsite AND < 500 employees corporate-wide): ☐

Region: 

Dates of Onsite: mm/dd/yy - mm/dd/yy 

Check One: Preapproval Visit: ☐ Evaluation Visit: ☐ 

Report Drafted Onsite: Yes: ☐ No: ☐ 90-Day Items Y ☐ N ☐ Date Completed: 06/06/06 

TEAM COMPOSITION

<table>
<thead>
<tr>
<th>NAME</th>
<th>ID</th>
<th>ROLE</th>
<th>SGE</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Team Leader</td>
<td></td>
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</tbody>
</table>

BEST PRACTICES CHECKLIST

☐ Ergo Program ☐ Confined Space Program ☐ LO/TO Program
☐ PSM ☐ Hazard Analysis ☐ Contractor Program
☐ Medical Program ☐ Self-Inspections ☐ Accountability
☐ Industrial Hygiene ☐ Employee Involvement ☐ Tracking of Hazards
☐ Pre-Job Analysis ☐ Other: 

STRATEGIC PLAN

High Hazard Industries

☐ Landscaping – 078 ☐ Oil/Gas – 138 ☐ Fruits/Vegetables 203
☐ Concrete/Gypsum/Plaster – 327 ☐ Blast Furnace/Steel Production – 331 ☐ Ship/Boat Building/Repair – 373
☐ Wholesale Storage – 422

Hazardss

☐ Ergo ☐ Lead ☐ Silica
☐ Amputations – Construction ☐ Amputations – General Industry

VPP Corporate Tracking

<table>
<thead>
<tr>
<th>Application Review</th>
<th>Onsite Prep</th>
<th>Onsite</th>
<th>Report Writing</th>
<th>Total</th>
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<tbody>
<tr>
<td>Team Hours Spent (Est)</td>
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* OSHA ARCHIVE DOCUMENT *

NOTICE: This document is presented here as historical content, for research and review purposes only.
### Site Information

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<thead>
<tr>
<th>Company Name:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Legal Name:</td>
<td></td>
</tr>
<tr>
<td>Mailing Address:</td>
<td></td>
</tr>
<tr>
<td>VPP Contact:</td>
<td></td>
</tr>
<tr>
<td>Site Contact Phone:</td>
<td></td>
</tr>
<tr>
<td>E-Mail Address:</td>
<td></td>
</tr>
<tr>
<td>NAICS Code for the Site:</td>
<td>Number of employees at the Site:</td>
</tr>
<tr>
<td></td>
<td>Number of Contractor employees at the Site: 0</td>
</tr>
<tr>
<td>Program Status:</td>
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<td>Audit Dates:</td>
<td>Report Date:</td>
</tr>
<tr>
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<td></td>
</tr>
<tr>
<td>Team Member 2:</td>
<td>TL Discipline:</td>
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<td>Team Member 3:</td>
<td>TM2 Discipline:</td>
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<td>TM3 Discipline:</td>
</tr>
<tr>
<td>Team Member 5:</td>
<td>TM4 Discipline:</td>
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<tr>
<td>Three years used to calculate Injury/Illness Rates:</td>
<td>Year of most current BLS Rates:</td>
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### Union Information

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<td>Local Number:</td>
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<tr>
<td>Site Representative:</td>
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<td>Mailing Address:</td>
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<tr>
<td>Telephone Number:</td>
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<tr>
<td>E-Mail Address:</td>
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<table>
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* OSHA ARCHIVE DOCUMENT *
NOTICE: This is an OSHA ARCHIVE Document, and may no longer represent OSHA policy.
1.1 Overview of the Revised VPP Site Report and Worksheet

The Office of Partnerships and Recognition, in coordination with OSHA Regional Office staff, recently conducted a process improvement project to develop a new format for the Voluntary Protection Programs (VPP) Site Report. The goal of this project was to reduce the time required to both prepare and review the report while ensuring adequate documentation of the VPP onsite evaluation.

The new format divides the original VPP report into two separate sections:

- The **VPP Site Worksheet** is a worksheet to be used onsite by the evaluation team to document their findings. The purpose of the VPP Site Worksheet is to provide the technical basis and rationale that support an evaluation team’s findings and the resulting program participation recommendation.

- The **VPP Site Report** is a summary of the findings and recommendations from the VPP on-site evaluation and is to be used by OSHA senior management to review the team’s findings and recommendations. The VPP Site Report is designed to reflect the overall findings from the evaluation in a *short and concise* narrative format. The Site Report contains a summary of the evaluation, documentation of the site’s injury and illness experience, and recommendation for program participation.

The revised VPP Site Worksheet and VPP Site Report replace the previous long-form narrative report. The major changes include:

- Streamlining the VPP Site Worksheet to enable yes/no answers to many of the questions and use of bullet points to document findings, rather than lengthy explanations.

- Replacement of the narrative report with a brief section that describes key program elements and the site evaluation team’s recommendations.

Both the VPP Site Worksheet and the VPP Site Report are to be maintained in the site’s public file and presented to the employer.

1.2 Technical Requirements

VPP on-site evaluation teams are required to complete the VPP Site Report and Worksheet using a laptop computer. The minimum technical specifications required to operate these programs effectively are:

- A Pentium III or equivalent CPU running at 600 MHz speed or faster (many are 900+)
- At least 256 MB RAM (Random Access Memory)
• At least a 10 GB hard drive
• Microsoft Word
• Access to e-mail from a remote location.

In addition, on-site evaluation teams should have access to a cellular (mobile) phone or pager. Additional items that evaluators have found to be useful, but not considered essential, include:

Computer projector (for example, InFocus LP 130)

Personal Desk Assistant (for example, a Palm Pilot) for scheduling and outreach/contact information.

Digital camera with the capability to load photos easily onto computer. (Note: This is often requested so that evaluators can provide pictures of success stories. However, if photos are to be published, the camera must be capable of high-resolution shots, with a minimum 300 dpi at 5x7 inches or larger. Such cameras are relatively expensive. A good alternative is a 35mm camera for hard copy prints, which can then be scanned and stored electronically.)

* * * * * * * * * * * * * * * * * * * * * * * * * *

The following pages contain detailed instructions for completing the revised VPP Site Worksheet and the VPP Site Report.
The VPP Site Worksheet requires evaluators to review the key topic areas related to a site’s safety and health management system and its working conditions. The VPP Site Worksheet has been streamlined from previous versions in several key ways:

- The number of areas to be addressed and the number of questions to be answered have been reduced as a result of consolidation and an attempt to reduce the redundancy of questions.
- Many of the questions are presented in a yes/no format, with a detailed response usually required only for those questions for which site evaluators answered “no.”
- Evaluators provide supplementary descriptive information in bullet form, rather than in narrative format.

The reduction in key topic areas in the VPP Site Worksheet has resulted in four major sections devoted to the following topics:

- Section I – Management Leadership and Employee Involvement
- Section II – Worksite Analysis
- Section III – Hazard Prevention & Control
- Section IV – Safety and Health Training.

The previous section entitled “A General Review of Safety and Health Conditions” is now part of the VPP Site Report and is no longer a stand-alone section in the VPP Site Worksheet.

At the end of each major section, an additional page has been included to enable evaluators to provide further information and discussion on such topics as Merit Goals, 90-Day Items, Best Practices, Recommendations, and Documents Referenced.

The VPP Site Worksheet’s modular format allows evaluators to further break up the document to facilitate the on-site evaluation and reporting of findings. Key sections now contain several subsections of questions that address various aspects of the general topic. Each subsection is clearly identified and given a letter and a number to facilitate easy reference by the on-site evaluators. For example, Section I, Management Leadership and Employment Involvement, consists of the following six subsections:

- Subsection A – Written Safety and Health Management System
- Subsection B – Management Commitment and Leadership
- Subsection C – Planning
- Subsection D – Authority and Line Accountability
- Subsection E – Contract Employees
- Subsection F – Employee Involvement.
Evaluators should be consistent in their use of the format when addressing the questions in each of the four topic sections. Please remember:

- Evaluators are required to complete all questions.

- Some of the questions will instruct evaluators to support their yes/no answers or explain why they believe that site performance in a particular area is adequate. **It is important that evaluators answer the entire question.**

- Although evaluators are not required to provide comments for “yes” answers, they may wish to do so in order to highlight best business practices or document a unique or meaningful application that might benefit another site.

2.1 Minimum Requirements (MR)

The previous Policies and Procedures Manual VPP TED8.1a contained a checklist for the purpose of determining if the applicant/site met *deminimus* requirements. The MR designator in the Site Worksheet allows the agency to eliminate that checklist.

Minimum Requirements (MR) represent those elements of a site’s safety and health management system that **must be in place** and at least **minimally effective** in order for a site to be considered for participation in the Merit Program. If a site fails to meet even one MR, then it is not eligible for participation in the VPP and should be asked to withdraw its application. Requirements that are considered MR will have the symbol: **MR.**

Section 4 of this document contains additional guidance intended to help you make a judgment on many of the questions identified as Minimum Requirements.

2.2 Instructions for Completing the VPP Site Worksheet

<table>
<thead>
<tr>
<th>Section I: Management Leadership &amp; Employee Involvement</th>
<th>How Assessed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes or No</td>
</tr>
<tr>
<td>A1. Are all the elements (such as Management Leadership and Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training) and sub-elements of a basic safety and health management system part of a signed, written document? (For Federal Agencies, include 29 CFR 1960.) If not, please explain.</td>
<td></td>
</tr>
<tr>
<td>A2. Have all VPP elements and sub-elements been in place at least 1 year? If not, please identify those elements that have not been in place for at least 1</td>
<td></td>
</tr>
</tbody>
</table>
### Section I: Management Leadership & Employee Involvement

<table>
<thead>
<tr>
<th>Year</th>
</tr>
</thead>
</table>

- A3. Is the written safety and health management system at least minimally effective to address the scope and complexity of the hazards at the site? *(Smaller, less complex sites require a less complex system.)* If not, please explain.

- A4. Have any VPP documentation requirements been waived? If so, please explain.

---

**To complete these subsections, evaluators should follow the steps listed below.**

1. Read the question and answer “Yes” or “No” in the first column based upon the findings from the evaluation.

2. If the question asks you to explain your “Yes” or “No” answer, please respond in bullet-point format.

3. If the Yes or No column is shaded, then the evaluator is required to provide a detailed answer to the question. Please present your analysis in bullet-point format.

4. In the section entitled “How Assessed,” identify the source(s) of information used to answer the question. If you:
   - Used information obtained during interviews, put an X in the **Interview** column.
   - Used personal observation, put an X in the **Observation** column.
   - Reviewed documents, put an X in the **Doc Review** column. Evaluators must identify the documents reviewed.

There are various ways to identify the documents reviewed. One is to assign numbers to all of the documents reviewed in connection with a particular section of the VPP Site Worksheet. When you use a document to answer a question, put the number assigned to that document in the “Doc Review” column. For example, if you used an employee manual to answer a question, and you had identified the employee manual as Document 1, you would put a “1” in the “Doc Review” column. Then, at the end of the section, you would list the number and the title of each document in the Documents Referenced box. Another potential method is to list the documents reviewed in the bulleted area below the question. Either method is acceptable.
Once the evaluators have completed the six subsections, they must complete the summary and recommendations section, as described below.

2.3 Instructions for Completing the Summary and Recommendations Section

At the end of each section, there is a summary and recommendations section. Instructions for its completion are presented below.

<table>
<thead>
<tr>
<th>Section I: Management Leadership &amp; Employee Involvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Merit Goals (Include cross-reference to section, subsection, and question, e.g.,)</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>90-Day Items (Delete this item for final transmittal to National Office)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Best Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comments including Recommendations (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Documents Referenced (as appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
</tbody>
</table>

1. In the Merit Goals section, list the specific elements that the evaluators have determined to be deficient and in need of Merit goals. Also reference the section of the VPP Site Worksheet for which the Merit Goal applies, for example, B3. If this section is not applicable, write “N/A” in the first line.

2. The 90-Day Items section should be used to document those actions that the site needs to take before OSHA can approve the site into the program. 90-Day Items should be limited to (a) compliance issues and (b) program element modifications that can be easily accomplished and that do not involve the “year-in-practice” requirement. Sites must demonstrate that they have addressed the items listed here within a 90-day period starting from the conclusion of the on-site visit. Once the applicant site has completed these items, this section should be removed from the final report that is transmitted to the National Office. The report listing these items, however, should be kept in the evaluator’s working file.

3. The Site Evaluation Team can use the optional “Best Practices” box at the end of each Worksheet Section to recognize (and thus praise) one or more aspects of the site’s safety and health management system where the site is performing particularly well.
4. The **Comments including Recommendations** section, which is optional, provides evaluators the opportunity to document additional comments about the site’s safety and health management system. Recommendations should be made in those areas where the site’s element is already at Star quality, but still has room for improvement. An appropriate recommendation is one that helps improve the element’s reliability, effectiveness, or efficiency. Like the 90-Day items, these recommendations should be removed from the report that is sent to the National Office. The report listing evaluators’ comments and recommendations, however, should be kept in the working file.

5. In the **Documents Referenced** section, evaluators must list the documents that were reviewed in addressing the elements of this section.

Team members and the Team Leader must ensure that goals, items, comments, or recommendations provided at the end of a Worksheet Area do not contradict any of the Site Evaluation Worksheet answers. For example, if the Worksheet has a question that has been answered “Yes” without further explanation, but the goals, items, comments, or recommendations indicate that the answer should have been “No” with an explanation, the inconsistency should be resolved to make the Site Evaluation Worksheet as accurate as possible.

### 2.4 Working with the VPP Site Worksheet Computer Files

In analyzing the data from the pilot test of the VPP Site Worksheet, OSHA found that there were a number of “best practices” used by VPP evaluators that enabled them to use the Worksheet in an efficient manner. These best practices resulted in a significant reduction in the time required to complete the Worksheet. Following are summaries of these best practices.

#### 2.4.1 Dividing the VPP Site Worksheet Files among Team Members

One of the best practices used by evaluators in the pilot program was to split the worksheet files and divide responsibility for their completion among team members. The method used to do this is described below.

To reduce the size of the VPP Site Worksheet computer file, increase the ease of its use, and reduce potential computer malfunctions, the VPP Site Worksheet has been broken into a series of folders and files. Each area has a folder. Each section of the Worksheet has been saved as a unique file within the appropriate area folder. For example, Section I, Subsection A and Section I, Subsection B are saved as two separate and distinct files. Both files are saved in the Section I folder. In addition to the area folders, there is a folder that contains the entire Worksheet in one big file.

To successfully work with these files, on-site evaluators should use the following procedures to divide responsibilities for completion of the VPP Site Worksheet:

1) The Team Leader should give all team members either a disk containing the full VPP Site Evaluation Worksheet if they will be able to complete the Worksheet on their own computers, or a hard (paper) copy of their assigned sections if computer resources are insufficient.
2) Before individual team members separate to conduct the evaluation, the entire team should meet and briefly review their assignments. This is to ensure that all team members understand which sections they are responsible for, and what information is needed to complete their assigned portion of the Worksheet.

3) When working with the files on the computer, team members should complete only their assigned sections. They should save their work under a different file name, such as “Section I-B, Company XYZ, Billings, MT,” to prevent its being mixed up with the original document. This can be done by using the “Save as” function under the “File” menu on the word processing software. Change the name of the file in the “File name” window that appears. If two team members are assigned to different sections of the same file, both should answer only their questions and then save their work with their own unique titles. The team leader will be able to open both files to copy and paste the information together as necessary (see instructions below for copying and pasting information).

2.4.2 Compiling the Final VPP Site Evaluation Worksheet

The following suggestions for compiling the VPP Site Worksheet sections into the final Worksheet are based on interviews with some of the team leaders.

1) The Team Leader should get the disk or hardcopy back from each team member after the site evaluation. Working alone to minimize group work (and thus person hours), the Team Leader should consolidate the different sections of the worksheet into a single document. To do this:

Open a blank MS Word document. Set the margins so that top and bottom are 1” and left and right are .5”.

Insert the File titled “Cover Pages.” To insert a file:

Put the cursor where you want to insert the file (in this case, at the top of the document).

Click on the Insert menu at the top of the document.

Click on File (to see this option you may have to expand the menu by clicking on the arrows at the bottom).

A browser window will appear. Use the browser to find the file you want to insert from its current location (in this case, most likely the A-drive, which is the floppy disk, or the C-drive if the file is already on the hard drive).

Double click on the file you want to insert.

Make all necessary changes to the cover pages of the VPP Site Worksheet.

Repeat the steps involved for inserting a file for all of the additional tables gathered from the disks received from each team member.

Save the final document (you should also save as you go!).

E-10
2) Since each team member may make additions to the “Additional Comments” file, the Team Leader should be prepared to copy and paste modifications in order to include all comments in the final report. To copy and paste sections of the document:

Highlight the section of the document you would like to copy. For sections of tables, highlight all the relevant cells or text, being sure to include the cells on the far right of the table, if necessary. If pasting into a blank document, be sure to set the margins for the top and bottom at 1” and the left and right margins at .5”. This will ensure that the formatting remains consistent between the documents.

After highlighting a section, click on the Copy icon on the tool bar, or click on Copy under the Edit menu. If Copy is not given as a choice immediately, you may need to click on the extended-menu button (the double arrows at the bottom of the menu) to find it.

Place the cursor where you would like the information pasted. Click on the paste icon from the tool menu, or click on Paste from the Edit menu.

The Team Leader can edit the report sections either before compiling them or after consolidating them.

2.4.3 Single File Version

Team Leaders who do not wish to utilize the multiple file method may use a single file version. We do not recommend cutting and pasting the tables in this version. You are more likely to be successful if you keep just one master file and have team members take turns filling out their assigned sections on the master file.
3. **VPP Site Report**

The VPP Site Report replaces the previous Site Report. The purpose of the VPP Site Report is to provide the reviewers with a brief summary of the evaluators’ findings upon completion of the site visit. The VPP Site Report is to be prepared after the VPP Site Worksheet has been completed.

The VPP Site Report addresses ten basic topics and two conditional areas:

- Purpose and Scope of Review
- Method of Data Collection
- Employees at the Worksite
- The Worksite/Program Changes (for Re-Approvals)
- Worksite Hazards
- Injury and Illness Rates
- OSHA Activity
- Elements of VPP Review
- Areas of Excellence (if applicable)
- Recommendation
- Merit Goals (if applicable)
- OSHA Log Recordkeeping

An example of a completed VPP Site Report is located at the end of this section.

3.1 **Preparing the VPP Site Report**

To complete the VPP Site report, evaluators should follow the steps listed below.

1. First compile the information (from the VPP Site Worksheet) required for completion of the VPP Site Report.

2. Once this information has been gathered and documented in the VPP Site Worksheet, present the information in paragraph form, as illustrated in the VPP Site Report Example in Section 3.3 below. Use the VPP Site Report Example as a model for developing a complete report.

3.2 **OSHA Log Recordkeeping**

Evaluators must review the VPP site’s OSHA injury and illness logs as part of a complete on-site visit and include this analysis in the VPP Site Report. To ensure that the OSHA injury and illness logs are thoroughly reviewed, evaluators must address the following issues:

- Prepare the Total Case Incidence Rate (TCIR) and Days Away from Work, Restricted and Transferred (DART) activity case incidence rate calculation table.
• Analyze the TCIR and DART rates.

• Compare the data contained in the site’s OSHA injury and illness logs with the data presented in the site’s VPP application.

The requirements for preparing each of these analyses are described below.

### 3.2.1 TCIR and DART Rate Calculation Table

Based on a review of the site’s OSHA injury and illness logs, evaluators should first complete the TCIR and DART rate table. An example follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>Hours Worked</th>
<th>Total # of Cases</th>
<th>TCIR</th>
<th>Number of Cases Involving Days Away from Work, Restricted Activity or Job Transfer</th>
<th>DART Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>185,445</td>
<td>2</td>
<td>2.2</td>
<td>2</td>
<td>2.2</td>
</tr>
<tr>
<td>2000</td>
<td>216,212</td>
<td>2</td>
<td>1.9</td>
<td>1</td>
<td>0.9</td>
</tr>
<tr>
<td>2001</td>
<td>195,444</td>
<td>1</td>
<td>.1</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>597,791</td>
<td>7</td>
<td>2.3</td>
<td>5</td>
<td>1.7</td>
</tr>
</tbody>
</table>

**BLS National Average for 2001 (NAICS 429100)**

<table>
<thead>
<tr>
<th>Year</th>
<th>Hours Worked</th>
<th>Total # of Cases</th>
<th>TCIR</th>
<th>Number of Cases Involving Days Away from Work, Restricted Activity or Job Transfer</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002 YTD</td>
<td>43,315</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
</tbody>
</table>

### 3.2.2 Analysis of the TCIR and DART Rates

In this section, site evaluators should present the site’s TCIR and DART rates and the percentage above or below the BLS National Average for the appropriate NAICS code.

The analysis of the TCIR and DART rates in the above example should be presented as follows:

• The Total Case Incidence Rate (TCIR) is 2.3 (73% below the 2001 BLS industry average for NAICS 429100).

• The Days Away from Work, Restricted Activity and Job Transfer (DART) Case Incidence Rate is 1.7 (60% below the 2001 BLS industry average for NAICS 429100).

### 3.2.3 Comparison of OSHA Injury and Illness Logs to Site’s VPP Application

Compare the site’s OSHA injury and illness logs to the site’s VPP application to determine whether the logs accurately reflect the injury and illness experience at the site. Also identify the individual responsible for maintaining the OSHA injury and illness log and verify that this individual understands OSHA’s recordkeeping requirements.
3.2.4 Temporary Employees

To fully evaluate the injury and illness experience of temporary employees at the worksite, include the following information:

- Whether temporary employees were at the worksite at the time of the site visit.
- Whether injuries or illnesses experienced by temporary employees under the direct supervision of the site were recorded on the site’s OSHA injury and illness log.
- The number of temporary employee injuries recorded on the OSHA injury and illness log for the current year.

Review applicable contractor injury and illness data and make a judgment about whether the contractors at the site are experiencing the same quality level of safety and health protection as regular employees, and/or whether the site is transferring hazardous activities to applicable contractors in order to “hide” the hazards.

3.3 VPP Site Report Example

The following is an example of the VPP Site Report. Note that this example does not include the required analysis of the OSHA logs.

I. Purpose and Scope of Review

A VPP onsite evaluation recommending Star approval was conducted at Infinitium USA, L.P., Linden Technical Center, Linden, New Jersey from February 8 through February 10, 2002. The OSHA VPP Review Team (Team) consisted of: Tom Jones, Team Leader; Jim Jones, Industrial Hygienist; Mary Jones, Safety Specialist; Lisa Jones, Ph.D., a Chemical Engineering Specialist; and Michael Jones, VPP SGE.

II. Data Collection Methods

The information for this report was obtained from the site’s VPP application; documentation reviewed on-site, interviews with employees, and a walkthrough of the plant. All areas of the plant were covered in at least one walkthrough.

III. Employees at the Worksite

There are 254 employees currently working on-site. In addition, 76 contractor employees are located onsite performing maintenance functions, implementing capital improvements, providing guard services, and staffing the cafeteria. The collective bargaining agents representing the employees onsite are the Independent Laboratory Employees Union, Inc. and the United Cafeteria Workers of America. Formal interviews were conducted with 20 employees and 10 contractors. In addition, informal interviews were conducted with 30 employees and 9 contractors.

IV. The Worksite or Program Changes (for Re-Approvals)
The site is properly classified under the Standard Industrial Classification (SIC) code 2860 for industrial organic chemicals – not elsewhere classified. The site is a corporate research and development center built in 1998. It consists of four buildings: an office complex, a maintenance building, a blending operation, and a pilot plant. The buildings are spread across 75 acres. Non-hazardous organic chemicals are combined in the blending plant to produce a saline solution for use with contact lenses. The pilot plant bottles and packages this solution for shipping. The site is not covered under OSHA’s Process Safety Management (PSM) standard.

V. Worksite Hazards

The hazards located on this site are skin irritant chemicals; confined space hazards for the storeroom areas; uncontrolled hazardous energy sources from maintenance conveyers; sanitation process hazards, including exposure to sanitation chemicals; elevated noise levels; and material handling hazards, such as truck operations and extensive conveyers.

VI. Injury and Illness Rates

The three-year Total Case Incidence Rate (TCIR) and Days Away from Work, Restricted Activity or Job Transfer (DART) case incidence rate for the period (1996-1999) are 0.3 and 0.1, respectively. The site TCIR is 92 percent below, and the DART rate is 94 percent below the 2001 BLS national industry average for SIC 2860.

VII. OSHA Activity

There has been no OSHA inspection activity at the site in any of the last three years. The site has a positive relationship with the local OSHA office. The site contacted the OSHA Regional Office regarding participation in the VPP program.

VIII. Elements of VPP Review

The OSHA VPP Review team examined each of the required elements of the site’s safety and health management system and, in accordance with their application, found them to be consistent with the high quality of VPP programs. The site meets all VPP requirements and all OSHA standards are appropriately covered. For specifics on the individual site program elements, consult the VPP Site Worksheet.

IX. Areas of Excellence (if applicable)

There are two program elements of this site that are exemplary and could be used as models for other sites in the same industry. These are:
Trend Analysis – The use of a safety and health database has resulted in trend analysis above and beyond what most sites in this industry address. They are able to pinpoint not only basic trends, but also potential interactive trends (particular locations and time of day, particular supervisors with a given piece of equipment on a particular shift) and have used this ability to target training, discipline, and corrective actions.

Machine Guarding – The machine guarding for the site is excellent. The guarding for the 200 Ton Press is particularly good. Such presses are difficult to guard effectively, but this site has found a rail, shield, and control panel system that is very effective.

X. Recommendation for Participation

The OSHA VPP Review Team recommends participation of the Infinitium USA, L.P., Linden Technology Center, Linden, NJ, in the OSHA VPP Star Program.

XI. Merit Goals

N/A
This section will help evaluators to interpret VPP Minimum Requirements (MRs) found on the VPP Site Worksheet. Not every MR on the Site Worksheet is covered here; some items already have guidance written into the question. Instead, this section covers the MRs that require additional guidance to determine whether a site has met the MR and what other elements or sub-elements may have bearing on the MR.

Below is a definition of Minimum Requirement, followed by guidance for selected MRs. The specified sections and subsections are references to the Site Worksheet.

4.1 VPP Minimum Requirement Defined

A Minimum Requirement is a basic element or sub-element that the VPP considers critical to workplace safety and health. A Minimum Requirement must be at least minimally effective for the site to avoid regular or ongoing exposure of employees to serious workplace hazards.

A site is not “minimally effective” on an aspect of VPP if the site does not have one or more of the required elements of the program in operational status or ready for implementation. As a result employees may be exposed to a serious hazard or hazards. In some cases, the site may have the element, but it is so ineffective that it is as if the element did not exist.

4.2 Section I. Management Leadership and Employee Involvement

4.2.1 Section I, Subsection A. Written Safety and Health Management System

A3. *Is the written safety and health management system at least minimally effective to address the scope and complexity of the hazards at the site? (Smaller, less complex sites require a less complex system).*

- This question is intended to elicit an overall professional judgment regarding the adequacy of the written program given the size and complexity of the site and its hazards.

- Things to consider include: size of the site, complexity of the site’s work, and complexity of the hazards at the site.

- As the worksite’s size increases, it needs more formal communication and written documentation to reduce the likelihood of important elements being overlooked due to miscommunication or misunderstanding.
4.2.2  Section I, Subsection B. Management Commitment and Leadership

B1. *Does management overall demonstrate at least minimally effective, visible leadership with respect to safety and health?*  Provide examples.

- Establishing clear lines of communication with employees.
- Setting an example of safe and healthful behavior.
- Creating an environment that allows for reasonable employee access to top site management.
- Ensuring that all employees at the site, including contract employees, are provided equally high quality safety and health protection.
- Clearly defining responsibility in writing, with no unassigned areas. Each employee, at any level, must be able to describe his/her responsibility for safety and health.
- Assigning commensurate authority to those who have responsibility.
- Affording adequate resources to those who have responsibility and authority. This includes such resources as time, training, personnel, equipment, budget, and access to information and experts, including appropriate use of certified safety professionals (CSP), certified industrial hygienists (CIH), other licensed health care professionals, and other experts as needed, based on the risks at the site.
- Holding managers, supervisors, and non-supervisory employees accountable for meeting their safety and health responsibilities. In addition to clearly defining and implementing authority and responsibility for safety and health protection, management leadership entails evaluating managers and supervisors annually, and operating a documented system for correcting deficient performance.

4.2.3  Section I, Subsection D. Authority and Line Accountability

D1. *Does top management accept ultimate responsibility for safety and health in the organization?*  (Top management acknowledges ultimate responsibility even if some safety and health functions are delegated to others.)  *If not, please explain.*

- The reliance on administrative controls makes it necessary that top management accept ultimate responsibility. Without this acceptance, the administrative controls can easily fail.
- OSHA believes that if a top manager attempts to delegate too much authority, safety and health efforts likely will fail. There will be insufficient management leadership, which is necessary for successful injury and illness prevention.
- It is also a problem when top managers delegate authority to persons who lack sufficient power or resources to ensure an effective safety and health management system.
D3. *Do the individuals assigned responsibility for safety and health have the authority to ensure that hazards are corrected or necessary changes to the safety and health management system are made? If not, please explain.*

- Responsibility without commensurate authority to effect necessary changes often results in uncontrolled hazards or hazards with inferior/ineffective hazard controls.

- Typically you will find this situation when management has delegated responsibility to a safety and health person or someone with line function, but the person is unable to effect meaningful change.

D5. *Are adequate resources (for example, equipment, budget, or experts) dedicated to ensuring workplace safety and health? Provide examples.*

- Consistent with the definition of minimally effective, the key issue here is whether the lack of resources results in employees being exposed to serious uncontrolled hazards.

4.2.4 *Section I, Subsection E. Contract Employees*

E5. *Does the site’s contractor program cover the prompt correction and control of hazards in the event that the contractor fails to correct or control such hazards? Provide examples.*

- If a site is failing to correct serious contractor-created hazards that either the original contractor or another contractor created and this results in exposing (any) employees to uncontrolled hazards, it is not minimally effective. This is more common in construction, for example, when a carpenter is exposed to hazards created by a mason and no one does anything about it, because “they” did not create the problem and the mason is nowhere to be found.

- Your answer here may have bearing on your response to the Minimum Requirement at Section I, Subsection B, B1. (See also FRN at III.F.5.d.)

E11. *Based on your answers to the above items, is the contract oversight minimally effective for the nature of the site? (Inadequate oversight is indicated by significant hazards created by the contractor, employees exposed to hazards, or a lack of host audits.) If not, please explain.*

- Guidance here is provided within the parenthetical portion of the question.

- Your answer here may have bearing on MR I.B.B1. (See also FRN at III.F.5.d.)

4.2.5 *Section I, Subsection F. Employee Involvement*

F3. *Do employees support the site’s participation in the VPP Process?*
To be minimally effective, overall, employees must be aware of the VPP program and must support the site’s participation.

It is understood that some small number of employees may not support the participation, but the key consideration is whether there is sufficient support that the program can be effectively implemented. Sufficient employee support is essential if administrative hazard controls are to be effective, because employees often must perform certain actions diligently. Without employee support, it is likely that administrative controls will be compromised and employees exposed to uncontrolled hazards.

F4. Do employees feel free to participate in the safety and health management system without fear of discrimination or reprisal? If not, please explain.

The issue is whether employees can participate in activities in the safety and health management system without fear that their participation may lead to adverse consequences.

For example, there should be no reprisals for participating in an accident investigation or for reporting a hazard or near-miss.

F9. Do employees have access to results of self-inspection, accident investigation, appropriate medical records, and personal sampling data upon request? If not, please explain.

It is not minimally effective if the employer refuses to provide such information when requested by employees, or otherwise deliberately prevents access to such records.

See CFR 1910.1020 for appropriate records.

4.3 Section II. Worksite Analysis

4.3.1 Section II, Subsection B. Baseline Hazard Analysis

B1. Has the site been at least minimally effective at identifying and documenting the common safety and health hazards associated with the site (such as those found in OSHA regulations, building standards, etc., and for which existing controls are well known)? If not, please explain.

A baseline survey and analysis is a first attempt at understanding the hazards at a worksite. It establishes initial levels of exposure (baselines) for comparison to future levels, so that changes can be recognized. Systems for identifying safety and industrial hygiene hazards, while often integrated, may be evaluated separately. Baseline surveys must:

Identify and document common safety hazards associated with the site (such as those found in OSHA regulations or building standards, for which existing controls are well known), and how they are controlled.

Identify and document common health hazards (usually by initial screening using direct-reading instruments) and determine if further sampling (such as full-shift dosimetry) is needed.
• Identify and document safety and health hazards that need further study.

• Cover the entire worksite; indicate who conducted the survey, and when it was completed.

• The original baseline hazard analysis need not be repeated subsequently unless warranted by changes in processes, equipment, hazard controls, etc.

• Refer back to the definition of minimally effective provided above.

• Your response to this item may have bearing on your answer to the Minimum Requirement at Section I, Subsection A, A3.

4.3.2 Section II, Subsection C. Hazard Analysis of Routine Activities

C1. Is there at least a minimally effective hazard analysis system in place for routine operations and activities?

• The requirement is NOT for hazard analyses to be done routinely, but to be performed on routine activities.

• Task-based or system/process hazard analyses must be performed to identify hazards of routine jobs, tasks, and processes in order to recommend adequate hazard controls. Acceptable techniques include, but are not limited to, Job Hazard Analysis (JHA) and Process Hazard Analysis (PrHA).

• Hazard analyses should be conducted on routine jobs, tasks and processes that:
  o Have written procedures.
  o Have had injuries/illnesses associated with them or have experienced significant incidents or near-misses.
  o Are perceived as high-hazard tasks, for example, tasks that could result in a catastrophic explosion, electrocution, or chemical overexposure.
  o Have been recommended by other studies and analyses for more in-depth analysis.
  o Are required by a regulation or standard.
  o Any other instance when the VPP applicant or participant determines that hazard analysis is warranted.

• A good hazard analysis describes where it is happening (environment), who or what it is happening to (exposure), what precipitates the hazard (trigger), the outcome should it happen (consequence), and other contributing factors.
• Your response to this item may have bearing on your answer to the Minimum Requirement at Section I, Subsection A, A3.

4.3.3 Section II, Subsection E. Routine Inspections

E1. Does the site have a minimally effective system for performing safety and health inspections (a minimally effective system identifies hazards associated with normal operations)? If not, please explain.

• Here the parenthetical provides guidance: A minimally effective system will identify hazards associated with normal operations at the site.

• A good inspection should verify that existing controls are still in place and effective.

• A dynamic work environment where conditions change frequently may need more frequent inspections.

4.3.4 Section II, Subsection F. Hazard Reporting System

F4. Does a minimally effective tracking system exist that results in hazards being controlled?

• A documented system must be in place to ensure that hazards identified by any means (self-inspections, accident investigations, employee hazard reports, preventive maintenance, injury/illness trends, etc.) are assigned to a responsible party and corrected in a timely fashion. This system must include methods for:
  o Recording and prioritizing hazards.
  o Assigning responsibility, time frames for correction, interim protection, and follow-up to ensure abatement.

• The Section I Minimum Requirements at D4 and D5 may influence your response to this MR.

F6. Is there a minimally effective means for employees to report hazards and have them addressed?

• To be minimally effective, employees must be free to report a hazard and must be able to have their concerns addressed, that is, reported hazards controlled.

4.3.5 Section II, Subsection G. Accident/Incident Investigation

G1. Is there a minimally effective system for conducting accident/incident investigations?

• An investigation system is not minimally effective if:
○ It does not include investigation of incidents (including near-misses) where significant hazards are present.

○ Investigations of accidents and incidents are conducted but do not include a reasonable attempt to identify contributing factors.

4.3.6 Section II, Subsection I. Trend Analysis

I1. Does the site have a minimally effective means for identifying and assessing trends?

• The trend analysis is not minimally effective if the evaluation team finds easily observable trends that indicate serious uncontrolled hazards.

• Your response to MR II. I4 may have bearing.

4.4 Section III: Hazard Prevention and Control

4.4.1 Section III, Subsection A. Hazard Prevention and Control

A1. Does the site select at least minimally effective controls to prevent exposing employees to hazards?

• The concern here is not whether the site followed the hierarchy of controls, but whether the selected controls protect employees from exposure to a serious hazard.

A10. Does the site have minimally effective written procedures for emergencies?

• The issue here is whether the site has a procedure for dealing with foreseeable emergencies.

• If no emergency plan exists, or the plan is so limited that it does not address foreseeable emergencies (TED 3-16 3h), it is not minimally effective.

4.5 Section IV. Safety and Health Training

4.5.1 Section IV, Subsection A. Safety and Health Training

A4. Does the site provide minimally effective training to educate employees regarding the known hazards of the site and their controls? If not, please explain.

• If, in general, the employees are not knowledgeable about serious hazards at the site and their controls, then the training cannot be considered minimally effective.
Appendix F

Recommended Interview Questions

I. Purpose. Interviews are an important tool in assessing the effectiveness of a site’s safety and health programming. These questions are intended to guide the OSHA reviewer during oral employee interviews. To begin, explain the purpose of the interview and the reason for OSHA’s presence at the site. Make employees aware that interviews are kept confidential and that the employee’s responses will not in themselves determine company approval or disapproval.

II. General Employee Interview Questions.

A. How long have you worked here?

B. Tell me about your job. What do you do during a typical day?

C. What are the safety and health hazards of your job?

D. How do you protect yourself from those hazards? What kind of personal protective equipment do you wear? Were you provided training?

E. What type of safety and health training have you received?

F. What happens if management disobeys a company safety rule? If an employee disobeys?

G. How do you respond in the event of a fire, hazardous waste spill, alarm, or medical emergency?

H. What does VPP mean to you?

I. What is one method of reporting a safety or health concern? What was the last unsafe practice you reported and/or corrected?

J. How do your supervisors demonstrate their involvement in safety and health?

K. Have you ever seen anyone testing the air, noise levels, or conducting other surveys for possible health hazards? Do you know what the results were or what they meant?

L. Have you or anyone you know ever been injured or experienced a job-related illness? What is the procedure when someone is injured?

M. How are you involved in the safety decision-making process?

N. Is safety and health valued in your organization?

F-1
O. What is one objective in your department’s safety program?

P. How does management support your involvement in safety?

Q. What are your rights under OSHA?

R. Is there anything else you think we should know about the safety and health program here?

III. Supervisors.

A. How long have you worked here? When did you become a supervisor?

B. What do you see as your role in safety and health?

C. To what kinds of hazards are you and/or your employees exposed?

D. Has the company’s upper management provided adequate resources for safety and health programming, such as funding, time, and technical support?

E. What do you do when you discover a hazard in your area?

F. What do you do when an employee reports a hazard in your area?

G. Do you provide employee training in safety-related topics? (If so, please describe.)

H. Please give some examples where you had to use the disciplinary system for infractions of safety and health rules.

I. When was the last emergency drill? What is your role in drills?

J. How are you held accountable for ensuring safe and healthful working conditions in your area?

K. At high hazard chemical plants only: Is maintenance satisfactory, particularly on release prevention equipment? Is there adequate supervision provided for work performed on all shifts?

L. Do you have contract employees working in your area? If so, how do you control and address safety or health hazards relating to or created by them?

M. Are there routine or unannounced inspections? Who participates?

IV. Administrators and Executives.

A. How long have you been with (company)?
B. Describe the type of safety and health hazards at this site.

C. How does management ensure that employee exposure to those hazards is eliminated or controlled?

D. How do you demonstrate leadership in and commitment to safety and health?

E. What benefits will a VPP partnership provide for your company?

F. What do you think are your facility’s best practices in safety and health?

G. How do you address the competing pressures of production and safety?

H. How do you hold your supervisors accountable for safety and health? Have you ever had to discipline a supervisor for not following the rules?

I. How are you held accountable for your safety and health responsibilities?

V. Recordkeepers.

A. Who is responsible for recordkeeping?

B. Is your site recordkeeping centralized? Is it computerized?

C. Do you have a completed Summary of Occupational Injuries and Illnesses for the last 3 calendar years? Do you have the supplemental documentation for each case entered on the log?

D. Which form do you use as the supplementary record: OSHA’s First Report of Injury, a State workers’ compensation form, an insurer’s form, or other?

E. What is the process by which injury and illness information gets to the recordkeeper? After an injury or illness occurs, how long does it take to enter it on the log?

F. What type of reference material do you refer to for guidance on keeping illness and injury records?

G. Who decides whether or not a case is recordable?

H. How do you determine whether or not a case is work-related?

I. Do you record any cases on the OSHA forms that are not compensable under workers' compensation?

J. How do you distinguish between an injury and an illness? Between medical treatment and first aid?

F-3
K. When does a case involve lost workdays? What constitutes restricted work activity?

L. What is your process for monitoring applicable contractor logs?

M. How do you safeguard the confidentiality of medical records?

N. How do you assure that any work restrictions are applied appropriately?

O. How have you assured timely and clear communications with the health care professional?

VI. Occupational Health Care Professionals.

A. What are your qualifications and licenses?

B. What procedures are in place to ensure that health care services are delivered consistently and effectively?

C. What type of audit procedures do you use to compare your process with acceptable standards of practice and OSHA requirements?

D. Are employees provided timely access to services?

E. How do you assure that work restrictions or work removal are followed?

F. How are you made aware of the job hazards at this facility? Are you included in identification of workplace hazards, or development of restricted duty jobs, or other onsite issues?

G. What kinds of health surveillance programs are in place?

H. How do you communicate health surveillance data to employees and management to reduce future risk?

I. Explain how you evaluate the effectiveness of your occupational health care program.

VII. Maintenance Personnel.

A. Is there a scheduled preventive maintenance program? How is it carried out?

B. Do maintenance personnel participate in safety functions?
C. Is there a priority system for safety/environmental related maintenance items? Is it being followed?

D. Does the preventive maintenance program include onsite vehicles, sprinkler systems, detection/alarm equipment, fire protection and emergency equipment?

E. Do you have input concerning safety and ease of maintenance for new equipment and machinery purchases?

F. Do you have an inventory of spare parts critical to safety and environmental protection?

G. Are you trained in the control of hazardous energy and the proper use of locks and tags?

H. Is there a system in place to track requests for repairs?

I. What methods are used to monitor the condition of critical equipment?

J. What is the ratio of scheduled versus unscheduled maintenance work?

K. What has the trend regarding maintenance been like over the past few years?

L. At sites covered by Process Safety Management (PSM), please ask appropriate questions from the Dynamic Inspection Priority Lists.

VIII. General Questions for Onsite Evaluations to Determine Reapproval.

A. Describe any changes in your job or in the handling of safety issues since the last OSHA onsite evaluation.

B. How familiar are you with VPP? Has your awareness increased since the last visit?

C. Do you have any increased knowledge of your rights under the program, including your right to receive upon request results of self-inspections or accident investigations?

D. Do you feel that the VPP partnership has had a positive impact on your job and your safety?

E. Have you noticed any changes in safety and health conditions here since the site’s approval in VPP?
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