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  - 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.



















































































- 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.
  8. Employee Rights. Outline the rights of employees under the OSH Act and, for Federal agency employees, 29 CFR 1960.
- 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.
2. Management Leadership.
- 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.

- a. Baseline safety and industrial hygiene surveys.
- b. Self-inspection forms and records.
- c. Health hazard assessment and monitoring records (such as industrial hygiene surveys, sampling results, exposure calculations, and summary reports).
- d. Hazard analysis forms and reports.
- e. Accident/incident investigations to verify that all causes of an accident/incident are identified, undue blame or reprisal is not placed on employees, and recommendations for preventing future occurrences are listed.
- f. Hazard reporting system for employees.
- g. Annual safety and health management system evaluations, worksite audits, and when needed to demonstrate that VPP criteria are being met, corporate audits that an applicant/participant voluntarily chooses to provide in support of its application.
- h. The system for managing contractor safety and health, and related documents.
- i. Trends analysis reports of injury/illness, accidents, employee hazard reports, etc.

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.



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.

<b>If:</b>	<b>Then:</b>
The participant's 3-year rates are above the national average, and an onsite evaluation has been conducted.	The participant must be placed on 1-Year Conditional status. The RA may <i>also</i> allow a 2-year rate reduction plan to provide the participant more time to reduce its rates to below the national average.
The participant's 3-year rates are above the national average, and an onsite evaluation has not been conducted.	The participant must be placed on a 2-year rate reduction plan approved by the RA.

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 designees 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.

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

**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.































**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.

Recordable Non-fatal Injury and Illness Case Incidence Rates					
1	2	3	4	5	6
Year	Total Work Hours	Total Number of Injuries & Illnesses		Total Number of Injury & Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer	
Last Year					
Most recent published BLS rate for NAICS code _____					
% 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:  $(TCIR) = (\text{total recordable non-fatal injuries and illnesses} \div \text{total hours worked}) \times 200,000$
- 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:  $(DART \text{ rate}) = (\text{total recordable non-fatal injuries and illnesses resulting in days away, restricted work activity, and/or job transfer} \div \text{total hours worked}) \times 200,000$
- 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:







































































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## 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

	Yes or No	How Assessed		
		Interview	Observation	Doc Review
<b>Section I: Management Leadership &amp; Employee Involvement</b>				
<b>A. Written Safety &amp; Health Management System</b>				
A1. <i>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.</i>				
•				
A2. <i>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</i>				

	How Assessed			
	Yes or No	Interview	Observation	Doc Review
<b>Section I: Management Leadership &amp; Employee Involvement</b>				
year.				
•				
A3. <i>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. MR.</i>				
•				
A4. <i>Have any VPP documentation requirements been waived? If so, please explain.</i>				
•				

**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.

<b>Section I: Management Leadership &amp; Employee Involvement</b>	
<b>Merit Goals</b>	<i>(Include cross- reference to section, subsection, and question, e.g., I.B.2)</i>
1.	
2.	
<b>90-Day Items</b>	<i>(Delete this item for final transmittal to National Office)</i>
1.	
2.	
<b>Best Practices</b>	
1.	
2.	
<b>Comments including Recommendations</b>	<i>(optional)</i>
1.	
2.	
<b>Documents Referenced</b>	<i>(as appropriate)</i>
1.	
2.	

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!).

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:

1999	185,445	2	2.2	2	2.2
2000	216,212	2	1.9	1	0.9
2001	195,444	1	.1	0	0
<b>Total</b>	<b>597,791</b>	<b>7</b>		<b>5</b>	
			<b>2.3</b>		<b>1.7</b>
<b>BLS National Average for 2001 (NAICS 429100)</b>			<b>8.6</b>		<b>4.2</b>
2002 YTD	43,315	0	0.0	0	0.0

### 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



## Site Worksheet Minimum Requirement Guidance

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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:
  - Have written procedures.
  - Have had injuries/illnesses associated with them or have experienced significant incidents or near-misses.
  - Are perceived as high-hazard tasks, for example, tasks that 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.
- 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:
  - Recording and prioritizing hazards.
  - 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?



- 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?

- 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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