OSHA INSTRUCTION

U.S. DEPARTMENT OF LABOR

Occupational Safety and Health Administration

DIRECTIVE NUMBER: CSP 03-01-005	EFFECTIVE DATE: 01/30/2020
SUBJECT:	Voluntary Protection Programs Policies and Procedures Manual

ABSTRACT

Purpose: This instruction revises and clarifies policies and procedures for administering the Occupational Safety and Health Administration (OSHA) Voluntary Protection Programs (VPP) and describes agency procedures for implementation.

Background: The Occupational Safety and Health Administration (OSHA) on July 2, 1982, announced establishment of VPP to recognize and promote effective worksite-based SHMS. In VPP, management, labor, and OSHA establish cooperative relationships at workplaces that are implementing or have implemented comprehensive safety and health management systems.

The enabling legislation for VPP is Section (2)(b)(1) of the OSH Act, which declares the Congress's intent "*to assure so far as possible every working man and woman in the Nation safe and healthful working conditions and to preserve our human resources (1) by encouraging employers and employees in their efforts to reduce the number of occupational safety and health hazards at their places of employment, and to stimulate employers and employees to institute new and to perfect existing programs for providing safe and healthful working conditions* ."

Approval into VPP is OSHA's official recognition of the outstanding efforts of employers and employees who have created and who maintain exemplary worksite safety and health management systems. OSHA offers assistance to organizations committed to achieving the VPP level of excellence.

Scope: This Instruction applies OSHA-wide.

Cancellations: OSHA Instruction CSP 03-01-003, *Voluntary Protection Programs (VPP): Policies and Procedures Manual*, April 18, 2008.

References: Occupational Safety and Health Act of 1970, 29 USC 651 (OSH Act)

OSHA Instruction CPL 02-00-160, *Field Operations Manual (FOM)*, August 2, 2016

Federal Register Notice 74 FR 927, *Revisions to the Voluntary Protection Programs to Provide Safe and Healthful Working Conditions,* January 9, 2009

OSHA Instruction CSP 03-01-004, *Special Government Employee (SGE) Program Policies and Procedures Manual for the Occupational Safety and Health Administration's (OSHA) Voluntary Protection Programs,* July 30, 2015

OSHA Publication 3885*, Recommended Practices for Safety and Health Programs,* October 2016 https://www.osha.gov/shpguidelines/index.html

State Impact: Notice of Intent required. See Chapter 1, Paragraph VII.

Action Offices: National, Regional, and Area Offices.

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

Contact: Directorate of Cooperative and State Programs
Office of Partnerships and Recognition
200 Constitution Avenue, NW, Rm N-3700
Washington, DC 20210

Approval: By and Under the Authority of

Loren Sweatt
Principal Deputy Assistant Secretary

TABLE OF CONTENTS

Chapter 1---------Introduction **Page 6**

Chapter 2---------Responsibilities **Page 18**

Chapter 3---------Guiding Principles **Page 26**

Chapter 4---------The VPP Safety and Health Management System **Page 30**

Chapter 5---------Ways to Participate: Site-Based **Page 45**

Chapter 6---------Ways to Participate: Mobile Workforce **Page 70**

Chapter 7---------Ways to Participate: Corporate **Page 88**

Chapter 8---------Star Demonstration Programs **Page 89**

Chapter 9---------The Application Process **Page 94**

Chapter 10--------Preparation for On-Site Evaluations **Page 103**

Chapter 11--------Participation Decisions and Management **Page 116**

Chapter 12 -------Enforcement Activity at VPP Worksites **Page 124**

Chapter 13 -------Training for VPP Personnel **Page 130**

Appendix A-------Format for Annual Self Evaluations **Page 139**

Appendix B------ Calculating Injury and Illness Rates **Page 149**

Appendix C-------Interview Questions **Page 155**

Appendix D-------Intent-To-Terminate Flow Chart **Page 162**

Appendix E-------OIS Enforcement Codes **Page 164**

Appendix F-------Competency Models **Page 167**

Executive Summary

This Instruction cancels and replaces OSHA Instruction OSHA CSP 03-01-003. The purpose of the manual is to provide guidance for the implementation of the VPP. It incorporates, among other items, language from a series of seven VPP policy memoranda issued since August, 2009. These memoranda clarified the roles and responsibilities of the VPP Action Offices, including revised policies and procedures for actions following a fatality/catastrophe/enforcement action and failure to report a significant incident at a VPP Site.

Significant Changes

This Instruction incorporates the following changes:

- **Ways to Participate.** Three new chapters have been added to address the three ways to participate in VPP: Site-Based, Mobile Work Force (MWF), and Corporate (on hold for Program revision).

- **Training.** A new chapter was added describing training opportunities for OSHA staff with VPP responsibilities. This training will be available to VPP Evaluation Team Leaders/Participants, and VPP Managers, and will provide consistent program information about VPP policies and procedures.

- **Whistleblower.** Language was added regarding how whistleblower allegations and activities will be addressed at active VPP sites.

- **New Recommended Practices for Safety and Health Programs.** OSHA issued *Recommended Practices for Safety and Health Programs* on October 18, 2016. These guidelines are available to VPP employers and to the public as a reference for the development, application, and maintenance of systems-based safety and health management programs, required by VPP. https://www.osha.gov/shpguidelines/index.htmlr

- **VPP Policy Enhancement Memoranda**. A series of seven VPP policy enhancement memoranda, issued since August, 2009, have been incorporated into the manual.

- **Providing Approval/Reapproval Reports.** The authority to provide copies of on-site evaluation reports and worksheets has been transferred to the Regional Administrator (RA). The RA will send initial VPP approval reports and worksheets to all newly-approved VPP sites, and will send reapproval reports when requested by the VPP participant.

- **Data Entry.** The responsibility for entering VPP site data into the VPP Automated Data System (VADS) has been assigned to the VPP Manager.

- **Process Safety Management (PSM):** Language has been added providing guidance for evaluating PSM issues at VPP sites with operations covered by the PSM standard.

- **Reorganization of the Manual.** The VPP Policies and Procedures Manual has been reorganized by topic to facilitate ease of reading.

- **Corporate.** OSHA is currently revising the VPP Corporate policy. The chapter for VPP Corporate has been removed and a place holder has been included. A new revised program for VPP Corporate is being developed and will be added upon approval.

- **Appendices.** The appendices have been streamlined. The VPP report worksheets and application templates have been removed and are located on OSHA's O: Drive.

- **Other.** This Instruction provides clarification on VPP policies and procedures, such as contractor injury and illness rate issues, Rate Reduction Plan effective dates, and appropriate assignment of VPP employers' North American Industry Classification Systems (NAICS) codes.

Chapter 1
Introduction

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

II. Scope. This Instruction applies to federal OSHA-wide.

III. Cancellation. OSHA Instruction CSP 03-01-003.

IV. Significant Changes.

A. Ways to Participate. Three new chapters have been added to individually address the three ways to participate in VPP: Site-Based; Mobile Work Force (MWF); and Corporate (on hold pending Program revision). Each chapter contains the pertinent information, processes, and procedures for that particular method of VPP participation.

B. Training. A new chapter was added to describe available training opportunities for OSHA staff with VPP responsibilities. This training will be available to VPP Evaluation Team Leaders/Participants, and VPP Managers, and will provide consistent program information about VPP policies and procedures. Information about these opportunities is presented in Chapter 13.

C. Whistleblower. Language was added forwarding how whistleblower allegations and activities will be addressed at active VPP sites. These situations will be handled on a case-by-case basis. The Regional VPP staff and the Area Office staff will collaborate with the Regional Whistleblower Office on the status of cases, and how findings may affect a VPP site's status.

D. New Recommended Practices for Safety and Health Programs. Initially issued on October 18, 2016*, Recommended Practices for Safety and Health Programs* guidelines are available to VPP employers and to the public as a reference for the development, application, and maintenance of systems-based safety and health management programs, required by VPP. https://www.osha.gov/shpguidelines/index.html

E. VPP Policy Enhancement Memoranda. A series of seven VPP policy enhancement memoranda, issued since August, 2009, have been incorporated into the manual.

F. Providing Approval/Reapproval Reports. The authority to provide copies of on-site evaluation reports and worksheets has been transferred to the RA. The RA will send initial VPP approval reports and worksheets to all newly-approved VPP sites, and will send reapproval reports when requested by the VPP participant.

G. Data Entry. The responsibility for entering VPP site-relevant data into the VPP Automated Data System (VADS) has been assigned to the VPP Manager.

H. Process Safety Management (PSM). Guidance has been added to address issues related to the evaluation of PSM issues at VPP sites with operations covered by the PSM standard.

I. Reorganization of the Manual. The Manual has been reorganized for clarity. The previous Manual's Chapter 3, which specified the requirements for various categories of participants, has been replaced by Chapters 5, 6, and 7, which address the three ways to participate (Site-Based, MWF, Corporate). Star and Merit requirements and on-site evaluation procedures are specified within each of these chapters. The VPP safety and health management system is the subject of a new Chapter 4, whereas previously it was included in Star Program requirements. Preparation for on-site evaluations is the subject of a new Chapter 10. Consequently, chapter titles and number designations differ from those referenced in the previous manual.

J. VPP Corporate. OSHA is revising the VPP Corporate policy. The chapter for Corporate has been removed and a place holder has been included. A new pilot program for VPP Corporate is being developed and will be added upon approval.

K. Appendices. The appendices have been streamlined. The VPP report worksheets and application templates have been removed and are located on OSHA's O: Drive.

L. Other Clarifications. This Instruction provides clarification on various VPP policies and procedures, notably:
   1. Contractor injury and illness rate issues,
   2. Appropriate assignment of VPP employers' North American Industry Classification System (NAICS) codes, and
   3. The effective dates for Rate Reduction Plans. (RRPs)

V. References.

A. Occupational Safety and Health Act of 1970, 29 USC 651 (OSH Act)

B. OSHA Instruction CPL 02-00-163, *Field Operations Manual (FOM)*, September 13, 2019

C. Federal Register Notice 74 FR 927, *Revisions to the Voluntary Protection Programs to Provide Safe and Healthful Working Conditions,* January 9, 2009

D. OSHA Instruction CSP 01-00-004, *State Plan Policies and Procedures Manual*, September 22, 2015

E. OSHA Instruction CPL 03-00-014, *PSM Covered Chemical Facilities National Emphasis Program,* November 29, 2011

F. OSHA Instruction CSP 03-01-004, *Special Government Employee (SGE) Program Policies and Procedures Manual for the Occupational Safety and Health Administration's (OSHA) Voluntary Protection Programs,* July 30, 2015

VI. Action Information.

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

B. Action Offices. OSHA National, Regional, and Area Offices with responsibilities for administering VPP

C. Information Offices. State designees; OSHA Directorates of Enforcement Programs, Construction, and Training and Education; Office of Communications, and the Department of Labor's Office of the Solicitor

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

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

States are expected to have policies and procedures in the form of a manual, a directive, or other documents for administering their approved VPP. These must be available for agency and public review.

OSHA encourages, but does not require, adoption of the changes in this manual. Notice of intent by states is required.

B. Changes in this Instruction. This Instruction is a Federal Program Change that updates guidance for implementing VPP, and implements revised policies and procedures regarding:

1. Inclusion of three separate chapters for the three Ways to Participate,
2. VPP training modules for OSHA staff,
3. Whistleblower activities at VPP sites,
4. PSM policy guidance for reapproval evaluations, and
5. Incorporation of seven VPP policy enhancement memoranda.

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

1. If the state adopts policies and procedures that differ from those of Federal OSHA, the state may either:

   a. Post all VPP policies and procedures documentation, including any response to these changes, on the State Plan website and provide the link to OSHA; or
   b. Provide OSHA a copy of VPP policies and procedures, any response to these changes, and information on how the public may obtain a copy.

2. If the state's VPP policies and procedures are identical to those of Federal OSHA, and it adopts changes identical to those in this Instruction, it will provide OSHA the date of adoption of these latest changes.

   If the state does not adopt these changes, all VPP policies and procedures must be available in the manner noted above for policies that differ from those of Federal OSHA. OSHA will provide summary information on the state responses to this Instruction on the website.

VIII. Definitions

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

B. Annual Self-Evaluation. A VPP participant's yearly self-assessment gauging the effectiveness of all required VPP elements and any other elements of the participant's safety and health management system. The annual self-evaluation is due to the Regional Office (RO) each year by February 15.

C. Annual Information Submission. A document written by a VPP participant and submitted to OSHA by February 15 each year, consisting of the following information:
   1. Updated names and addresses of participant/applicant;
   2. Participants and applicable contractors' injury and illness data. This data will include case numbers and rates;
   3. Average number of employees at the site and the total number of hours worked by those employees for the previous calendar year;
   4. A copy of the most recent annual evaluation of the participant's safety and health management system;
   5. Descriptions of significant changes or events;
   6. Progress made on the previous year's recommendations;
   7. Merit or One-Year Conditional goals (if applicable); and
   8. Success stories.

D. Appeal. A written request to OSHA's Office of the Assistant Secretary or consideration of additional information provided by the site.

E. Applicable Contractor. A contractor whose employees worked at least 1,000 hours for a VPP site-based applicant/participant in any calendar quarter within the last 12 months, and are not directly supervised by the applicant/participant.

F. Accepted Application. An application that has been reviewed by the Regional Office, or the National Office, for certain employers seeking VPP participation and found to be complete. Also, referred to as a completed application.

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

H. Compliance Assistance Specialist. Compliance Assistance Specialists (CAS) are employees of OSHA whose primary responsibility is to promote OSHA's cooperative programs, training opportunities, and information and tools available on the OSHA website or from the agency. CAS staff are not involved in enforcement activities. They are employed throughout the country in OSHA Area Offices. In addition to their other responsibilities, they are frequently involved in VPP activities.

I. Compliance Officer. A federal compliance safety and health officer (CSHO).

J. Compressed Reapproval Process (CRP). A VPP on-site evaluation procedure that OSHA may choose to employ for site-based and MWF Star participants seeking reapproval and meeting specified criteria. A CRP evaluation examines all VPP elements assessed during a standard on-site evaluation but places particular attention on changes since the last reapproval and the most recent annual self-evaluation.

K. Conditional Status. An interim level of VPP participation when the participant has allowed one or more safety and health management system elements to slip below Star quality. Before a participant can be placed on a one-year conditional status, the participant must return its safety and health management system to Star quality within 90 calendar days of the evaluation visit, and must verify that the system's elements have been maintained at full Star level for one year.

L. Contract Employees. Those individuals employed by a company that provide services under contract to the VPP applicant/participant, usually at a VPP applicant's/participant's worksite.

M. Corporate Participation. The VPP Corporate policy is being revised. Chapter 7 of this manual is a place holder for the revised VPP Corporate policy.

N. Days Away, Restricted, and/or Transfer Case Incidence Rate (DART rate). The rate of all injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer. This rate is calculated for an individual worksite, all worksites within an applicant's/participant's Designated Geographic Area (DGA), or all worksites of an employer for a specified period of time (usually one to three years).

O. Designated Geographic Area (DGA). A specific geographic area for MWF VPP participation. A DGA will not be smaller than a single OSHA Area Office territory and will not be larger than an OSHA Regional Office territory.

P. Directorate of Cooperative and State Programs (DCSP). The Directorate responsible for coordinating and overseeing OSHA's VPP and other cooperative programs, located in OSHA's National Office.

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

R. Demonstration Program. A program within VPP that enables employers with VPP-quality safety and health protection to test alternatives to current VPP eligibility and performance requirements. If a Demonstration Program is judged successful, its alternative ways to achieve safety and health excellence can lead to changes in VPP criteria.

S. Federal Register. The official Federal government publication, issued by the Government Publishing Office (GPO), in which OSHA announces the philosophy and criteria for VPP approval and participation in a public notice commonly referred to as the VPP *Federal Register* Notice or the *Federal Register* Notice.

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

U. Injury/Illness Rates. Numerical rates that:

1. Represent an applicant's/participant's nonfatal recordable injuries and illnesses at an individual worksite or within a DGA; and
2. Are an important factor when OSHA assesses an applicant's/participant's qualification for VPP.

V. Medical Access Order (MAO). Documentation that provides OSHA personnel authority to gain access to personally identifiably employee medical information in accordance with 29 CFR Part 1913.

W. Mentoring. The assistance that a VPP participant provides to another employer to prepare that employer for VPP application and/or improve the employer's safety and health management system.

X. Merit Goal. A target for improving one or more deficient safety and health management system elements for a participant approved to the Merit program.

Y. Merit Program. The program within VPP designed for employers that have demonstrated the potential and commitment to achieve Star quality, but that need to further improve their safety and health management system and/or injury and illness performance. OSHA gives a Merit Program participant specified Merit goals that it must meet within two years in order to achieve Star status and continue within VPP.

Z. Mobile Workforce (MWF) Participation. A category of participation available to employers whose work is characterized by short-term operations and employees who move physically from one work project to another; or long term contractor operations performed at two or more fixed worksites. Distinguishing features of MWF participants include a participation plan unique to the applicant/participant and a DGA. (See Chapter 6.)

AA. On-Site Assistance Visit. A visit to an applicant/participant by an OSHA VPP Manager, Compliance Assistance Specialist (CAS), or other non-enforcement personnel, to offer assistance (for example, help with the VPP application, a records review, and/or general observations about the employer's safety and health management systems).

BB. On-Site Evaluation. A visit to an applicant/participant worksite or headquarters by an OSHA on-site evaluation team to determine whether the applicant/participant qualifies for initial approval, continued participation, or advancement within VPP.

CC. On-Site Evaluation Report. A document written by the OSHA on-site evaluation team that consists of the site report and site worksheet. This document contains the team's assessment of an applicant/participant's safety and health management system and its implementation, and the team's recommendation regarding approval of the applicant or reapproval of the participant to VPP.

DD. On-Site Evaluation Team. A multi-disciplinary group of OSHA professionals and/or Special Government Employees (SGE) who conduct on-site evaluations. The team normally consists of a team leader, a backup team leader, safety and health specialists, and other technical specialists, as appropriate.

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

FF. Participation Plan. A unique, written strategy submitted to OSHA by a MWF applicant as part of its VPP application. See Chapter 4.

GG. Process Hazard Analysis (PHA). A PHA is an organized and systemic effort to identify and analyze the significance of potential hazards associated with the processing or handling of highly hazardous chemicals.

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

II. PSM Application Supplement (A). A series of questions designed to establish a basic understanding of a VPP applicant's PSM policies and procedures. Applicants covered by the PSM standard must submit responses to the PSM Application Supplement A along with their VPP application.

JJ. PSM "Level 1" Auditor. An OSHA employee with specialized experience/training in the chemical processing or refining industries. Specific requirements for a PSM "Level 1" Auditor include:

1. OSHA Training Institute (OTI) Course 3300, Safety and Health in the Chemical Processing Industries;
2. OTI Course 3400, Hazard Analysis in the Chemical Processing Industries; and,
3. advanced training such as OTI Course 3410, Advanced Process Safety Management, or other equivalent specialized seminars in PSM; and
4. prior experience with chemical industry safety. This experience should include experience obtained in any one of the following ways:
    a. Through accident investigations in chemical, petrochemical or refinery plants involving fires, explosions and/or toxic chemical releases;
    b. Through previous chemical inspections involving process safety management evaluations; or
    c. Through previous chemical industry employment.

KK. PSM Supplement B. A document compiled annually that includes questions requiring responses to be submitted by VPP participants covered under the PSM standard as part of their annual self-evaluations submitted to OSHA.

LL. PSM Supplement C. A series of PSM-related questions selected by OSHA to use on initial and reapproval on-site evaluations. The questions are chosen from lists of questions acquired from OSHA's Refinery National Emphasis Program.

MM. Recommendations. Suggested improvements noted by the on-site evaluation team that are not requirements for VPP participation but that would enhance the effectiveness of the participant's safety and health management system. (NOTE: Compliance with OSHA standards is a requirement, not a recommendation.)

NN. Resident Contractor. A Resident Contractor is a company that provides ongoing, long-term, on-site services to a host employer at a specific site, and occupies recognizable, delineated work areas within the host employer's site.

OO. Safety and Health Management System(s) (SHMS). For the purposes of VPP, a tool used to assist in preventing employee fatalities, injuries and illnesses through the ongoing planning, implementation, integration, and control of four interdependent elements: Management Leadership and Employee Involvement; Worksite Analysis; Hazard Prevention and Control; and Safety and Health Training.

PP. Safety and Health Program. *Recommended Practices for Safety and Health Programs,* issued on October 18, 2016 for general industry business employers and on December 1, 2016 for the construction industry. These guidelines are available to VPP employers and to the public as an enhanced reference for the development, application and maintenance of systems-based safety and health management programs, required by the VPP. https://www.osha.gov/shpguidelines/index.html

QQ. Site-Based Participation. A category of VPP participation characterized by fixed, ongoing or long-term work operations at a single facility. It is available to employers of private-sector fixed worksites in general industry and the maritime industry; Federal-sector fixed worksites; and certain long-term construction worksites. These employers must control site operations and have ultimate responsibility for assuring safe and healthful working conditions. Site-based participation also is available to resident contractors at site-based VPP participants; and to resident contractors who operate at a non-participating fixed worksite (under special circumstances). (See Chapter 5.)

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

SS. Special Government Employee (SGE). As defined in 18 U.S.C. § 202, an "SGE is an officer or employee who is retained, designated, appointed, or employed to perform temporary duties…for not more than 130 days during any period of 365 consecutive days." OSHA will retain SGEs from a VPP participant who is knowledgeable in safety and health management system assessment, formally trained by OSHA in the policies and procedures of VPP, and determined by OSHA to be qualified to perform VPP on-site evaluations. An SGE may participate as a team member on VPP on-site evaluations and as a team leader for VPP on-site evaluations conducted at OSHA Offices.

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

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

VV. Team Leader. The OSHA staff person who coordinates the OSHA on-site evaluation team and ensures the performance of all evaluation activities.

WW. Temporary Employees. Employees hired on a non-permanent basis by the applicant/participant. Temporary employees are grouped with regular hires for purposes of calculating employer injury and illness rates.

XX. Termination. OSHA's formal removal of a VPP participant from the program or from a VPP Demonstration program.

YY. Total Case Incidence Rate (TCIR). A number that represents the total nonfatal recordable injuries and illnesses per 100 full-time employees, calculated for a worksite for a specified period of time (usually one to three years).

ZZ. Two-Year Rate Reduction Plan. A strategy employed when a Star participant's three-year rates rise above the national average and calls into question the participant's continuing VPP qualification. The plan is developed jointly by the participant and OSHA and must be approved by the Regional Administrator (RA). It must identify and address any safety and health management system deficiencies related to the high rates, correction methods, and timeframes, and must include quarterly participant progress reports.

AAA. VPP Annual Data Spreadsheet. (Annual Submission) The yearly report, prepared by the Regional VPP Manager and submitted electronically to the Directorate of Cooperative and State Programs (DCSP) that provides information on the annual TCIR and DART rates of participants.

BBB. VPP Approval Ceremony. An event planned by the approved participant and normally held at the participant's approved work location or headquarters, where a representative from OSHA recognizes the participant's achievement and, for initial program approvals, presents the VPP plaque and VPP flag.

CCC. VPP Automated Data System (VADS). A database that includes information on approved VPP participants (under Federal or State Plan jurisdiction). VPP applicants (under Federal jurisdiction) will be entered into the database by the Regional Office (RO).

DDD. VPP Manager. The regional staff person directly responsible for the day-to-day operations of VPP in a particular OSHA Region.

EEE. VPP Participant Representative. The person at a VPP site who is designated by an applicant/participant as the primary contact with OSHA for matters concerning VPP.

FFF. Way to Participate. One of three primary ways in which businesses and other employer organizations may seek VPP approval. These are: site-based, mobile workforce, and corporate. The principles and features of VPP-quality safety and health management systems are generally consistent for all three ways to participate. There are some differences, however, in the VPP requirements concerning system details and implementation and the manner in which OSHA evaluates applicants/participants.

GGG. Withdrawal. Decision by an applicant/participant to discontinue pursuing VPP approval or participation in VPP.

HHH. Worksite. For VPP purposes, a worksite is a location where work is performed by employees of an employer.

IX. The Programs. There are three levels of participation in VPP.

A. Star Program. The Star Program recognizes the safety and health excellence of participants whose employees are successfully protected from fatality, injury, and illness by the implementation of comprehensive and effective workplace safety and health management systems. Approved participants are self-sufficient in identifying and controlling workplace hazards and maintaining their injury and illness rates below those of their industries published by the Bureau of Labor Statistics.

B. Merit Program. The Merit Program recognizes participants that have good safety and health management systems and that show the willingness, commitment, and ability to achieve site-specific goals that will qualify them for Star participation.

C. Demonstration Program. A Demonstration Program may be developed to recognize employers that have VPP-quality safety and health management systems differing in some significant fashion from the VPP model. These employers do not meet current VPP Star requirements and do not fit the traditional model for VPP participation. If OSHA determines that the alternative approach is as protective as current VPP requirements, then the Assistant Secretary may decide to alter VPP provisions to incorporate the tested alternatives.

X. The Elements. To qualify for VPP, an applicant/participant must:

A. Maintain injury and illness rates below those identified by the BLS for their corresponding industry, and

B. Operate a comprehensive SHMS to include four essential elements and sub-elements. These elements, when integrated into an employer's daily operations, can reduce the incidence and severity of illnesses and injuries, and are:

1. Management leadership and employee involvement;
2. Worksite analysis;
3. Hazard prevention and control; and
4. Safety and health training.

Chapter 2

Responsibilities

I. Introduction. This chapter describes OSHA's responsibilities for managing VPP. These responsibilities must be carried out by the identified individual or his/her designee.

II. Assistant Secretary. The Assistant Secretary is responsible for all decisions relating to
   A. Approval of new participants,
   B. Approval of participants moving from the Merit Program to the Star Program,
   C. Granting a second Merit term,
   D. Approval of Star Demonstration Programs,
   E. Lifting of One-Year Conditional status, and
   F. Termination of participation.

III. Regional Administrators (RA). RAs are responsible for the overall management of VPP in their regions. The RA may defer some responsibilities and thus their "designee" may assume some of the functions held by the RA. The RA must:

   A. Meet VPP goals and objectives established by the Assistant Secretary.
   B. Ensure VPP Managers have access to the resources and expertise needed to effectively manage the program.
   C. Review all VPP on-site evaluation reports. Make recommendations or decisions for participation, as appropriate.
   D. Send on-site evaluation reports to all VPP new approval sites.
   E. Send on-site evaluation reports to VPP reapproval sites, upon request.
   F. Ensure MAOs are obtained prior to VPP on-site evaluations when needed.
   G. Forward the on-site evaluation report plus recommendation or decision to DCSP.
   H. Review any requests to extend the period between on-site evaluations for a participant and determine whether the extension will be granted.
   I. Develop Star Demonstration Programs for review by DCSP and approval by the Assistant Secretary, as necessary.
   J. Actively promote VPP.
   K. Attend, whenever possible, VPP ceremonies and conferences.
   L. Review region internal audits annually to determine program issues and/or deficiencies and modify regional procedures to improve program implementation and operations.
   M. Ensure all required information and data about an applicant/participant is entered into the VPP Automated Data Systems (VADS). This data includes, but is not limited to, employer name, location, contact person, telephone number, approval date, VPP status, TCIR and DART rate, union information if applicable, and number of employees.

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

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

B. Review of Applications and On-Site Evaluation Reports. DCSP must:

1. Assist regions in the review of VPP applications, when requested.
2. Review applications for Star Demonstration Programs and other pilot programs.
3. Review all on-site evaluation reports for new participants and spot-check RA recommendations for reapprovals to ensure that national report formatting requirements are met and that the VPP requirements met are clearly documented.
4. Prepare appropriate documentation for the Assistant Secretary's decisions and signature.
5. Notify the appropriate VPP Manager of the Assistant Secretary's final decisions.
6. Provide access to copies of the following documents to the worksite, appropriate labor unions, RA, VPP Manager, and other affected offices:
   a. Assistant Secretary's approval or congratulatory letter.
   b. The on-site evaluation report for newly approved participants.
7. Conduct an annual review of program injury and illness statistics to determine program impact.

C. Support. DCSP must:

1. Provide regions with program support when requested and when resources are available.
2. Assist in the development of Star Demonstration Programs and make recommendations to the Assistant Secretary concerning approval.
3. Assist the Directorate of Training and Education with the development and implementation of training information on VPP policies and procedures.
4. Provide training on the VPP policies and procedures for OSHA staff outside of VPP.
5. Ensure that applicant/participant data in VADs is accurate and current.

D. State Plan Changes. DCSP must consider proposed change supplements relating to VPP in State Plans, in accordance with the State Plan Policies and Procedures Manual, CSP 01-00-004, September 22, 2015.

E. Maintenance of Records and Data. DCSP must:

1. Ensure the information entered into VADS and provided by the Region, is accurate and includes:

a. The General Information section from the application.
b. The DCSP Director's memorandum to the Assistant Secretary requesting approval of a VPP on-site evaluation report.
c. On-Site evaluation reports.
d. Assistant Secretary's letter to the participant (which includes notification of a copy sent to any and all collective bargaining agents).
e. Any formal correspondence to and from the RA, the VPP participant, or the public.

2. With support from the Office of Information Technology Solutions (OITS), develop and maintain a comprehensive national database of VPP participants' information including, but not limited to, the information listed in section IV.E.1, above.

3. Generate VPP information and distribute to appropriate offices as requested, including:
   a. VPP On-Site Evaluation Log.
   b. VPP Application Status Log.
   c. Monthly/quarterly participation data.
   d. SGE Usage Report.
   e. Regular information updates for the OSHA VPP website.
   f. Monthly information for inclusion in publications.

V. Directorate of Training and Education (DTE).

A. DTE will work with DCSP to update and deliver training curriculum for the #2450 *Evaluation of Safety and Health Management Systems*, #5500 *VPP Team Leader Training Course*, and the OSHA #5508 *VPP Team Member Training Course*. The latter two courses were implemented in 2018.
B. DTE will assist DCSP with updates to the OSHA #5450 *Special Government Employee Training Course*, as needed.
C. Three VPP competency modules are available on LearningLink. These modules are included with additional training options for OSHA staff having responsibilities within VPP.

VI. VPP in State Plans.

A. Work with states and territories operating OSHA-approved State Plans to establish, implement, or expand VPP in their jurisdiction.
B. State Plan Submissions: Review and process State Plan submissions for VPP, including any revisions, in accordance with Chapter 1, and the State Plan Policies and Procedures Manual, CSP 01-00-004.

VII. VPP Managers. VPP managers are responsible for the day-to-day management of VPP at the Regional level. The VPP Manager may defer (with RA approval) some of their responsibilities under this section to other employees in the Region (for example: VPP Coordinators or VPP evaluation Team Leaders). They must develop and maintain a working knowledge of VPP in the following areas:

A. Application Processing. Review and process applications in accordance with Chapter 9. In addition:

1. Provide application information and assistance to interested employers, employee groups, and other parties such as trade associations, state and local governments.
2. Obtain the applicant's OSHA inspection history and review to determine the applicant's eligibility for VPP.
3. Notify the Office of Partnerships and Recognition (OPR) when VADS has been updated with the general information sections of completed applications.

B. On-Site Evaluations.

1. Ensure that an on-site evaluation is conducted within six months of accepting an application.
2. Schedule on-site evaluations, taking into consideration due dates, deadlines, priorities, and coordination with company officials.
3. Inform the Area Director so that the participant can be removed from the programmed inspection list. Such removal may occur no more than 75 days prior to the on-site evaluation.
4. Whenever possible, ensure an evaluation report is drafted on-site, including a preliminary summary recommendation for the RA's approval.
5. For approved Demonstrations; determine, in coordination with DCSP, whether an application to participate in a Star Demonstration Program has sufficient merit to warrant an on-site evaluation, and make recommendation to DCSP.

C. Approval.

1. Ensure completion of any and all, on-site evaluation reports.
2. Forward to DCSP on-site evaluation reports and RA memos regarding recommendations or reapproval decisions.
3. Inform applicants of the Assistant Secretary's decisions regarding approval.
4. Inform the Area Director of the participant's approval.

D. Annual Self-Evaluation Submissions from VPP Participants. See Appendix A

1. Ensure that each VPP participant's annual self-evaluation is received by February 15 of each year. Extensions may be granted by the VPP Manager, on a case-by-case basis. Without extenuating circumstances, after 45 days, if the annual self-evaluation has not been received, then participant may be asked to withdraw from the program.
2. Review the annual self-evaluations and:
   a. Request an explanation from the participant if a substantial increase (or decrease) in rates or some problem with the program evaluation is noted.
   b. If an unresolved serious problem is evident, make arrangements with the company for an on-site assistance visit.
3. As a courtesy, notify the participant in writing via e-mail that the annual self-evaluation has been received. Note any areas of concern and request additional information, as appropriate.
4. Submit the completed VPP Annual Data Submission Spreadsheet to DCSP by March 30, or enter the Annual Data Submission information into VADS

E. Reapproval.
1. Track current VPP participants and ensure that on-site evaluations to determine a recommendation for reapproval are scheduled and conducted in accordance with Chapter 10.
2. Obtain the RA's approval for any requests to extend with just cause the period between on-site evaluations.
3. Any approved extensions of time between on-site evaluations must be documented and copied to both DCSP and the Regional case file.

F. Special Circumstances.
1. Discuss any change in ownership, organization, and union representation (if applicable) with the participant representative, and schedule an on-site visit if needed to evaluate the change's impact. Update VADS to reflect any updates to the participant's information.
2. Coordinate and review any formal or non-formal complaints, referrals, fatalities or catastrophes, accidents or incidents, and resultant inspection reports or letters. (See Chapter 12)
3. Continued VPP Participation: Continued participation in VPP is a privilege for sites meeting the requirements of the program and is not an entitlement for any participant. OSHA may ask a participant to withdraw from VPP if the participant fails to maintain a mature, robust SHMS, or other special circumstances. If the participant fails to withdraw upon request, OSHA may terminate that location from VPP.

G. Fatality/Catastrophe/Enforcement at a VPP Site. See Chapter 12.

H. Criteria for Termination.

1. Failure to maintain injury and illness rates below required levels, failure to timely submit annual self-evaluations, or falsification of reports or data.
2. If any participant fails to maintain a mature, robust SHMS, and the participant does not withdraw upon request. (see F.3.a-g above)
3. The Region must notify DCSP via a memorandum of the RA's recommendation regarding the participant's termination or continued VPP participation.
4. The Region and DCSP will brief the OAS on the Region's intended course of action.
5. Other items or actions that concern OSHA regarding continued participation. Examples that may constitute a failure of employers' SHMS elements and/or a lack of trust by OSHA include, but are not limited to the following:

    a. fatality/catastrophe at a VPP site
    b. failure to report a hospitalization, amputation, or loss of an eye
    c. failure to communicate with transparency during and following enforcement actions
    d. failure to maintain injury and illness rates below required level
    e. failure to timely submit annual self-evaluations
    f. falsification of reports or data, and
    g. determination (by the RA) that an extreme lack of good faith is shown while negotiating possible settlement of enforcement actions. NOTE: It is the employer's statutory right to contest issued citations. This would be a rare occurrence and the RA will provide supporting information to DCSP if such circumstances form the basis for termination.

I. Ongoing Assistance. The VPP manager will be available to assist participants as needed, e.g., when changes occur at the worksite that may affect continued participation.

J. VADS Data Entry. Information about VPP applicants/participants will be entered into VADS. This data includes, but is not limited to, employer name, location, contact person, telephone number, approval date, VPP status, TCIR and DART rate, union information if applicable, and number of employees. The VPP Manager will update VADS with site information prior to transmitting the report to DCSP.

K. Training. VPP Managers will assist in:

1. Training CAS or other OSHA personnel in coordinating, conducting VPP evaluations, report writing, and other post VPP on-site activities,
2. Coordinating and conducting SGE training classes and other SGE activities.

L. Maintenance of Participant Files. The VPP manager must maintain a public file of all approved participants in the Region and make the items below available to the public on request. The participant's file will be maintained in accordance with Agency Records Retention policy (See Section M, below). The file must include:

1. VPP application and amendments.
2. On-Site evaluation reports.
3. RA's letter of recommendation.
4. RA's transmittal memoranda to Assistant Secretary (via the Director of DCSP).
5. Assistant Secretary and RA approval letters.
6. Notification to the appropriate Area Director(s) removing an approved participant from the general inspection list.
7. Participant's annual self-evaluations.
8. Participant action plans such as Rate Reduction Plans, Merit Goal reports and One-Year Conditional Plans.
9. Related formal correspondence.

M. Disposition of VPP Participant Files. VPP files can be divided into three areas, individual VPP participant files, policy files, and miscellaneous program related information. Some files may be kept in more than one office. However, the official record copies are maintained with the originating office. The maintenance and disposition of VPP records is detailed in accordance with the National Archives Records Administration Schedule, N1-100-07-001, dated March 22, 2011.

https://www.archives.gov/files/records-mgmt/rcs/schedules/departments/department-of-labor/rg-0100/n1-100-07-001_sf115.pdf

This schedule also includes when records will be destroyed and/or archived. These standards apply to original records for individual VPP sites located in the Regional Offices as well as in DCSP.

VIII. OSHA Area Directors. In addition to being knowledgeable about VPP, the Area Director's responsibilities include:

A. Inspection Deferral.

1. Ensure that programmed inspections of applicants are deferred for no more than 75 days prior to their scheduled on-site evaluation.
2. Remove approved participants from any programmed inspection lists for the duration of participation, unless a participant chooses otherwise. The RA will notify DCSP and the Area Director if a VPP participant waives its right to programmed inspection deferrals.
3. Return participants that have withdrawn or been terminated to the programmed inspection list, if applicable, at the time of the next inspection cycle.

B. Upon the RA's request, the Area Director must assign properly trained CSHOs and/or CAS staff to serve as VPP team members or team leaders.

C. The Area Director must use required procedures for conducting complaint, referral, and/or fatality/catastrophe investigations at VPP worksites and:
   1. Notify the VPP Manager when a complaint (including a non-formal complaint responded to by inquiry) is received from a VPP participant and of the subsequent disposition of the complaint.
   2. Immediately notify the VPP Manager of any fatality/catastrophe, or employers' failure to report a fatality or catastrophe, and other incidents requiring enforcement that occur at a VPP worksite.
   3. Ensure the appropriate VPP Site Enforcement codes are entered into OIS. (See Appendix E)

D. Promoting VPP. In promoting VPP, Area Directors must:
   1. Respond completely and promptly to public inquiries about VPP.
   2. Promote VPP publicly by:
      a. Giving speeches and presentations regarding VPP.
      b. Attending VPP ceremonies.
      c. Ensuring that CSHOs are knowledgeable about VPP requirements and objectives and encouraging them to identify possible candidates.
      d. Referring likely VPP candidates to the VPP Manager.
      e. Maintaining communication with VPP participants regarding OSHA standards and policies, training needs, and outreach.
      f. Supporting Regional VPP activity to the greatest extent possible.
   3. Encourage VPP participants, where appropriate, to assist OSHA with accomplishing the agency's mission (e.g., assist with outreach and training initiatives.)
   4. Notify the VPP Manager of each VPP outreach activity.

Chapter 3

Guiding Principles

I. This chapter addresses the various principles underlying VPP and contributing to the unique relationship between participants and the agency.

II. Guiding VPP Principles. The following essential principles are key to all VPP participants. To maintain Star-level participation, an applicant/participant is required to include, and maintain their SHMS with all of the elements listed.

A. Safety and Health Management System Excellence. VPP applicants and participants must demonstrate, in the development and ongoing implementation of their SHMS, a level of excellence commensurate with the rigorous standards and performance requirements embodied within VPP. Their SHMS must effectively identify, analyze/evaluate, and prevent/control hazards, ensuring the protection of employees and supporting the prevention of workplace injuries and illnesses. As a result, VPP worksites serve as models of safety and health excellence, demonstrating the benefits of a systems approach to employee protection.

Star participants, in particular, are expected to be on the leading edge of hazard prevention methods and technology. OSHA's Safety and Health Programs (SHP) guidance for general industry and construction is designed, in part, to assist small and mid-sized employers in the development and implementation of systems-based safety and health programs. Additionally, the revised guidance expands the discussion about contractor and temporary employee safety and health provisions. VPP participants will be strongly encouraged to integrate this guidance into their SHMS.

B. Cooperative Relationship. Based on the intent and history of VPP, OSHA expects participants to work cooperatively and proactively with the agency, both in the resolution of safety and health problems and in the promotion of effective SHMS. This cooperation is founded in the required interaction between labor, management, and OSHA. OSHA facilitates cooperation by designating a contact person, usually the Regional VPP Manager, who coordinates each approved participant's contact with the agency.

VPP's emphasis on open dialogue and cooperation between OSHA, the employer, employees, and employees' representatives, complements the agency's enforcement programs. OSHA continues to investigate safety and health complaints, fatalities, catastrophes, serious injury or illness, and other significant events at VPP participant sites.

C. Employee Support for VPP Participation.

1. Any application received by OSHA must reflect the support of applicant's employees.
2. When an applicant's employees are unionized,
   a. The applicant is required to provide evidence of support from applicable collective bargaining representatives. For specific requirements concerning union support for VPP participation, refer to the Eligibility sections in Chapters 5, 6, and 7.
   b. Unions retain the right to withdraw support at any time. If a Union withdraws support from VPP, the site no longer meets the requirements for VPP and will be asked to withdraw, or may be terminated.

D. Compliance with the OSH Act. All VPP applicants and participants will comply with the OSH Act, OSHA standards/requirements, and in the case of Federal agencies, 29 CFR 1960.

1. Correcting Deficiencies. Any deficiencies related to compliance that are uncovered through OSHA on-site reviews, self-inspections, employee reports, incident investigations, process hazard reviews, annual self-evaluations, or any other means must be corrected promptly. OSHA expects applicants/participants to provide effective interim protection as necessary to keep employees safe while corrections are being made.

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

E. Voluntarism. Participation in VPP is strictly voluntary. The applicant who wishes to participate freely submits information to OSHA on its safety and health management system (SHMS), goes above and beyond compliance with the OSH Act and applicable OSHA requirements, and opens itself to agency review. These expectations apply throughout the participant's involvement in VPP.

F. OSHA History. If an applicant has been inspected by OSHA within the 60-month period preceding application, the inspection, abatement, and/or any other history of interaction with OSHA will be reviewed as a part of the application and must indicate good faith attempts to improve safety and health.

G. Assurances. Applications to VPP must be accompanied by assurances describing steps the applicant agrees to undertake if OSHA approves the application. There are some assurances that apply to all levels of VPP participation. There are also other assurances unique to each specific type of participation (e.g. site-based, mobile workforce, or corporate participation.) See the Assurances sections in Chapters 5, 6, and 7.

H. Continuous Improvement. VPP participants must demonstrate continuous improvement in the operation and impact of their SHMS. Annual VPP self-evaluations help participants to measure success, identify areas needing improvement, determine needed changes, and track the implementation of these changes. OSHA on-site evaluation teams verify this improvement.

I. Protecting Whistleblower Rights. All VPP participants and applicants will agree to protect the rights of whistleblowers per 29 CFR Part 1977, will train managers on whistleblower protections during regular OSHA trainings and will post OSHA literature on whistleblower rights in a place visible to employees.

J. Outreach. VPP participants serve as models of safety and health excellence in their industries and in their communities. As such, all VPP participants are required to conduct outreach and mentoring beyond their own facility. This can be accomplished in a variety of ways, including but not limited to:

1. Mentoring other worksites interested in improving safety and health;
2. Conducting presentations at safety and health conferences and meetings of labor, industry and government groups participating in training initiatives; and other outreach opportunities;
3. Supporting employee participation as Special Government Employees on VPP on-site evaluation teams; and
4. Sharing best practices and success stories.

III. Recognition. When OSHA approves an applicant for participation in VPP, the agency recognizes that the applicant is providing, at a minimum, the basic elements of ongoing, systematic protection of workers in accordance with rigorous VPP criteria. See Chapter 11 for management responsibilities related to OSHA recognition.

A. Exemption from General Schedule Inspection. The protection provided by VPP participants should make general schedule inspections unnecessary. Therefore, the site-based employer's approved worksites and MWF employers' work within an approved DGA, are removed from OSHA's programmed inspection lists (unless the participant chooses not to be removed). The RA will inform DCSP and the applicable Area Office when an employer waives its right to the programmed inspection exemption.

B. Publicity. OSHA publicizes VPP participants' successes in a variety of ways, including stories on the agency's website, www.osha.gov; press releases and other agency media; and recognition during agency officials' speeches and presentations.

C. Symbols of Recognition.

1. The VPP symbols of recognition are plaques and program flags, normally presented at approval ceremonies.
2. The participant also may choose to use the VPP logo on such items as letterhead, shirts, mugs, pins, and magnets.

a. Guidance concerning use of the VPP logo is published on the VPP website, www.osha.gov/dcsp/vpp. Participants should be referred to this webpage.

b. If additional guidance is needed, contact the Director of OPR.

Chapter 4

The VPP Safety and Health Management System

I. Introduction. OSHA requires VPP applicants/participants to have a comprehensive safety and health management system consisting of four basic elements and sub-elements. These elements work together to prevent fatalities, injuries, and illnesses in the workplace. Within this system, all parts are interconnected and affect one another.

A. The Four Elements. The VPP SHMS consists of four critical interrelated elements. Effective implementation requires that they function together in one comprehensive and systematic effort.

1. Management Leadership and Employee Involvement. In a VPP-quality organization, management regards worker safety and health as a fundamental value and applies its leadership to safety and health protection with as much commitment, planning, and visibility as it does to other organizational purposes. In organizations with the most effective system, employees are actively and meaningfully involved in the planning and operation of the safety and health management systems and in decisions affecting their own safety and health.
2. Worksite Analysis. The successful management of workplace hazards begins with a thorough understanding of all hazardous situations to which employees may be exposed and the implementation of a meaningful system to recognize hazards as they arise.
3. Hazard Prevention and Control. Workplace hazards identified during the hazard analysis process must be eliminated or controlled by developing and implementing specified systems and by using the specified hierarchy of controls.
4. Safety and Health Training. Training is necessary to reinforce and complement management's commitment to prevent exposure to hazards. All employees must understand the hazards to which they may be exposed and how to prevent exposure to themselves and others from such hazards. Effective training enables employees to accept and follow established safety and health procedures, as well as to understand they are protected from retaliation for reporting hazards.

B. Effective, Performance-Based Protection. The VPP system is performance-based. Employers and employees must identify their specific workplace hazards and needs, to develop and implement appropriate protective measures. OSHA's VPP experience provides ample evidence of this system's feasibility and effectiveness. The system's flexibility has enabled its application to any private sector and federal agency, and any size employer, from the small single worksite to the large multi-facility organization. The system's comprehensiveness and rigorous standards, when applied consistently and conscientiously, enable effective worker protection in diverse settings and under varied work conditions.

II. Management Leadership and Employee Involvement. Each applicant must be able to demonstrate senior-level management leadership in, and commitment to, its SHMS. Management systems for comprehensive planning must address protection of worker safety and health. Employees must be meaningfully involved in the safety and health management system.

All aspects of the safety and health management system must be appropriate to the size of the worksite(s) and the type of industry.

A. Management Leadership. Authority and responsibility for employee safety and health must be integrated with the overall management system of the organization and must involve employees. Management demonstrates its commitment to safety and health protection and VPP participation by establishing, documenting, and communicating to employees and contractors clear goals that are attainable and measurable; objectives that are relevant to workplace hazards and trends of injury and illness; policies and procedures that indicate how to accomplish the objectives and meet the goals; and resources necessary to accomplish the communicated goals and objectives in a timely manner. Management leadership actions include:

1. Signing a statement of commitment to maintain compliance with OSHA standards, to continuously improve safety and health, and to consistently meet VPP requirements.
2. Maintaining a written SHMS documenting the elements and sub-elements, procedures for implementing the elements, and other safety and health programs, including those required by OSHA standards applicable to their industry. For example: Federal agencies' written programs must meet the requirements of 29 CFR part 1960, and referenced OSHA standards; and construction companies' written programs must also meet the requirements of 29 CFR 1926.20(b).
3. Providing visible leadership in implementing the SHMS.
4. Ensuring all workers at a participant's site (including any contractor's employees) are provided equal, high-quality safety and health protection.
5. Establishing clear communication with employees and creating an environment that allows for reasonable employee access to site management and senior management.
6. Responding to employees in a timely and appropriate manner following employees' reports of hazardous conditions. The SHMS must include tracking these responses and tracking hazard elimination or control to completion.
7. Setting an example by following the rules such as, but not limited to, wearing any required personal protective equipment, reporting hazards, reporting injuries and illnesses, following the same safety and health procedures expected for all employees at the workplace, and subjecting managers and employees to the same disciplinary system for infractions.

8. Defining in writing, and communicating the responsibility and authority for SHMS performance to all employees, with no unassigned areas. Each employee, at any level, must be able to describe his/her responsibility for safety and health.
9. Assigning adequate authority to those persons who are responsible for safety and health, ensuring they are able to carry out their responsibilities.
10. Providing and directing adequate resources to those who have responsibility and authority. This includes resources, such as time, training, personnel, equipment, budget, and access to information and experts, including appropriate use of certified safety professionals (CSP), certified industrial hygienists (CIH), licensed health care professionals, and other experts as needed.
11. Holding managers, supervisors, and non-supervisory employees accountable for meeting their safety and health responsibilities.
12. Evaluating managers' and supervisors' safety and health performance at least annually by operating a documented performance standards and appraisal system that addresses correcting deficient safety and health performance.
13. Planning for emergency safety and health expenditures in the budget, including funding for prompt correction of uncontrolled hazards.
14. Integrating safety and health into other aspects of planning, such as planning for new equipment, processes, and buildings.
15. Conducting an annual SHMS self-evaluation in order to:
    a. Maintain knowledge of the hazards to which employees are exposed.
    b. Maintain knowledge of the effectiveness of system elements.
    c. Ensure completion of the previous years' recommendations.
    d. Modify goals, policies, and procedures.

B. Employee Involvement. In addition to their right to report hazards, employees must be involved in the safety and health management system in active, meaningful, and constructive ways. There are many opportunities for employees to be involved and it is expected that all employees will participate in three or more different ways. 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.

1. The site culture must enable and encourage effective employee involvement in the planning and operation of the SHMS and in decisions that affect employees' safety and health.

2. To facilitate involvement, employees must have access to the results of self-inspections, accident investigations, and other safety and health data upon request. At unionized sites, this requirement may be met through employee representative access to these results.

3. Examples of acceptable employee involvement include, but are not limited

to, the following:

a. Participating in *ad hoc* safety and health problem-solving groups;
b. Participating in audits and/or worksite inspections;
c. Participating in accident and incident investigations;
d. Developing and/or participating in employee improvement suggestion programs;
e. Training other employees in safety and health;
f. Analyzing job/process hazards;
g. Acting as safety observers; and
h. Serving on safety and health committees constituted in conformance with the *National Labor Relations Act*.

4. Employees do not meet this requirement by only participating in incentive programs, attending meetings, or working in a safe manner.

5. All employees, including new hires, must be notified about participation in VPP and employees' rights under the OSH Act.

C. Contract Worker Coverage. All contractors and subcontractors, whether at general industry, construction, maritime, or Federal agency VPP sites, must follow worksite safety and health rules and procedures applicable to their activities while at the site.

1. VPP participants are expected to encourage all of their contractors to develop and operate effective SHMS.

2. Participants must have in place a documented oversight and management system for contractors that drives improvement in contractor safety and health and ensures contractors' employees are provided effective protection. Such a system must:

a. Address safety and health considerations during the process of selecting contractors and when contractors are on-site.
b. Include provisions for timely identification, correction, and tracking of uncontrolled hazards in contractor work areas.
c. Ensure that contractors follow site safety and health rules.
d. Include a provision for removing a contractor or a contractor's employees from the worksite for safety or health violations.

3. Injury and Illness Data Requirements.

a. Contractors (e.g., contracted maintenance workers) and temporary employees who are supervised by host management are governed by the host's SHMS and are, therefore, included in the host's rates.
b. Management is required to maintain TCIR and DART rate data (either for all contractors or for all applicable contractors) for hours worked at the worksite. (See Chapters 5, 6, 7, and Appendix B.)
c. Participants must maintain, and report annually to OSHA, the contractor TCIR and DART rate data.

4. Training. Managers, supervisors, and non-supervisory employees of contract employers must be made aware of:
   a. Hazards they may encounter while on the worksite.
   b. How to recognize hazardous conditions and the signs and symptoms of workplace-related illnesses and injuries.
   c. Implemented hazard controls, including safe work procedures.
   d. Emergency procedures.
   e. Whistleblower Rights and Anti-Retaliation Protections.

D. Self-Evaluation of the SHMS. The applicant/participant must annually evaluate the organization's safety and health efforts. This evaluation will judge success in meeting goals and objectives, and will help those responsible to determine and implement changes for continually improving worker safety and health protection.

The annual self-evaluation is not a compliance audit. It is a critical review to assess the effectiveness of all four VPP elements and their sub-elements, and to analyze participant and contractor injury and illness data and trends. It should include a review of written programs, a walk-through of the workplace, and interviews with employees. An annual evaluation that is merely an inspection of the workplace(s) with a brief report pointing out hazards or a general statement of the sufficiency of the system is inadequate for purposes of VPP qualification or of maintaining VPP status.

1. The system must provide for an annual written narrative report with recommendations for timely improvements, assignment of responsibility for those improvements, and documentation of timely follow-up action or the reason no action was taken.

2. The evaluation must assess the effectiveness of all elements of the VPP SHMS and any other elements of the applicant's SHMS.

3. The evaluation may be conducted by competent site, corporate, other persons, or groups of persons who are trained and/or experienced in performing such evaluations. The annual self-evaluation may be conducted by a participant’s employees along with managers, qualified corporate staff, or outside sources who are trained in conducting such evaluations.

4. Procedures for the self-evaluation involve selection and review of well-defined leading and lagging indicators.

5. Using metrics and performance measures as indicators to help measure progress toward goals and objectives; effectiveness of hazard controls and overall effectiveness of the SHMS must be in place. The written evaluation should include indicators identified.

6. Description of the indicators will address the:

a. Rationale behind selection of the indicator.
b. Method, frequency, and responsibility for monitoring or measuring each indicator.
c. Methods used to keep records of the indicator.
d. Periodic review of indicator suitability (NOTE: indicators must be chosen carefully to effectively measure tangible results and prevent unintended consequences).
e. Analysis, interpretation, and communication of results.

7. Self-evaluation results in:
   a. Identifying deficiencies in the system that may have contributed to uncontrolled hazards or that limit the effectiveness of the SHMS.
   b. Assigning responsibility and providing resources for correcting hazards and tracking corrective actions.
   c. Assigning responsibility and providing resources for addressing system deficiencies and achieving goals and objectives.
   d. Establishing new or revised system goals and objectives for the next year to correct identified deficiencies and improve SHMS.

8. The evaluation should follow the format provided in Appendix A. At least one annual self-evaluation and appropriate corrective action for identified hazards, must be completed before VPP approval. For applicants covered by OSHA's PSM standard, completion of the appropriate PSM Supplement B is also required as part of the evaluation. Following approval, the self-evaluation report must be included with the participant's annual submission to OSHA.

III. Worksite Analysis. The successful management of workplace hazards begins with a thorough understanding of all hazardous situations to which employees may be exposed and the ability to recognize and correct those hazards as they arise. An effective worksite analysis system must be implemented to systematically identify basic and unforeseen safety and health hazards, evaluate their risks, prioritize, and recommend methods to eliminate or control hazards. The following are the required methods of worksite analysis.

A. Comprehensive Safety and Industrial Hygiene Surveys. These surveys, conducted at intervals appropriate for the nature of workplace operations, must include:
   1. Identification of safety hazards accomplished by an initial comprehensive baseline survey and then subsequent surveys as needed. The initial baseline survey will identify the hazards to which employees are exposed. It establishes initial levels of exposure (baselines) for comparison to future levels, so that changes can be recognized. Baseline surveys will:
      a. Identify and document safety hazards at the worksite(s) and how they are controlled.

b. Identify and document health and exposure hazards (usually by initial screening using direct-reading instruments) and determine if further sampling (such as full-shift dosimetry and air monitoring) is needed.
c. Evaluate the employer's exposure assessment programs.
d. Identify and document safety and health hazards that need further assessment.
e. Cover the entire work area, indicate who conducted the survey, and record when it was completed.

2. Identification of health hazards and employee exposure levels are accomplished through an industrial hygiene sampling rationale and strategy. Sampling rationale should be based on the industrial hygiene sampling strategy and objective data which includes reviews of any changes that have occurred in the processes, equipment, or chemicals used; implementation of controls and their effectiveness; reviews of safety data sheets, employee complaints, exposure incidents, medical records, and any other instances that warrant sampling.

B. Hazard Analysis of Routine Jobs, Tasks, and Processes. Task-based or system/process hazard analyses must be performed to identify hazards of routine jobs, tasks, processes, or phases in order to recommend adequate hazard controls. Acceptable techniques include, but are not limited to: Job Hazard Analysis (JHA), and Process Hazard Analysis (PHA).

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

2. In construction, the emphasis must be on specific safety and health hazards associated with each craft and each phase of work.

3. The results of hazard analyses must be included in training and hazard control programs.

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

1. Hazard identification must lead to hazard elimination or control.
2. If a non-routine or new task becomes routine, a hazard analysis must be conducted.

D. Pre-use Analysis. When a worksite is considering new equipment, chemicals, facilities, or significantly different operations or procedures, the safety and health impact to the employees must be reviewed. The level of detailed analysis should be commensurate with the perceived risk and number of employees affected. This practice should be integrated in the procurement/design phase to maximize the opportunity for proactive hazard controls.

E. Documentation and Use of Hazard Analyses. Hazard analyses performed to meet the requirements of C or D, of this section, must be documented and must:

1. Consider both health and safety hazards.
2. Be easily understood.
3. Identify the steps of the task or procedure being analyzed, as well as any existing hazard controls, recommendations for more effective hazard controls, dates when analyses were conducted, and names of responsible parties.
4. Be used in training on safe job procedures, modifying workstations, equipment or materials, and in future planning efforts.
5. Be updated as the environment, procedures, equipment, or work phase changes, or errors are found that invalidate the most recent hazard analyses.

F. Routine Self-Inspections. A system is required to ensure routinely scheduled self-inspections of the workplace. It must include written procedures that determine the frequency of inspections and areas covered, responsible parties for conducting inspections and abating hazards, documentation of findings and corrections, and the tracking of identified hazards for timely correction.

1. For general industry and maritime applicants/participants under the site-based approach, these inspections:
   a. Must be made at least monthly, with the inspection schedule being determined by the types and severity of hazards.
   b. Must cover the entire worksite at least once each quarter.

2. Top management and others, including employees who have knowledge of the written procedures and hazard recognition, can participate in the inspection process.

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

4. Written reports of findings are required. Documentation of inspections must be thorough.

5. The system will track all hazard controls to completion.

G. Hazard Reporting System for Employees. The applicant/participant must operate a reliable system that enables employees to notify appropriate management personnel in writing, without fear of reprisal about recognized hazardous conditions, and to receive timely and appropriate responses. The system must have an anonymous component and include timely responses to employees, including the tracking of hazard control or elimination to completion.

H. Industrial Hygiene (IH) Program. A documented industrial hygiene exposure assessment strategy must be in place to address all potential health hazards in the workplace. Factors that need to be addressed in the assessment strategy include the probability and severity of exposure and a description of the work scenarios and population of employees that could be exposed. The assessment strategy provides the rationale for determining if baseline and subsequent surveys are needed to assess employee exposures.

1. Assessment strategy. The assessment strategy must use nationally recognized procedures for all sampling, testing, and analysis, with written records of results maintained in a logical order.
2. Sampling Results. At a minimum, sampling results must be analyzed and compared to OSHA permissible exposure limits (PELs) to determine both employees' exposure and possible overexposure. Comparison to more restrictive levels, such as action levels, threshold limit values (TLVs), or self-imposed standards, is strongly encouraged to reduce exposures to the lowest feasible level.
3. Documentation. Sampling results must be documented and must include a description of the work process, controls in place, sampling time, exposure calculations, duration, route and frequency of exposure, and number of exposed employees.
4. Communication. Sampling results must be communicated to employees and management.
5. Use of Results. Sampling results must be used to identify areas for additional study, in order to select hazard controls and determine if existing controls are adequate.
6. Industrial Hygiene (IH) Expertise. IH sampling should be performed by a certified industrial hygienist (CIH). Initial and/or full shift sampling can be performed by staff members with specialized training in the specific procedures regarding the potential or identified health hazards in the workplace, but only if the sampling process and the results are reviewed by a CIH.
7. Procedures. Standard, nationally recognized procedures must be used for surveying and sampling as well as for testing and analysis.

8. Use of Contractors. If an outside contractor conducts industrial hygiene surveys, the contractor's report must include all sampling information listed in this section and be effectively communicated to site management. Any recommendations contained in the report should be considered and implemented where appropriate and necessary. Use of contractors does not remove responsibility for the IH program, from the VPP applicant, or participant.

I. Investigation of Incidents and Near-Misses. The applicant/participant must investigate all incidents and all reported near-misses, and must maintain written reports of the investigations. Incident and near-miss investigations must determine root causes and:

1. Be conducted by personnel trained in incident investigation techniques. Personnel who were not involved in the accident or who do not supervise the injured employee(s) should conduct the investigation to minimize potential conflicts of interest.
2. Document the entire sequence of relevant events.
3. Identify all contributing factors, emphasizing failure or lack of hazard controls.
4. Determine whether the SHMS was effective, and provide recommendations to prevent recurrence.
5. Human errors, which may be unintentional lapses, mistakes in judgment or violations of procedures, should be studied to understand why the failures occurred and what controls are appropriate. Do not place undue blame or reprisal on employees.
6. Assign priority, timeframes, and responsibility for implementing recommended controls.
7. The results of investigations (to include, at a minimum, a description of the incident and the corrections made to avoid recurrence) must be made available to employees on request, although the actual investigation records need not be provided.
8. The results of investigations must be documented. Lessons learned and investigation results need to be incorporated into subsequent workplace analyses and hazard control implementations.

J. Trend Analysis. The process must include analysis of information such as injury/illness history, hazards identified during inspections, employee reports of hazards, incident and near-miss investigations, and OSHA logs, and the purpose of trend analysis is to detect trends/patterns with common causes in order to control or eliminate them.

1. The results of trend analysis must be shared with employees and management and utilized to direct resources; prioritize hazard controls; and determine or modify goals, objectives, and training.
2. Patterns and trends can be used to measure safety and health performance and for setting goals and objectives.

IV. Hazard Prevention and Control. Effective prevention and control of workplace hazards are critical to protecting employee safety and health and avoiding workplace incidents. Prevention and control allows employers to minimize or eliminate safety and health risks and liabilities as well as meet their legal obligation to provide employees with a safe and healthy work environment. Site hazards identified during the hazard analysis process must be eliminated or controlled by developing and implementing appropriate controls. Management must ensure the effective implementation of systems for hazard prevention and control and ensure that necessary resources are available, including the following:

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

B. Hazard Elimination and Control Methods. The types, severity, and risk of hazards posed to employees should be considered when determining methods of hazard prevention, elimination, and control. In general, the hierarchy of controls detailed below should be followed.

1. Elimination or Substitution. Eliminating the hazard should be the first control method where possible. Substitution of a hazardous material should be implemented where the new material does not pose a greater hazard.
2. Engineering. Engineering controls directly eliminate a hazard by such means as isolating the hazard or ventilating the workspace. These are the most reliable and effective controls.
3. Protective Safety Devices as Engineering Controls. Although not as reliable as traditional engineering controls, such methods can be acceptable and include interlocks, redundancy, failsafe design, system protection, and fire suppression systems.
4. Administrative. Administrative controls significantly limit daily exposure to hazards by controlling or manipulating the work schedule or work habits. Job rotation is an example of an administrative control.
5. Work Practices. These controls include workplace rules, safe and healthful work practices, personal hygiene, housekeeping, maintenance, and procedures for specific operations.
6. Personal Protective Equipment (PPE). The decision to use PPE, and the adoption of specific PPE by an applicant/participant, must be directly related to hazards identified in hazard analysis. The use of PPE, in combination with other controls, or alone, should be used only when all other hazard controls have been exhausted or proven infeasible.

When engineering controls have been studied, investigated, and implemented, yet still do not bring employees' exposure levels to below the OSHA PEL; or when engineering controls are determined to be infeasible, then a combination of controls through a hazard control program, may be used.

C. Hazard Control Programs.

1. The hazard control programs must be:
   a. Understood and followed by all affected parties;
   b. Appropriate to the hazards of the site;
   c. Enforced through a clearly communicated, written disciplinary system that includes procedures for disciplinary action or reorientation of managers, supervisors, and non-supervisory employees who break or disregard safety rules, safe work practices, proper materials handling, or emergency procedures. The disciplinary system for safety and health can be incorporated into an all-encompassing disciplinary system. Disciplinary programs must be designed to ensure that employees are not discouraged from reporting;
   d. Written, implemented, and updated by management as needed, utilized by employees; and
   e. Incorporated in training, positive reinforcement, and correction programs.

2. Compliance. Applicants and participants must be in compliance with any hazard control programs and standards required by OSHA, such as PPE, Respiratory Protection, Lockout/Tagout (LOTO), Confined Space Entry, Process Safety Management (PSM), or Bloodborne Pathogens. VPP applicants and participants must periodically review these programs to ensure they are up-to-date.

D. Occupational Healthcare Program.

1. Licensed health care professionals must be available to assess employee health status for prevention, early recognition, and treatment of illness and injury.

2. Arrangements for needed health services, such as pre-placement physicals, audiograms, and pulmonary function tests, must be included.

3. Employees trained in first aid, CPR, physician care, and/or emergency medical care, must be available for all shifts within a reasonable time and distance. If the applicant or participant provides Automated External Defibrillators (AED), training must be provided.

4. Emergency procedures and services including provisions for ambulances, emergency medical technicians, emergency clinics, and hospital emergency rooms should be available. Employees on all shifts should be trained in the procedures and services. See H. in this section.

E. Preventive Maintenance of Equipment. A written preventive maintenance system must be in place for monitoring and maintaining equipment used by employees. Equipment must be inspected, replaced, and repaired on a schedule, following manufacturers' recommendations, to prevent it from failing and creating a hazard. A portion of the system should also include predictive elements and measures for equipment maintenance. Documented records of maintenance and inspections and repairs must be kept and can be documented in various media, such as computer software packages. The system must include maintenance of hazard controls such as, but not limited to machine guards, exhaust ventilation, and mufflers.

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

1. Recording and prioritizing hazards.
2. Assigning responsibility, timeframes for correction, implementation of interim protection methods, and follow-up to ensure correction.

G. Disciplinary System. A written disciplinary system addressing safety and health violations is required. This system can be a subpart of an all-encompassing workplace disciplinary system. The safety and health disciplinary system must include:

1. Procedures for appropriate disciplinary action or reorientation of managers, supervisors, and non-supervisory employees who violate or disregard safety and health policies, safety rules, safe work practices, proper materials handling, or emergency procedures.
2. Clear communication to employees and management.
3. Equitable enforcement.
4. Safeguards to ensure employees report injuries, illnesses, workplace hazards, accidents, or near misses, without fear of retaliation.
5. Disciplinary policies and how these will be applied to contactors and their employees.

H. Emergency Preparedness and Response. Written procedures for response to all emergencies (e.g., fire, chemical spill, accident, terrorist threat, or natural disaster) on all shifts must be established, follow OSHA standards, be communicated to all employees, and be practiced at least annually. These procedures must list requirements or provisions for:

1. Assessment of the emergency.
2. Assignment of responsibilities (such as incident commander).
3. First aid.
4. Medical care.
5. Routine and emergency exits.
6. Emergency telephone numbers.
7. Emergency meeting places.

8. Training drills including, at minimum, annual evacuation drills, should be conducted at times appropriate to the performance of work so as not to create additional hazards. Coverage of critical operations must be provided so that all employees have an opportunity to participate in drills.
9. Documentation is required to address the site's inclusion of all employees. Additionally, information needs to be included about how absent employees will receive an opportunity to participate in drills.
10. Documentation must include a critique of evacuation drills and recommendations for improvement.
11. Appropriate PPE where needed.

V. Safety and Health Training. Training is necessary to reinforce management commitment to preventing exposure to hazards. All employees must understand the hazards to which they may be exposed and how to prevent harm to themselves and others from such hazard exposure. Effective training enables employees to accept and follow established safety and health procedures.

A. Knowledge of Hazards. Training must be provided to ensure that managers, supervisors, non-supervisory employees, and contractors know the hazards in their workplace, how to recognize hazardous conditions, signs and symptoms of workplace-related illnesses, and safe work procedures.

B. Required by Standard. Training required by OSHA standards must be provided in accordance with the standard.

C. Addressing the Needs of All Employees. The safety and health training needs of each employee are systematically determined to ensure that all hazards in the employee's work and workplace are addressed. This may be determined through, but not limited to job hazard analyses (JHA), hazard analysis findings, position descriptions, and work tasks.

D. Managerial Responsibilities. Managers and supervisors must understand their safety and health responsibilities and how to carry them out effectively.

E. New Employees. New employee orientation/training must include, at a minimum, discussion of hazards at the worksite, protective measures, emergency evacuation, employee rights under the OSH Act, and VPP. All employees, including new hires, must be notified about participation in VPP and employees' rights under the OSH Act.

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

G. Safety and Health Responsibilities. Management must ensure that employees who have specific roles in the SHMS are competent to carry out their responsibilities based on an effective combination of education, training, and experience. The competency requirements for each role should be incorporated into position descriptions and standard operating procedures (SOPs). Needed training must be completed before the employee is assigned to SHMS duties.

H. Documentation. Training attendance must be documented.

I. Frequency.
   1. Training required by OSHA standards must be conducted at least as frequently as required by the noted standard.
   2. Training that is not specifically required by OSHA standards must be provided at adequate intervals. Specific intervals should be determined based on assessments by the site's safety and health staff.
   3. Additional training must be provided when changes occur in work processes, new equipment, new procedures, or work phases.

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

K. Qualification of Trainers. Persons who have specific knowledge or expertise in the subject must conduct training.

L. Personal Protective Equipment. Where PPE is required (either by OSHA standard or management requirement), employees must understand why it is required, its limitations, how to use it, and how to properly maintain it and ensure that it fits properly.

VI. Recommended Practices for Safety and Health Programs.

Recommended practices for Occupational Safety and Health Programs can be found at https://www.osha.gov/shpguidelines/index.html. The guidelines are substantially similar to the 1989 SHMS Guidelines currently utilized by VPP employers, with some exceptions.

A. OSHA has statutory requirements for employers in the construction industry to have safety and health programs. However, those requirements are not systems-based and are different from the voluntary guidelines.

B. Implementation of the 2016 Recommended Practices for Safety and Health Programs is not required by OSHA standards. However, all VPP applicants/participants are strongly encouraged to incorporate these practices into their SHMS.

Chapter 5

Ways to Participate: Site-Based

I. Introduction. This chapter details requirements for site-based participation, procedures for OSHA's evaluation of site-based applicants and the subsequent periodic reevaluation of participants. It includes SHMS requirements unique to site-based participation that must be met in addition to the system requirements in Chapter 4.

II. Purpose. Site-based participation focuses on a single, fixed worksite or, in some instances, a single, long-term construction site. OSHA may approve site-based applicants for Star, Merit, or Demonstration Program participation. This chapter addresses Star and Merit approval and participation. For information on Demonstration Programs, see Chapter 8.

III. Site-Based Participation. Site-based participation is appropriate for fixed worksites and some long-term construction projects.

A. Eligibility - General.

1. OSHA accepts VPP applications for site-based participation from the owners and site officials who control operations and have ultimate responsibility for assuring safe and healthful working conditions of:

a. Private-sector fixed worksites in general industry and the maritime industry.
b. Federal fixed worksites.
c. Long-term construction worksites/projects, either private- or public-sector, that have been in operation for at least 12 months at projected time of approval and that expect to continue in operation for at least an additional 12 months. A site-based construction applicant must be the general contractor (GC), owner, or an organization that provides overall management at a worksite, controls site operations, and has ultimate responsibility for assuring safe and healthful working conditions at the worksite. Site-based construction applications cover individual sites only.
d. Resident contractors at site-based VPP participants (see section V.A., below).
e. Resident contractors at non-participating fixed sites. Although resident contractors at non-VPP sites may apply for site-based participation in VPP, they may only receive VPP recognition if the non-VPP host site commits to providing unobstructed site access to OSHA VPP evaluation teams. Historically, this scenario has existed for Host sites that had been, at one time, VPP participants. These Host sites continue to demonstrate commitment to the requirements and tenets of VPP, although no longer being recognized participants.

B. Unionized Sites.

1. At fixed worksites with employees organized into one or more collective bargaining units, the authorized representative for each collective bargaining unit must either:
   a. Sign the application or
   b. Submit a signed statement indicating that the collective bargaining agent supports or is not opposed to VPP participation.

2. Without such concurrence from all such authorized agents, OSHA will not accept the application.

3. Whenever a change occurs in union representation/status, the participant must notify the OSHA RA in writing within 60 calendar days. The RA will determine what steps, if any, must be taken to reaffirm VPP support.

C. OSHA History.

1. Chapter 3 addresses the guiding principles and general requirements concerning OSHA history.
2. In addition, a fixed worksite's history must include:
   a. No open investigations, pending or open contested citations, or notices under appeal at the time of application; and
   b. No affirmed willful violations during the 60 months prior to the applicant's submission of its VPP application.

D. Assurances. Site-based applications must include certain assurances describing what the applicant agrees to do if OSHA approves the application, to include:

1. Compliance with the OSH Act and applicable standards, and will correct in a timely manner all hazards discovered through self-inspections, employee notification, accident investigations, OSHA on-site reviews or enforcement inspections, process hazard reviews, annual evaluations, or any other means. The applicant will provide effective interim protection as necessary to keep employees safe while corrections are being made.

2. Correcting any site deficiencies related to compliance with OSHA requirements and identified during the OSHA preapproval on-site review. The correction period will be determined by the VPP team leader and will not exceed 90 days.

3. Continuing to meet and maintain the requirements of the elements following approval. Site-based applicants whose primary activity is construction will continue to meet and maintain the construction requirements.

4. Ensuring all employees, including newly-hired employees and contractor/subcontractor employees, are educated in VPP, including employee rights under the program and, under the OSH Act, or if applicable 29 CFR 1960.

5. Including all employees are protected from retaliatory actions resulting from their activities/duties.

6. Ensure employee access to the results of self-inspections, accident investigations, and other SHMS data upon request. At unionized sites, this requirement may be met through employee representative access to these results.

7. Make available for initial and continued VPP approval, the applicant will provide the following information:
   a. Written SHMS documents;
   b. All documentation listed at VIII.E.; and
   c. Any agreements between management and the authorized collective bargaining agent(s) concerning safety and health.

8. They will make available to OSHA any data necessary to evaluate the achievement of individual Merit or One-Year Conditional goals.

9. As part of the site's annual comprehensive VPP self-evaluation report, each site-based participant will send, by February 15 of each year, to its designated OSHA VPP contact:
   a. The participant's TCIR for injuries and illnesses of all employees, including temporary employees, for the previous calendar year,
   b. The participant's DART rate for all employees including temporary employees for the previous calendar year, and
   c. Fixed worksite participants whose primary activity is construction will include in their rates and data, the experience of all employees, including temporary employees and contractor/subcontractor employees.

E. Applicable Contractors. Applicable contractors are those employers who have contracted with a VPP participant to perform certain jobs and whose employees worked, at the worksite, a total of 1,000 or more hours in at least one quarter in the given calendar year. The VPP participant whose contractor's primary operations are not construction and whose employees are not directly supervised by the applicant, will send to the designated OSHA VPP contact, site-specific injury and illness data on each applicable contractor's employees.

1. The data will consist of the participant's TCIR and DART rates for each applicable contractor's employees; total number of cases from which these two rates were derived; hours worked; and estimated average employment for the past full calendar year.

2. Each participant will also submit:
   a. The total number of TCIR and DART rate cases;
   b. Hours worked;
   c. Estimated average employment for the past full calendar year;
   d. A copy of the most recent annual self-evaluation of the participant's SHMS; and
   e. A description of any participant success stories (e.g., reductions in workers' compensation rates, or increases in employee involvement in the program).
   f. As applicable, each participant at a fixed site covered by PSM will submit a fully completed Supplement B, as referenced in Chapter 1, Section VIII.MM.
   g. Changes in ownership of applicable contractors at the site will be annotated in the participant's annual self-evaluation.

F. Organizational Change. Whenever significant organizational, management, or ownership changes occur, the participant will provide OSHA within 60 calendar days, a new Statement of Commitment signed by management and, when applicable, authorized collective bargaining agents.

IV. Injury and Illness Performance. In determining a site's qualification for the Star or Merit Program, OSHA considers the most recent three-year recordable nonfatal injury and illness experience and compares that experience with industry averages published by the Bureau of Labor Statistics (BLS). For instructions on how to calculate rates, including use of an alternative rate calculation for smaller worksites, see Appendix B.

A. Star Rate Requirements.
   1. Fixed Worksites.
      a. The applicant/participant's three-year TCIR and three-year DART rates must be below at least one of the three most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by BLS. Compare both rates to only one single year.
      b. An alternative rate calculation may be used for eligible VPP participants. However, these calculations are primarily used for eligible smaller worksites having fewer than 250 employees at one site; for example, where a single or relatively small number of incidences would cause the worksite's disqualification when using the normal three-year rate calculation. (See Appendix B)

   2. Long-Term Construction Projects. The following requirements apply to long-term construction projects applying under the site-based option and to any Federal agency or other site-based applicant, whose work is primarily construction in nature.

a. To qualify for the Star Program, the applicant/participant's TCIR and DART rates (including all subcontractor employees) from worksite inception until time of application must be below the national average for the industry classification.

b. If an applicant/participant has rates which exceed the BLS average for its NAICS, then the general contractor may qualify for the Merit program if the company-wide three-year TCIR-and DART rates are below the national average.

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

B. Merit Rate Requirements. The TCIR and DART rates must be calculated and compared to the industry average in the same manner as the Star Program, except that the three-year rates do not have to be below the industry average. The following criteria apply:

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

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

3. Long-Term Construction Site Requirement: If one or both incidence rates are above the industry averages, the applicant must demonstrate that the company/organization-wide three-year TCIR and DART rates are below at least one of the three most recently published years of BLS rates for the industry, at the most precise published level.

V. SHMS Requirements. The following system requirements are in addition to, or provide clarification of, those located in Chapter 4.

A. Fixed Worksite Star Requirements. For Star approval of fixed worksites, including Resident Contractors operating at a Host site, all VPP requirements discussed in Chapter 4 must be in place and working effectively for at least 1 year prior to Star approval.

B. Fixed Worksite Merit Requirements. For Merit approval of fixed worksites, the basic elements and sub-elements of the VPP SHMS must all be operational or, at a minimum, in place and ready for implementation by the date of approval. In addition, all established minimum requirements (MRs) must be met.

C. Long-Term Construction Projects and other Construction Applicants. The requirements for the Star and Merit programs are generally identical to those of fixed worksite VPP applicants, with the following additions:

1. SHMS Self-Evaluation. The self-evaluation must be conducted annually and immediately prior to completion of construction.
   a. The final evaluation is to determine what has been learned about safety and health activities that can be used to improve the participant's SHMS at other sites.
   b. If a participant does not provide this final evaluation, prior to completion of construction, OSHA will not consider subsequent applications from the participant for that project.

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

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

4. Contractor Requirements. General Contractors must make subcontractors and their employees aware of the VPP application or participation and of their rights, roles, and responsibilities. Evidence that all subcontractors at the worksite recognize these conditions is necessary and may include:
   a. The contractual agreement.
   b. A written statement of willingness to cooperate.
   c. Attendance at safety meetings.
   d. Orientation sessions for incoming subcontractor employees.

5. Employee Involvement. Employees at construction sites must be involved in safety and health at the worksite to the degree practical based on the time they will spend on site. Examples of short-term involvement include attending daily toolbox talks on safety and health, and participating in daily self-inspections. The more time they spend on site, the more involvement OSHA expects. The on-site evaluation team will judge the sufficiency of employee involvement through interviews and observations.

VI. Federal Agencies. Federal agency fixed worksites covered by 29 CFR are eligible for site-based VPP participation.

A. Requirements for federal agencies are identical to those of site-based, with the following additions:

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

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

3. Federal worksites must make available to the OSHA on-site evaluation team, their agency's most recent Annual Occupational Safety and Health Report to the Secretary of Labor.

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

5. Federal worksites must not have any open OSHA Notices (of Unsafe and Unhealthful Working Conditions).

6. Federal worksites may be subject to strict contract language and regulations governing selection and removal of contractor employees, making it contractually impossible to pre-screen particular contractors based on injury/illness rates. In such cases, OSHA may accept alternative strategies to assure employee safety and health protection. This, in no way abrogates the responsibilities for federal worksites to follow requirements in compliance and for VPP participation. These alternative strategies will be vetted through DCSP.

B. Fixed federal agency worksites whose primary work activity is construction must follow the requirements for site-based long-term construction projects. See V.C.

VII. Resident Contractors.

A. The requirements for VPP applicants/participants who are resident contractors working at a site-based VPP participant are identical to those for site-based participation, with the following additions:

1. The host must be an approved site-based VPP participant before the resident contractor may submit its application.
2. The resident contractor must have a minimum of 12 months on-site before submitting an application.
3. The type of work being conducted by the resident contractor must be evaluated to determine the appropriate industry classification.

B If the resident contractor is hired to fulfill a function that normally would be performed by the host then the resident contractor should be assigned the host's industry classification.

C. If the resident contractor is hired to fulfill a function that would not normally be associated with the host's industry or service, then the contractor's own industry classification should be assigned.

D. If the resident contractor has fewer than three years on site, apply the injury and illness performance requirements for site-based long-term construction projects. (See IV.A and IV.B.)

E. A general contractor (GC) of a large construction project at an approved VPP worksite may submit a separate application for site-based VPP participation. The requirements for site-based long-term construction apply.

F. When a VPP-approved resident contractor at a VPP worksite is replaced by a new resident contractor, the VPP approval will transfer to the new resident contractor based on the following criteria. The exiting VPP-approved resident contractor will inform the RA of their withdrawal from VPP, within 10 days of the replacement.

1. VPP status can transfer if 75 percent or more of the employees remain employed with the new resident contractor and if the new resident contractor:
   a. Submits a new letter of management commitment.
   b. Submits a new self-evaluation.
   c. Receives a satisfactory OSHA on-site evaluation within 12 months.

2. A new VPP application is required if less than 75 percent of the employees remain employed with the new resident contractor. A new resident contractor may have to wait a calendar year in order to meet rate requirements for the application.

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

1. If VPP status transfers to the new resident contractor, as in section VII.F.1, the subcontractor maintains its VPP status.

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

VIII. Conducting the On-Site Evaluation.

A. Purpose and Scope. The on-site evaluation consists of a thorough evaluation of each element and sub-element of the site-based VPP applicant/participant's safety and health management system, and implementation of that system, in order to recommend approval or reapproval. This Section describes the standard on-site evaluation process for site-based applicants/participants and, at H., the compressed reapproval process (CRP), provides an alternative on-site evaluation protocol for qualifying Star participants seeking reapproval. See Chapter 7 for instructions concerning the on-site evaluation of site-based corporate applicants/participants. See Chapter 10 for instruction on scheduling and required frequency of on-site evaluations.

1. Initial Approval On-Site Evaluation. The initial approval on-site evaluation, which OSHA conducts in a non-enforcement capacity, is a review of the applicant's SHMS conducted to:
   a. Verify information supplied in the application concerning VPP qualification.
   b. Identify strengths and weaknesses of the applicant's SHMS and evaluate its adequacy to address the worksite's hazards.
   c. Determine whether the applicant's SHMS meets the requirements for Star, Merit, or Demonstration approval.
   d. Determine how effectively the applicant has implemented its SHMS.
   e. Identify any deficiencies in the SHMS that must be satisfactorily addressed before OSHA can approve the applicant.
   f. Identify any areas of non-compliance with OSHA regulations.
   g. Obtain information to assist the Assistant Secretary in making the VPP approval decision.

2. Reapproval On-Site Evaluation-Star. OSHA's on-site reapproval evaluations of Star participants will:
   a. Determine the establishment's qualification for continued Star recognition.
   b. Document results of program participation in terms of the evaluation criteria and other noteworthy aspects of the site's SHMS. Special attention must be made to note the participant's efforts to continuously improve their SHMS.
   c. Identify any problems that have the potential to adversely affect continued qualification and determine appropriate follow-up actions.

3. Reapproval On-Site Evaluation - Merit. OSHA's periodic on-site reapproval evaluations of Merit participants will:
   a. Determine qualification for a second Merit term, or determine whether the participant may be approved to the Star Program.
   b. Determine whether adequate progress has been made toward the agreed-upon Merit goals to warrant Star recognition.
   c. Identify any problems in the SHMS or its implementation that need resolution in order to continue qualification or meet agreed-upon goals.
   d. Document system improvements and/or improved results.
   e. Provide advice and suggestions for needed improvements.

B. The Team. On-site evaluations are carried out by a team consisting of OSHA safety and health staff acting in a non-enforcement capacity, and other qualified team members. See Chapter 10, Preparation for On-Site Evaluations, for instructions on selecting and preparing the team.

C. Methods of Evaluation - General.

1. For all on-site evaluations, the three primary methods of evaluation are document review, observation, and interviews. See Sections E., F., and G. Additional activities that must occur are the opening conference, daily briefings, report preparation, and closing conference. At the conclusion of the on-site evaluation, the on-site evaluation team will provide the RA with its recommendation regarding the applicant/participant's suitability for participation or continued participation in VPP, and the appropriate program/level.

2. For current VPP participants who demonstrate a sustained commitment to safety and health excellence, as described in Section H., OSHA may choose to employ a CRP on-site evaluation. At the conclusion of the CRP, the on-site evaluation team must provide the RA with its recommendation regarding the participant's suitability for continued participation in VPP.

D. Opening Conference. The opening conference with the employer and employee representatives will establish the guidelines for the on-site evaluation, outlining expectations and requested assistance. During the opening conference, the on-site evaluation team should get a sense of the commitment that exists at the worksite.

The team leader must convey the following information:

1. Importance of VPP. Describe OSHA's view of VPP and its importance to the common goal, that every worker goes home safe and healthy at the end of each day.

2. Purpose. Clearly state the purpose of the on-site evaluation.

3. Full Disclosure. Indicate that the on-site evaluation team expects the applicant/participant to adhere to the signed full disclosure assurances submitted with the application.

4. Schedule. Outline the schedule for the on-site evaluation.

5. Interviews Arrangements must be made to conduct private interviews with supervisors, union representatives, maintenance personnel, record-keepers, 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 of I.2.b., Hazard Correction

7. Status. Explain how the on-site evaluation team will keep the VPP participant representative updated daily on the progress of the on-site evaluation and the flow of the evaluation process.

8. Employee Rights. Review the rights of employees under the OSH Act, applicable OSHA standards, and for federal agency employees, 29 CFR 1960.

E. Document Review. The applicant/participant's SHMS must describe how it meets each of the VPP systems requirements (See Chapter 4). The documents reviewed will include those listed below, and 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 on-site 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 three-year period, current year-to-date, and for any applicable contractors.
- Recalculate the TCIR and DART rates using the instructions found in Appendix B.

b. Incentive Programs. Incentive programs can be an important tool to promote workplace safety and health. The first type of program rewards workers for reporting near-misses or hazards, and encourages involvement in the SHMS. The second type of incentive program can be rate-based and focus on injury and illness numbers. In no circumstance will the incentive program discourage reporting of injuries and illnesses. These incentive programs will be reviewed by OSHA during on-site evaluations.

c. First Reports of Injury. These reports may appear in varied formats and are generated by the employer.

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

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

f. Medical Surveillance. Team-selected medical surveillance reports, e.g., audiometric testing records, respirator fit-test records, etc.

g. Records Review. Any cause for under- or over-reporting, such as, but not limited to, lack of training in OSHA recordkeeping requirements, or misdiagnosis of an injury or illness must be addressed and will result in a more extensive recordkeeping review. Discuss any discrepancies or omissions with the recordkeeper. Determine corrective actions, and recalculate the three-year TCIR and DART rate~~s~~ if necessary.

h. Discrimination Policies. Resources such as documents, postings, electronic notices, and websites regarding the prohibition of discrimination, retaliation, and harassment. These resources can be obtained from sources such as, but not limited to the National Labor Relations Board or the Equal Employment Opportunity Commission.

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.

F. Observation.
1. Scope. The on-site evaluation team must perform a walkthrough of 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 on-site evaluation team on the first day. The remainder of the on-site evaluation will include additional walkthroughs, 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 on-site 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 SHMS.
   c. Problem Areas. The on-site 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 on-site 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 PPE. The team must keep track of the number of employees interviewed, but employee names and addresses must not be recorded.

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 4)
c. Identify and note any uncontrolled hazards that must be corrected. Ensure that a responsible member of management takes notes, and agrees on a reasonable time period for correction.
d. If uncontrolled hazards are present, determine the cause of the deficiencies in the SHMS.
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. Construction. 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.

G. Interviews.

1. Formal Interviews. Private formal interviews are conducted 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.

3. Persons Interviewed.

a. Managers. A representative number of managers must be interviewed to ascertain the depth of management leadership in the SHMS.

b. Supervisors. A representative number of supervisors must be interviewed. It is advised to ensure supervisors are interviewed regarding topics such as, but not limited to, EHS goals and objectives, performance management, incentive program implementation, disciplinary actions and training.

c. Other Employees. Conduct employee interviews with those individuals involved in the actual process or production at the worksite to verify aspects of the SHMS.

d. Occupational Health Care Professionals. On-site occupational healthcare professionals will be interviewed as deemed necessary by the evaluation team leader.

e. Maintenance Personnel. Maintenance personnel should be interviewed; and they must be interviewed at chemical plants making or using highly hazardous chemicals.

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. These individuals will be interviewed while verifying the employer's PSM Supplement responses.

h. Contractor 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 SHMS equal in quality to the applicant's. Representatives from each craft should be interviewed, where possible.

4. Selecting Persons for Interviews. The selection of persons to be interviewed must be made by the on-site 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. (See Appendix C)

   a. The reviewers must assure each interviewee that their responses will be treated confidentially, and that no single answer they give will influence the team's recommendation.
   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.

H. Compressed Reapproval Process (CRP). For site-based Star and MWF participants seeking continued participation (reapproval), and meeting all eligibility requirements detailed below, OSHA may choose to employ a CRP on-site evaluation.

1. Eligibility Requirements. To qualify for a CRP evaluation, the participant must meet each of the following requirements and conditions:
   a. Compliance with all required Assurances.
   b. Complete self-evaluation demonstrating VPP-quality safety and health excellence.
   c. Maintain good standing at the Star level.
   d. No work-related fatalities or catastrophes since the most recent VPP on-site evaluation.
   e. No willful, repeat, or high gravity serious citations since the most recent VPP on-site evaluation.
   f. Three-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 (e.g., rates that trend up) warrant a comprehensive on-site evaluation.
   g. Participant's OSHA complaint history and findings since its most recent VPP on-site evaluation do not indicate the need for a comprehensive on-site evaluation. In making this determination, the VPP Manager/Coordinator will consider the participant's size, complexity, and work culture.
   h. For MWF participants, see Chapter 6.
   i. Notification to OSHA of changes in management, ownership, or bargaining unit status has been made. The VPP Manager/Coordinator determines that the changes do not warrant a comprehensive on-site evaluation.

2. Notification. The on-site evaluation Team Leader will notify the participant of OSHA's decision to perform a CRP. The Team Leader will also inform the participant that the CRP may be expanded into a comprehensive on-site evaluation if more information is required to make a decision regarding continued VPP participation.

3. Scope. In general, the conduct of a CRP evaluation will parallel the standard on-site evaluation except:
   a. Opening and closing conferences should focus on changes since the most recent VPP on-site evaluation and the information covered in the most recent annual evaluation.
   b. Review of the participant's SHMS 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 PSM standards, 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 On-Site Evaluation Worksheet.
      - The site's responses to PSM Supplement B will be verified and the evaluation team will work with the site to obtain responses to PSM Supplement C questions.
   d. 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.

4. Documenting the CRP On-Site Evaluation. Documents needed include:
   a. The CRP Worksheet, which includes only Minimum Requirements (MRs);
   b. Supplemental PSM documentation, where applicable; (see VIII.H.3.c.),
   c. Where appropriate, document highly hazardous operations (e.g., LOTO, Permit Required Confined Space) and new/changed elements within the participant's SHMS.

5. Switching from the CRP to the Standard Evaluation Process. The on-site Team Leader may decide to switch from the CRP to the standard evaluation process (as described in E.-G.) if more information is needed to make a decision regarding a participant's continued participation in VPP. The Team Leader must inform both the OSHA Regional Office and the

participant of this decision.

I. Discussion of Findings.

1. Daily Debriefings. At the end of each day, the on-site evaluation team must meet privately to discuss members' findings. The team leader is responsible for organizing the findings and conducting daily briefings with applicant/participant's management and employees.

2. Uncontrolled Hazards.
   a. Informing Management. As hazards are found and discussed during the walkthrough, the on-site 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.
   b. 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 on-site evaluation, the on-site evaluation team and management must discuss and agree upon correction methods and time frames.
   c. 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 on-site evaluation report can be processed.
   d. Notification of Corrective Action. Management must notify the team leader via e-mail, indicating how and when the corrections will be made. The team leader may decide to return to the worksite to verify correction.
   e. Referral to Assistant Secretary. If after repeated attempts to reach agreement, management refuses to correct a situation endangering the safety and health of employees, that situation must be referred to the Assistant Secretary for review and enforcement action, if necessary.

J. Deficiencies in the Safety and Health Management System (SHMS). Where the team detects any deficiencies in the employer's SHMS, the on-site evaluation team must document these deficiencies as goals for correction, recommendations for improvement, or both.

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

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

K. Final Analysis of Findings. When the documentation review, walkthrough, and employee interviews have been completed, the on-site evaluation team must meet privately to review and summarize its findings. The team leader will facilitate the discussion and assist the team members in drawing conclusions about the quality of the applicant/participant's SHMS based on their findings.

1. In analyzing their findings, the on-site evaluation team must consider the following:
   a. Observations made in the work areas.
   b. The nature of injuries or illnesses recorded on the Summary of Occupational Injuries and Illnesses and reflected in the First Report of Injury data.
   c. The degree to which implementation of written programs has been verified.
   d. The reviewer must look for an overall pattern in the perceptions of managers, supervisors, employees, and contract employees regarding worksite conditions and the SHMS based on the responses to formal and informal interviews. Employee responses supported by information obtained by document review, observation, or other employee interviews should carry the most weight.
   e. When the applicant/participant is very small or in a low-hazard industry, some of the requirements for formality may be relaxed (e.g., informal programs or scaled-down documentation), provided there is substantial evidence for the effectiveness of the SHMS.

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

   Once verbal or written concurrence has been obtained by the RA (or designee), conduct a review with management and employees regarding the findings of the on-site evaluation team

IX. Recommendations for First time Participation. In the final private meeting prior to the closing conference, the on-site evaluation team must reach consensus on its recommendation for program participation. If team members cannot reach consensus, the team leader must consult with the Regional Office. The RO should consult with the NO if necessary. The on-site evaluation team must decide among the following recommendations.

A. Star Recommendation. When the on-site evaluation team finds that a site-based applicant's SHMS meets all VPP requirements at Star quality, a recommendation for participation in the Star Program will be made.

B. Merit Recommendation.

1. When the on-site evaluation team finds that a site-based applicant's SHMS falls short of Star quality in one or more elements requiring long-term goals for correction, but does meet the requirements for Merit participation, a recommendation for one three-year (maximum) term of Merit Program participation must be made.

2. 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 on-site evaluation report. The participant must work to complete these goals in order to maintain Merit status and qualify subsequently for the Star Program. Merit goals must address:
   a. Star requirements not presently in place or aspects of the SHMS that are not up to Star quality.
   b. Methods for improving the SHMS that will address identified problem areas.

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

4. Reducing the three-year TCIR and/or DART rate to below the national average is not, by itself, an appropriate Merit goal. Corrections of SHMS deficiencies underlying the high rate must be included in the Merit goals.

C. Returning the Application. The on-site evaluation team will return the application to the employer if the applicant does not meet either Star or Merit requirements. The employer will be notified that they can reapply when all of the requirements have been met and maintained for at least one year.

X. Recommendations for Reapproval of Participants. The on-site evaluation team must decide among the following recommendations:

A. Continued Star Participation.

1. Recommendation for Star Reapproval. When the on-site evaluation team has judged that the participant's SHMS continues to meet all Star Program requirements, the team will recommend reapproval to the Star Program pending satisfactory completion of any 90-day items.

2. Recommendation for One-Year Conditional Participation in the Star Program. The on-site evaluation team may recommend conditional Star Program participation for one year when the following conditions are met:
   a. The participant has allowed one or more identified SHMS elements to fall below Star quality, and these deficiencies can be satisfactorily corrected, restoring the system to full Star quality during a 90-day deferral of decision.
   b. The participant must agree to return its SHMS to Star quality within a 90-day deferral period and must demonstrate a commitment to maintain that level of quality.
   c. The participant agrees to specified goals, correction methods, and time frames established by the team leader with input from the team members and participant representatives. These goals must be accomplished for the participant to return to full Star status. The One-Year Conditional goals must meet the same criteria listed for Merit goals.
   d. The participant must agree to submit quarterly reports to OSHA during the year documenting their progress in meeting the One-Year Conditional Goal(s).
   e. When placed on conditional status, the participant will not receive a congratulatory letter from the Assistant Secretary until the conditional status is removed.

3. Recommendation for Star Reapproval with Two-Year Rate Reduction Plan (RRP). Whenever the three-year rate (either TCIR and/or DART) of a participant is the same or above the three most recent/published BLS rates for their NAICS, the site will develop and be placed on an approved two-year rate reduction plan. The effective date will be the date the RA approves the RRP. The RRP will be effective for two full calendar years; this may or may not include the year the higher rates were discovered.
   a. The VPP on-site evaluation report will include the following information on the implementation of the RRP requirements.
      - Regional Office approval,
      - Identify an end date two full years from the effective date of the RRP. This may or may not include the year the rate increase was discovered.
      - Identify deficiencies identified in the SHMS and develop a plan to eliminate these deficiencies.(If there is no plan place on a one-year conditional plan),
      - Provide a schedule for required quarterly updates,

- Offer assistance in plan development,
- Provide a statement of understanding that if the required rate reductions are not achieved within the plan period, the site will be subject to termination. Back to back, two year RRPs will not be allowed.

b. The VPP Manager will conduct a review of the site progress after the first year. If, at that time, the rates show an increase rather than a decrease, the site will be encouraged to withdraw from VPP.

c. If, within five years after successfully completing a two-year rate reduction plan, the participant's three-year rates rise to or above the three most recent/published BLS rates again, the participant will be asked to withdraw from VPP.

d. Consecutive two-year rate reduction plans will not generally, be approved. If extreme extenuating circumstances are present, the Assistant Secretary may approve a second RRP.

4. Annual Self-Evaluation by February 15. If the participant's three-year rate (either TCIR or DART) indicates the need for a two-year RRP, the participant must submit its two-year RRP to the Regional Office along with their annual self-evaluation.

a. If upon OSHA's review of the participant's annual self-evaluation, it is determined that the participant's three-year rate (either TCIR or DART) is the same or above the three most recent/published BLS rates for their NAICS, the participant will be notified by OSHA in writing to develop and submit a two-year RRP.

b. The RRP submitted by the participant will be in place for two full calendar years from the time the plan is approved.

B. One-Year Conditional Star Participants.

1. Lifting of One-Year Conditional Status. If a participant on One-Year Conditional Star status has fully met all One-Year Conditional goals and maintained the restored SHMS at Star quality for one year, the on-site evaluation team will recommend lifting the One-Year Conditional status and returning the participant to full Star Program status.

2. Withdrawal. If any One-Year Conditional goals have not been met, the on-site evaluation team will recommend that the participant be terminated from VPP. Additionally, a site cannot be placed on consecutive One-Year Conditional status periods and a Star participant cannot be downgraded to Merit Status.

C. Merit Participants.

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

2. Merit Reapproval (When the Original Three-Year Merit Term Has Expired). If, due to unanticipated circumstances, a Merit participant has not met all agreed-upon goals or Star requirements, then the on-site evaluation team may recommend a second Merit term with new goals. It is expected that requests for second terms in Merit would be very rare and based on unforeseen circumstances (for example, a natural disaster). Any request for a second Merit term will come from the RA and must be approved by the Assistant Secretary.

3. Automatic Termination. A Merit participant will be terminated from VPP if they have not met all agreed-upon goals, including Star requirements, and one of the following situations exists:
   a. The original three-year term has expired and there are no extenuating circumstances.
   b. The original three-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.
   c. The participant already has been approved to a second Merit term and either:
      - That term has expired; or
      - The participant 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.

XI. Closing Conference. The findings of the on-site evaluation team, including its recommendation to the RA (pending RA notification), will be presented to management and appropriate employee representatives before the team leaves the worksite. During the closing conference, the team leader will review:

A. Findings. Review the team's findings, addressing each of the major VPP elements including requirements specific to site-based applicants/participants. Also review the injury and illness rates and how they compare to the industry national average.

B. 90-day Items. Review all uncorrected hazards, expected correction methods, and time frames. A list of these items as well as any other recommended actions will be provided to the employer at this time.

C. Goals. Review Merit, Star One-Year Conditional, or Star Two-Year RRP goals and time frames.

D. Recommendations. Review any recommendations made by the on-site evaluation team for improvement of the applicant/participant's safety and health management system.

E. Responsibilities. Remind the applicant/participant of its responsibilities under III.D, Assurances, and Chapter 4.

F. Team providing recommendation at the time of the closing. The on-site team will not provide the company with their recommendation for participation status without RA approval.

XII. The On-Site Evaluation Report.

A. Purpose of the Report. The on-site evaluation team must write and complete a report (including worksheet) documenting the on-site evaluation to substantiate the team's VPP approval/reapproval recommendation to the RA and Assistant Secretary. 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 application information submitted by an applicant.
2. Documentation of the qualifications for participation.

B. Writing the On-Site Evaluation Report. The draft report must reflect the consensus of the on-site evaluation team. Each team member will complete their assigned sections. When resources allow, the team will attempt to complete a draft report before leaving the worksite. For additional information on Demonstration Program evaluation reports, see Chapter 8.

1. Review of the Draft On-Site Evaluation Report. Once the draft is complete, the team must review and make any needed changes.

2. Presentation of Evaluation Findings. The findings of the evaluation will be provided to the applicant/participant at the closing conference. The team leader will advise the applicant/participant an approximate time frame for completion of the draft report.

C. Completing the Final On-Site Evaluation Report. The team leader must compile the final report and submit it to the VPP Manager and/or RA for processing.

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

E. 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 on-site evaluation team, whichever occurs first.

XIII. Correction of Remaining Hazards.

A. Hazard Correction Plan. Within a week of the closing conference, the applicant/participant must provide, in a letter/e-mail to the VPP Manager, any hazard correction plans (for 90-day items), including corrective action dates that have been agreed to and interim corrective measures that have been put in place. The VPP Manager will ensure the completion of corrective actions is documented.

B. Verification of Hazard Correction.

1. Corrective Action Completion. The applicant/participant will work with the VPP Manager to correct identified hazards. When all of the corrective actions have been completed, the site will provide the VPP Manager with documentation of corrective action completion, including completion dates and supporting documentation if requested.

2. Correction Verification Letter. The team leader, VPP Manager, or RA may decide to conduct a return visit to verify the corrections. The findings of this visit must be documented and kept on file. The correction verification documentation may be made available to an on-site evaluation team at a later date.

3. Finalizing the On-site Evaluation Report. When hazard corrections have been verified, and no uncorrected hazards remain, the team leader will remove annotation of the 90-Day items and other recommendations made to the site before submitting the report to the RA.

4. 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 RA has made every attempt to resolve the problem, then:

   a. The VPP Manager or RA will inform the applicant or participant that the matter is being referred to the Assistant Secretary. The referral, detailing the uncorrected hazards and the cooperative efforts made by the Region to achieve resolution, must be sent to DCSP for concurrence.
   b. The Assistant Secretary will 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, s/he must send a memorandum to the RA instructing the RA to inform the appropriate Area Office to take enforcement action. (See Chapter 12.)
   c. For withdrawal, termination, and reapplication procedures, refer to Chapter 11.

XIV. Term of Participation.

A. Star Program. There is no limit to the term of participation in Star if a participant continues to meet all Star requirements, including maintenance of Star-quality protection and annual submission of information. The one exception is for site-based long-term construction participants whose VPP participation ends with the completion of construction work.

B. Merit Program. Approval to Merit typically will be a single term not to exceed three years. The actual time spent in the Merit Program may be less than three years and will depend on the time necessary to accomplish Merit goals.

1. A participant must meet Star rate requirements within the first two years of Merit participation. This is to afford an additional year of experience before attaining Star approval.
2. A Merit participant qualifies for Star when Merit goals have been met; and when all other safety and health elements and sub-elements are operating at Star quality.
4. VPP participation of all site-based construction participants, whether Star or Merit, ends with the completion of construction work at the site.
5. In rare, unanticipated, and unique circumstances, OSHA may consider reapproving a Merit participant for a second term. (See Chapter 11.)

Chapter 6

Ways to Participate: Mobile Workforce

I. Introduction. This chapter details requirements for Mobile Workforce (MWF) participation, procedures for OSHA's evaluation of MWF applicants, and the periodic evaluations of those participants. Also included in this chapter are SHMS requirements unique to MWF participation (outside of those listed in Chapter 4), and the MWF-specific requirement to develop a Participant Plan.

II. Purpose. The Mobile Workforce Program allows VPP participation for companies whose employees travel from one site to another and typically do not "control" the worksite. This provides employers an opportunity to showcase abilities to provide high-level safety and health protection for the mobile workforce.

III. The Mobile Workforce Participant.

A. General Eligibility. OSHA accepts VPP applications for MWF participation from corporate, business unit, or division levels. The host site does not necessarily need to be an approved VPP site.

B. Participation Plan. A major difference between the requirements for site-based and MWF eligibility is MWF applicants must provide a Participation Plan. Each applicant will develop a unique Participation Plan that includes a discussion of SHMS elements that differ in substance or emphasis from the basic system requirements provided in Chapter 4. This may include management leadership, and employee involvement strategies to ensure employee protection, such as employees' ability to leave the worksite if unsafe conditions exist; hazard analysis using historical sampling data for a baseline; emergency response policies and evacuation procedures appropriate to construction and other mobile workforce projects; and other alternative approaches to safety and health.

C. Designated Geographic Area (DGA). OSHA will work with the applicant to define a geographic area for MWF VPP participation. The DGA will enable the applicant to achieve VPP participation and receive OSHA recognition for temporary work projects. This includes projects where the contractor is on site for a long-term project (For example, a turn-around at a petroleum refinery) where operations, although long term, are task-based and are temporary.

1. A DGA cannot be smaller than a single OSHA Area Office territory and cannot be larger than an OSHA Regional Office territory.
2. MWF applicants seeking to participate in, and approve participants into, more than one Region, must submit a separate application for participation in each Region.
3. MWF applicants and approved participants, cannot expand their DGA into more than one Region;
   a. The DGA will become part of the applicant's Participation Plan;

b. At time of application, the applicant must have at least two active work projects within the DGA (one of which can be the company's headquarters);

c. Requests for modifying an established DGA will be handled by the RO on a case-by-case basis.

D. Unionized Workforce.

1. When a majority of an applicant's employees and contractor/subcontractor employees are represented by unions, the applicant must provide to OSHA signed documentation that the unions support VPP participation, or are not opposed to participation.
2. OSHA expects each applicant to determine whether the requirement for union support applies. Calculate the percentage of employees (including temporary employees) and contractor/subcontractor employees who are represented by unions at the time of VPP application. See chart below
3. An applicant must provide OSHA signed documentation that the authorized bargaining agents, individual local unions that represent the applicant's employees, or, when appropriate, local, regional, or national industry council, either support VPP participation or are not opposed to participation at its sites within the DGA. Without such concurrence, OSHA will not accept the application.
4. Where the applicant's site is not covered by a union, OSHA will evaluate employee support for participation through on-site interviews. A lack of employee support and involvement, for any reason, will result in OSHA returning the application.

E. OSHA History.

In addition to the general requirement concerning an applicant's OSHA inspection history the following applies to mobile workforce participation:

The applicant's history within the DGA must include no open investigations, no pending or open contested citations or notices under appeal at the time of application, and no affirmed willful violations during the 60 months prior to application.

F. Assurances.

MWF applications must include certain assurances describing what the applicant agrees to do if OSHA approves the application. The following assurances are specific to MWF participation and are in addition to those listed in Chapter 4. The applicant must assure that:

1. Applicant will correct any site deficiencies related to compliance with OSHA requirements and identified during the OSHA preapproval on-site review. The correction deadline:
   a. Will depend on the length of the work project and the nature of the deficiency;
   b. Will be determined by the OSHA VPP team leader; and

c. In no instance will exceed 30 days for construction and 90 days, for general industry sites.

2. The systems and procedures of SHMS are in place and effectively implemented at all work projects, and management provides effective oversight, to assure VPP-quality safety and health protection throughout the DGA.

3. By February 15 of each year, each MWF participant will send to its designated OSHA VPP contact:
   a. The DGA's TCIR and DART rates for the previous calendar year for the participant, contractor/subcontractors, and temporary employees.
   b. The participant will also submit:
      - The total number of cases for each of the above two rates;
      - Total hours worked;
      - Estimated average number of employees at each site for the past full calendar year;
      - A copy of the most recent annual self-evaluation of the participant's safety and health management system; and
      - A description of any success stories, for example, reductions in workers' compensation rates, increases in employee involvement in the program.

4. The percentage of employees represented by unions may change. Therefore, an approved mobile workforce participant will report to OSHA, as part of its annual self-evaluation, any change in this percentage that would have the effect of changing the participant's union support requirement.

5. When OSHA needs to visit a particular work project that the mobile workforce applicant/participant does not control, the applicant/participant will inform, and gain written permission from the controlling employer (for example, the general contractor) for OSHA to enter. In these instances, OSHA will provide reasonable notice prior to the visit. If the controlling employer refuses permission for OSHA to enter, OSHA will consider visiting a different work project within the DGA, if available. If no other sites are active within the DGA, or planned for the following six months, the MWF will be asked to withdraw.

6. <u>Project Lists</u>.
   a. Prior to OSHA's VPP preapproval on-site evaluation visit and subsequent reapproval visits, the applicant/participant will provide OSHA with a list including addresses of all active work projects;
   b. If the applicant/participant is a controlling employer at any work projects within the DGA, it will provide OSHA with a list

including addresses of all active work projects and all work projects scheduled or expected for the next 12 months.

For the purpose of VPP, a controlling employer is any entity at a work location (such as a general contractor or manager at a construction project) that controls project/site operations and has ultimate responsibility for assuring safe and healthful work conditions at the project/site.

G. Injury and Illness Performance.

In determining MWF applicant's qualification for the Star or Merit Program, OSHA considers the most recent three-year recordable injury and illness data for all work conducted within the DGA (including work conducted by contractors/subcontractors) and compares that data with industry averages published by BLS. Some applicants may use an alternative calculation of injury and illness experience based on the best three out of the most recent four years (see G.3.). The following provisions govern the injury and illness performance requirements for MWF Star and Merit approval.

1. Star Participant Rate Requirements.

The MWF applicant at the time of approval must meet the following employee performance criteria for the company's workforce within the DGA.

a. The workforce consists of all employees over whom the applicant has responsibility and authority for safety and health, including regular hires plus temporary, contractor, and subcontractor employees. The term "combined workforce rates" as used here means injury and illness rates calculated from data that combine an applicant's regular workforce (which includes temporary employees) and its contractor/subcontractor employees. It is the applicant's responsibility to maintain records of hours worked by contractor/subcontractor employees under its control within the DGA plus any recordable injuries and illnesses these employees may experience.

b. Two combined workforce injury and illness (I&I) rates reflecting the data of the most recent three calendar years must be below at least one of the three most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by BLS. OSHA will compare the two DGA-wide rates against the single year that is most advantageous to the applicant. These rates are:

- The three-year TCIR (a single rate that reflects three years of total recordable injuries and illnesses); and
- The three-year DART rate.

2. Merit Participant Rate Requirements. If a participant's three-year TCIR and/or DART rate for the last three calendar years prior to approval does not meet the Star rate requirements (See G.1.), the participant must develop and rate reduction plan (RRP) to achieve Star rate requirements within two years. It must be statistically possible to achieve this goal. For example, the occurrence of one recordable injury at the worksite of a smaller employer may skew the employer's I&I rates to a level unable to be reduced within the two years.

3. Alternative Rate Calculation. Some applicants, usually smaller employers with limited numbers of employees/contractors/subcontractors and/or hours worked, may use an alternative method for calculating incidence rates. The alternative method allows the applicant to use the best three out of the most recent four years' injury/illness experience. To determine whether the applicant qualifies for the alternative calculation method, do the following:
   a. Using the employer's most recent employment statistics (hours worked in the most recent calendar year), calculate a hypothetical total recordable case incidence rate assuming that the employer had two cases during the year;
   b. Compare that hypothetical rate to the three most recently published years of BLS combined injury/illness total recordable case incidence rates for the industry; and
   c. If the hypothetical rate (based on two cases) is above the BLS national average for the employer's industry in at least one of the three years, the employer qualifies for the alternative calculation method.
   d. If the applicant qualifies for the alternative calculation method, the best three of the last four calendar years may be used to calculate both three-year rates.

H. MWF Contractors. Contractors participating as MWF for longer periods, yet still temporary, will not be considered true Resident Contractors in that, while they may have long-term contracts at specific work sites (for example, a contract for a turn-around project), actual length of their work at that site is not indefinite. The requirements for long-term contractors working as MWF VPP participants are identical to those for MWF participation generally, with the following additions:

1. The contractor must have a minimum of two eligible sites within the DGA and must have at least 12 months on site before submitting an application.

2. The type of work being conducted by the contractor must be evaluated to determine the appropriate industry classification. In general, an employer's NAICS code is based on the employer's primary revenue-generating activity. For OSHA's purposes in VPP, an employer's established NAICS code will be the same NAICS code OSHA would use for the same employer, for enforcement purposes, regardless of the

location where the work is performed. A specific discussion on NAICS Codes is located in Chapter 9 Section II.D.

IV. Safety and Health Management System Requirements for MWF.
MWF applicants/participants are required to implement and maintain a comprehensive SHMS consisting of four basic elements and their sub-elements. These elements work together to prevent fatalities, injuries, and illnesses in the workplace.

A. Additional SHMS Requirements for MFW. All VPP participants, regardless of entrance and participation type, are required to maintain a comprehensive SHMS. The basic tenets of VPP and SHMS are the same regardless of a participant's "Way to Participate." Specific details of the SHMS requirements for all employers are located in Chapter 4.

1. Based on the varying locations and types of work performed by MWF participants, traditional VPP requirements have been adapted to better reflect how the MWF SHMS are applied differently. The primary differences between the SHMS of site-based and MWF participants are in the employee involvement, baseline hazard analysis and emergency response and evacuation elements. The other main difference is the requirement for MWF companies to develop and submit a Participation Plan to OSHA.

2. For small applicants/participants, some of the requirements may be implemented and documented less formally than is required of larger companies. This adjustment is at the discretion of the VPP Manager and the on-site evaluation team.

B. Additional SHMS Requirements.
MWF employers are recognized for outstanding safety and health performance at site locations within a DGA. This might include multiple work locations managed by a general contractor, construction manager, non-construction contractor, or other contractors, all of which may have control and ultimate responsibility for safe and healthful conditions for some or all of their sites. In other situations these same contractors may have limited control and will only be responsible for safe and healthful work conditions for work in which, they are contractually responsible. Additional requirements addressing these issues are:

1. The MWF applicant's SHMS must be fully established at the Star level and, therefore, must incorporate all elements of the VPP SHMS. Approval to either Merit or Star Program will be determined by the degree and effectiveness of implementation at individual sites/projects.

2. Because the mobile workforce participant often relies on contractor/subcontractor employees, contract worker coverage is particularly critical for effective worker protection. Therefore, a mobile workforce participant's SHMS must provide thorough, documented

oversight and management of all contractors/subcontractors under its control.

3. This oversight and management must include specific procedures for considering safety and health performance during the contractor selection process. If circumstances prevent the selection of contractors with a history of good safety and health performance, the participant's management system must provide sufficiently rigorous oversight to ensure the safety and health of all employees.

4. All mobile workforce applicants/participants must perform routine self-inspections of all their active worksites within the DGA. These self-inspections must follow written procedures or guidance, involve trained employees, and result in written reports of findings and tracking of hazard elimination or control to completion. Each worksite must be covered in its entirety at least weekly.

5. Contract employees must be provided with safety and health protection equal in quality to that provided to employees.
   a. All contractors, whether regularly involved in routine site operations or engaged in temporary projects such as construction or repair, must follow the safety and health rules of the host.
   b. VPP participants must have in place a documented oversight and management system covering applicable contractors. Such a system must:
      - Ensure that safety and health considerations are addressed during the process of selecting contractors and when contractors are on-site.
      - Encourage contractors to develop and operate effective SHMS.
      - Include provisions for timely identification, correction, and tracking of uncontrolled hazards in contractor work areas.
      - Include a provision for removing a contractor or contractor's employees from the worksite for safety or health violations.

V. Merit Program. The Merit program recognizes participants that have a SHMS but must take additional steps to reach Star quality. If OSHA determines that an employer has demonstrated the commitment and possesses the resources to meet Star requirements within three years, the employer may enter the Merit program with set goals for reaching Star.

VI. Conducting the Evaluation.

A. Preapproval/Approval/Reapproval On-Site Evaluations.

1. Purpose. The on-site evaluation consists of a thorough evaluation of a MWF VPP applicant/participant's SHMS and its implementation in order to recommend approval or reapproval. On-site evaluations are carried out

by a team consisting of OSHA staff, acting in a non-enforcement capacity, and other qualified team members. See Chapter 10 for instructions on Team Composition.

2. Procedures for On-Site Review of MWF Applicants (Applies to all MWF on-site evaluations). OSHA conducts a two-phased on-site review of MWF applicants. The first phase consists of an evaluation of the applicant's SHMS; followed by a second phase, during which OSHA conducts on-site evaluations of selected, currently active worksites/projects within the DGA. This two-phased review is intended to:
   a. Verify information supplied in the application.
   b. Identify strengths and weaknesses of the applicant's SHMS.
   c. Evaluate its adequacy to address the worksite's hazards.
   d. Determine whether the applicant's SHMS meets the Star/Merit requirements.
   e. Determine how effectively the applicant has implemented its SHMS.
   f. Identify any hazardous conditions to which employees may be exposed, and work with the employer to find appropriate protective methods.
   g. Obtain information to assist the Assistant Secretary in making the VPP approval decision.

3. Duration. The time required for the preapproval on-site review will depend upon the complexity of applicant's operations and the number, size, and complexity of the worksites/projects OSHA visits.

4. Phase 1: Safety and Health Management System Review (Unique to MWF). OSHA initially conducts an evaluation of the SHMS to determine whether the system meets Star requirements. The SHMS will include systems for ensuring implementation and oversight of safety and health protection at all worksites/projects within the DGA. This evaluation normally takes place at the fixed location where the applicant maintains safety and health records (typically the applicant's headquarters). This site may or may not be considered a MWF site.

   All SHMS elements will be evaluated in Phase I but specific attention should be focused on the employer's management commitment. OSHA will carefully assess the applicant's management commitment to safety and health and to VPP. This assessment will include interviews with senior officials, employees, and union representatives where applicable.

5. Document Review. OSHA will examine the following records (or samples) if applicable and relevant to the application or to the SHMS (OSHA will accommodate trade secret concerns to the extent feasible.):
   a. Written SHMS documents.

b. Management statement of commitment to safety and health.
c. The OSHA Form 300 log (or a successor OSHA form) for all sites/projects within the DGA.
d. Other occupational safety and health injury, accident, near miss reports, and documents.
e. Safety and health manuals.
f. Safety rules, emergency procedures, and examples of safe work procedures.
g. The system for enforcing safety rules.
h. Reports from employees of safety and health problems and documentation of management's response.
i. Self-inspection procedures, reports, and correction tracking.
j. Accident investigation reports and analyses.
k. Safety and health committee minutes.
l. Employee orientation and safety training programs and attendance records.
m. Baseline safety and industrial hygiene exposure assessments and updates;
n. Industrial hygiene monitoring records, results, exposure calculations, analyses and summary reports.
o. Annual SHMS self-evaluations, site audits, and, when needed to demonstrate that VPP criteria are being met, corporate audits that an applicant voluntarily chooses to provide in support of its application. The review of evaluative documents needed to establish that the applicant is meeting VPP requirements will cover at least the last 3 years and will include records of follow-up activities stemming from self-evaluation recommendations.
p. Preventive maintenance program and records.
q. Accountability and responsibility documentation, e.g., performance standards and appraisals.
r. Contractor safety and health programs.
s. Occupational health care programs and records.
t. Available resources devoted to safety and health.
u. Hazard and process analyses.
v. Process Safety Management (PSM) documentation, if applicable.
w. Employee involvement activities.
x. Other records that provide relevant documentation of VPP qualifications.

6. Rates Review. OSHA will review DGA-wide injury, illness, and fatality records; and recalculate and verify the TCIR and the DART rate (the two rates submitted with the application).

7. Phase 2: Site/Project Evaluation (Unique to MWF). OSHA temporary worksites/projects within the DGA. These worksite evaluations will assess the effectiveness of the SHMS, including its system of oversight. The VPP evaluation team will conduct a site walkthrough, employee

interviews, and site-specific document review.

a. Site Walkthrough. The walkthrough is a general assessment of safety and health conditions. It aims to determine whether the SHMS has been implemented effectively and is adequately protecting workers from site hazards.

b. Interviews. The review will include random formal and informal interviews with relevant individuals, including contract workers.

c. Site-Specific Document Review. OSHA will examine documents that demonstrate the site's implementation of the applicant's SHMS (e.g. specific rules regarding site hazards and site operations).

d. Controlling Employer. When OSHA visits a site that an applicant/participant does not control, OSHA will provide reasonable notice prior to its visit. MWF participants must inform the primary employer and gain permission for OSHA VPP personnel to enter the site before submitting their DGA available active sites list.

   The applicant must inform and gain written permission from the site's controlling employer (e.g. the general contractor) for OSHA to enter; and must inform the controlling employer that, while OSHA will focus primarily on the applicant's/participant's work at the site, any conditions (including those created by others) that OSHA views and deems a violation, must be abated immediately, or confirmed as abated. OSHA will not take enforcement action, or issue citations if the hazardous conditions are corrected immediately or with well-documented abatement. If correction does not occur, OSHA will consider making a referral for enforcement.

e. Number of Site/Project Evaluations. The number of site/project evaluations will depend on the complexity and scope of operations and the number of sites/projects within the DGA, and will be determined by the RA. The RA may use a variety of factors in making this decision but in no case will only one site within the DGA be evaluated.

f. Evaluation of Fixed Locations. Some applicants/participants may conduct certain operations at fixed locations, such as a headquarters, warehouse, or construction yard, that impact the safety and health of the overall MWF establishment(s). OSHA reserves the right to evaluate these fixed locations, although they will not be considered a worksite for purposes of MWF participation. Should the employer desire to bring such fixed work locations into VPP, OSHA will accept applications under VPP's site-based participation requirements, as provided in Chapter 5.

8. Reapproval Evaluation. OSHA will conduct the first reapproval evaluation of a MWF participant's sites/projects within 18 to 24 months of the initial

Star approval. Subsequently, OSHA will conduct reapproval evaluations of sites/projects within the DGA at no greater than 36-month intervals. The identification of potentially serious safety and health risks/hazards may create the need for referral for enforcement.

OSHA will review the participant's SHMS at the participant's headquarters, beginning with the second reapproval evaluation, and subsequently at every other reapproval period.

9. Two Phase Evaluation Purpose. This two-phased reapproval review is intended to:
   a. Verify the participant continues to meet the requirements for Star/Merit;
   b. Address the more transient nature of a MWF participant by having shorter reapproval cycles than traditional site-based participants.
   c. Identify strengths and weaknesses of the participants SHMS and evaluate its adequacy to address the worksite's hazards;
   d. Identify any deficiencies in the applicant's SHMS that must be satisfactorily addressed before OSHA will approve the participant for continued participation;
   e. Determine if the employer effectively addresses hazards; and
   f. Obtain information to assist the RA in making the VPP reapproval decision.

10. Reapproval Preparation. The reapproval will be arranged at the mutual convenience of OSHA and the participant. The review team will consist of a team leader; a back-up team leader (when needed); and health, safety, and other specialists as required by the size and complexity of applicant's operations.

11. Reapproval Duration. The time required for the reapproval on-site review will depend upon the complexity of participant's operations and the number, size, and complexity of the worksites/projects OSHA visits.

12. Reapproval Scope. The reapproval on-site review for MWF participants will consist of two phases: an evaluation of the participant's SHMS, and on-site evaluations of temporary, currently active worksites/projects.
   a. Phase 1: Safety and Health Management System Review. OSHA will conduct a re-evaluation of the participant's SHMS to determine whether the system continues to meet Star/Merit requirements. It will include systems for ensuring continued implementation and oversight of safety and health protection at all worksites/projects within the DGA.
   b. Phase 2: Site/Project Evaluation. OSHA will visit a number of temporary worksites/projects within the DGA. These worksite evaluations will assess how effectively the participant continues to implement and oversee its SHMS.

c. Number of Site/Project Evaluations. The number of site/project evaluations will depend on the complexity and scope of applicant's operations and the number of sites/projects within the DGA, and will be determined by the RA. The RA may use a variety of factors in making this decision but in no case will only one site within the DGA be evaluated. If there are no active sites at the time of reapproval, and none are planned within six months, the MWF participant may be asked to withdraw.

d. Compressed Reapproval Process. For current VPP participants who demonstrate a sustained commitment to safety and health excellence, OSHA may choose to employ a CRP on-site evaluation to recognize sustained excellence. At the conclusion of the CRP, the on-site evaluation team must provide the RA with its recommendation for the participant's suitability for continued participation in VPP.

- The standard CRP evaluation format may be used for MWF. However, additional description of the MWF site, as well as how the employer's SHMS is implemented and maintained, must be added to the report.

VII. Discussion of Findings.

A. Daily Debriefings. At the end of each day, the on-site 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. Specific details about areas of consideration are located in Chapter 5, Sections I-K.

B. Final Analysis of Findings. When the documentation review, walkthrough, and employee interviews have been completed, the on-site evaluation team will meet privately to review and summarize the findings. The team leader will facilitate the discussion and assist the team members in drawing conclusions about the quality of the participant's SHMS, based on their findings. Specific details about areas of consideration are located in Chapter 5, Section VIII.K.

VIII. Recommendations for Continued Participation. In the final private meeting prior to the closing conference, the on-site evaluation team must reach consensus on their recommendation for continued program participation. If they cannot reach consensus, they must consult with the Regional or National Office or both.

A. Star Participants.

1. Recommendation for Star Reapproval. When the on-site evaluation team has judged that the participant's SHMS continues to meet all Star Program requirements, the team must recommend reapproval to the Star Program upon satisfactory completion of any 30-day items.

2. Recommendation for One-Year Conditional Participation in the Star Program. The on-site evaluation team must recommend conditional Star Program participation for one year (dating from the end of the 30-day deferral period) when the participant meets the conditions of both a. and b., below.
   a. The participant's SHMS has fallen below Star quality in one or more of the requirements, and
   b. Where those requirements can be satisfactorily met during a 30-day deferral of decision.

3. One-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 goals are required to be met within the first 30 days and then the participant has a period of one year to maintain their SHMS at the improved Star level.

4. When the Participant's Rates Have Increased. Whenever the three-year rate (either TCIR and/or DART) of a participant is the same or above the three most recent/published BLS rates for their NAICS, when observed during the on-site reapproval evaluation, the site will develop and be placed on an approved two-year RRP. The effective date will be the date the RA approves the RRP (when the site has finished drafting the plan). The RRP will be effective for two full calendar years; this may or may not include the year the higher rates were discovered.

.

   a. Additionally, if the rate increase is related to a deficiency in their SHMS, the site will also be placed on a one-year conditional status. When re-evaluating the one year conditional status and it is discovered the site rates are still above the three most recent/published BLS rates, the site will be encouraged to voluntarily withdraw from the program. Failure to withdraw will result in termination.
   b. The VPP on-site evaluation report will include the following information about the RRP and the employer's responsibilities under the plan.
      - The plan must be approved by the Regional Office,
      - The end date of the plan identified (two full years from the end of the on-site evaluation),
      - The steps for developing the plan to include any deficiencies identified in their SHMS (if not placed on a one year conditional),
      - A time schedule for the required quarterly updates,
      - An offer of assistance in the plan development,
      - A statement of understanding that if unable to accomplish the required rate reductions within the allotted two years, they will

be encouraged to withdraw from VPP and failure to withdraw will result in termination.

c. The VPP Manager will conduct a review of the site progress after the first year. If the rates show an increase, rather than a decrease, the site will be encouraged to withdraw from VPP.

5. Withdrawal. The on-site 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 30-day deferral of decision.
   c. The participant has not made good faith effort on agreed-upon corrections.

6. Lifting of One-Year Conditional Status.
   a. If all One-Year Conditional goals have been met and the SHMS has been restored to Star quality for one full year, the on-site evaluation team must recommend lifting the One-Year Conditional status and returning the participant to full Star Program participation.
   b. If all One-Year Conditional goals have not been met, the on-site evaluation team recommend that the participant withdraw from the program or be terminated. A former Star participant cannot be returned to the Merit Program.

B. Merit Participants.

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

2. Merit Reapproval. When the First Three-Year Merit Term Has Expired, and a Merit participant has not met all agreed-upon goals or Star requirements, the on-site evaluation team will recommend the site withdraw. If the site can demonstrate to OSHA that they have been diligent in maintaining their Merit status while working to achieve Star recognition, the Assistant Secretary may be requested to grant approval of a second Merit term. Rare and special circumstances must be present for the Assistant Secretary to grant a second Merit term.

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

a. The first three-year term has expired and there are no extenuating circumstances.
b. The participant has already had a second Merit approval.
c. The first three-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.

IX. Term of Participation.

A. Star Program. A MWF participant's term of participation in the Star Program is open-ended so long as the participant:
1. Continues to maintain its excellent SHMS at its sites/projects within the DGA as evidenced by favorable reevaluation,
2. Continues to maintain injury and illness rates below the BLS published rates for the participant's industry, and
3. Submits the annual information required by designated due dates, including annual rate data and program self-evaluation.

B. Merit Program. MWF participants in the Merit Program are approved for a period of time not to exceed three years. The term will depend upon how long it is expected to take the applicant to accomplish the goals for Star participation. Approval for a second term is contingent upon approval by the Assistant Secretary, and only when unanticipated unique circumstances slow the participant's progress toward accomplishing the goals.

X. Closing Conference. The findings of the on-site evaluation team, including its recommendation to the RA, can be presented to management and appropriate employee representatives before the team leaves the worksite. During the closing conference, the team leader will review:

A. Findings. Review the team's findings, addressing each of the major VPP elements including requirements specific to site-based applicants/participants. Also, review the injury and illness rates and how they compare to the industry national average.

B. The On-Site Evaluation Team's Recommendation to the RA. The On-site evaluation Team Leader will discuss, with the employer, the recommendation the team will make to the RA relative to the site's status after the RA has been notified.

C. 30-Day Items. Review all uncorrected hazards, expected correction methods, and time frames. A list of these items as well as any other recommended actions will be provided to the employer at this time.

D. Goals. Review Merit, Star One-Year Conditional, or Star Two-Year RRP goals and time frames.

E. Recommendations. Review any recommendations made by the on-site evaluation team for improvement of the applicant/participant's safety and health management system.

XI. The On-Site Evaluation Report.

A. Purpose of the Report. The on-site evaluation team must write a report documenting the on-site evaluation to substantiate the team's recommendation to the RA and Assistant Secretary for approval or reapproval 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 On-Site Evaluation Report. The draft report must reflect the consensus of the on-site evaluation team. Each team member will complete their assigned sections. When resources allow, the team will attempt to complete a draft report before leaving the worksite. For additional information on Demonstration Program evaluation reports, see Chapter 8.

1. Review of the Draft On-Site Evaluation Report. Once the draft is complete, the team must review it and make any necessary changes.

2. Presentation of Evaluation Findings. The findings of the evaluation, including any 30-Day items and other recommendations, will be provided to the applicant/participant at the evaluation close-out. The team leader will advise the applicant/participant an approximate time frame for completion of the draft report.

3. Team Recommendation at Closing. The on-site team will not provide the company with their recommendation for participation status without RA approval.

4. Writing the On-Site 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 on-site evaluation team. Each team member must complete the sections of the on-site evaluation report assigned by the team leader.

5. Completing the Final On-Site Evaluation Report. The team leader must compile the final report and submit it to the VPP Manager and/or RA for processing. The final report may be deferred from submission to the Regional VPP Manager, RA, or both if uncorrected hazards are still present at the worksite after the closing conference or after the team leaves the worksite.

6. Deferral Period. The final report may be deferred for up to 30 days from the closing conference or until all uncontrolled hazards identified by the on-site evaluation team, whichever occurs first.

XII. Correction of Remaining Hazards.

A. Hazard Correction Plan. Within a week of the closing conference, the applicant/participant must document in a letter/email to the VPP Manager any hazard correction plans (this can be the list of 90 day, and action items), interim measures put in place by the site to protect the employees, and dates that have been agreed upon. This documentation will be kept on file until notification of completion of all of the outstanding items has been received.

B. Verification of Hazard Correction.

1. Signed notification of completion of all the required corrective actions will be provided to the VPP Manager or his/her designee indicating how and when the corrections were made.

2. The team leader, VPP Manager, or RA may decide to conduct a return visit to verify the corrections. The findings of this visit must be written in a correction letter, kept as part of the participant's file, and may be made available to an on-site evaluation-team at a later date.

C. Finalizing the On-Site Evaluation Report. When hazard correction has been verified, and no uncorrected hazards remain, the team leader will remove annotation of the action items and other recommendations made to the site before submitting the report to the RA.

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 RA has made every attempt to resolve the problem then:

1. The VPP Manager or RA 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 RA instructing the RA to inform the appropriate AO to take enforcement action. [See Chapter 8.]

3. For withdrawal, termination, and reinstatement procedures, see Chapter 11.

Chapter 7

Ways to Participate: Corporate

The Corporate VPP policy is being revised. This page is a place holder for VPP Corporate.

Chapter 8

Star Demonstration Programs

I. Purpose of Star Demonstration Programs. Star Demonstration Programs enable OSHA to work with companies and industries to demonstrate the effectiveness of methods for achieving excellence in SHMS that are potential alternatives to current Star requirements. OSHA may approve Star Demonstration Programs for such purposes as:

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

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

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

1. Experimenting with an alternative approach that, if successful, will be an improvement over current standards in safety and health management.
2. Exploring other opportunities to develop innovations and improvements in safety and health management.

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

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

IV. Proposal Development. Parties interested in developing proposals must work with DCSP or RA, one of whom will take the lead as the primary point of contact with the proposing party.

A. Submitting a Proposal. Either OSHA or a stakeholder may propose a Star Demonstration Program. In addition to individual worksites, proposals may come from corporations, unions, or other organizations. (e.g., a group of small businesses that have joined to provide a complete system of safety and health protection for affected employees.)

B. Proposal Components. The proposals are required to be written, and at a minimum must include a detailed description of the proposed Star Demonstration Program, including:

1. Concept overview with background information and a brief history

2. Data to reinforce the need for a Demonstration and how it will serve the goals of VPP.
3. Alternative approaches to be tested, including proposed methodology and potential benefits.
4. How the Demonstration requirements differ from current Star requirements, and explanation of the requirements to be met while testing the alternative approaches.
5. Measures to be put in place to ensure that all employees and contractors will receive the protection of a Star quality SHMS.
6. Description of how the effectiveness of the Demonstration will be measured and evaluated to determine its success or failure.
7. Term of the Star Demonstration.

C. Exceptions to Star Requirements. A Star Demonstration Program proposal may include exceptions to normal Star requirements, so long as all employees and contractors continue to receive Star quality protection.
1. Alternative methods of implementing the four basic elements may be the subject of a Star Demonstration Program.
2. If appropriate to the testing of an alternative approach, an applicant may not be required to address all the specific sub-elements that comprise each basic element.
3. OSHA will consider other proposed exceptions to normal Star requirements.

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

A. The Review Process.
1. The DCSP and the RA(s) will discuss the merits and disadvantages of the proposal.
2. OSHA's point person and lead point of contact for the Demonstration proposal will be DCSP, the RA or the Assistant Regional Administrator (ARA) of CSP, or a designated senior program staff person.
3. The designated point person (above) will prepare a written program description, meeting the criteria outlined in IV. B., as well as recommendations regarding the advisability of pursuing the proposed program.
4. DCSP will decide whether it is advisable to pursue the proposed program. [See B., below] If it appears advisable, the next step is for OSHA to negotiate program-specific requirements with the proposing party.

B. Recommendation. If DCSP recommends approval of the proposed program, a recommendation will be forwarded to the Assistant Secretary. If DCSP decides that the proposal should not be approved, a detailed explanation will be provided to the affected RA, including an explanation of why the proposed Star Demonstration program is being rejected. The OSHA lead contact will provide this detailed explanation to the proposing party.

C. The Assistant Secretary Decision. DCSP will brief the Assistant Secretary about the Demonstration proposal and will advise the Assistant Secretary of their recommendation to accept the proposal. The Assistant Secretary approves or disapproves the Demonstration proposal.

1. If approved, the Star Demonstration Program is opened to applications on the day it is announced to the public. DCSP announces new Star Demonstration Programs to the public by means such as fact sheets, press releases, and OSHA's website. This includes the specific requirements of the Star Demonstration Program.
2. If the Assistant Secretary decides against approval, DCSP must provide the affected RAs with an explanation of why the proposed program has been rejected, and the OSHA lead contact will provide this explanation to the proposing party (if other than OSHA).

VI. Approval of Applicants in Star Demonstration Programs.

A. Application Review. OSHA will review applications and determine if they meet the requirements of the particular Star Demonstration Program. If deemed complete and acceptable, an on-site evaluation will be scheduled.

B. On-Site Evaluations. On-site evaluations must be conducted according to the general procedures described in Chapter 5, except that:

1. Any specific requirements unique to the particular Star Demonstration Program must also be considered.
2. Two recommendation options are available to the on-site evaluation team: approval or denial to the Star Demonstration Program.

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

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

E. Frequency of On-Site Evaluations. On-site evaluations must be conducted according to the terms of the Demonstration and using the procedures described in Chapter 5 and will occur at least every 12-18 months during the term of the Demonstration.

VII. Outcome of a Star Demonstration Program.

A. Regional Comment Period. After the expiration of a Star Demonstration, the DCSP and the RA will analyze data collected during the Demonstration and will include the analyses and the program results in the Demonstration evaluation. The evaluation will be provided to DCSP in writing no more than 90 days after the expiration of the program.

B. Report to the Assistant Secretary. Based on the evaluation submitted by DCSP and the RA, a recommendation will be made to the Assistant Secretary on changing Star requirements to include or be replaced by the Star Demonstration Program requirements. DCSP will submit this recommendation in writing to the Assistant Secretary no more than 60 days after the evaluation document is provided to DCSP.

C. Assistant Secretary's Decision.

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

   a. The changes become effective on the day they are announced to the public.
   b. Star Demonstration Program participants may begin the process of seeking Star Program approval on that date.
      - If fewer than 24 months have passed since a participant's last on-site evaluation, that participant may be approved to Star status automatically. The official approval date is the day the Star requirement changes became effective.
      - If more than 24 months have passed since a participant's last on-site evaluation, an evaluation must be conducted before the participant can be recommended for Star status. The official approval date is the day of the Assistant Secretary's approval letter.

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

VIII. Termination of a Star Demonstration Program.

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

1. Likely to endanger employees.
2. Unlikely to result in changes to Star requirements.
3. Unlikely to result in the creation of a new type or level of VPP participation.

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

1. All affected RO.
2. All affected Star Demonstration Program participants.
3. Other affected stakeholders such as corporate headquarters or unions.

Chapter 9

The Application Process

I. Eligibility and Program Requirements.

A. Eligibility. OSHA accepts applications for recognition in VPP from private sector general industry, maritime, construction employers, and from Federal agency worksites. The appropriate RO accepts applications from general contractors, subcontractors, mobile workforce employers, owners, and site managers who control worksite operations and have ultimate responsibility for assuring safe and healthful working conditions at the worksite. The Regions also accept applications from qualifying resident contractors at VPP sites as well as those at non-VPP worksites. Applications for participation are subject to the following conditions:

1. Employees' Support of Participation. Employees must actively support participation in VPP. The site culture must enable and encourage effective employee involvement in the planning and operation of the safety and health management system and in decisions that affect employees' safety and health.

2. OSHA Inspection History. If OSHA has inspected an applicant worksite in the 60 months preceding the application, the inspection, abatement, and any other history of interaction with OSHA must indicate good faith attempts by the employer to improve safety and health at the worksite. This includes verification and certification of correction of all serious violations. In addition, the existence of any of the following at the worksite precludes the applicant's participation in VPP:

   a. Open enforcement investigations at the time of application.
   b. Pending or open contested citations or notices under appeal at the time of application.
   c. Willful citations or unresolved Whistleblower Administrative Law Judge statute cases where OSHA issues a Merit Finding or 11(c), International Safe Container Act (ISCA), or Asbestos Hazard Emergency Response Act (AHERA) cases where the Office of the Solicitor of Labor files a complaint in district court during the 60 months prior to application.
   d. Unresolved, outstanding enforcement actions such as long-term abatement agreements or contests.
   e. Work-related fatality of an employee during the 60 months prior to application or a work-related fatality of a contract employee during the 12 months prior to application.
   f. Inclusion in OSHA's Severe Violator Enforcement Program (SVEP) at the time of application.

g. OSHA history pertaining to non-VPP worksites of the same company if it is determined that a corporate decision, program, or policy which applies to all company worksites does not meet VPP Star quality.

B. Program Requirements. Applicants must understand and agree, through assurances, to fulfill program requirements for participation in VPP.

1. Applicants must assure:

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

b. Worksite deficiencies related to compliance with OSHA requirements and identified during the OSHA on-site review will be corrected when observed and in no case, outside of 90 days. Interim protection must be provided to employees where a hazard cannot be abated immediately.

c. Employees actively support the VPP application.

d. Requirements and VPP elements are in place, met, and, maintained.

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

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

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

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

- Written SHMS.
- All documentation outlined in Chapter 6.VI.A.5.
- Any agreements between management and the collective bargaining agent(s) concerning safety and health.
- Any data necessary to evaluate the achievement of individual Merit.

i. Each VPP applicant must submit a complete application including annual injury and illness rates to its Regional VPP Manager. Sites covered under the PSM Standard must also complete the PSM Supplement A Questionnaire.

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

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

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

II. Preparing the Application.

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

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

If:	***And:***	***Then:***
The applicant operates at a worksite where operations are physically separated but where a single, effective on-site evaluation is still feasible.	All applicant employees are covered by a single safety and health management system	A single application is required.
The applicant is the General Contractor of a construction worksite where subcontractor employees are also covered by the same safety and health management system.	All applicant employees are covered by a single safety and health management system	A single application is required.

If:	*And:*	*Then:*
The applicant has multiple operations.	All applicant employees are covered by a single safety and health management system	A single application is required reflecting the appropriate NAICS code for the employer.
More than 50 percent of the predominant work* performed by employees is performed at off-site location(s).	The application is for an MWF site.	A single application is required.
The applicant's operations are separated by distances that would prevent an effective, single on-site evaluation.	All employees may or may not be covered by a single safety and health management system.	More than one application is required.
More than one employer at a single worksite is applying for VPP (for example, an office building).	N/A	More than one application is required.

*Follow the directions in the North American Industrial Classification System (NAICS) Manual to determine the predominant work and the appropriate NAICS code. If questions still exist, contact OSHA's National Office

C. Confidentiality. During the application process and prior to program approval, the application and all related information is confidential and must be used solely for VPP-related activities. Only applications of approved participants will be kept in a public file. If an applicant withdraws, the original application and related documents must be returned or deleted electronically. No records or any part of a returned application will be maintained by the VPP Region.

D. NAICS Code Determination. During the application review process, OSHA will confirm the employer's NAICS code provided in the application meets the NAICS code listing for their operations. The link below provides information that helps to understand NAICS codes and how they are applied.

1. Using the Host's NAICS. The resident contractor will be assigned the host's industry classification (NAICS code) when:
   a. The majority of the work (greater than 50 percent) performed by the resident contractor fulfills a function normally performed by the host (such as general equipment maintenance); or
   b. The host employer's own employees work side by side with the resident contractor's employees performing the same or similar tasks.

2. Using the Contractor's NAICS. The resident contractor will be assigned its own NAICS code, which differs from the host employer's, when:
   a. The majority of the work performed by the resident contractor is not normally associated with the host's industry or service; and

b. The work is conducted independent from the host employer's supervision and control.

3. Additional Guidance. RAs should use the following criteria and examples to determine the appropriate industry classification:

a. If the resident contractor performs work that is independently performed, applicable across multiple industries, and not tightly integrated with the host employer's work, then a NAICS code for the contractor's specific work would be applied. (For example, an employer whose function is solely to erect and dismantle scaffolding).

b. If the resident contractor performs specialty, skilled work not commonly performed by the host employer, then the NAICS code for that specialty skilled work would be applied. (For example, an employer engaged in computer operations and other technology-related functions).

c. If the resident contractor performs work entirely unrelated to the host employer's operations, then the NAICS code for the contractor's specific work would be applied. (For example, those employers performing facility security operations).

III. Application Records. The VPP Manager will enter the application receipt and processing information into VADS.

IV. Procedures for Receipt and Review of Applications.

A. Queue. When an application is submitted, the RA will assess regional resources to determine if the application will be processed or if it will be placed in an existing application queue. Applications that have remained in a queue for more than nine months that have not been reviewed and accepted will be returned to the site. The applicant can work with the VPP Manager to determine when an updated application should be resubmitted.

B. Data Entry. Relevant information from the application will be entered into VADS by the VPP Manager.

C. Processing. Applications will be processed based on priorities established by the Agency.

D. Application Queue Process. A VPP application queue number will be assigned based on receipt of application and Agency prioritization criteria.

E. Application Processing. If the application will not be processed within nine months, the Regional/Area Office will notify the National Office, return the application to the applicant, and update VADS accordingly.

F. Regional Office Review. Once the Regional/Area Office is to ready to process a

new application from the queue, a notification, via phone call or email, will be sent to the applicant. The Regional/Area Office will review the application and contact the applicant site if additional documentation is required.

Once an application is considered complete and accepted, the Regional/Area Office will schedule the on-site evaluation. The review, acceptance, and scheduling of the on-site evaluation will be based on regional resource availability and industry prioritization (where pre-determined).

G. In general, application review must include an examination of the following:

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

2. Injury and Illness Rates. The rates supplied in the application must be examined as follows: (See Appendix B.)

    a. For general industry, the reviewer of the application must calculatethe three-year TCIR and DART rates for injuries and illnesses, using data from the last three complete calendar years.
    b. For construction, calculate rates for the life of the worksite if fewer than three years. At a minimum, the most recent 12 months is required, and the data must include all employees of contractors and subcontractors on the worksite. (On construction worksites, all contractors are considered worksite employees for the purpose of rate calculations, and, therefore, are included in the applicant/ participant's rates).
    c. Evaluate the applicant/participant's injury and illness history by using a-three-year TCIR and a three-year DART rate; (a minimum of one year rates for construction). The three-year TCIR and DART rates must be below at least one of the three most recent years of specific industry national averages for nonfatal injuries and illnesses at the level published by BLS for that industry. Compare both rates to the same single year.
    d. An alternative rate calculation may be used for eligible smaller worksites. This process is described in Appendix B, Section VII.
    e. The reviewer must determine if the applicant's injury and illness rates are low enough to warrant an on-site review.

3. Safety and Health Elements. The reviewer must determine if the application describes how the applicant is meeting the VPP requirements, addressing each of the elements and sub-elements of an effective SHMS listed in Chapter 4 and as outlined below.

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

b. Worksite Analysis. The applicant must describe methods used to recognize, identify, and analyze hazards. Effective worksite analysis provides the information managers and employees need for a thorough understanding of all hazardous situations to which they may be exposed.

c. Hazard Prevention and Control. The applicant must describe and give examples of how hazards are addressed, including preventative maintenance, occupational health care program, emergency preparedness, and hazard elimination employing the hierarchy of controls.

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

4. Assurances. The reviewer must determine that the application contains a signed statement that all required assurances have been included.

5. Incentive Programs. Incentive programs can be an important tool to promote workplace safety and health and may be varied in structure. The first type of program rewards workers for reporting near-misses or hazards, and encourages involvement in the safety and health management system. The second type of incentive program is rate-based and focuses on injury and illness numbers. For example, a rate-based program may reward employees with a bonus or prize at the end of the month when no injuries are reported, or managers may be evaluated and rewarded based on their work-unit's lack of reported injuries. Employers must take care such a program is not implemented in a manner that has the negative effect of discouraging workers from reporting an injury or illness. Therefore, if a VPP applicant/participant chooses to use this type of program, it must be able to demonstrate what type of precautions are in place to ensure that the program does not discourage reporting. Such an incentive program must also meet all requirements of the provisions in Sec. 11 (c) of the OSH Act and 29 CFR Part 1904.

The reviewer must determine if the application contains a positive incentive program that encourages or rewards workers for reporting injuries, illnesses, near misses, or hazards; and/or recognizes, rewards, and thereby encourages worker involvement in the SHMS.

6. Additional Attachments. The reviewer must determine if the application contains the required additional attachments, as follows:
   a. Copy of top-level safety policy
   b. Organization chart
   c. Most recent annual evaluation
   d. Site incentive program
   e. Signed statement of union support, if applicable
   f. VPP PSM Application Supplement (Supplement A), if applicable
   g. Site Whistleblower program

H. Discussion with the Applicant. In some cases OSHA may need to discuss the appropriate program choice with the applicant.

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

2. Possible Star Demonstration Program Candidate. If an applicant, due to the nature of the work or the worksite, cannot meet all the requirements, but appears to have a SHMS at Star quality, they may qualify for a possible Star Demonstration Program. (See Chapter 8)

I. DCSP Review. DCSP will review an application at the request of a Region or, if required by an established Demonstration Program.

J. Incomplete Applications. If the application is considered incomplete, the VPP Manager must notify the applicant, noting the missing elements and requesting that the missing information be submitted within 90 days. If the additional information is not provided within that time, the application will be returned to the applicant. The applications can be resubmitted when completed and the applicant will be returned to the queue using the date the completed application is accepted.

K. Ineligible Applications. If it is clear that the applicant cannot qualify for VPP, the application will be returned with written notification indicating the reasons the application was denied by OSHA and VADS will be updated accordingly.

L. Voluntary Withdrawal of an Application. An applicant may withdraw the application by notifying the VPP Manager. The withdrawal is effective on the date the notification is received in the Regional Office. The VPP Manager must:

1. Note the withdrawal information in VADS.

2. Return the original application to the applicant within 10 working days.

3. The RA must acknowledge the withdrawal by letter or e-mail, giving the official withdrawal date. The letter must include a statement that OSHA will entertain re-application if circumstances change.

M. Decision to Conduct the On-Site Evaluation. Once an application is accepted, the VPP Manager must:

1. Notify the applicant in a timely manner that an on-site evaluation will be scheduled and conducted. However, if during the time the application was being reviewed, an enforcement activity is conducted at the site, no on-site evaluation will be conducted until any outstanding enforcement actions have been closed. The RA should carefully consider the facts of the enforcement activity and will determine if the application should be returned to the employer or if the Region can postpone on-site evaluation plans. The evaluation should not be postponed for longer than 90 days. The application will be returned to the employer if the RA believes it necessary to postpone the on-site for more than 90 days.

2. Notify the appropriate AO so that the applicant can be removed from any programmed inspection lists, effective no more than 75 days prior to the scheduled on-site review.

Chapter 10

Preparation for On-Site Evaluations

I. Purpose. A VPP on-site evaluation consists of a thorough evaluation of a VPP applicant/participant's SHMS and/or its implementation. On-site evaluations are carried out by a team consisting of qualified and prepared OSHA staff (acting in a non-enforcement capacity), and other qualified team members.

A. Initial Evaluation. The purpose of the initial on-site evaluation is to determine whether the applicant meets program requirements, and to make a recommendation for recognition status.

B. Reapproval Evaluations. OSHA conducts on-site reapproval evaluations of participants according to established timeframes. See Table in Section II.B. The identification of potentially serious safety and health risks may create the need for more frequent evaluation. A periodic reapproval evaluation:

1. Determines continued VPP qualification.
2. Documents results of program participation in terms of the evaluation criteria and other noteworthy aspects of the participant's SHMS.
3. Identifies any problems that could adversely impact continued qualification, determine appropriate follow-up actions, and provide advice and suggestions for improvement.
4. For Merit participants, determines whether the participant qualifies for advancement to the Star Program.
5. For Star Demonstration Program participants, determines the effectiveness of the demonstration program.

II. Scheduling On-site Evaluations. VPP applications will be processed based on priorities established by the Agency.

A. New Applicants. For new applicants, the on-site evaluation should commence within nine months of OSHA accepting a completed application.

B. Reapproval of Star Participants.

1. The following table provides required minimum timeframes for on-site reapproval evaluations of Star participants.

Timeframes for Periodic Reevaluation of Star Participants				
Way to Participate	First Reapproval evaluation	Second & Subsequent On-site Reapprovals	First Headquarters/ Home Office SHMS Reevaluation	Second & Subsequent Headquarters/Home Office SHMS Reevaluation
Site-Based	30 to 42 months after initial approval	Within 36 to 60 months of the on-site closing conference date	N/A	N/A
Mobile Workforce	18 to 24 months after initial approval for selected sites within DGA	Within 36 months of prior reapproval on-site closing conference data for selected sites within DGA	At time of 2nd reapproval period	Within 72 months of last on-site closing conference date – at time of every 2nd reapproval period
Corporate Site-based	For approved sites: same as Site-Based	For approved sites: same as Site-Based	Within 60 months of initial approval	Within 60 months of last reapproval
Corporate Mobile Workforce	For selected sites within DGA: same as Mobile Workforce	For selected sites within DGA: same as Mobile Workforce	Within 60 months of initial approval	Within 60 months of last reevaluation

C. One-Year Conditional Star. OSHA will conduct an on-site evaluation no later than 15 months after the date of the letter/e-mail informing the participant of its conditional status.

It is important to note, items identified for corrective action resulting in a site being placed on One-Year Conditional status are required to be corrected during the initial 90 days after identification. The site is then allowed the next 12 months (one year) to ensure the employer's SHMS has been restored and is fully functional. OSHA may conduct an earlier on-site evaluation if the participant notifies the VPP Manager that the goals have been met and it is prepared for an early re-evaluation, but in no case will be fewer than 12 months.

D. Two-Year Rate Reduction Plan. An on-site reapproval is not required at the end of the two-year period unless it normally would be required under the routine reapproval timeframe.

E. Reapproval of Merit Participants.

1. All Merit participants, regardless of their chosen way to participate will undergo on-site reapproval evaluation, at a minimum, every 12-18 months (if feasible) to determine whether sufficient progress is being made on Merit goals. OSHA may conduct the on-site sooner upon evidence that

the participant has achieved its Merit goals.

2. For a MWF participants, within a DGA approved at the Merit level, OSHA normally will return every 12-18 months, to previously evaluated sites still in operation. This is in addition to any new worksites within the DGA that the Region may choose to evaluate.
3. If the RA determines that on-site reapproval resources are too limited, they may allow the Merit on-site reapprovals to be performed up to every 24 months as opposed to 12-18 months.

F. Re-evaluation of Demonstration Program Participants. On-site reapprovals will be governed by the terms of the particular Demonstration; however, they must occur, at a minimum, every 18 to 24 months.

G. Scheduling Exceptions.

1. On-site reapproval evaluations must be conducted earlier than normal scheduling requirements when:

   a. Significant changes have occurred in management, processes, or products that may require evaluation to ensure the participant is maintaining a VPP quality SHMS.
   b. OSHA has learned of significant problems, such as increasing injury and illness rates, serious deficiencies described in the participant's annual evaluation of its SHMS, or if the site is placed on inactive status following deficiencies discovered through OSHA enforcement.

2. An on-site reapproval evaluation may be conducted earlier when requested by a participant, and if OSHA's resources permit.

3. Enforcement activity at an applicant/participant worksite will affect the scheduling of a VPP on-site evaluation. (See Chapter 12)

4. If it appears the Region will be unable to perform a timely on-site reapproval evaluation of a participant (between three and five years of the participant's last reapproval):
   a. The VPP Manager/Coordinator should submit to the RA a request to extend the period between reapproval evaluations, including a reason for the request and a proposed alternative timetable.
   b. The RA will review the request and make a decision.
   c. The RA, upon granting a scheduling exception, will inform the Area Director and DCSP.

H. Selection of Mobile Workforce Worksites. The VPP Manager will select and communicate to the team leader the location of the worksite(s) the team will visit within the applicant/participant's DGA. The VPP Manager will consider:

1. Number of active worksites within the DGA.
2. Number of employees at particular worksites. Normally, selection of worksites with greater numbers of employees will produce more meaningful results and be a better use of OSHA resources.
3. The type of work performed at particular worksites. The selection normally should emphasize worksites that represent the employer's typical activity within the DGA.
4. Whether a worksite does not represent typical work within the DGA but merits on-site evaluation for other reasons. These reasons may include, for example:
   a. The worksite is unusually large in scope (e.g., a stadium).
   b. The work is unusually hazardous or may pose serious risk if employees have not received specialized training.

I. Arrangements with the Applicant/Participant. Arrangements for the on-site evaluation must be coordinated by the team leader. The team leader will contact the site representative of the applicant/participant to do the following items:

1. Set the date for the on-site evaluation and explain the process. Ensure that, at locations not controlled by the applicant/participant, the controlling employer has been informed of the impending OSHA visit and granted permission for entry.

2. If permission cannot be obtained within a reasonable period of time (a maximum of 30 days from the opening conference) to complete evaluations at worksites not controlled by the employer, the evaluation will be concluded, and the site will be asked to withdraw or to return their application.

3. Inform the site representative of the documents that must be reviewed by the on-site evaluation team. OSHA 300 logs (or equivalent) may be requested in advance of the on-site, if appropriate.

4. If SGEs will be used as members of the on-site team, the VPP Manager or team leader must inform
   A. The applicant/participant.
   B. The controlling employer at locations not controlled by the applicant/participant.
5. Where collective bargaining agents are involved, the team leader will inform the site representative that such agents must be included in the initial and closing conferences and allowed the opportunity to accompany the on-site evaluation team on the worksite walkthrough. Similar employee involvement must be encouraged at non-collective bargaining worksites.

III. Medical Access Order (MAO).

A. When it will be necessary to access and review medical records, the VPP Manager or team leader will prepare and submit a MAO Request Form to the OSHA Office of Occupational Medicine and Nursing prior to the scheduled on-site. The request will be made approximately two weeks prior to the date of the scheduled on-site evaluation. The Region will work in cooperation with OOMN based on resource availability. (The Medical Access Order Request form can be downloaded electronically on the OSHA Intranet webpage at www.osha slc.gov/dts/oom/mao.html.)

B. Regions will remind their VPP Managers and Evaluation Team Leaders that when handling employee medical records they must follow the "Rules of Agency Practice and Procedure Concerning OSHA Employee Medical Records" 29 CFR 1913.10, including:

1. Presenting the access order prior to examining or obtaining medical information subject to the written MAO.

2. Ensuring the MAO is posted at the worksite.

3. Directing questions or objections concerning the written access order to the on-site Evaluation Team Leader and/or the OSHA Medical Records Officer, located in OOMN.

4. Evaluate any question arising beyond the scope of 1913.10 with SOL.

IV. The On-Site Evaluation Team.

A. Team Composition. Team composition is based on the size of the worksite and nature of the process, and must include at least (1) through (3) below. Applicants/participants who fall under the PSM Standard must also include (4). The Team Leader may serve the dual role of (2), (3), or (4) below. Under no circumstances, however, will the Team be comprised of fewer than two members. The team must be available to conduct the evaluation together. The VPP on-site evaluation team must include at least one qualified Federal or State Plan state employee serving in the capacity of Team Leader. SGEs may not serve as Team Leaders or Backup Team Leaders unless they are conducting a VPP on-site evaluation of an OSHA office.

1. Team Leader
2. Safety Engineer or Safety Specialist
3. Industrial Hygienist
4. PSM "Level 1" Auditor
5. Backup Team Leader
6. Additional Safety or Health Specialists, including others with knowledge and skills appropriate to the worksite.

7. Special Government Employees (SGEs). Refer to the latest SGE Policies and Procedures Manual for guidance on selecting, requesting, and utilizing SGEs. (Note: SGEs will be vetted through the DCSP SGE Coordinator to ensure they are active and that no conflict of interest will arise from their participation.)
   a. An SGE with PSM qualifications may assist in evaluating an applicant/participant's PSM program elements but may not serve as the member of the evaluation team with the primary PSM responsibilities. Exceptions may be made by the RA and the rationale documented in the on-site evaluation report.
8. Star Demonstration Program Coordinator. A Star Demonstration Program coordinator from the National Office may participate in Star Demonstration Program on-site evaluations, as requested.

B. Selection of the Team. The team leader will formally request team members. This may be done by emailing the proposed on-site schedule to OSHA Area Directors and SGEs, or posting the schedule and request on OSHA's VPP web pages at https://www.osha.gov/dcsp/vpp/sge/onsite.html.

1. Basic Qualifications. All team members should attend the relevant OTI classes for VPP teams referenced in Chapter 13. Additionally, team members must have at least, one or more of the following:
   a. Thorough knowledge of VPP policies.
   b. OSHA Course 2450, Evaluation of Safety and Health Management Systems, or other formal classroom training in evaluating SHMS (for OSHA personnel only). OSHA employees should also be encouraged to attend OSHA Course 5450, Special Government Employee Training Course.
   c. For SGE personnel only, OSHA Course 5450, Special Government Employee Training Course.
   d. Working knowledge and understanding of SHMS, and
   e. At least one person (not including SGEs) on the team must have a safety and health job classification, for example, Safety and Occupational Health Specialist 0018 or Industrial Hygienist 0690.

2. Team Leader. The team leader must meet the qualifications above, plus have participated on at least three on-site evaluations, including once as a team member, once as a backup team leader, and once as a team leader in training.

3. Compliance Officers. OSHA personnel whose primary duties include enforcement responsibilities in the Area Office having jurisdiction over the worksite, may be assigned to a VPP on-site team. However, as a general rule, such personnel may not subsequently engage in enforcement activity at the same worksite for two years or until the worksite is no longer a VPP participant, whichever comes first. The RA, on a case-by-case basis, may choose to override this two year requirement. The RA's rationale will be documented.

C. Preparing the On-Site Evaluation Team.

1. Advance Information. The team leader will supply the team with the following information in advance of arrival at the worksite to be evaluated.
   a. Site VPP History. For new applicants, team members will be given relevant sections of the application and the most recent self-evaluation. For current participants, team members will be given a copy of the participant's last on-site evaluation report. Ensure that team members are also provided with Merit or One-Year Conditional goals to be evaluated.
   b. Inspection History. Team members will be given the enforcement inspection history, any history of whistleblower investigation activity, and a summary of past interactions between the applicant and OSHA.
   c. Any Documents Obtained with the Application. If any records were submitted in advance of the on-site evaluation, these will be shared with team members.
   d. PSM Application Supplement A and/or PSM Supplement B. Share with team where applicable.

2. Advance Preparation of Team Members. In advance of the on-site evaluation, team members must prepare the following items:

   a. Review. When feasible, team members must carefully review the application and any previous on-site evaluation reports.
   b. Report Worksheet. Team members must familiarize themselves with the appropriate on-site evaluation worksheet and report format to ensure they understand what information they will be responsible for obtaining during the on-site evaluation.
   c. Interview Questions. Team members must carefully review the applicable interview questions supplied by the VPP team leader in preparation for conducting on-site interviews.
   d. Personal Protective Equipment (PPE). Team members must equip themselves with any PPE, such as safety shoes and safety glasses, required for the on-site evaluation (unless they have been informed that PPE will be provided).

e. Preparation upon Arrival. 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 on-site evaluation.

V. Evaluation of Process Safety Management (PSM).

A. Process Safety Review. A process safety review is required at all VPP worksites producing or using highly hazardous chemicals and subject to the Process Safety Management (PSM) standard. The review must be conducted in accordance with OSHA's Process Safety Management (PSM) Directive by a PSM Level 1 Auditor who must select one or more complete processes and follow the process flow. Elements of the review should include the following:

1. Review of process hazard analysis and operating procedures.
2. Use of the employer's piping and instrumentation diagrams (P&IDs) to assist in following the process flow.
3. A check of process lines as necessary to verify documented systems protection.
4. Ask questions concerning systems failure procedures during informal interviews with appropriate operator, maintenance, and contract personnel.
5. Review the training records. Look for evidence that all considerations have been addressed and that management has identified and is controlling all hazards and potential releases.
6. Verify the responses provided by the applicant/participant to the questions found in the PSM application Supplement A, that are most appropriate to the facility's operations (new approvals only).
7. Verify VPP PSM Supplement B responses are provided with the site's annual self-evaluation. If the on-site evaluation is a reapproval, the responses provided by the site for the previous year's Supplement B will be verified.
8. Ask and verify answers for the questions from recent Dynamic Inspection Priority Lists (Supplement C) that are most appropriate to the facility's operations.

B. PSM Compliance. VPP on-site evaluations should include a review of the application of industry recognized and generally accepted good engineering practices (RAGAGEP).

OSHA's PSM standard is performance-based and requires, in many instances, that the employer's programs align with industry standards in order to provide the highest levels of employee protection. As with all of the VPP tenets, compliance with safety and health standards is expected and required. However, OSHA's standards provide minimum requirements and VPP participants are expected to go above and beyond the minimum requirements.

C. PRS Reapproval Guidance. Corrective actions for issues related to the PRS are complex and usually require more than 90 days to fully complete. The procedures below use the current VPP framework (90-day items, One year Conditional Status)

and allow for the additional timeframes needed for the completion of PRS-related corrective actions only.

This guidance will assist the field when determining reapproval of VPP participants where the evaluation team has found the employer was not implementing appropriate RAGAGEP for pressure relief systems. Paragraphs 1-5 below are steps to be taken when corrective actions will take longer than the 90 day period allowed for program deficiencies observed during a reapproval on-site evaluation. Additionally, section D, provides supporting information for these procedures.

1. On-Site Evaluation: If deficiencies are noted at the conclusion of an on-site evaluation issue a notice of 90-day action item(s) identifying the specific PRS deficiency(ies) and the expectations that the site will:
   a. Correct the deficiency(ies) or
   b. Initiate an engineering evaluation of its PRS and implement interim employee protective measures to address the PRS hazards

2. Hazard Correction (via phone or on-site): At the conclusion of the 90-day period, the participant must provide:
   a. Documentation of correction of the PRS deficiency, or
   b. Written documentation of: 1) the initiation of the engineering evaluation; 2) proof of implementation of interim protective measures; 3) expected completion date for the corrective actions, and
   c. A written notice of agreement from the union, if represented, with the participant's interim protective measures.

   If the participant successfully meets the required actions in paragraph 2, change the site's status to One-Year Conditional Star. If the participant does not meet the required actions in paragraph 2, then encourage the participant to withdraw and reapply when all corrections have been made. Issue an Intent-to-Terminate letter as necessary.

3. One-year, On-Site Re-evaluation: The participant must provide a copy of the following:
   a. A completed engineering evaluation, and
   b. A written abatement plan outlining the expected date of completion of all PRS deficiencies.
      - The final correction date should be no later than two years from the date the deficiencies were noted by the VPP evaluation team.
      - In some cases, the site may have up to four years to complete the abatement plan.
      - Sites identifying the need for four years to complete corrective actions must document the reason(s) for the need of the additional time.

During the one-year, re-evaluation above, when the participant provides the information required in paragraph 3, and it is acceptable to OSHA, return the site to Star status. If the participant does not provide the information, or if the information provided is not acceptable, encourage the participant to withdraw and reapply when all corrections have been made. Issue an Intent-to-Terminate letter as necessary. Extensions for completion of the required documentation will be considered on a case-by-case basis.

4. Annual Self-Evaluation: VPP policies require participants to provide an annual self-evaluation to OSHA by February 15 of each year. VPP sites with identified PRS deficiencies must also provide the following as part of their annual self-evaluation:
   a. A written progress report with updates on the abatement plan, and
   b. A completed PSM Supplement.

   A participant will be expected to correct identified PRS deficiencies within two years. In rare cases, the site may have up to four years to complete the abatement plan. If an annual progress report is not received with the annual self-evaluation, the VPP Manager will follow up with the site to ensure it was not an oversight. If the participant does not intend to comply, encourage the participant to withdraw and reapply when all corrections have been made. Issue an Intent-to-Terminate letter as necessary.

5. Completed Abatement Plan: The participant must provide documentation that is acceptable to OSHA and verifies that the participant has completed the abatement plan. If the participant has not completed the abatement plan, ask the participant to voluntarily withdraw or terminate the participant from VPP.

D. <u>1-Year Modified Conditional Star Period</u>. During the one-year modified conditional period outlined in Section C above, the site must submit to OSHA an acceptable engineering evaluation of and an abatement plan for the identified PRS deficiencies. Interim protective measures must be outlined in the evaluation and implemented as discovered during the engineering evaluation. Listed below are the actions necessary for the site to implement as part of its 1-Year Conditional Status:

1. Engineering Evaluation.
   a. Perform an engineering evaluation of pressure vessels and pressure relief systems (e.g., relief piping and equipment, including effluent handling and PRVs) in PSM-covered processes to document compliance with recognized and generally accepted good engineering practices (RAGAGEP). Prior to performing the evaluation, the site will:
      - Develop a complete inventory of its pressure retaining

equipment, including pressure vessels, heat exchangers, etc., in the covered processes.

- Identify any such equipment requiring overpressure protection that may not be provided with adequate pressure relief. Compile and review existing process safety information ("PSI") on the relief systems in the covered processes and verify the completeness and accuracy of the PSI, including field verification by the site.
- Identify gaps in the information required to document the design and design bases of the relief systems.

b. Compile the additional information needed to document relief system design and design bases adequately. Create an engineering evaluation document that includes all of the following:

- The design and design bases of all pressure vessels and associated relief equipment, including all information required to assess compliance with RAGAGEP.
- Documentation of the total number of pressure vessels without required overpressure protection and pressure relieving systems that do not comply with RAGAGEP.
- Organization and identification of any RAGAGEP deficiencies by category, including, at a minimum, any of the following:
  - pressure vessels lacking overpressure protection,
  - valves inappropriate for their service,
  - rupture disc/non-reclosing valve deficiencies,
  - excessive built up back pressure,
  - inadequate sizing,
  - inlet pressure drop exceeding applicable RAGAGEP
  - unsafe or inappropriate effluent handling and discharge equipment and systems, and
  - any other deficiencies, including installations that may be subject to excessive vibration.

c. All data and assumptions used in performing the analyses. Where necessary, the site will identify additional field data or additional analyses to evaluate and to refine the preliminary findings

d. Documentation of the calculations performed. Use of software that documents the calculations sufficiently to allow them to be checked and reproduced is acceptable

2. Abatement Plan. The abatement plan shall include interim goals, interim safeguard implementation, corrective action time frame, and scheduled status updates to OSHA. The site must base the action plan's schedule on a risk-based assessment of the deficiencies, with

priority given to correcting the deficiencies presenting the greatest risk to employees. OSHA intends the site's risk assessment to consider and document potential process hazards, consequences, human factors, facility siting, and any other information that assists in determining a prioritized course of abatement.

During the one-year conditional on-site evaluation, OSHA will verify the site has successfully completed its engineering evaluation and corrected all higher risk deficiencies or has scheduled timely correction and implemented effective interim controls to abate the risk prior to the scheduled correction date.

3. Annual Evaluation. Each year, in addition to the site's annual self-evaluation, it must include a copy of its abatement plan that outlines, in detail, progress made in addressing deficiencies stated within the abatement plan.

   If at any time during the two-year period the site is unable to document progress toward completion as required, a recommendation will be made for the site to withdraw or issued an Intent to Terminate letter. The site will be provided an opportunity to present evidence that it has taken actions to correct the identified deficiencies or to abate the risks associated with deficiencies by alternative, at least as equally effective means.

4. Reapproval. Per VPP policy all VPP sites will undergo a reapproval evaluation no later than 5 years from their previous reapproval. During that evaluation, the VPP Evaluation Team will select a process stream from the site's submitted engineering plan and verify that the site completed the agreed-upon corrective actions. After successful completion and implementation of the site's engineering evaluation, including all required corrections as determined by the VPP Evaluation Team, OSHA will recommend continued Star participation.

E. RA Decisions: The above process was developed to address issues specifically related to pressure relief systems and the application of current RAGAGEP. If a deficiency in an area of a participant's PSM program(s), unrelated to PRS, is observed the RA will determine a plan for moving forward. The RA can:

1. Recommend one 90 day period for correction to be followed by a one-year conditional status being applied to the participant. If the participant is not able to affirm their PSM system is fully operational for the one year period beyond the 90 days, the RA will issue an Intent-to-Terminate letter.

2. For corrective actions requiring more than 90 days, the RA may recommend applying the multi-step process listed for PRS corrective actions. The participant would be allowed no more than two years for full

corrective action and would be required to provide status updates to the RA on a frequency determined by the Region.

3. The RA will determine the adequacy of the employer's corrective actions and may agree to an extension of an additional two years if the corrective actions will require a high level of systems engineering, redesign or capital expenditures.

F. Technical Guidance: If the VPP Manager assesses the need for additional technical resources to assist in reviewing the participants engineering and corrective action documents, they can, through the RA, request the services of a subject matter expert (SME). The Region may choose to hire an external SME or may request, through DCSP, the assistance of the National Office: Office of Chemical Process Safety and Enforcement Initiatives (OCPSEI).

Chapter 11

Participation Decisions and Management

I. Report Processing. After an on-site evaluation has been conducted and the on-site evaluation report has been completed, the VPP Manager must coordinate clearance of the report through the Regional Office. Additional report processing steps are also required of DCSP.

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

1. The RA will 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 One-Year Conditional status.
   e. Approving a second term to Merit participants.
   f. Termination of participation.

2. The RA has responsibility to:
   a. Send the on-site evaluation report and worksheet to the VPP participants upon each new approval.
   b. Reapprove (or not reapprove) participation in the Star program.
   c. Reapprove (or not reapprove) participation in the Merit Program if the first Merit term has not expired.
   d. Place a Star participant on One-Year Conditional status.

3. Correspondence to Reapproved VPP Participants
   a. Non-Union VPP participants - Upon reapproval of a non-union VPP participant, the RA will send the following information to the appropriate management contact:
      - VPP Management Reapproval Letter.
      - VPP Site Report and Worksheet, upon request.
   b. Unionized VPP Participants - Upon reapproval of a unionized VPP participant, the RA will send the aforementioned documents to the appropriate management contact plus the following correspondence to the participant's union representative(s):
      - VPP Union Reapproval Congratulatory Letter
      - Copy of VPP Management Reapproval Letter
      - VPP Site Report and Worksheet

B. Transmittal to DCSP. No later than 30 working days following the completion of the final on-site evaluation report, and after all 90 day items have been corrected, the RA must transmit the following to DCSP for concurrence.

1. A signed memorandum from the RA to the DCSP Director, stating the RA's recommendation or decision for approval or reapproval. It must contain:
   a. Noteworthy aspects of the applicant's/participant's SHMS that 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. The names and addresses of the unions and their respective agents where collective bargaining agents exist.
   e. In the case of a reapproval, the approval letter that was sent from the RA to the participant, following the format of the Assistant Secretary's letter.

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

C. DCSP Report Review and Processing.

1. Pertinent participant information will be entered into the National VPP database (VADS) by the responsible VPP Manager and verified by DCSP.
2. A technical and editorial review of the report will be conducted by experienced DCSP staff.
3. The VPP Manager will be notified by the liaison if questions arise during the review and/or revisions or additions are needed.

II. Preparing a Recommendation Package.

DCSP must prepare and submit a recommendation package to the Assistant Secretary within 20 working days of receipt of the on-site evaluation report and signed RA's memorandum. It must contain the following documents:

A. Information outlining the applicant company's background, injury and illness rates, on-site evaluation team findings and recommendations, brief summary of any recent VPP site enforcement activities, DCSP concurrence or non-concurrence, and a request for action on the report recommendation.

B. An on-site evaluation report recommending a new approval or lifting of a participant's One-Year Conditional-status. On-site evaluation-reports that recommend a participant's reapproval within a program are sent to the participant by the RA with his/her reapproval letter. Reports are not sent to the participant again when the Assistant Secretary recognizes the reapproval.

C. A letter drafted by the RO 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 the union officials listed on the RA memorandum. The letter must be one of the following two types; either:

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

2. Congratulatory Letter. For reapprovals, the congratulatory from the Assistant Secretary is issued after the RA has reapproved participation in VPP.

3. Templates of these letters can be found in the O Drive (O:\DCSP\OPR\VPP\VPP TEMPLATES).

III. Final On-Site Evaluation Report and Participation Date. The approval becomes final when the final on-site evaluation report is sent to the applicant/participant with the letter announcing the site's approval.

A. For new approvals, approvals from the Merit Program to the Star Program, lifting of a Star participant's One-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 One-Year Conditional Star status, the effective date is the date the RA's reapproval letter is signed.

C. The effective dates reflected in A and B above are the dates used by the NO to track approval status, account for data requests, and use in program data analyses.

IV. Notification.

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

1. Mail the letter 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 approval of an applicant/participant, the VPP Manager will:

1. Annotate VADS accordingly, with the appropriate dates and information from the on-site reports.

2. Inform the company of the approval and its effective date.

3. Inform the applicant/participant that an official letter of approval or congratulations will be sent by mail immediately.

4. Inform the applicant that a copy of the new approval, on-site evaluation report and worksheet will be sent by the RA, and

5. Award plaques and flags will be available approximately one month from the approval/reapproval.

6. Inform the participant that a copy of the reapproval, on-site evaluation report and worksheet are available, upon request.

7. 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.

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 Star, Star Demonstration, and MWF participants a personalized plaque measuring 15"x 12" recognizing 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 MWF reapproval, the VPP Manager or Coordinator will 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.
2. 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 congratulatory letter.

B. Flags. OSHA awards participants with new VPP approvals a flag appropriate to that program. The VPP Manager may maintain an inventory of flags, if reasonable.

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

A. The RA is responsible for arranging OSHA representation at the request of the site. The local office Area Director may represent the RA.

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 on-site 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 the 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. [The Office of Communications is available to assist in developing and issuing press releases.]

VII. Withdrawal Process. 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 RA 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.

B. OSHA Requests Withdrawal. OSHA will request a participant withdraw from VPP if the Agency determines that the participant no longer meets the requirements for VPP participation.

C. When a Participant's Location or Ownership Changes.

1. 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:
   a. Submit a new letter of management commitment.
   b. Submit a new self-evaluation including a comprehensive baseline hazard analysis.
   c. Receive a satisfactory OSHA on-site evaluation within 18 months.

2. 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 re-apply.

D. Withdrawal Process. The participant must write a letter/e-mail addressed to the RA 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/e-mail.

1. When appropriate (or when possible) the RA must send the participant a letter/e-mail acknowledging the withdrawal, with a copy to the Director of DCSP. The letter/e-mail must also state:
   a. The VPP flag must no longer be used. Plaques may continue to be displayed but no additional dates may be engraved.
   b. The company's application, on-site evaluation reports, approval letters, and annual evaluations will be removed from the public file.
   c. The establishment will be returned to the programmed inspection list, if applicable, at the time of the next inspection cycle.
   d. OSHA will consider a re-application to VPP if and when eligibility requirements are met. (See IX.)

E. Notification of Area Office. If applicable, the RA must notify the appropriate Area Director that the withdrawn participant is no longer participating in VPP and must be returned to the programmed inspection list for the next inspection cycle. The Region will also send a dated copy of this transmittal to DCSP and annotate VADS as appropriate.

VIII. Termination. If a site is asked to withdraw from VPP (for cause) and the site chooses not to withdraw, OSHA will recommend the site be terminated from VPP. Examples of issues and/or reasons that could precipitate a recommendation for termination include:

- Fatality/catastrophe at a VPP site
- Non fatality/catastrophe enforcement action
- Failure to report a fatality, hospitalization, amputation, or loss of an eye within the required time period
- Obstruction of official OSHA activities
- Failure to maintain injury and illness rates below required levels
- Failure to maintain VPP requirements
- Failure to timely submit annual self-evaluations
- Falsification of reports or data
- Withdrawal of Union support of VPP

A. Examples of what may be considered a lack of cooperation between OSHA and the participant may be exemplified by actions taken by the participant may include the following:

1. OSHA requests a participant to withdraw and they decline.

2. Participant impedes or is uncooperative during an enforcement inspection (aside from exercising employer statutory rights.)

3. An employer's statutory rights are not impacted by VPP participation. However, a VPP participant is expected to maintain an attitude of cooperation with OSHA during VPP activities. Examples of how a lack of cooperation could be perceived include:
   a. Participant is unresponsive to multiple information/document requests during VPP evaluations.
   b. Participant does not allow employees to speak with OSHA representatives during VPP evaluations.
   c. Participant refuses to correct a hazardous condition at the site.
   d. Participant does not exemplify continuous improvement.
   e. Management changes occurred and program standards cannot be maintained.

4. Other possible reasons for VPP termination include: a Merit term of approval has expired without a recommendation or approval for a second term; construction work has been completed. If a VPP resident contractor leaves the hosting VPP participant's worksite, the resident contractor will no longer be in VPP.

IX. Notice of Intent to Terminate. The RA, through the VPP Manager, must notify DCSP, the participant, and union representative(s) in writing of OSHA's intent to terminate a site's participation in VPP.

A. Appeal Process. The participant has 30 days from the receipt of the notice to appeal the intent to terminate or to withdraw. If filing an appeal, it must provide to the Assistant Secretary, through the RA, in writing, the reasons why it should not be removed from VPP. Upon review of the participant's justifications for continued participation, the Assistant Secretary in consultation with the RA and DCSP must make the final decision.

1. When the Assistant Secretary reviews the participant's appeal:
   a. Termination Appeal Package. The RA, 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, not already reviewed by DCSP staff.
      - A briefing document summarizing the applicable enforcement activities and the Region's rationale for supporting termination of the participant.
   b. DCSP Concurrence. DCSP and the VPP staff will review the package and, after concurrence, transmit it to the Assistant Secretary.

c. Notification of Termination. If the Assistant Secretary denies the appeal, the RO may offer the participant the opportunity to withdraw. If the participant fails to withdraw DCSP will process the termination letter. The letter must inform the participant of the termination decision and its consequences, their rights to voluntarily withdraw or to appeal the decision to terminate, and the requirements for re-application.

Once the letter is signed:

- DCSP must notify the VPP Manager immediately via email.
- DCSP, in conjunction with the RA, will inform the former participant of their return to the programmed inspection list, if applicable, within 30 days following the date of the termination letter. The RA also must notify the Area Office immediately.

2. If the Assistant Secretary finds the participant's appeal valid, the participant may continue in VPP and will be provided a letter from the Assistant Secretary acknowledging OSHA's support of the appeal.

X. Reinstatement. Reinstatement requires re-application. See table below for time frames.

If:	***And:***	***Then:***
An applicant withdraws its application.	OSHA Inspection History, SHMS status, conditions and VPP Assurances are met,	Re-application can occur at any time.
An applicant withdraws its application due to an OSHA enforcement inspection.		Re-application can occur when all enforcement activity is closed.
An applicant withdraws its application due to withdrawal of union support.		Re-application can occur when a new letter of union support is received by the Regional VPP Manager.
A participant withdraws from the program on their own accord.		Re-application can occur after one year.
A participant withdraws from the program due to an OSHA enforcement inspection, or voluntarily withdraws to avoid termination.		Re-application can occur at least one year after all enforcement activity has been closed.
A participant withdraws from the program, due to withdrawal of union support.		Re-application can occur when union support has been re-established.
OSHA terminates a participant from the program due to a fatality or other enforcement-related issues.		Re-application can occur three years after termination date.

Chapter 12

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. Any further assessment will not be conducted until enforcement activities are complete. Five types of activities will trigger additional assessment of a VPP site:

A. Unprogrammed OSHA Inspections. Unprogrammed enforcement inspections occur in response to referrals, some non-formal complaints, formal complaints, some severe injury reports, and all fatalities and catastrophes.

B. Failure to Report. 29 CFR 1904.39 requires employers to report to OSHA any fatality/catastrophe within eight hours, and hospitalizations, amputations, or loss of an eye within 24 hours.

C. Citations. The issuance of any willful, repeat, or failure to abate citations to the participant will result in additional VPP assessment.

D. 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 a VPP reassessment. The RA may make the determination to reassess a participant's SHMS if there is reason to believe that a serious deficiency exists that would have an impact on the participant's continued qualification for VPP. (e.g., The RA may decide a VPP site's SHMS should be reassessed if allegations of Wage and Hour violations or of youth worker standards' violations have been made by credible sources.)

E. Whistleblower Complaints. VPP assessments may be conducted based on whistleblower retaliation complaints involving rights afforded by the whistleblower protection laws including, but not limited to, worker participation in safety and health activities, reporting a work-related injury, illness or fatality, or reporting an alleged violation of the whistleblower statutes.

II. OSHA Personnel. As a general rule, a Compliance Officer who served as a VPP on-site team member may not conduct an enforcement inspection at that VPP participant's site for two years following the VPP assessment or until the participant is no longer in VPP, whichever occurs first. The RA, on a case-by-case basis, may choose to override this two year requirement and will document his/her rationale.

III. Enforcement Activities.

A. If an event triggers enforcement activity during the time between when the application is accepted and when the on-site evaluation is scheduled, the on-site evaluation must be postponed until the enforcement case is closed. The RA should carefully consider the facts of the enforcement activity and will determine if the application should be returned to the employer or if the Region can postpone on-site evaluation plans. The evaluation should not be postponed for longer than 90 days. The application will be returned to the employer if the RA believes it necessary to postpone the on-site for more than 90 days.

B. If there already is an open enforcement case at a worksite when the AD is notified by a VPP Manager of a pending on-site evaluation, the AD must inform the VPP Manager of the enforcement activity so that the VPP application can be returned to the applicant.

C. If an event triggers an enforcement activity prior to the application being reviewed and accepted, the application will be returned to the employer. In this event, the employer can re-apply after all enforcement activity is complete and any recognized hazards have remained corrected for one year.

D. If an event triggers enforcement activity during the time between the scheduling and the beginning of an on-site evaluation, the VPP on-site visit must be postponed until the enforcement case is closed.

E. If an event triggers enforcement activity during the VPP on-site evaluation, VPP on-site will be deferred until the enforcement case is closed.

IV. Initiation of Enforcement Activity.

A. When an AO receives a complaint, a referral other than from the on-site team, or is notified of a fatality, catastrophe, or other event requiring enforcement at a VPP worksite, the AD must initiate an enforcement action following normal OSHA enforcement procedures.

B. If the VPP team observes conditions during an on-site evaluation that warrant a referral for enforcement, the RA will notify the participant and the Assistant Secretary. Enforcement action may be initiated only after the Assistant Secretary approves such action.

C. When a CSHO inputs VPP site enforcement inspection information into the OSHA Information System (OIS), appropriate codes must be entered into the "additional" codes section of the inspection report. OIS Coding procedures for enforcement activities at VPP sites are detailed in Appendix E.

V. Violations Classified as Willful.

For any enforcement activity at a VPP site resulting in the determination of Willful violations, and after the enforcement inspection closing conference:

A. The Regional Office will facilitate a face-to-face meeting with the site to discuss additional information surrounding the incident.

B. The RA will determine if additional action related to the participants VPP status is necessary.

C. The RA will notify DCSP-OPR if additional action will be taken and will provide the RA's recommendation regarding the participant's termination or continued VPP participation within 90 calendar days from the date the citations are issued.

VI. Violations Classified as other than Willful.

For non-fatality/catastrophe-related enforcement activity at a VPP site resulting in Serious, Repeat, Failure-to-Abate, Other than Serious, or no violations issued, and after the enforcement inspection closing conference:

A. The Regional Office is encouraged to facilitate an informal review/meeting with

the site to discuss additional information surrounding the incident.

B. The RA will determine if additional action related to the participants VPP status is necessary.

C. The RA will notify DCSP-OPR if additional action will be taken and will provide the RA's recommendation regarding the participant's termination or continued VPP participation within 90 calendar days from the date the citations are issued.

VII. Actions Related to Significant Incidents.

A. Upon being informed of a fatality/catastrophe at a VPP site, including a non-VPP contractor working at a VPP site, the Region will notify the Office of the Assistant Secretary (OAS) via DCSP. The above notification will also occur if an employer fails to report the fatality/catastrophe or other significant incidents as outlined in 29 CFR 1904.39, within the required time frame. An email will be sent to DCSP through OPR.

B. The following information will be included for either a host employer and/or contractor employer, to the extent possible:

- Site Name
- Site Address
- Contractor Name and Address, if Applicable
- Fatality or Catastrophe
- Failure to Report
- VPP Status
- Date of Initial Approval
- Date of Most Recent Reapproval
- North American Industry Classification System (NAICS) Code
- Date of the incident
- Brief Incident Description (Include the Number of Fatalities and/or Employees Hospitalized and Inspection Number, if possible)
- Union Information, if Applicable

C. During the course of the inspection, the Region will keep DCSP advised of any significant facts and findings in the case. The Region will also coordinate with the Directorate of Enforcement Programs (DEP) or Directorate of Construction (DOC), as appropriate.

VIII. Change in VPP Status.

Within 30 calendar days following a report of a fatality of a VPP site employee, a catastrophe at a VPP site, or a VPP employer's failure to report significant incidents within the required time frame, the status of the VPP participant will be changed to "Inactive Pending Inspection." At that time, the following will occur:

A. The Region will notify the VPP site in writing of the change in status, request that they not display the VPP flag, plaque, publications and/or certificates, and inform

any SGE that they may not act as SGEs while the site is in "Inactive Pending Fatality/Catastrophe Inspection" status.

B. The change in a site's VPP status will be made and reflected in all print and electronic materials, including the OSHA Web site, and tracking systems.

IX. Termination.

When a fatality/catastrophe is deemed work-related, or the participant fails to report a fatality/catastrophe or other significant incident within the required statutory time period to the Region, and citations are issued, the RA will issue a "Notice of Intent to Terminate" (ITT) within 30 calendar days of citation issuance based on the following:

A. Prior to the ITT, the Region/Area Office will facilitate a review and a face-to-face meeting with the site, to discuss additional information surrounding the incident, and to assess the status of the employer's safety and health management program. In certain, and very rare circumstances, the RA may use discretion and approve the meeting to be held virtually.

B. If the Region determines that termination is not a recommended resolution based on the review and meeting above, the RA will send an email to the DCSP Director verifying that no further action is required.

C. A participant's review and meeting with the Region will not impact their right to appeal the ITT with the OAS within the 30 calendar days. The participant may also choose to withdraw from VPP.

D. If the Region determines that the site no longer meets the criteria for remaining in VPP, the site will be offered the opportunity to withdraw or will be issued an ITT if they choose not to withdraw.

E. During the meeting, the RA (or their designee) will allow the site to identify why they should remain in VPP and discuss the option to withdraw from VPP.

F. If the employer intends to reapply to VPP, they may state that in their materials.

G. The Region will provide DCSP with copies of the ITT and other information received during the informal meeting.

H. If the Region determines that termination is recommended, the RA will send a memorandum to the DCSP Director, along with a copy of the ITT sent to the site.

X. Appeal Process.

A. Participant Appeal of the ITT.

1. The participant has 30 calendar days from the receipt of the notice to appeal the ITT.
2. The participant must provide to the Assistant Secretary in writing, the reasons why the site should not be removed from VPP.
3. Upon review of the participant's justifications for continued participation, the Assistant Secretary, in consultation with the RA and DCSP, will make the final decision.
4. The RA will send a memorandum with the Region's recommendation on the VPP site's continued participation in VPP along with the site file.

B. DCSP Role.

DCSP and VPP staff will review the recommendation package, work with the Region to prepare a briefing document and after concurrence, will transmit it to the AS. This will be done, within 30 days, and pending receipt of all the appropriate information related to the case.

1. OAS Decision.

   a. The participant will be notified in writing of the outcome of their appeal.

   b. If the termination is upheld, the participant:

      - May no longer display the VPP flag, plaque, and/or certificates
      - Remove all references to the site having VPP status, in print or electronically.
      - Returns to programmed inspection lists.
      - Remove references from the VPP public files maintained in the OSHA Regional Office.
      - May not reapply for VPP participation for three years.

   c. If the appeal is granted by the Assistant Secretary, the participant will be reinstated to VPP status.

   d. DCSP will notify the RA of the Assistant Secretary's decision via email and provide a copy of the Assistant Secretary's correspondence to the participant. The RA will immediately notify the appropriate Area Office.

2. Confidentiality. Information gathered during VPP evaluations cannot be used by the Area Office for any enforcement activity at the worksite unless the worksite has refused to correct hazards found by the VPP team, the team has recommended enforcement action, and the Assistant Secretary concurs with such action.

3. Whistleblower Complaints. If a participant has any ongoing whistleblower complaints, check with the regional Whistleblower Protection Office to determine status. The ARA CSP may request access to the Whistleblower Database to review case status and activities at VPP sites in their respective Regions. The RA will make a final determination with concurrence of OAS.

   Upon final disposition of a complaint filed under the Occupational Safety and Health Act (OSH Act) 11(c) or other Whistleblower statutes, the following will apply to active VPP participants based on the case disposition:

Whistleblower Case Status	VPP Action
Withdrawn	VPP participant remains in program
Settled	Obtain additional information to determine participants continued participation
Merit Finding for ALJ statute cases or district court complaint filed by SOL for 11(c), AHERA, or ISCA cases	VPP participant will automatically be terminated from VPP

Chapter 13

Training for VPP Managers, Team Leaders and Team Members

I. Introduction. This chapter describes training available for VPP on-site evaluation team members, team leaders and VPP Managers to effectively administer VPP. The training curriculum provides OSHA staff nationwide with the guidance, knowledge, skills, and resources necessary to enhance the individual's job performance and allow the individual to successfully serve in his or her capacity within VPP. A copy of the Core Competency Models for each position can be found in Appendix F.

II. Availability.

A. OTI Classes.

1. VPP Team Members. Prior to serving as a team member, OSHA personnel are strongly encouraged to complete the OSHA #5508 Team Member Training Course and show proficiency in the knowledge and skills described in the VPP Team Member Competency Model located in Appendix F.

2. VPP Team Leaders. Prior to serving as a team leader, OSHA personnel are strongly encouraged to complete the OSHA #5500 VPP Team Leader Course and show proficiency in the knowledge and skills described in the VPP Team Leader Competency Model. The team leader must also have participated on at least three on-site evaluations, including once as a team member, once as a backup team leader, and once as a team leader in training.

3. VPP Managers. A VPP Manager must meet the qualifications described in II. A and B of this Chapter, and show proficiency in skills described in the VPP Manager Competency Model located in Appendix F.

4. Special Government Employees (SGE). Prior to serving as a member, SGEs must complete the OSHA #5450 Special Government Employee Training Course and show proficiency in the knowledge and skills described in the VPP Team Member Competency Model located in Appendix F.

B. LearningLink. Self-directed training for OSHA staff is available on LearningLink. The training is available and is strongly recommended, for use prior to an individual serving in official capacity as a VPP team member, team leader or VPP Manager. Copies of the training modules can be obtained by request from the National Office.

Listed below are the training guidelines from the LearningLink training, for OSHA VPP evaluation team members, team leaders, and regional VPP Managers. Each

training section builds upon the previous one. As a result, the team leader should at least know the function, role, and training required for the team member, and the VPP Manager should know the requirements for both the team leader and member.

III. VPP Team Member Training. Upon the RA's request, the AD must assign properly trained CASs/CSHOs to serve as VPP team members or team leaders.

A. Task Analysis. An individual serving in the capacity of VPP team member is expected to have an understanding of the competencies outlines. Detailed information can be found in Appendix F-VPP Team Member Competency Model.

1. Technical Competence. Knowledge that is acquired through formal training or extensive on-the-job experience to perform one's job; works with, understands, and evaluates technical information related to the job; and advises others on technical issues.
   a. Thorough knowledge of VPP policies
   b. OSHA Course 2450, Evaluation of Safety and Health Management Systems, or other formal classroom training in evaluating SHMS (for OSHA personnel only)
   c. Working knowledge and thorough understanding of SHMS

2. Analysis. Identifying problems and using sound judgment to generate and evaluate alternatives and to make recommendations for improvement.
   a. Reviews materials to prepare for the on-site visit.
   b. Reviews documents relevant to the assigned portion of the site evaluation to ensure documents meet relevant VPP standards.
   c. Participates in site walkthrough and determines whether VPP requirements relevant to the assigned portion of the site evaluation are being met.
   d. Conducts safety and health reviews relevant to the assigned portion of the site evaluation.
   e. Identifies and notes any uncontrolled hazards that must be corrected.
   f. Suggests improvements that would correct deficiencies in the site's safety and health program or improve the program.
   g. Assists in the development of any necessary Merit and One-Year Conditional goals for correction of deficiencies in the SHMS that are requirements for Star level VPP participation.
   h. Assists, as appropriate, in the development of recommendations for correcting safety and health management deficiencies that do not involve VPP requirements.

3. Interpersonal Skills. Developing and maintaining effective relationships with others; effectively dealing with individuals who are hostile, difficult, or distressed; and relating well to people of varied backgrounds and different situations.

a. Interacts with VPP Team Leader, fellow team members, employees, and site representatives when participating in an on-site review.
b. Interacts with others during formal and informal interviews, discussions, briefings, opening conference, and closing conference when participating in an on-site review.

4. Oral Communication. Expressing information to individuals or groups effectively, taking into account the audience and nature of the information; making clear and convincing oral presentations; listening to others, attending to nonverbal cues, and responding appropriately.
   a. A team member will participate in all formal and informal interviews with selected individuals to determine whether requirements relevant to the member's assigned portion of the site evaluation are being met.
   b. A team member participates in daily debriefings for site representatives.
   c. Participates in team discussions to draw conclusions about the quality of the site's SHMS based on the team's on-site evaluation findings. Also participates in discussions regarding recommendation for program participation.
   d. Participates in the closing conference to present the findings of the on-site evaluation team, including any recommendations being made at the time of the closing.

5. Written Communication. Recognizes or uses correct English grammar, punctuation, and spelling; communicates information in a succinct and organized manner; and produces written information, including technical material that is appropriate for the intended audience.
   a. Documents formal and informal interview information while protecting employee confidentiality.
   b. Documents findings regarding the assigned portion of the site evaluation.
   c. Participates in the writing of the on-site evaluation report.

B. Training Outline for VPP Team Members.

1. Pre-On-site Activity.
   a. VPP team member qualifications.
   b. Review documents to prepare for on-site visit (provided by team leader)
      - Most recent self-evaluation, last on-site evaluation report for current participants (including merit or One Year conditional goals if applicable).
      - Site inspection history.
      - PSM application and/or questionnaire.

- Review documents related to the assigned portion of the site evaluation
- Equip themselves with appropriate PPE.

2. On-Site Activity.
   a. Participate in opening conference.
      Conduct review of required OSHA programs and of the site's SHMS.
   b. Participate in walkthrough; observing all working conditions and employee behavior; conducting and documenting private formal and informal interviews; identifying and noting any uncontrolled hazards.
   c. Document findings related to the assigned portion of the evaluation.
   d. Participate in writing the on-site evaluation report focusing on assigned portions. (Note: the entire team will participate in report development).
   e. Participate in group consensus discussions regarding recommendation for participation; methods and timelines for hazard correction; and development of any Merit or One Year Conditional goals.
   f. Team members with specialized expertise may be asked to participate in more detailed technical reviews of the site's programs (e.g., team members with PSM expertise will participate in the evaluation of the site's responses to PSM supplemental questions).

IV. VPP Team Leader Training. Upon the RA's request, the AD must assign properly trained CASs/CSHOs to serve as VPP team members or team leaders.

A. Task Analysis. An individual serving in the capacity of VPP team leader is expected to have a thorough understanding of the elements listed in section III of this chapter as well as, all information below. (See also Appendix F -VPP Team Leader Competency Model.) Staff members serving as Team Leaders are very strongly recommended to have taken the SGE class.

1. Technical Competence. Uses knowledge that is acquired through formal training or extensive on-the-job experience to perform one's job; works with, understands, and evaluates technical information related to the job; and advises others on technical issues.

2. On-Site Experience. Experience on a minimum of three on-site evaluations, including once as a team member, a backup team leader, and a team leader in training (with a qualified team leader as backup team leader).

3. Leadership. Influences, motivates, and challenges others; adapts leadership styles to a variety of situations.
   a. Coordinates the on-site evaluation team and ensures that all evaluation activities are performed.
   b. Prior to the on-site evaluation, provides the on-site evaluation team with the company's VPP history, inspection history, documents from the application, and PSM documents and makes section assignments for the on-site evaluation.

4. Analysis. Identifying problems and using sound judgment to generate and evaluate alternatives and make recommendations for improvement.
   a. Will determine which evaluation process to be used during the on-site evaluation, a CRP or the standard evaluation.
   b. Organizes the on-site evaluation findings, and conducts daily briefings with management and employees.
   c. During the closing conference, reviews findings, the team's recommendation for approval/reapproval/disapproval, 90-day items, goals, recommendations, and responsibilities.

5. Planning and Evaluating. Organizing work, setting priorities, and determining resource requirements; determining short- or long-term goals and strategies to achieve them; coordinating with other organizations or parts of the organization to accomplish goals; monitoring progress and evaluating outcomes.
   a. Develops Merit and One Year Conditional goals as necessary, to ensure the site manages any deficiencies in Star quality discussed in the on-site evaluation report.
   b. Return to a worksite to verify the correction of 90-day items, if necessary.

6. Interpersonal Skills. Developing and maintaining effective relationships with others; effectively dealing with individuals who are hostile, difficult, or distressed; relating well to people of varied backgrounds and different situations.
   a. Holds a strategy meeting with all team members to prepare the team for the on-site evaluation and to make assignments.
   b. Leads opening conference and closing conference with the company and team members.
   c. Conducts private interviews with supervisors, union representatives, maintenance personnel, record keepers, occupational health staff, and randomly selected employees, including contractor employees.

7. Written Communication. Recognizes or uses correct English grammar, punctuation, and spelling; communicates information in a succinct and organized manner; produces written information, including technical material that is appropriate for the intended audience.

a. Compiles the final report, and submits it to the VPP Manager and/or RA for processing.
b. When hazard correction has been verified, removes any lists of uncorrected hazards from the final report before submitting the final report to the RA.

B. Training Outline for Team Leaders.

1. VPP Team Leader Competency Model. See Appendix F.

2. Pre-On-Site Activity.
   a. Gather and review applicable reference sources: All policy documents related to VPP including current policies and procedures manual and Federal Register notices.
   b. Schedule evaluation start date with employer and explain projected timeline for VPP on-site evaluations.
   c. Gather required information related to site demographics and logistics including most recent VPP evaluations, union status, required PPE, AV equipment and availability, and lodging availability for the team.
   d. Assemble VPP Evaluation Team- Determine number of SGE's needed, conduct vetting and provide SGE requests; determine any specific technical competencies needed (IH, PSM, other), gather emergency contact information.
   e. Send necessary information to the team- i.e., reference documents, logistics and verification of the site's Whistleblower and enforcement history.
   f. When deemed necessary, request Medical Access Order to ensure receipt prior to beginning of the on-site activity. Save electronic copy for auditing.

3. On-Site Activity.
   a. Conduct Opening Conference
   b. Determine walkaround priorities and coordinate walkaround
   c. Randomly select employees and schedule interviews
   d. Assign team members to evaluate programs and records
   e. Conducts daily briefings to employer
   f. Determines compliance-related issues/90-Day Items
   g. Manages any personnel/ethics issues, medical issues or personal concerns of team
   h. Draft VPP evaluation report, based on the site's type of participation
   i. Conduct Closing Conference

4. Post-On-Site Activity. VPP Evaluation Report Processing and submission for review

V. VPP Manager Training.

A. Task Analysis. An individual serving in the capacity of VPP Manager is expected to have an understanding of the elements in sections III and IV, above (see also Appendix F – VPP Manager Competency Model):

1. Program Awareness. Understanding the mission and function of a program, as well as the policies, procedures, rules, and regulations; operating effectively within a program, and being directly responsible for the day-to-day operations of VPP in a specific region

2. Analysis. Identifying problems and using sound judgment to generate and evaluate alternatives and make recommendations for improvement.
   a. During an on-site assistance visit, conducts a records review and/or makes general observations about the applicant's or participant's SHMS.
   b. Reviews the sites' annual self-evaluation submissions, and evaluates any changes in rates and/or their programs, requesting explanations from the participant if necessary.
   c. Requests and obtains information from the appropriate Area Office regarding enforcement activities, inspection reports or letters concerning conditions at the VPP worksite, fatalities, catastrophes, and other accidents or incidents that may involve publicity.

3. Planning and Evaluating. Organizing work, setting priorities, and determining resource requirements; determining short- or long-term goals and strategies to achieve them; coordinating with other organizations or parts of the organization to accomplish goals; monitoring progress and evaluating outcomes.
   a. Schedules on-site evaluations, taking into consideration due dates, deadlines, priorities, and coordination with company officials.
   b. Evaluates any national priorities for scheduling on-site evaluations of specific applicants.
   c. Ensures participant's required submissions are received by established time frames.
   d. Ensures the completion of on-site evaluation reports.
   e. If an unresolved serious problem is evident, or when an enforcement activity is concluded, makes arrangements with the company for an on-site assistance visit to determine if the employer's SHMS remains in place and is Star quality.
   f. Encourages State Plans to update DCSP with general participant information and end-of-year information regarding new and existing VPP participants.

4. Interpersonal Skills. Developing and maintaining effective relationships with others; effectively dealing with individuals of varied backgrounds and different situations.

a. Possesses the skills to negotiate with a company's management or VPP representatives as needed.
b. Works with participant and RA in coordinating the award ceremony.

5. Written Communication. Recognizes or uses correct English grammar, punctuation, and spelling; communicates information in a succinct and organized manner; produces written information, including technical material that is appropriate for the intended audience.

a. Drafts and provides any required documents to the participant, DCSP, or OSHA's Assistant Secretary. These documents include, but are not limited to, correspondence to an applicant related to their upcoming evaluations, letters of VPP termination, areas of SHMS corrective actions necessary, and updates to DCSP on ongoing enforcement activities.
b. Returns an ineligible application with a letter indicating the reasons the application was denied by OSHA.
c. Upon being informed of a fatality, catastrophe, accident, or incident, immediately provides a description of the event, by e-mail and/or telephone, to the Assistant Secretary, the RA, DCSP, and OPR, keeping them abreast of the situation as pertinent information becomes available.

B. Training Outline. Training for VPP Managers should include the following elements.

1. Introduction.

2. Understanding the background and history of VPP.

a. Programs within VPP
b. Terms of Participation and Periodic Re-evaluations

3. Overview of the VPP Policies and Procedures Manual.

4. VPP Manager Responsibilities.

a. Application Processing
b. On-Site Evaluations
c. Managing the Annual Submissions, approval and reapproval processes
d. Oversight of Withdrawal and Termination
e. Records Retention and File Maintenance
f. Other responsibilities may be assigned by the RA

5. Reports. The VPP manager is responsible for the VPP approval process and all of the report processing. They are required to review reports prior to submission to DCSP and ensure that the appropriate report format has

been followed. They will also work with the VPP team leader in obtaining any information in reports missing or in need of clarification.

6. SGE. The VPP Manager is expected to have a comprehensive knowledge of the SGE program, including how to obtain SGE support for on-site evaluations and other qualifying activities (see the SGE Policy and Procedures manual), administrative functions of the SGE program which include processing applications for the SGE of the Year award.

   a. Participates in SGE training classes to assist in establishing logistics and performing parts of the training classes.

7. Enforcement Actions at VPP Sites.

   a. Knowledge of how notifications to NO of enforcement actions are to be made and any follow-up duties.

8. Working with State Plan Partners in VPP.

   a. Sharing resources cooperatively.
   b. Oversight and audit process of State Plan.

9. Training Opportunities.

   a. Participation at VPPPA and VPPPA Conferences.
   b. Participation in, and conducting VPP Applications Workshops.
   c. Performing VPP Outreach Activities.
   d. Responding to routine national office information requests.

VI. RA/DRA/ARA/AD Awareness.

The operation and implementation of VPP is under the authority of the RA. The RA may delegate authority to his/her management staff such as, but not limited to, the Deputy RA, ARA of CSP and the OSHA AD. Each senior member of regional management should have a basic understanding of the following:

A. Tenets of VPP
B. General program participation requirements
C. Knowledge of the components of a successful SHMS
D. Distinct differences between Cooperative and Enforcement program policies and procedures
E. Regional Liaison/Coordinator contact in DCSP, OPR
F. Responsibilities of the Regional VPP Manager

Sources to obtain the information above can be found throughout this manual and on OSHA's VPP website. Where resources allow, Regional senior managers should attempt to participate in at least one VPP on-site evaluation. The training described in this chapter and the associated competency models in Appendix F are also available to RA/DRA/ARA/AD positions.

APPENDIX A

Format for Annual VPP Participant Self - Evaluation Submissions*

***Changes in format and substance to the Self-Evaluation are made periodically. Any modifications are maintained electronically by OPR.**

Format and Content for Annual VPP Participant Self-Evaluation

OSHA requires each VPP participant to perform annually a self-evaluation of its safety and health management system. This self-evaluation, reflecting the most current previous calendar years' experience, must be submitted to the participant's OSHA Regional VPP Manager by February 15 of each year. Participants will find it useful to review the VPP *Federal Register* Notice, 74 FR 927, January 9, 2009, which includes annual submission requirements, safety and health management system requirements applicable to all participants, plus additional requirements unique to the participant's chosen way to participate.

The annual self-evaluation is not a compliance audit. It is a critical review to assess the effectiveness of all four VPP elements and their sub-elements, and to analyze participant and contractor injury and illness data and trends. It should include a review of written programs, a walk-through of the workplace, and interviews with employees. During this process, participants should answer the following questions relating to each element and sub-element of their safety and health management system:

1. Is it comprehensive?
2. Is it operating effectively and meeting established goals and objectives?
3. Are there problems that require the development and implementation of solutions in order to maintain excellent worker protection and continued VPP eligibility?
4. What improvements can be made to make it even more effective?
5. What goal modifications should be made for the coming year?

OSHA expects the evaluation to include participant and applicable contractor injury and illness data, progress toward Merit or One-Year Conditional-Star goals (if applicable), and success stories, including safety and health or PSM best practices. OSHA uses the submitted information to update records and statistics, showcase successes related to implementation of VPP requirements, and demonstrate that participants are committed to continuous improvement of worker safety and health at their facilities.

Participants covered by OSHA's Process Safety Management (PSM) standard must also provide responses to all applicable questions found in the PSM Supplement B questionnaire for the applicable calendar year. The responses must cover all PSM operations within the site or applicable DGA.

OSHA encourages participants to use the following suggested format in preparing their annual self-evaluation:

Revised Suggested Format for Participant's Annual Self-Evaluation

Section A: Summary Information

Table A-1 Participant Summary Sheet			
To be completed by VPP Participants			
VPP Participant Name Address Phone		**Calendar Year**	**Date Submitted**
Corporate Information (if different from above)	Name Address Phone		
Site/DGA Manager Name Phone E-Mail Fax	**Site/DGA VPP Contact** Name Phone E-Mail Fax	**NAICS Code** **VPP Status**	
	Is the site covered by OSHA's PSM Standard? (If yes, complete PSM Supplement B.)		
To be completed by Site-Based Non-Construction Participant (1)			
Number of Employees	**Hours Worked**	**TCIR**	**DART Rate**
Summary – All Applicable Contractors of Site-Based Non-Construction Participant (2)			
Total Number of Applicable Contractor Employees	**Hours Worked On-Site of All Applicable Contractor Employees**	**Combined Applicable Contractor TCIR**	**Combined Applicable Contractor DART Rate**
To be completed by Site-Based Construction or Mobile Workforce Participant (3)			
Total Number of All Site/DGA Employees Including All Contractor Employees	**Hours Worked of All Site/DGA Employees Including All Contractor Employees**	**Combined TCIR**	**Combined DART Rate**

Table A-1 Participant Summary Sheet				
To be completed by VPP Participants				
VPP Participant Name Address Phone			**Calendar Year**	**Date Submitted**

(1) Site-based Non-Construction Participants: Enter the average number of employees employed at the site and the total hours worked by the participant's own employees (including temporary and contractor employees regularly intermingled with and directly supervised by participant employees) at the approved site. Injury and illness data should correspond with information normally found in the appropriate column of the participant's OSHA 300 (A) Summary of Work-Related Injuries and Illnesses and optional worksheets.

(2) Summary of Applicable Contractors of Site-Based Non-Construction Participants: All data in these cells must reflect the combined employee numbers and hours worked of **only applicable contractors' employees** at the approved site. Applicable contractor data **must not** be combined with participant employee numbers and site hours unless contractor employees are regularly intermingled with and directly supervised by participant employees.

(3) Site-Based Construction and Mobile Workforce Participants: All data must reflect the combined workforce of participant employees and all contractor/subcontractor employees.

Table A-2 Union Information	
Union Name(s)	
Union Local Number	
Union Representative for Site/DGA	
Address	
Phone	
E-Mail	
Fax	

Section B: Injury & Illness Rate Information

Injury and illness rate information for the previous calendar year must be received in the Regional Office or appropriate Area Office no later than February 15 of each year, along with your completed annual self-evaluation.

(1) Site-based Non-Construction Participants: Use Table B-1 below to submit data for your own site employees, including temporary employees and any contractor employees regularly intermingled with and directly supervised by your employees. On the Participant Summary Sheet (see Section A, Table A-1), record some of the data in Table B-1.

(2) Site-based Non-Construction Participants with Applicable Contractors: Use Table B-2. Provide a **separate Table B-2 for each applicable contractor** (an applicable contractor is a contractor whose employees worked 1,000 hours or more at your site in any calendar quarter). Report applicable contractor injury and illness experience only for work at the site. Do not combine this data with your own site employee data. Guidance on the assignment of a contractors' NAICS codes is detailed in Chapter 9, Section II.D. On the Participant Summary Sheet (see Section A. Table A-1) record combined data for all applicable contractors.

(3) Site-Based Construction and Mobile Workforce Participants: Use Table B-1. Submit combined work hours and combined injuries and illnesses of **all employees.** This must include your own employees, including temporary employees plus all contractor/subcontractor employees. Use this combined data to calculate your site or DGA TCIR and DART rate. On the Participant Summary Sheet (see Section A, Table A-1) record combined data.

When Participant Rates Have Increased

If the one-year site/DGA TCIR or DART rate has increased since last year, **identify and describe the contributing factors and corrective actions that have been taken**. Include this information in the narrative evaluation of each related element and sub-element. See Section D below.

If your three-year site/DGA TCIR or DART rate now exceeds the highest rate of the last three years published by the BLS statistics for your NAICS code, **submit a rate reduction plan based on your findings.** Contact your Regional VPP Manager to discuss the terms of your rate reduction plan.

Table B-1
VPP Participant's Recordable Non-Fatal Injury and Illness Case Incidence Rates

1	2	3	4	5	6	7
Year	**Total Number Employees**	**Total Work Hours**	**Total Number of Injuries & Illnesses**	**Total Case Incidence Rate for Injuries and Illnesses (TCIR)**	**Total Number of Injury & Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer**	**Days Away from Work, Restricted Work Activity, and/or Job Transfer Rate (DART rate)**
20XX						
20XX						
20XX						
Participant's Three-Year TCIR and DART rate						
Most recent published BLS rate for NAICS code _____						
Percent above or below National Average						

Table B-2 Applicable Contractor Recordable Nonfatal Injury and Illness Case Incidence Rates (for use by site-based non-construction participants) (for the applicable contractor's work at your site only)						
Name of Applicable Contractor						
NAICS Code for applicable contractor's work at your site						
1	2	3	4	5	6	7
Year	Total Number Employees*	Total Work Hours	Total Number of Injuries & Illnesses	Total Case Incidence Rate for Injuries and Illnesses (TCIR)	Total Number of Injury & Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer	Days Away from Work, Restricted Work Activity, and/or Job Transfer Rate (DART Rate)
Most recent published BLS rate for NAICS code _____						
Percent above or below National Average						

* Estimated average number of applicable contractor employees.

Calculating Rates for Tables B-1 and B-2

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

N = Total number of recordable nonfatal injuries and illnesses during the calendar year. ***Site-based non-construction participants*:** This number will be the total injuries and illnesses of your site employees, including temporary employees and any contractor employees regularly intermingled with and directly supervised by your employees. ***Site-based construction participants and mobile workforce participants*:** This number will be total injuries and illnesses of the employees **plus** all contractor/subcontractor employees.

For the TCIR, use the total number of injuries and illnesses.

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

EH = Total number of hours worked by employees during the year. ***Site-based non-construction participants*:** This number will be hours worked by site employees, including temporary employees and any contractor employees regularly intermingled with and directly supervised by your employees. ***Site-based construction participants and mobile workforce participants*:** This number will be hours worked by employees, including temporary employees and contractors directly supervised by applicant/participant **plus** all contractor/subcontractor employees.

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

BLS data: Insert the TCIR and DART rates for your industry from the Bureau of Labor Statistics (BLS) Table of Incidence Rates of Nonfatal Occupational Injuries and Illnesses by Industry. Find the table at www.BLS.gov or obtain from your Regional VPP Manager. Compare your rates to the most recently published BLS average rates for your industry: Calculate the percent above or below the BLS national average for your TCIR and DART rates using the formula: [(Site rate - BLS rate) ÷ BLS rate] x 100.

Section C: Significant Events or Changes

Describe the impact of any significant event, the change that occurred, and the steps taken to ensure or restore employee safety and health (e.g., change in management, corporate buy-out, complaint, accident, catastrophe, fatality, etc.).

Section D: Narrative Evaluation of Safety and Health Management System

In narrative form, describe the effectiveness of each of the four elements (and their sub-elements) of your safety and health management system. They are:

1. Management Leadership and Employee Involvement
   a. Management Commitment to Safety and Health Protection and to VPP Participation
   b. Policy
   c. Goals, Objectives, and Planning
   d. Visible Top Management Leadership
   e. Responsibility and Authority
   f. Line Accountability
   g. Resources
   h. Employee Involvement
   i. Contract Employee Coverage
   j. Written Safety and Health Management System

2. Worksite Analysis
   a. Hazard Analysis of Routine Jobs, Tasks, and Processes
   b. Hazard Analysis of Significant Changes, New Processes, and Non-Routine Tasks - Including pre-use analysis and new baselines
   c. Routine Self-Inspections
   d. Hazard Reporting System for Employees

e. Industrial Hygiene Program
f. Investigation of Accidents and Near-Misses
g. Trend/Pattern Analysis

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

4. Safety and Health Training
   a Managers
   b. Supervisors
   c. Employees
   d. Emergencies
   e. PPE

For each sub-element also include a description of:

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

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

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

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

Goal	**Status**
Goal 1:	
Goal 2:	
Goal 3:	

Section F: Best Practices and Success Stories

Please describe any safety and health or PSM best practices and/or success stories related to the implementation of VPP requirements. Include anecdotal as well as statistical evidence of improvements, non-routine safety and health activities, outreach, etc.

Section G: Special Government Employees

Please provide a list of all active SGEs at your site. Include the name, phone number, e-mail address and SGE activity completed during the year for each SGE.

SGE Name	**Phone number**	**E-mail address**	**SGE activity**

APPENDIX B

Instructions for Calculating Injury and Illness Rates

Instructions for Calculating Injury and Illness Rates

I. Definitions.

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

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

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

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

III. Contractor Rates.

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

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

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

V. Rate Calculations.

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

N = Sum of the number of recordable injuries and illnesses in the year.

For the TCIR, use the total number of injuries plus illnesses.

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

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

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

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

$$\frac{[(\#inj + \#ill) + (\#inj + \#ill) + (\#inj + \#ill)]}{[hours + hours + hours]} \times 200{,}000$$

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

$$\frac{[(\#DART\ inj + ill) + (\#DART\ inj + ill) + (\#DART\ inj + ill)]}{[hours + hours + hours]} \times 200{,}000$$

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

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

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

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

$$\frac{\text{Site rate - BLS rate}}{\text{BLS rate}} \times 100$$

VII. Alternative Calculation for Small Worksites.

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

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

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

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

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

The following tables may be used for calculating rates and comparing them to the national averages. A separate Table 2 should be used for each applicable contractor, and the information should pertain to the worksite experience only, not the contractor's entire company.

Table 1. Site Employee Recordable Nonfatal Injury and Illness Case Incidence Rates					
Year	**Total Work Hours**	**Total Number of Injuries and Illnesses**	**Total Case Incidence Rate for Injuries and Illnesses (TCIR)**	**Total Number of Injury & Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer**	**Days Away from Work, Restricted Work Activity, and/or Job Transfer Rate (DART Rate)**
3 Years Ago (annual)					
2 Years Ago (annual)					
Last Full Year (annual)					
3-Year Totals & Rates					
BLS Rates for NAICS code_____ : Year 1 (most recently published)					
Year 2 (prior to Year 1)					
Year 3 (prior to Year 2)					
Percent above or below BLS year _____ National Average (select the most advantageous single year; compare both your three-year rates with that year's average rates)					

Table 2. Site Applicable Contractor Recordable Nonfatal Injury and Illness Case Incidence Rates (for work at your site only)					
Year	**Total Work Hours**	**Total Number of Injuries and Illnesses**	**Total Case Incidence Rate for Injuries and Illnesses (TCIR)**	**Total Number of Injury & Illness Cases Involving Days Away from Work, Restricted Work Activity, and/or Job Transfer**	**Days Away from Work, Restricted Work Activity, and/or Job Transfer Rate (DART Rate)**
3 Years Ago (annual)					
2 Years Ago (annual)					
Last Year (annual)					

APPENDIX C

Interview Questions

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 and health-related topics? (If so, please describe.)

H. How do you assure that any work restrictions are applied appropriately?

I. Please give some examples where you had to use the disciplinary system for infractions of safety and health rules.

J. When was the last emergency drill? What is your role in drills?

K. How are you held accountable for ensuring safe and healthful working conditions in your area?

L. 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?

M. 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?

N. 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 three 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 ensure that any work restrictions are recorded 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 on-site 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 on-site 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. What are the safety and health hazards of your job?

M. What type of safety and health training have you received?

N. At sites covered by Process Safety Management (PSM), please ask appropriate questions from the Dynamic Inspection Priority Lists.

VIII. General Questions for On-Site Evaluations to Determine Reapproval.

A. Describe any changes in your job or in the handling of safety issues since the last OSHA on-site 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?

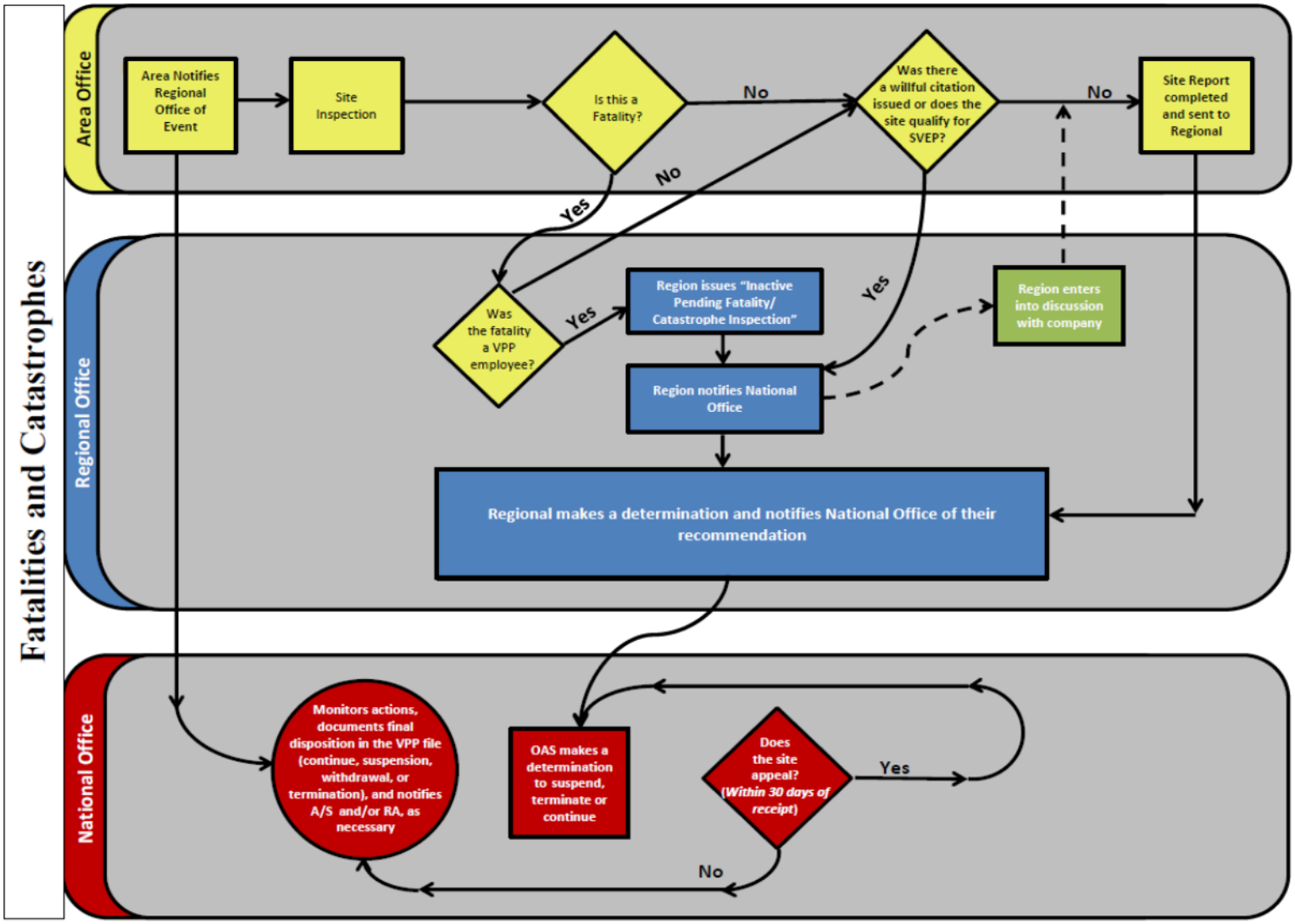
E. Have you noticed any changes in safety and health conditions here since the site's approval in VPP?

F Are there any incentive programs or other practices at this site that would discourage the reporting of work-related injuries/illnesses?

H. Can employees at this workplace discuss safety and health issues, stop work in the presence of a hazardous situation, and report injuries and illnesses without fear of reprisal or retribution?

APPENDIX D

Intent-to-Terminate Flow Chart


Fatalities and Catastrophes
Area Office
Area Notifies Regional Office of Event
Site Inspection
Is this a Fatality?
No
Was there a willful citation issued or does the site qualify for SVEP?
No
Site Report completed and sent to Regional
Yes
No
Regional Office
Was the fatality a VPP employee?
Yes
Region issues "Inactive Pending Fatality/ Catastrophe Inspection"
Yes
Region enters into discussion with company
Region notifies National Office
Regional makes a determination and notifies National Office of their recommendation
National Office
Monitors actions, documents final disposition in the VPP file (continue, suspension, withdrawal, or termination), and notifies A/S and/or RA, as necessary
OAS makes a determination to suspend, terminate or continue
Does the site appeal? (Within 30 days of receipt)
Yes
No

APPENDIX E

OIS
Enforcement Codes

I. *The following is a list, explanation and example Scenarios of VPP Optional Information Codes to be placed in the program information tab of the inspection form. (N-04-XXX):*

Value	***Description***
VPP-P	ENFORCEMENT ACTIVITY AT A VPP PATICIPANT SITE, NON FAT/CAT
VPP-PEF	FAT/CAT AT VPP SITE INVOLVED A SITE EMPLOYEE
VPP-C	ENFORCEMENT ACTIVITY WITH A VPP CONTRACTOR, NON FAT/CAT
VPP-CEF	FAT/CAT THAT INVOLVED A VPP CONTRACTOR EMPLOYEE

Below are several sample scenarios demonstrating when and how the information codes should be applied:

These codes apply to enforcement activities conducted where the employer/ host employer is a VPP participant. The **N-04 VPP-P** code identifies a VPP participant where enforcement activity will occur and the additional code(s) identify the fatality or catastrophe activity associated with/at the VPP participant. *For all contractor enforcement activity on a VPP participant's site, please enter the host VPP participant inspection number (if an inspection of the VPP site is initiated) in the Related Inspection field on the contractors' inspection form.*

Scenario 1 – Complaint Inspection involving a VPP participant employee

A CSHO responds to a site to conduct a complaint inspection and learns that the site is a VPP participant. Since it is a VPP participant's site, the CSHO will select the N-04 VPP-P code in the OIS inspection form when entering in the inspection data. Additionally, The Regional VPP Manager will be notified if a Willful citation or the citations placing the site in the Severe Violator Enforcement Program (SVEP) are issued. Via regional protocols, applicable VPP Policy shall be implemented.

Scenario 2-Fatality inspection involving a VPP participant employee

A CSHO responds to a site after learning that a fatality occurred. Further details reveal that the fatally injured employee is a VPP participant site's employee. The CSHO will enter the N-04 VPP-PEF and N-04 VPP-P code in the OIS inspection form when entering the event and inspection data. Additionally, The Regional VPP Manager will be notified if a Willful citation or the citations placing the site in the Severe Violator Enforcement Program (SVEP) are issued. The Regional VPP Manager will be notified as soon as possible via regional protocols.

Scenario 3-Non-fatality inspection of a Non-VPP, contractor employee, at a VPP site

A CSHO observes an employee exposed to an unprotected fall from the roof of a commercial building. Upon entering the site, the CSHO learns that the exposed employee is a contractor's employee on a VPP site. The CSHO will select the N-04

VPP-C code in the OIS inspection form for the contractor. Since the host site is a VPP participant, the CSHO will also enter an OIS inspection for the host site and select the N-04 VPP-P code in the OIS inspection form when entering in the inspection data for the host site. The Regional VPP Manager will be notified if a Willful citation or the citations issued places the site in the Severe Violator Enforcement Program (SVEP). Via regional protocols, applicable VPP shall be implemented.

Scenario 4-Non-VPP Contractor's employee fatality at a VPP participant's site

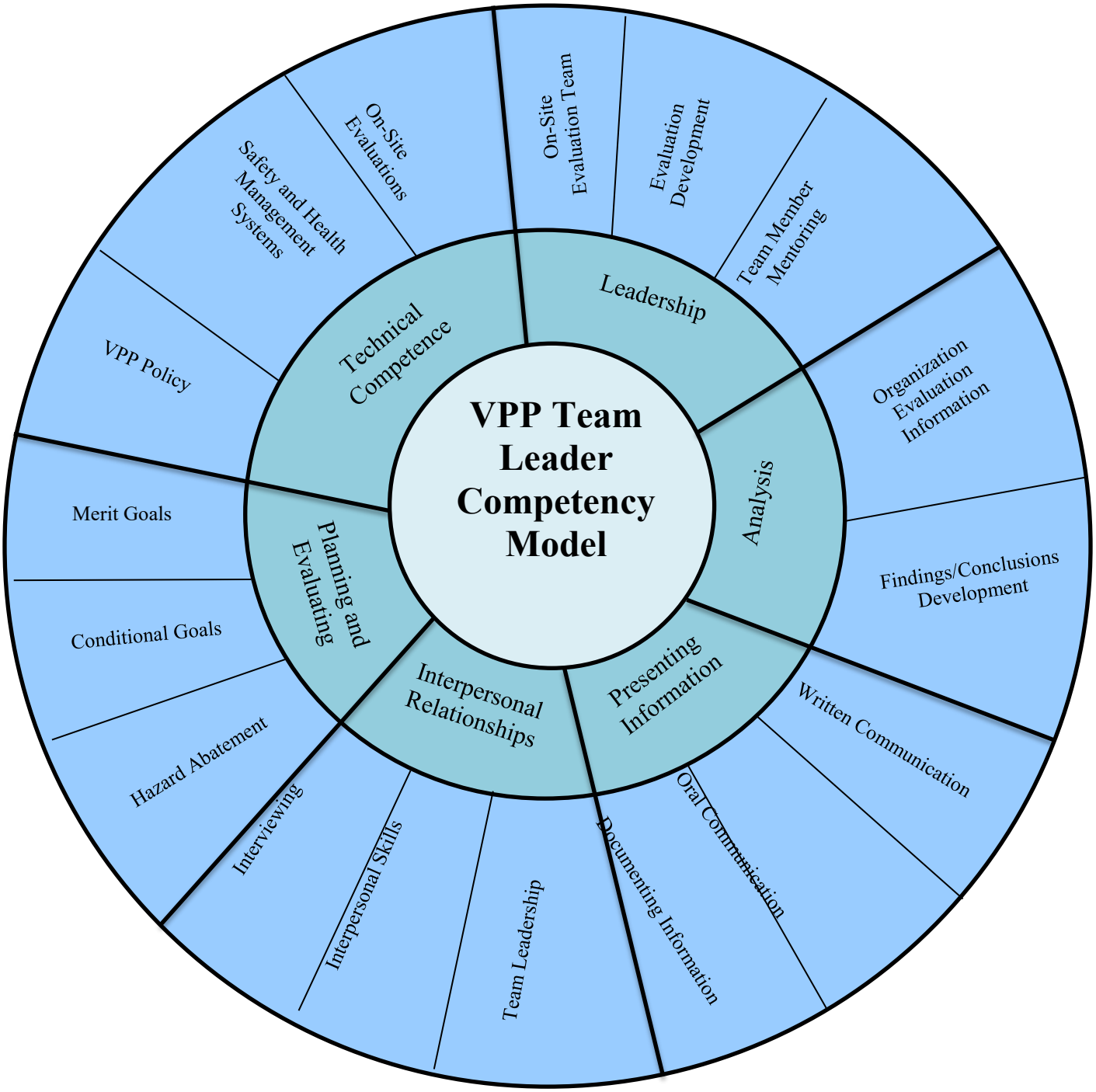
A CSHO responds to a work site after learning that a fatality has occurred. Upon learning that the fatally injured worker was a contractor's employee on a VPP participant's site, the CSHO will enter the N-04 VPP-CEF code in the OIS inspection form for the contractor to identify that a non-VPP contractor's employee was involved in a fatality. Since the host site is a VPP participant, the CSHO will also enter an OIS inspection for the host site and select the N-04 VPP-P code in the OIS inspection form when entering in the inspection data for the host site. The VPP Regional Manager will be informed as soon as possible.

Scenario 5-VPP contractor's employee fatality at a VPP participant's site

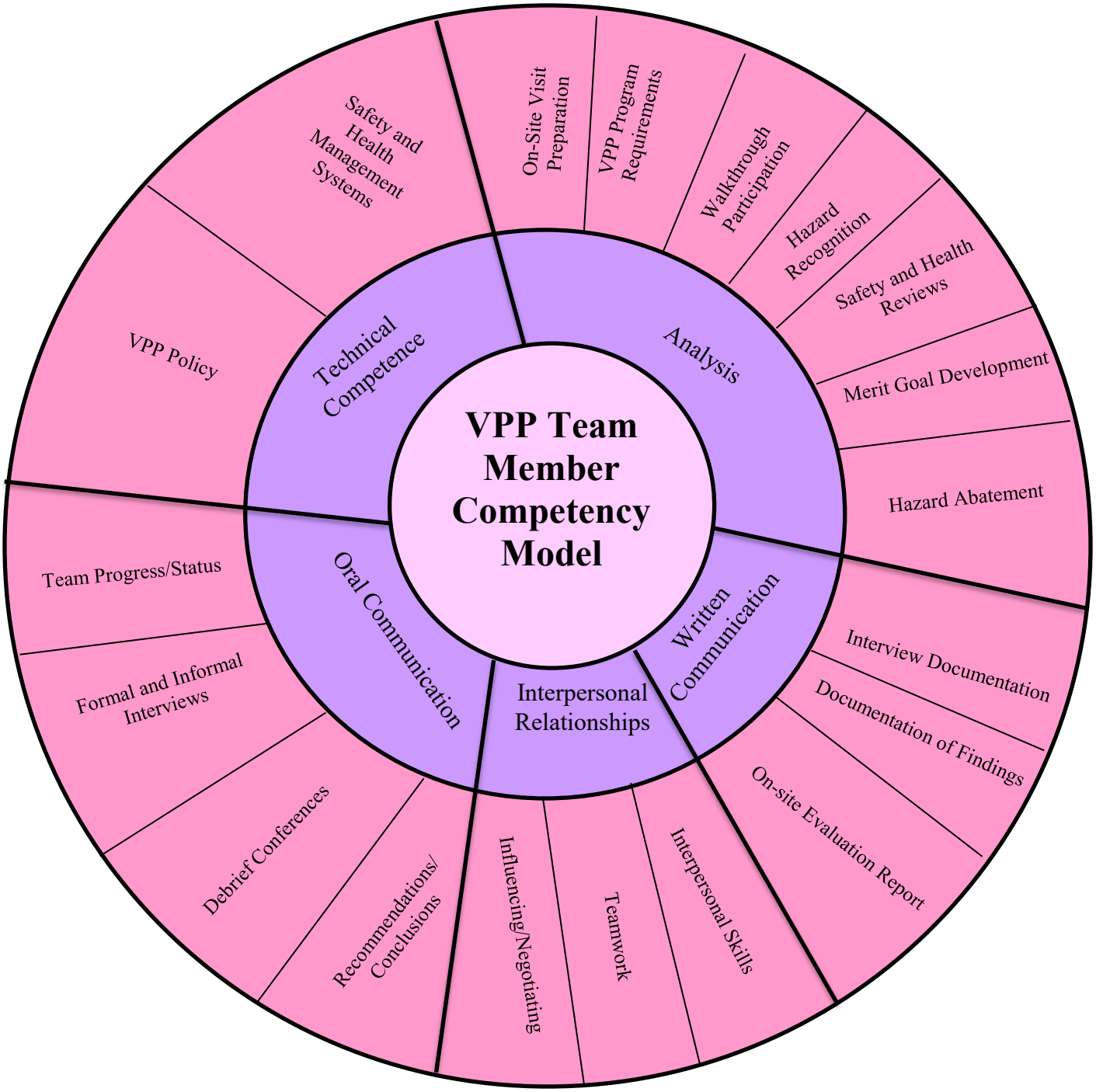
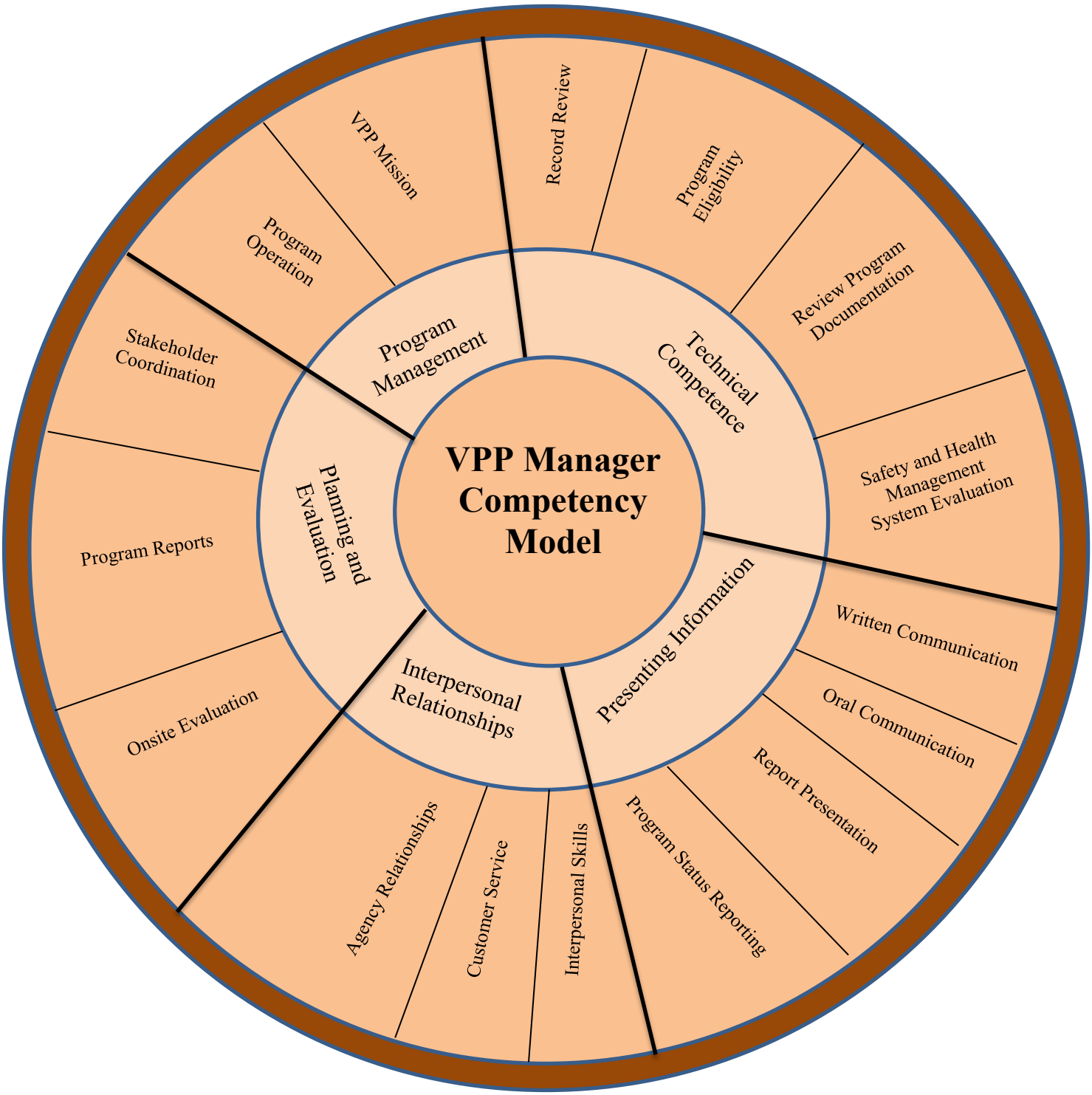
A CSHO responds to a work site after learning that a fatality has occurred. Upon learning that the fatally injured worker was a contractor's employee on a VPP site and the contractor is a VPP participant, the CSHO will enter the **N-04 VPP-CEF for the** VPP contractor's employee fatality. The CSHO will also enter an OIS inspection for the VPP participant host site and select the **N-04 VPP-P** code and **N-04 CEF** in the OIS inspection form. The VPP Regional Manager will be informed as soon as possible.

APPENDIX F
Competency Models

VPP Team Leader Competency Model



VPP Team Member Competency Model



VPP Manager Competency Model