DOSH VOLUNTARY PROTECTION PROGRAM (VPP) MANUAL

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CHAPTER 1
INTRODUCTION

A. BACKGROUND

The Voluntary Protection Program (VPP) emphasizes the importance of worksite safety and health programs in meeting the goal of the Washington Industrial Safety and Health Act (WISHA), "to assure, insofar as may reasonably be possible, safe and healthful working conditions for every man and woman working in the state..."

The VPP was implemented effective June 1, 1996, under the authority of WISHA, which directs the agency to encourage employers and employees in their efforts to reduce hazards, institute new programs, and perfect existing programs for providing safe and healthful working conditions.

The VPP provides official recognition of excellent safety and health programs, assistance to employers in their efforts to reach that level of excellence, and the benefits of a cooperative approach to resolve potential safety and health problems.

The program is based on the following six principles:

1. **Balanced Approach.** The VPP is designed to complement the Division of Occupational Safety and Health's (DOSH's) enforcement efforts. They are one facet of DOSH's balanced approach to ensure every working man and woman a safe and healthful workplace.

2. **Cooperation.** The VPP is based on the concept that, in many cases, cooperation can achieve more positive results than adversarial approaches. Indeed, VPP will work only where a cooperative attitude exists among DOSH, the employer, and employees.

3. **Selectivity.** Recognition in the VPP requires rigorous and detailed attention to workplace safety and health by all personnel in that workplace. Sites are approved on the basis of their written safety and health program and their performance in meeting the standards set by the program.

   Not all workplaces will have the level of motivation and commitment necessary to participate in the VPP.

4. **Stimulus.** Acknowledging and rewarding employer and employee initiatives in addressing safety and health concerns will stimulate interest in new ways to make and keep workplaces safe and healthful.

5. **Models.** Safety and health programs that are successful in meeting VPP requirements will serve as models for employers who want to improve their own safety and health programs.

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

B. VOLUNTARY PROTECTION PROGRAM (VPP) LEVELS

The VPP is comprised of program elements that have been demonstrated to reduce the incidence and severity of workplace illnesses and injuries at worksites where these programs are an integral part of daily operations.

The VPP operates at two levels:

1. **Star.** The Star Program is the most highly selective program and is for applicants with occupational safety and health programs that are comprehensive and successful in reducing workplace hazards.
2. **Merit.** The Merit Program provides a planned set of "stepping stones" toward achieving Star participation for those employers who have demonstrated the potential and willingness to reach Star requirements.

C. ELEMENTS OF VPP

To qualify for VPP, an applicant/participant must operate a comprehensive safety and health management system that includes four essential elements.

These elements, when integrated into a worksite's daily operations, can reduce the incidence and severity of illnesses and injuries:

- Management leadership and employee involvement
- Worksite analysis for hazard assessment
- Hazard prevention and control
- Safety and health training

D. VPP PHILOSOPHY

Participation in VPP does not modify either employer or employee rights or responsibilities under WISHA, and participants must continue to comply with all applicable WISHA standards. Working together, the agency, the employer, and the employees can move beyond the basic requirements of the Act in a comprehensive effort to prevent or eliminate workplace hazards, not merely to comply with regulations.

Such cooperation requires trust from all parties. In order to engender trust, DOSH's VPP approach to applicants is based on the following principles:

1. **Voluntarism.** The VPP is strictly voluntary. The company has voluntarily submitted itself to DOSH scrutiny and deserves the agency's respect.
2. **Confidentiality.** The VPP team must protect the confidentiality of the applicant's information as far as possible.
   - **a.** During the application process, before approval, the application is confidential and therefore access to it is restricted solely to VPP-related activity. (RCW 49.17.250(3).
   - **b.** Only applications of approved participants will be kept in a public information file.
   - **c.** If an applicant withdraws before approval and participation, the original application is returned. The VPP Specialist keeps one copy in the archive file.
   - **d.** When DOSH needs onsite access to sensitive corporate documents such as internal audit reports and performance evaluations, the VPP team reviews only the portions of those documents relating to safety and health. The VPP team is permitted to copy only materials or content related to safety and health.
   - **e.** Any classified or trade secret information and/or personal knowledge of such information that becomes known by DOSH personnel must be kept confidential, and handled in accordance with RCW 49.17.200, Chapter 19.108 RCW Uniform Trade Secrets Act.
   - **f.** Collecting such information and the number of personnel accessing it must be limited to the minimum number necessary to conduct the VPP onsite visit. Any classified or trade secret information that becomes part of the official file must be identified as such in the official file. No classified or trade secret information is permitted to be included in the public information file.
3. **Compliance and Beyond.** Under the WISH Act, employers must comply with the provisions of the Act and with the standards set under the authority of the Act.
   - **a.** DOSH recognizes that the best of workplaces may be temporarily out of compliance with a WISHA standard, but DOSH expects applicants to take all feasible actions necessary to discover such lapses promptly, and to come into compliance as soon as possible.
   - **b.** DOSH expects Star participants to be on the leading edge of hazard prevention methods and technology and that Star participants will show continuous improvement in their safety and health programs.
4. **Hazard Prevention.** VPP staff will not limit their recommendations to the requirements of WISHA standards and VPP elements, but will recommend any program changes that may improve safety and health in the workplace.

5. **Cooperation.** VPP staff and approved VPP participants will work together to resolve any safety and health problems that may arise during participation.

E. DEFINITIONS

Year Conditional Goal. A target for correcting deficiencies in safety and health management system elements or sub-elements identified by DOSH during the onsite evaluation of a Star participant.

Such deficiencies, which indicate that a site no longer fully meets Star requirements, must be corrected within 90 days, and the participant must then operate at the Star level for 1 year following correction, for the participant's conditional status to be lifted. Failure to meet this requirement will result in the participant's termination from the VPP.

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

Annual Evaluation. A participant's yearly self-assessment, documented in writing, consisting of the following information:

(a) Updated names and addresses;
(b) The participant's and applicable contractors' injury and illness case numbers and rates, average annual employment, and hours worked, for the previous calendar year;
(c) A copy of the most recent annual evaluation of the participant's safety and health management system;
(d) Descriptions of significant changes or events;
(e) Progress made on the previous year's recommendations;
(f) Merit or 1-Year Conditional goals (if applicable); and
(g) Any success stories.

Additionally, participants covered by the Process Safety Management Standard (PSM) must respond to applicable questions from the annual VPP PSM questionnaire.

(See Appendix I for the Self-Evaluation Template.)

Annual Submission: (See Annual Evaluation) The annual self-evaluation is submitted to DOSH by February 15th of each year, to gauge the effectiveness of the required VPP elements and any other elements of the participant's safety and health management system.

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

Accepted Application. An application that has been reviewed by the VPP Specialist and found to be complete. Also referred to as a 'completed application.' This means the VPP qualification process can move forward.

Back-up Team Leader. A member of an onsite review team who provides assistance to the Team Leader, actively participates in all phases of the onsite review, and can assume the duties of the Team Leader, when necessary.

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

Complete Applications. Applications that have been reviewed by the VPP Specialist and found acceptable either with no further information needed or with all requested additional information received.

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

Evaluation Onsite Review. A DOSH onsite team visit to a current participant in the VPP to determine the site's eligibility to continue participation, or to advance to Star level.

Evaluation Report. A report, written by the DOSH evaluation onsite review team that makes recommendation for the site's continued participation or advancement in VPP.

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.

Injury/Illness Rates. Numerical rates that represent recordable injuries and illnesses at a worksite and that are an important factor when DOSH assesses an applicant/participant's qualification for VPP.

Mentee. A worksite participating in the Voluntary Protection Programs Participants' Association (VPPPA) Mentoring Program (see definition below) and being mentored by a VPP participant so the worksite/employer can apply to the VPP or simply to improve the site's safety and health program.

Mentor. A VPP participant that provides coaching and support to another worksite to improve that location's safety and health management system or to prepare it to apply for or participate in VPP.

Mentoring Program. A program designed cooperatively by OSHA, DOSH, and the Voluntary Protection Programs Participants' Association (VPPPA) and run by the VPPPA to match VPP sites that volunteer to be mentors with sites that request help improving their safety and health programs.

Merit Goals. Goals established during a pre-approval onsite review that, when accomplished, should qualify the site to advance to the Star level of the VPP.

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

Official File. The file containing any records received by or made by a DOSH Consultant or the VPP Specialist that concern, relate to, or are part of any VPP application or VPP onsite visit, or that concern, relate to, or are part of the performance of any official duty related to the VPP or Consultation programs. These files are protected from public disclosure under RCW 49.17.250(3).

Onsite Consultant Visit. A visit to a VPP applicant by a Regional Safety and Hygiene Consultant to offer help including help with safety or hygiene, conducting a records review, and/or making general observations about the applicant's safety and health management system with an eye to helping the applicant make improvements.

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

Onsite Evaluation Report. A document written by the DOSH onsite evaluation team and consisting 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 the team's recommendation regarding approval of the applicant or re-approval of the participant in VPP.

Onsite Evaluation Team. A group of DOSH professionals with interdisciplinary skills who conduct pre-approval and evaluation onsite reviews, usually consisting of a team leader, a backup team leader, various safety and health specialists, and other specialists as appropriate.

Pre-approval Onsite Evaluation. A DOSH onsite team visit to a site applying to the VPP to determine the site's eligibility to participate.

Pre-approval Report. A report written by the DOSH pre-approval onsite review team to make recommendation about the site's participation in a VPP. (See Appendix F)

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

Process Safety Management (PSM). A reference to WAC 296-67 (PSM), which covers all employers who either use or produce highly hazardous chemicals at levels exceeding specified limits.

PSM "Level 1" Auditor. A PSM "Level 1" Auditor is a DOSH employee with experience in the chemical processing or refining industries.

Public Information File. The file containing copies from the official file of those documents which are releasable to the public after a VPP application has been approved: the worksite's VPP application, the pre-approval report, and the approval letter. Subsequent evaluation reports are also releasable.

Resident Contractor. A company that provides ongoing, onsite services to a VPP applicant/participant.

Safety and Health Management System. For the purposes of VPP, a method of preventing employee fatalities, injuries and illnesses through the ongoing planning, implementation, integration, and control of four interdependent elements: Management Leadership and Employee Involvement; Worksite Analysis; Hazard Prevention and Control; and Safety and Health Training.

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

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.

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

Structural Requirements. Safety and health program components that are required for participation in one of the VPP levels.

Team Leader. The DOSH VPP specialist who completes the application review, leads the onsite review team and prepares approval documents for VPP applicants. (See Appendix C for a list of Team Leader Responsibilities.) Prior to functioning independently as a Team Leader, the individual must:

- Attend formal classroom Safety and Health Program Assessment training, or equivalent on-the-job or self-study training;
- Have formal leader training (on-the-job, classroom, or self-study);
- Participate as a team member on two onsite reviews; and
- Serve as team leader-in-training on at least one onsite review with the backup of an experienced team leader.

Termination. Formal removal of a VPP participant from the program. Termination usually occurs when Merit Program participants complete their terms of approval with no recommendation for a new term or advancement to the Star Program. Termination also may occur if the trust between labor, management and/or DOSH no longer exists.

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

VPP Approval Ceremony. An event planned by the approved worksite and normally held at the site, where representatives from DOSH recognize the participant's achievement, present the VPP plaque, and present the VPP flag.

VPP Specialist(s). The Department's safety and health staff members directly responsible for the day-to-day operations of the VPP. They report to the Special Employer Programs Manager.

- The VPP Specialist(s) are assigned responsibility for application review and processing.
- The VPP Specialist(s) are designated the Team Leader or Backup Team Leader for the onsite review.
- The VPP Specialist(s) are the DOSH contact persons for the site after the site's approval for participation in the VPP.

VPP Site Representative. The individual designated by an applicant or participant as the primary spokesperson regarding VPP related activity at the worksite.

VPPPA/Voluntary Protection Programs Participants' Association. The VPPPA, a nonprofit charitable organization, is a leader in promoting excellence in workplace safety and health and environmental protection through cooperative programs between government, management, and labor. The members of the VPPPA include almost all companies involved in the VPP along with government entities operating cooperative programs promoting safety, health, and cooperative excellence.

Withdrawal. Voluntary decision by an applicant to withdraw the application to the VPP or by a participant to withdraw from participation in the VPP.

CHAPTER 2

RESPONSIBILITIES

A. INTRODUCTION

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

B. RESPONSIBILITIES

B.1. Special Employer Programs Manager. The Special Employer Programs Manager or his/her designee oversees the administration of the VPP by the VPP Specialist(s) and ensures that appropriately trained staff is available for application review and processing.

B.2. Compliance Program Manager. The Statewide Compliance Manager or designee does the following:

a. Refers complaints, chemical spills/releases or fatality/catastrophe situations at VPP worksites to the Regional Compliance Manager.

b. Notifies the Special Employer Programs Manager who coordinates with the VPP Specialist when a complaint is received from a VPP worksite and of the subsequent disposition thereof. This action shall include complaints which are responded to by letter.

c. Immediately notifies the Special Employer Programs Manager who coordinates with the VPP Specialist of any chemical spills/releases, fatalities/catastrophes, or significant accidents or incidents that occur at a VPP worksite.

B.3. DOSH Regional Consultation Manager. The DOSH Regional Consultation Manager or his/her designee does the following:

a. Provides handout literature describing the VPP, application instructions, and other informational materials, as developed, to interested parties upon request. Such parties are then referred to the VPP Specialist.

b. Promotes the VPP in appropriate public presentations, using available material geared to audience interest.

c. Ensures that DOSH Consultants know the requirements and objectives of the VPP, and encourages them to identify possible candidates.

d. Refers likely VPP candidates to a VPP Specialist for follow-up.

e. Upon request, provides professional staff resources to participate on VPP onsite teams.

B.4. VPP Specialist(s). The VPP Specialist(s) coordinate and ensure the following:

a. Administers the VPP by following the requirements and procedures of this manual.

b. Facilitates application review, including, where merited, onsite verification and recommendation by the onsite evaluation team for concurrence by DOSH's Assistant Director, and approval decision by the Director of Labor and Industries.

c. Develops and maintains a VPP outreach program directed at potential applicants.

d. Provides interpretations of VPP requirements as needed.

e. Provides training (through DOSH internal training, on-the-job, at conferences, etc.) in techniques of management review of safety and health programs, and in policies and procedures of the VPP.

f. Provides VPP information and assistance to all interested parties, and recruits likely candidates.

g. Regularly notifies the Statewide Compliance Manager and the Consultation Manager of new approvals, changes in status, terminations, and withdrawals.

h. Maintains a record of all VPP inquiries and applications received, and reports quarterly to the Special Employer Program Manager, indicating the number of inquiries and applications received.

i. For preapproval, the VPP Specialist works with the Regional Compliance Manager to ensure that any applicant who appears on programmed inspection lists has inspections deferred from no more than 75 days prior to the date the onsite review is scheduled until the date of the approval decision. For post-approval, the VPP Specialist notifies the DOSH IT Systems Manager to remove the participant from programmed inspection lists for the duration of VPP participation.

j. Informs the DOSH Consultation Program Manager, and DOSH Regional Consultation Managers, of all scheduled pre-approval and evaluation onsite visits planned for their region.

k. Works with Public Affairs to issue a news release to announce VPP approvals. (A news release need not be issued if the site or parent company plans to issue one.)

l. Provides post-approval assistance and evaluation to new participants.

m. Sends a notice of the approval decision to all evaluated participant worksites that received recommendations that they continue in the Star Program.

n. Ensures that employee complaints, referrals, significant chemical leaks and spills, fatalities, catastrophes or other significant accidents/incidents at participant or applicant sites are referred to Compliance for investigation

according to standard DOSH policy, and that reports of such investigations are provided to the Special Employer Programs Manager.

o. Ensures that the following information regarding the VPP participants in Washington State is submitted to OSHA in a timely manner after approval, and that updated information is submitted when known, for update of OSHA records:

- Corporation name (if different from approved worksite).
- Approved worksite name.
- Corporate contact (if any) and telephone number.
- Site contact and telephone number.
- Address of approved site location.
- Nature of operation at approved site (5 to 20 words).
- NAIC for approved site.
- Number of employees at approved site.
- Date of approval.
- Name of program to which approved.
- Union (if any).
- Date of evaluation(s).
- Date of withdrawal or termination.

p. Ensures that updated promotional materials are available for distribution to Regional Consultation Managers, the Outreach Program Manager, and others upon request. (Appropriate persons and offices.)

q. Maintains a public information file on all approved sites.

r. Acts as liaison between DOSH and the VPP Participants' Association (VPPPA).

s. Maintains a comprehensive record of all applications, and all paperwork, reports, and official letters in a participant file. This includes copies of internal written communications, notes documenting oral communications, all communications with the applicant or participant, summary of enforcement actions taken against applicant or participant with final disposition or contested status, and WIN information related to citations and penalties.

t. Maintains a directory of current VPP participants on the DOSH website.

u. Ensures that all required reports are properly prepared and submitted in a timely manner.

v. Ensures that the required procedures for termination is adhered to, approved by the DOSH Assistant Director, and documented in the participant file.

w. Maintain annual schedule for VPP on-sites and re-certifications. The schedule is written and reviewed quarterly to ensure that on-sites occur within three months of the due date, except in the case of extenuating circumstances.

x. Ensure that medical access orders are requested and received prior to conducting an onsite evaluation.

C. Safety and Health Incentive Programs

The VPP Specialist(s) will review and evaluate safety and health incentive programs for all VPP applicants and VPP participant worksites. OSHA Instruction, CSP 03-01-003, VPP Policies and Procedures Manual, which became effective on April 18, 2008, addresses incentive programs within the context of an employer's proper and accurate recording of injuries and illnesses.

Chapter VI, Onsite Evaluations, Section III.B.1. Subsections b. and g. stress that incentive programs should promote safety awareness and worker participation in safety-related activities, and must not be the cause of under-reporting of injuries and illnesses.

VPP and its participants have the opportunity to lead the way by example and to effect positive and creative change throughout their industries. By working cooperatively DOSH and its VPP partners can demonstrate that a good incentive program, which emphasizes positive worker involvement in safety and health activities and conscientious hazard reporting and correction, can be one element in an effective injury and illness prevention program.

C.1. Incentives That Promote Injury and Illness Reporting and Worker Involvement. A positive incentive program encourages or rewards workers for reporting injuries, illnesses, near-misses, or hazards, and/or recognizes, rewards, and thereby encourages worker involvement in the safety and health management system. Such an incentive program can be a good thing and an acceptable part of a VPP-quality safety and health management system. Examples of such positive incentives include providing tee shirts to workers serving on safety and health committees, offering modest rewards for suggesting ways to strengthen safety and health, or throwing a recognition party at the successful completion of company-wide safety and health training.

C.2. Disincentives That Discourage Injury and Illness Reporting and Worker Involvement. An incentive program that focuses on injury and illness numbers often has the effect of discouraging workers from reporting an injury or illness. When an incentive program discourages worker reporting or, in particularly extreme cases, disciplines workers for reporting injuries or hazards, problems remain concealed, investigations do not take place, nothing is learned or corrected, and workers remain exposed to harm. Disincentives to reporting may range from awarding paid time off to a unit that has the greatest reduction in incidence rates to rewarding workers with a pizza party for achieving an injury/rate reduction goal or maintaining an injury- and illness-free worksite for a period of time. A company whose incentive program has the potential to discourage worker reporting fails to meet the VPP's safety and health management system requirements.

C.3. New Applications. When faced with a VPP applicant's incentive program containing provisions that could discourage injury and illness reporting, the VPP Specialist during the initial application review or the VPP Evaluation Team during the onsite evaluation will advise the applicant of DOSH's position and VPP policy. The applicant may choose to make an immediate change to its incentive program that will bring the program in line with VPP policy. If the applicant needs more than a short/nominal period of time to eliminate the disincentive and/or to revise its program, it would be appropriate to designate this needed improvement as a Merit goal, assuming the applicant qualifies for Merit participation. If the applicant refuses to make the needed change, the VPP Specialist will recommend that the applicant withdraw its VPP application.

C.4. Re-approvals. If the VPP Specialist during review of a Star participant's annual self-evaluation identifies a problem in the participant's incentive program, or if a VPP Evaluation Team uncovers disincentives to injury and illness reporting during its document review and employee interviews, the participant will be given the opportunity to bring its incentive program in line with VPP policy consistent with a 90-day item.

C.5. Onsite Visits. If the VPP Specialist identifies a problem in a VPP participant's incentive program during a quality assurance audit or any onsite visit, the participant will be given the opportunity to bring its incentive program in line with VPP policy within 90 days.

C.6. VPP Status. Following the 90-day period during which the VPP participant must eliminate the disincentive and/or revise its incentive program, the DOSH Assistant Director may choose to place the participant on Star One-Year Conditional status and require the participant to demonstrate one year of effective implementation of the program change. A participant's refusal to make the recommended improvement to its incentive program is grounds for VPP termination.

The established termination procedures will apply, including the DOSH Assistant Director's written notice of intent to terminate and the participant's right to appeal in writing to the Director of Labor and Industries.

D. PROVIDING VPP INFORMATION TO THE PUBLIC

All requests for information about the VPP must be addressed promptly and completely.

D.1. Materials. All DOSH offices must have on hand sufficient quantities of current VPP explanatory and promotional materials to satisfy routine requests.

Explanatory materials should include at least the Labor and Industries website information about the Voluntary Protection Program, its elements, instructions for self evaluations, and application guidelines.

Promotional materials may change from time to time. It is important to provide up-to-date information to interested parties.

D.2. Public Information Files. The VPP Specialist maintains a public file for each approved VPP participant. For more information about these files, see Chapter 7, Section B.9.

D.3. Speeches and Presentations. DOSH Consultants, the VPP Specialists, and Labor and Industries leadership staff need to be prepared to make VPP speeches or presentations on request. The VPP Specialist provides assistance on request whenever possible.

E. VPP PROGRAM UPDATES AND EFFECTIVENESS

If a policy or procedure is issued by Federal OSHA to VPP, it will be reviewed for comparison with the most current DOSH VPP Manual. If the comparison makes DOSH VPP policies and procedures less effective than OSHA, the OSHA changes will become effective immediately for DOSH VPP. The VPP specialist will follow the issued OSHA policy or procedure until such time they are incorporated into the DOSH VPP Manual. This includes changes to the OSHA VPP Manual or any OSHA memorandums related to VPP.

CHAPTER 3

REQUIREMENTS FOR STAR AND MERIT

INCLUDES RESIDENT CONTRACTORS & CONSTRUCTION INDUSTRY WORKSITES

A. INTRODUCTION

This chapter defines requirements for the Star and Merit programs as well as unique requirements for the construction industry, and for resident contractors at VPP sites. These requirements are identical to OSHA requirements.

B. THE STAR PROGRAM

The Star Program recognizes the very best workplaces that are in compliance with Washington WISHA regulations, and that operate outstanding safety and health management systems for worker protection.

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

All of the VPP requirements, detailed below, must be in place and working effectively for at least one year prior to Star approval.

B.1. Injury and Illness History Requirements. Injury and illness history at the site is evaluated using a three-year total case incident rate (TCIR) and a 3-year day away, restricted, and/or transfer case incident rate (DART rate).

The 3-year TCIR and DART rates must be below the 3-year average published Bureau of Labor Statistics (BLS) national average for the five- or six-digit North American Industrial Classification System (NAICS) code for the industry in which the applicant is classified.

The BLS publishes NAICS industry averages two years after data is collected. (For example, in calendar year 2009, calendar year 2007 national averages are available and used for comparison).

B.2. Comprehensive Safety and Health Management System Requirements. The following safety and health management system elements and sub-elements must be implemented.

a. Management Leadership and Employee Involvement.

(1) Management Commitment. Management demonstrates its commitment by:

(a) Establishing, documenting, and communicating to employees and contractors clear goals that are attainable and measurable, objectives

that are relevant to workplace hazards and trends of injury and illness, and policies and procedures that indicate how to accomplish the objectives and meet the goals.

(b) Signing a statement of commitment to safety and health.

(c) Meeting and maintaining VPP requirements.

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

(e) Identifying persons whose responsibilities for safety and health include carrying out safety and health goals and objectives, and clearly defining and communicating these responsibilities in their written job descriptions.

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

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

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

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

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

(k) Establishing lines of communication with employees and allowing for reasonable employee access to top management at the site.

(l) Setting an example by following the rules, wearing any required personal protective equipment, reporting hazards, reporting injuries and illnesses, and basically doing anything that they expect employees to do.

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

(n) Conducting an annual evaluation of the safety and health management system in order to:

- Maintain knowledge of the hazards of the site.
- Maintain knowledge of the effectiveness of system elements.
- Ensure completion of the previous years' recommendations.
- Modify goals, policies, and procedures as appropriate.

(2) Employee Involvement. Employees must be involved in the safety and health management system in at least three meaningful, constructive ways in addition to their right to report a hazard.

Avenues for employees to have input into safety and health decisions include participation in audits, accident/incident investigations, self-inspections, suggestion programs, planning, training, job hazard analyses, and appropriate safety and health committees and teams.

Employees do not meet this requirement by participating in incentive programs or by simply working in a safe manner.

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

(b) Employees must receive feedback on any suggestions, ideas, reports of hazards, etc., that they bring to management's attention. Site officials must provide documented evidence that employees' suggestions were followed up and implemented when appropriate and feasible.

(c) All employees, including new hires, must be notified about the site's participation in the VPP and about employees' rights (such as the right to file a complaint) under the Department of Labor and Industries. Orientation training curriculum must include this information.

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

(3) Contract Worker Coverage. Contract workers 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 site.

(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 onsite.
- Encourage contractors to develop and operate effective safety and health management systems.
- Provide for timely identification, correction, and tracking of uncontrolled hazards in contractor work areas.

(c) Ensure that if a contractor or contractor's employees are creating or contributing to the existence of safety and health hazards, that the issues are appropriately addressed and resolved.

(d) Injury and Illness Data Requirements

- Onsite contractors (such as contracted maintenance workers) and temporary employees who are supervised by host site management are governed by the site's safety and health management system and are therefore included in the host site's rates.
- Site management must maintain copies of the TCIR and DART rate data for all applicable contractors based on hours worked at the site.
- Site officials must report all applicable contractors' TCIR and DART rate data to DOSH annually.

(4) Training. Managers, supervisors, and non-supervisory employees of contract employers must be made aware of:

- The hazards they may encounter while on the site.
- How to recognize hazardous conditions and the signs and symptoms of workplace-related illnesses and injuries.
- The implemented hazard controls, including safe work procedures.
- Emergency procedures.

(5) Safety and Health Management System Annual Evaluation. There must be a system and written procedures in place to annually evaluate the safety and health management system.

The annual evaluation must be a critical review and assessment of the effectiveness of all elements and sub-elements of a comprehensive safety and health management system.

An annual evaluation that is merely a workplace inspection with a brief report pointing out hazards or a general statement of the sufficiency of the system is inadequate for purposes of VPP qualification.

Note the following important points about the annual evaluation:

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

(b) Site employees may conduct the annual evaluation with managers, qualified corporate staff, or outside sources that are trained in conducting such evaluations.

(c) At least one annual evaluation and demonstrated corrective action must be completed before VPP approval.

(d) The annual self-evaluation must be included with the participant's annual submission to the Division of Occupational Safety and Health, VPP Specialist. Appendix I provides a suggested format.

B.3. Worksite Analysis. A hazard identification and analysis system must be implemented to systematically identify basic and unforeseen safety and health hazards, evaluate their risks, and prioritize and recommend methods to eliminate or control hazards to an acceptable level of risk.

Through this system, management must gain a thorough knowledge of the safety and health hazards and employee risks.

The required methods of hazard identification and analysis are described below:

a. Conduct Baseline Safety and Industrial Hygiene Hazard Analysis. A baseline survey and analysis is a first attempt at understanding the hazards at a worksite. It establishes initial levels of exposure (baselines) for comparison to future levels, so that changes can be recognized.

Systems for identifying safety and industrial hygiene hazards, while often integrated, may be evaluated separately.

Baseline surveys must:

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

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

(3) Identify and document safety and health hazards that need further study.

(4) Survey the entire worksite, and indicate who conducted the survey, and when it was completed.

The original baseline hazard analysis need not be repeated subsequently unless warranted by changes in processes, equipment, hazard controls, etc.

b. Hazard Analysis of Routine Jobs, Tasks, and Processes. Task-based or system/process hazard analyses must be performed to identify hazards of routine jobs, tasks, and processes in order to recommend adequate hazard controls.

Acceptable techniques include, but are not limited to: Job Hazard Analysis (JHA), and Process Hazard Analysis (PHA).

Conduct hazard analysis on routine jobs, tasks and processes that:

- Have written procedures.
- Have had injuries/illnesses associated with them or have experienced significant incidents or near misses.
- Are perceived as high-hazard tasks, i.e., they could result in a catastrophic explosion, electrocution, or chemical over-exposure.
- Have been recommended by other studies and analyses for more in-depth analysis.
- Are required by a regulation or standard.

Also conduct hazard analyses in any other instances when the VPP applicant or participant determines that hazard analysis is warranted.

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

control. If a non-routine or new task is eventually to be done on a routine basis, then a hazard analysis of this routine task should subsequently be developed.

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

e. Documentation and Use of Hazard Analyses. Hazard analyses performed to meet the requirements of 2.c. or d. above, must be documented and must:

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

(1) It must include written procedures that determine all the following:

- The frequency of inspection and areas covered
- Those responsible for conducting the inspections
- Recording of findings
- Responsibility for abatement, **and**
- Tracking of identified hazards for timely correction.

(2) Findings and corrections must be documented.

(3) Inspections must be made at least monthly, with the actual inspection schedule being determined by the types and severity of hazards.

(4) The entire worksite must be covered at least once each quarter.

(5) Top management and others, including employees who have knowledge of the written procedures and hazard recognition, may participate in the inspection process.

(6) Personnel qualified to recognize workplace hazards, particularly hazards peculiar to their industry, must conduct inspections.

(7) Documentation of inspections must evidence thoroughness beyond the perfunctory use of checklists.

g. Hazard Reporting System for Employees. The site must operate a reliable system that enables employees to notify appropriate management personnel in writing--without fear of reprisal--about conditions that appear hazardous, and to receive timely and appropriate responses.

The system can be anonymous and must include timely responses to employees and tracking of hazard elimination or control to completion.

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

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

(2) Sampling Strategy. The written program must address sampling protocols and methods implemented to accurately assess employees' exposure to health hazards.

Sampling should be conducted when:

- Performing baseline hazard analysis, such as initial screening and grab sampling.
- Baseline hazard analysis suggests that more in-depth exposure analysis, such as full-shift sampling, is needed.
- Particularly hazardous substances (as indicated by a Washington DOSH standard, chemical inventory, material safety data sheet, etc.) are being used or could be generated by the work process.
- Employees have complained of signs of illness.
- Exposure incidents or near misses have occurred.
- It is required by a standard or other legal requirement.

- Changes have occurred in such things as the processes, equipment, or chemicals used.
- Controls have been implemented and their effectiveness needs to be determined.
- Any other instance when the VPP applicant or participant determines that sampling is warranted.

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

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

(5) Communication. Sampling results must be communicated to employees and management.

(6) Use of Results. Sampling results must be used to identify areas for additional, more in-depth study, to select hazard controls, and to determine if existing controls are adequate.

(7) IH Expertise. IH sampling should be performed by an industrial hygienist, but initial sampling, full-shift sampling, or both may be performed by safety staff members with special training in the specific procedures for the suspected or identified health hazards in the workplace.

(8) Procedures. Standard, nationally recognized procedures must be used for surveying and sampling as well as for testing and analysis.

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

i. Investigation of Accidents and Near Misses. The site must investigate all accidents and near misses and must maintain written reports of the investigations. DOSH Compliance will inspect any workplace that has had a fatality and may inspect an injury requiring in-patient hospitalization of any employee.

Accident and near-miss investigations must:

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

(2) Document the entire sequence of relevant events.

(3) Identify all contributing factors, emphasizing failure or lack of hazard controls.

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

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

(6) Assign priority, time frames, and responsibility for implementing recommended controls.

(7) Make results of investigations (to include, at a minimum, a description of the incident and the corrections made to avoid recurrence) available to employees on request, although the actual investigation records need not be provided.

j. Trend Analysis. The process must include analysis of information such as injury/illness history, hazards identified during inspections, employee reports of hazards, and accident and near-miss investigations for the purpose of detecting trends.

The results of trend analysis must be shared with employees and management and used to direct resources; prioritize hazard controls; and determine or modify goals, objectives, and training to address the trends.

B.4. Hazard Prevention and Control. Management must ensure the effective implementation of systems for hazard prevention and control and ensure that necessary resources are available, including the following:

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

b. Hazard Elimination and Control Methods. The types of hazards employees are exposed to, the severity of the hazards, and the risk the hazards pose to employees should all be considered in determining methods of hazard prevention, elimination, and control. In general, the following hierarchy should be followed in determining hazard elimination and control methods.

When engineering controls have been studied, investigated, and implemented, yet still do not bring employees' exposure levels to below WISHA permissible exposure limits, or when engineering controls are determined to be infeasible, then a combination of controls may be used.

Whichever controls a site chooses to employ, the controls must be understood and followed by all affected parties; appropriate to the site's hazards; equitably enforced through the disciplinary system; written, implemented, and updated by management as needed; used by employees; and incorporated in training, positive reinforcement, and correction programs.

(1) Engineering. Engineering controls directly eliminate a hazard by such means as substituting a less hazardous substance, by isolating the hazard, or by ventilating the workspace. These are the most reliable and effective controls.

(2) Protective Safety Devices. Although not as reliable as true engineering controls, such methods include interlocks, redundancy, failsafe design, system protection, fire suppression, and warning and caution notices.

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

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

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

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

d. Occupational Health Care 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 lung function tests must be included.

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

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

e. Preventive Maintenance of Equipment. A written preventive and predictive maintenance system must be in place for monitoring and maintaining workplace equipment.

Equipment must be replaced or repaired on a schedule, following manufacturers' recommendations, to prevent it from failing and creating a hazard.

Documented records of maintenance and repairs must be kept. The system must include maintenance of hazard controls such as machine guards, exhaust ventilation, mufflers, etc.

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

This system must include methods for:

- Recording and prioritizing hazards, **and**
- Assigning responsibility, time frames for correction, interim protection, and follow-up to ensure abatement.

g. Disciplinary System. A documented disciplinary system must be in place. The system must include enforcement of appropriate action for violations of the safety and health policies, procedures, and rules. The disciplinary policy must be clearly communicated and equitably enforced to employees and management. The disciplinary system for safety and health can be a sub-part of an all-encompassing disciplinary system.

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

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

B.5. Safety and Health Training.

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

b. Training required by WISHA standards must be provided in accordance with the particular standard.

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

d. New employee orientation/training must meet the requirements of the Accident Prevention Program core rule, WAC 296-800-140.

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

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

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

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

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

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

C. MERIT PROGRAM

The Merit program recognizes worksites that have good safety and health management systems but must take additional steps to reach Star quality.

If DOSH determines that an employer has demonstrated the commitment and possesses the resources to meet Star requirements within 2 years, the employer may enter the Merit program with set goals for reaching Star.

C.1. Injury and Illness History Requirements.

The TCIR and DART rate must be calculated and compared to the industry average in the same manner as for the Star Program, **except** that the 3-year rates do not have to be below the industry average.

The following restrictions apply:

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

b. DOSH must determine that it is programmatically and statistically feasible for the site to reduce its TCIR and DART rate to below the industry average within 2 years.

C.2. Comprehensive Safety and Health Management System Requirements.

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

C.3. Merit Goals.

If the Onsite evaluation team recommends that a site participates in the Merit program, the site must then complete a set of goals in order to maintain Merit status and qualify for the Star Program.

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

b. Merit goals must include methods for improving the safety and health management system that will address identified problem areas.

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

d. Reducing a 3-year TCIR or DART rate to below the national average is not, by itself, an appropriate Merit goal. Merit goals must focus on correcting safety and health management system deficiencies underlying the high rate.

C.4. Term of Participation.

a. The length of term depends on the time needed to accomplish Merit goals. However, initial approval to Merit status will be for a single term not to exceed 3 years.

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

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

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

D. RESIDENT CONTRACTORS

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

- The host site must be an approved VPP (Star or Merit) site before the resident contractor may submit its application. In addition, the resident contractor must have a minimum of 12 months on-site before submitting an application.
- The type of work being conducted by the resident contractor must be evaluated to determine the appropriate industry classification.
- If the resident contractor is fulfilling a function that would normally be filled by the host (such as general maintenance), then the resident contractor should be assigned the host's industry classification.
- If the resident contractor is independent and would not normally be associated with the host site's industry or service, then the contractor's own industry classification should be assigned.

- If the resident contractor has fewer than 3 years on site, apply the injury and illness history requirements for construction.
- The resident contractor's participation, once approved, is contingent upon the host site's continued participation in VPP.
- A general contractor (GC) of a large construction project at an approved VPP site can submit a separate application for VPP. The requirements for construction apply.

E. VPP REQUIREMENTS FOR THE CONSTRUCTION INDUSTRY

A construction applicant must be the general contractor (GC), owner, or an organization that provides overall management at a site, controls site operations, and has ultimate responsibility for assuring safe and healthful working conditions at the site.

The project must have been in operation for at least 12 months prior to approval.

Construction applications cover individual sites only.

E.1. Injury/Illness History. To qualify for the Star Program, the site's TCIR and DART rate (including all subcontractor workers at the site) from site inception until time of application must be below the national average.

If a site has rates which exceed the BLS average for its NAIC, then the general contractor may qualify for the Merit program if the company-wide 3-year TCIR and DART rate are below the national average.

E.2. Comprehensive Safety and Health Management System Requirements. The requirements for the Star and Merit programs are identical to those of VPP generally, with the following **additions**:

a. Safety and Health Management System Evaluation. The evaluation must be conducted annually and immediately prior to completion of construction.

IMPORTANT: If a construction company does not provide the final evaluation, DOSH will not consider subsequent VPP applications for other sites operated by that company.

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

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

d. Notice of VPP Application. General Contractors must make subcontractors and their employees aware of the VPP application or participation and of the subcontractors' and employees' rights, roles, and responsibilities.

The GC must provide evidence that all subcontractors at the site recognize these conditions. This evidence may include:

- The contractual agreement.
- A written statement of willingness to cooperate.
- Attendance at safety meetings.
- Orientation sessions for incoming subcontractor employees.

e. Employee Involvement. Employees at construction sites must be involved in safety and health at the site, to the degree practical based on the time they will spend on the 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 DOSH expects.

The onsite evaluation team will judge the sufficiency of employee involvement through interviews and observations.

CHAPTER 4

APPLICATION REVIEW

A. INTRODUCTION

DOSH's first step in determining an applicant site's eligibility for the VPP is to review the written application. Review involves the following three steps:

A.1. Eligibility Determination. The VPP accepts applications from general industry in the private and public sectors and construction worksites that have implemented a safety and health management systems meeting the requirements of RCW 49.17.

VPP accepts applications from owners and site managers who control worksite operations and who have ultimate responsibility for assuring safe and healthful working conditions at the worksite.

VPP also accepts applications from resident contractors at participating VPP worksites.

A.2. Review of Application. The review will determine whether the applicant appears to meet the requirements for the program.

A.3. Verification and Assessment. If the written description of the site safety and health program meets the requirements, then the pre-approval onsite review can be scheduled. The pre-approval onsite review assesses the worksite and verifies that VPP requirements are met.

B. DOSH ROLES AND RESPONSIBILITIES

The primary DOSH roles involved in application review are the VPP Specialists and the DOSH Consultation Manager.

B.1. VPP Specialist(s). The VPP Specialists are responsible for overall management of the VPP application review process. The VPP Specialists are also responsible for:

a. Maintaining current VPP application information and promotional materials.

b. Responding to requests for program information and application assistance (including referral to the Voluntary Protection Program Participants Association (VPPPA) Mentoring Program).

c. Assembling staff for the application review.

d. Assembling the onsite team.

e. Scheduling the onsite review and serving as the Team Leader or Backup Team Leader.

f. Maintaining a state office log of applicants.

g. Summarizing the 5-year history for each applicant using the WISHA Information Network (WIN) with special note of complaints, fatalities, citations, and pending enforcement action such as a long-term abatement agreement or contest.

h. Communicating with appropriate Regional Compliance staff for a current update on the applicant.

i. Establish a participant file for all materials, records, and communication related to the applicant or participant.

B.2. DOSH Consultation Manager. The DOSH Consultation Manager is responsible for the following actions:

a. After scheduling the VPP onsite review, the Team Leader requests that the DOSH Consultation Manager and Compliance Manager defer any programmed inspection until a decision concerning the site's VPP participation has been made. The worksite must be removed from the programmed inspection lists no more than 75 days before the scheduled onsite review.

b. Provides trained regional staff to participate on VPP onsite review teams when requested. Each VPP review team usually includes one Safety and Health Specialist and one Industrial Hygienist.

C. APPLICATION RECEIPT

C.1. Application Records.

a. State Record. The VPP Specialist maintains a current record of all complete applications received, which includes the following information for each application:

- Date VPP application received.
- Corporate or company name, site, and VPP representative.
- Site location(s) and name of site representative(s).

- Number of employees at site.
- Type of industry.
- Location of site by Region.
- Dates of onsite review (scheduled or accomplished).
- Names of onsite team members.
- Current status of application.
- Approval date.
- Evaluation date(s).
- Presentation ceremony date, if any.
- Withdrawal or termination date, if any.

b. The VPP Activity Log. The VPP Specialist maintains a VPP Activity Log, updated monthly.

C.2. Application Notifications and Copies. The VPP Specialist is responsible for the following activities:

a. Inform the applicant within 15 working days that the application has been received, and provide the name and telephone number of the VPP Specialist or his/her assigned designee, or notify the applicant that an application will not be accepted if there is any open investigation and pending or open contested citations.

b. Log in complete applications on a Monthly VPP Activities Log submitted to the Special Employer Programs Manager, OSHA Region X, and included on the G: drive of the L&I server.

A complete application must contain, at a minimum, the following:

- All information requested in the VPP Application Guidelines.
- All assurances.
- A formal signed statement by all applicable collective bargaining agents, where appropriate.

c. If an application is considered incomplete, notify the sender about the application deficiencies and the 90-day time frame the sender has in which to submit additional material to complete the application.

- The application is considered inactive until the missing items are submitted, or for 90 days, whichever comes first.
- If all the requested items have not been submitted within 90 days, the application will be returned to the sender with notice to resubmit with complete information.

d. Reserve the unmarked original application, to be placed in the public information file if the application is approved.

D. APPLICATION REVIEW PROCEDURES

All applications received go through the following process:

D.1. Cursory Review. Upon application receipt, the Special Employer Programs Manager designates a Team Leader to review the application. The Team Leader initially reviews the application to discover any major deficiencies, and notifies the applicant that the identified deficiencies must be corrected before the application can be accepted. The applicant has 90 days to provide the missing material or information.

D.2. Timely Review. Once the Team Leader accepts an application as complete, and logs it in, the Team Leader must thoroughly review the application within 30 working days. Team members review the application prior to the scheduled onsite review, if possible.

D.3. Mentoring Evaluation. If the site has been mentored during the application process, the Team Leader notes the effectiveness of that mentoring, based on program review, and provides feedback to the VPPPA either by telephone or in writing.

D.4. OSHA 300 Log Verification. The Onsite Team verifies the OSHA 300 Log onsite. During the application process, the Backup Team Leader averages the last 3 complete calendar years' injury and illness incidence rates, and similarly averages the lost workday cases for the site's regular employees **and** for all applicable contractors' employees who worked 1000 or more hours at the site in any calendar quarter.

The site must provide this data for at least the last 12 months, and the data must be for all employees of contractors and subcontractors on the site.

D.5. Rates Calculation and Comparison for Injury/Illness/Lost Workdays.

a. Three-year average rates are calculated as $(N/EH) \times 200{,}000$ where:

N = number of recordable injuries and illnesses (or lost workday cases) during the last 3 full calendar years.

EH = total hours worked by all employees during the last 3 full calendar years.

$200{,}000$ = base hours for 100 full-time equivalent workers.

b. DOSH compares the 3-year average site rates to the most recent published BLS annual 3-year average injury rates for the appropriate North American Industry Classification (NAIC), "Occupational Injuries and Illness in the United States by Industry," for the site's regular employees and the appropriate NAIC (where the largest number of hours are worked) for the contract employees.

c. DOSH uses injury and illness tables. Appropriate data are in columns entitled "Total Cases" (TCIR) and "Total" (DART). DOSH uses the three most recent years shown in the tables, and averages these BLS rates.

d. If a public sector applicant has an experience factor, or if their workers' compensation rate is at or below the state average for their risk class, DOSH uses their experience factor. This information is available from the VPP Specialist through LINIIS, a system available to the compliance and consultation staff within DOSH,

e. The Backup Team leader is responsible for reviewing OSHA 300 data. Occasionally, when thorough advance analysis is warranted by the Backup Team Leader, the applicant may be requested to submit copies of the OSHA 300 Log for the most recent 3 years **prior to** the onsite visit. This is normally done when numbers don't coincide or computations don't agree.

f. The Backup Team Leader, and possibly the Onsite Team, screen the log carefully to identify patterns and problem areas and to determine suggested corrective actions.

g. At other times, if it appears warranted (e.g., for resource considerations), the Team Leader, Backup Team Leader, or Onsite Team member(s) may make arrangements to go to the site solely to review and verify the OSHA 300 Log in advance of the onsite visit.

D.6. Application Discussion. The Backup Team Leader and the Special Employer Programs Manager, where applicable, discuss the application and assist the Team Leader in preparing a list of questions and other needed documents to complete the application.

This list needs to contain only items necessary to determine initial eligibility. (See Appendix A) It is important to minimize the burden on the applicant.

D.7. IH Sampling and Surveying Records. It is not required but the regional hygienist may find it desirable to review records of industrial hygiene sampling and surveying before the onsite review. This decision depends on the materials and work processes at the site.

D.8. Assignment to Appropriate VPP Category (Merit or Star). The appropriate VPP category may need discussion with the applicant. For example, an applicant may have recently begun a vigorous safety and health program, but may not have all the required qualifications for Star. The VPP would contact such an applicant about the possibility of qualifying for Merit level.

D.9. Telephone or E-mail Contact. The Team Leader must telephone or e-mail the site's VPP Representative to discuss the list of questions and needed documents, and:

a. Come to agreement on which items must be sent to DOSH, and which items can await the onsite review.

b. If the application is from a member of the chemical industry, determine whether any of the chemicals from the "List of Highly Hazardous Chemicals" are produced, used, or stored at the site.

(1) Inform chemical plants that manufacture or use (or have as a by-product at any stage of the process) a high hazard chemical as defined by the Process Safety Management of Highly Hazardous Chemicals Standard that they must be able to demonstrate, through documentation and physical evidence, that they have conducted their own review of chemical hazards, and that such review, at a minimum, conforms to the Process Safety Management Standard.

(2) The onsite review cannot be scheduled until the applicant site management verifies their documentation demonstrating that their chemical hazards review has been conducted, and submits any requested information relating to the review to the Team Leader.

(3) Most well-managed chemical plants will have their own on-going studies, with documentation of hazards from onsite high-risk chemicals that conforms to the Standard. If documentation is not available, the Team Leader informs applicant site management that no onsite review will take place until the Process Safety Management review is conducted and documented.

D.10. Confirmation of Agreement. The Team Leader sends a follow-up note to the applicant, listing the items agreed to on the telephone and/or via e-mail. This correspondence provides a record of the informal telephone/e-mail agreement.

D.11. Decision to Conduct the Pre-Approval Onsite Review. When the application is complete, the Team Leader and Backup Team Leader confer with the Special Employer Programs Manager and make a decision, within 20 working days of the application becoming complete, about whether to schedule an onsite visit.

- All reviewers must be consulted and must be in agreement that scheduling a pre-approval on-site visit is appropriate.
- No onsite review can be conducted until pending enforcement action, if any, has been closed.

If it is clear that the applicant cannot qualify for the VPP program, the Team Leader asks that the application be withdrawn, and explains why. See also Section E., WITHDRAWAL OF THE APPLICATION, below.

It is important that the applicant understands that if no written notice of withdrawal is received within 30-days of withdrawal being suggested, the application will be officially denied by DOSH, as if the application had been processed and the site had failed.

If the applicant does not withdraw the application, the Team Leader returns the original application with a letter indicating the reasons DOSH denied the application. The Team Leader also sends a copy of this letter to OSHA. The VPP

Specialist keeps a copy of the denial letter and a marked-up copy of the application in the VPP archive file for one year.

D.12. Onsite Review Notification. When the date of the onsite review has been established, the Team Leader notifies OSHA through the Monthly VPP Activity Log for proper updating of National Office records.

The VPP Specialist works with the Regional Compliance Manager to ensure that the applicant has programmed inspections deferred effective no more than 75 days prior to the scheduled onsite review. (See Chapter 6, Section C.4., for removal from targeting lists after application approval.)

E. WITHDRAWAL OF THE APPLICATION

An applicant may withdraw the application for any reason, effective with notification to a VPP Specialist or the Special Employer Programs Manager. The withdrawal is effective on the date the notification is received.

E.1. Discovery of Cause. The VPP Specialist must determine the cause of withdrawal.

E.2. Providing Acknowledgment. The VPP Specialist acknowledges the withdrawal of the application with a letter giving the official withdrawal date. The letter includes a statement that DOSH will entertain re-application if the applicant's circumstances change.

E.3. Application Return. The original application must be returned to the applicant within 10 working days after notification of withdrawal is received.

If the application was accepted and logged, the VPP Specialist keeps a marked-up working copy of the application for one year, as a reference for responses to questions that may arise about how the application was handled. No other copies will be kept.

If withdrawal occurs before the application has been accepted, the original application is returned and no copies kept.

CHAPTER 5

VPP ONSITE REVIEW

A. INTRODUCTION

The onsite program review, which is carried out by a team of DOSH staff acting in a non-enforcement capacity, is a thorough review of the site's management of its safety and health program. An onsite review will be conducted prior to any approval recommendation for new applicants and recertifications.

It is conducted to accomplish the following:

- **Verification.** Verify the accuracy of the information supplied in the application.
- **Audit.** Identify both strengths and weaknesses of the applicant's safety and health program as currently implemented at the site. Ensure that all necessary safety and health program elements are operating and that procedures are in place for thorough follow-up.
- **Quality Assessment.** Determine if the applicant's program provides sufficient protection for the safety and health hazards and potential hazards of the site.
- **Recommendation.** Provide information that supports the recommendation and that the DOSH Assistant Director, and the Director of Labor and Industries, will need in making the approval decision.

B. PREPARATION FOR ONSITE EVALUATIONS

An onsite evaluation must be scheduled by the Team Leader in concert with the site contact and the team that will be doing the evaluation.

B.1. New Applicants. For new applicants, an on-site evaluation must be conducted within six months of receipt of a completed application.

B.2. Recertification. For recertification, onsite evaluations must be conducted as follows:

a. Star Participants.

The first reevaluation must be conducted between 30 and 42 months following initial approval. Thereafter, reevaluations must be completed within 60 months of the preceding evaluation.

b. 1-Year Conditional Star Participants.

The reevaluation must be conducted within 15 months (90 days plus 1 year's experience operating at Star level) after the participant was placed on conditional status.

c. Merit Participants.

The first reevaluation must be conducted 12-24 months following initial approval (18 months preferred). If the participant is re-approved at the Merit level, another reevaluation must be performed at the end of the participant's Merit term.

C. ONSITE REVIEW (SUMMARY)

This is a brief summary of onsite review. A full description follows in section D.

C.1. General. The onsite program review is intended for use only when the applicant has provided evidence of meeting the qualification requirements.

C.2. Pre-visit Planning. A review team consisting of a Team Leader and additional safety and health experts, as appropriate, needs to be appointed at least one month in advance.

The following aspects of the pre-visit planning must be attended to:

a. If necessary resources are not available in the Region where the applicant is located, the Team Leader requests assistance from other regions in locating qualified team members.

b. The Team Leader must make all necessary arrangements with the applicant.

c. If the onsite visit calls for access to employee exposure and medical records as defined in WAC 296-802-900, the VPP Specialist or other team member must follow the requirements of WAC 296-802-50005 and 50010, or of any subsequent policy document which replaces it. The team leader must submit their medical access orders at least three weeks prior to a scheduled onsite evaluation or recertification, and maintain a copy in the applicant or participant file.

d. The team members must, whenever possible, review the application well in advance and prepare for the onsite review. Where application bulk and/or disbursement of team members makes advanced review of the application difficult, the application may be reviewed onsite at the start of the visit by those team members who were unable to review it in advance.

e. The Team Leader must conduct a team strategy meeting prior to the onsite review. This meeting needs to include a review of the pertinent VPP requirements, policies, and procedures (See Appendix C). The meeting may be conducted in person or by telephone.

C.3. Onsite Visit. The onsite visit consists of the following elements:

a. Opening Conference. Hold the opening conference with company officials and employee representatives, to include the collective bargaining unit if applicable.

b. Document Review. Verify the information submitted in the application. Review any additional documents as necessary. (See Figure 5-1 at the end of this chapter.)

c. Plant Walk-Through. Ensure the program is operating as described and that any serious hazards found are corrected as soon as possible, or that plans to correct the hazards are prepared while the team is onsite.

d. Employee Interviews. Conduct interviews with a wide variety of company and contract employees to determine their level of involvement in and perceptions of the site safety and health program. (See sample questions in Appendix D.)

e. Closing Conference. Brief site representatives at the conclusion of the onsite review. Include a presentation of findings and recommendations and a copy of the draft pre-approval report, if prepared at the site. At a minimum, provide a list of any 90-day items at the closing conference.

D. ONSITE REVIEW (DETAILED)

This section expands on the process summarized in Section C of this chapter.

D.1. Size and Composition of the Review Team. Team composition will depend upon the size of the site and the number and complexity of the potential hazards.

a. Personnel. Onsite review teams will include:

(1) A Team Leader who possesses:

- Thorough knowledge of the VPP policy as outlined in this manual.
- Good knowledge and understanding of safety and health program management.
- Experience and/or training as defined under Team Leader in the Definitions.

(2) A backup Team Leader who is:

- A trained Team Leader providing expertise and assistance to the Team Leader, at a site that is large and/or has complex processes;

  or

- A person in training to be a Team Leader.

(3) A safety engineer or specialist.

(4) An industrial hygienist.

(5) Additional safety and/or health specialists, with expertise relating to the site's industry, especially when DOSH has a special emphasis program targeting this industry.

Examples include persons trained in Process Safety Management for highly hazardous chemical industries, and occupational health professionals where medical surveillance and management of employees is under review.

b. Factors Affecting Team Size and Length of Time Onsite. Where the site is large and/or the processes are complex, additional safety and health team members may be necessary. For example, a well-qualified backup Team Leader can ensure a more thorough site review.

c. Onsite Team Members. The Team Leader, Special Employer Programs Manager, and DOSH Regional Consultation Managers normally select team members.

d. Team Leader Responsibilities. The Team Leader's onsite review responsibilities are spelled out in each section of the review process. (See Appendix C.) The Team Leader may delegate some of these responsibilities to the Backup Team Leader.

D.2. Arrangements. The Team Leader coordinates arrangements for the program review.

a. Schedule. The Team Leader must contact the applicant to explain the process of the review and to determine a convenient time to conduct the onsite program review.

(1) The Team Leader needs to select several dates convenient for the review team and suggest these dates to the applicant.

(2) The duration of the visit depends on the size and complexity of the site:

- Estimating the duration of the visit needs to take into account time needed to hold the opening conference, conduct the onsite review, prepare the draft pre-approval report, and carry out the closing conference.
- Onsite visits usually average about 3 to 5 days, including travel time, unless the site has some unusual characteristics, e.g., the site is large and/or the processes are complex.
- Chemical plants producing, using, or storing one or more "highly hazardous chemicals" may require additional time onsite.

b. Documentation. The Team Leader needs to inform the site representative of the suggested list of items to have ready for the team's review; this list will be sent in advance of the meeting date. (See Figure 5-1, at the end of this chapter, for a suggested list.)

Additional documentation arrangements may include:

- Ensuring an opportunity to review contractors' documents and records;
- Requesting facilities such as a room for the team, and an interview room;
- Requesting submission of OSHA 300 Logs prior to the onsite review, if appropriate.

c. **Employee Representation.** Where collective bargaining agents are involved, the Team Leader must tell the site representative that such agents must be included in the initial and closing conferences and be allowed the opportunity to accompany DOSH on the site walk-through. Similar employee involvement also needs to be encouraged at non-collective bargaining sites.

D.3. Advance Planning Responsibilities for Onsite Team Members.

a. **Knowledge of Industry.** The team members must become as familiar as possible with the type of industry and its associated hazards.

b. **Detailed Application Review.** Team members must, whenever possible, review the application carefully well in advance of the onsite review.

c. **Information Needed Onsite.** Team members must review the VPP on-site question tool to ensure they understand what information and data they are responsible for obtaining during the site visit.

For chemical plants with highly hazardous chemicals, documentation and physical evidence must be obtained, showing that the applicant site has done its own review of chemical hazards, and that this review is at least as effective as the review required by the Process Safety Management standard.

d. **Checklist.** Team members must carefully review all elements of the safety and health program descriptions submitted with the application, and compile a checklist to use during the onsite documentation review and production area visit.

e. **Onsite Questions.** Team members must carefully review questions prepared by the Team Leader regarding the site, and add questions as appropriate. (See Appendix D, Employee Interview Questions).

f. **Special Equipment.** Team members must equip themselves with special equipment (safety shoes, PPE, etc.) required for the onsite visit.

NOTE: Some special equipment may be supplied by the site as determined by the Team Leader.

D.4. Strategy Meeting. Shortly before the scheduled review, the Team Leader must confer with all the team members to plan the onsite review and to make assignments.

a. **Timing.** The Team Leader must carefully plan the time onsite.

b. **Briefing.** The Team Leader must review onsite procedures and the application for the site

c. **Program Evidence.** The Team Leader must ensure that the team members recognize the signs of a safety and health program which is effective in practice, for example:

- The employer is providing employees a workplace free from recognized hazards that are causing, or are likely to cause, serious injury or death
- Employees are aware of hazards and what management has done to control them;
- Employees are knowledgeable about how to protect themselves and how to notify management about safety and health concerns; and,
- Management is fully involved in hazard prevention and control and these efforts are thoroughly tracked to completion.

d. Assignments. The Team Leader makes specific onsite assignments to ensure a comprehensive review and to take advantage of each team member's expertise. The support role of the Backup Team Leader must be clearly communicated.

E. OPENING CONFERENCE

The opening conference with the employer and employee representatives sets the stage for the onsite review, letting everyone know what to expect and what assistance will be needed and from whom. During this session the team needs to be able to get a sense of the extent of commitment that exists at the worksite.

E.1. Atmosphere. Team members needs to establish a cooperative atmosphere.

E.2. Discussion Topics. The Team Leader must do the following:

a. Describe DOSH's Balanced Approach. Describe DOSH's view of the Voluntary Protection Program and VPP's importance to DOSH's balanced approach.

b. State Review Goals. Clearly state that the goals of the onsite review are to:

(1) Verify the information submitted in the application.
(2) Assess the extent of the implementation of the site safety and health program.
(3) Assess the adequacy of the safety and health program for the potential hazards at the site.

c. Give Full Disclosure Assurance. Indicate that DOSH expects that the site will adhere to the signed full disclosure assurance included in the application.

d. Explain the Schedule and Stages. Briefly cover what activities the program review will entail and the approximate timing of each stage.

e. Make Arrangements for Interviews. Make arrangements to conduct private interviews with labor-management, safety committee members, supervisors, maintenance personnel, record keepers, occupational health and safety staff, and randomly selected employees including contract employees (if any).

f. Explain Addressing Discovered Hazards. Explain the differences between the onsite review that will be conducted and an inspection or consultation visit, and explain the correction requirements for any hazards noted.

Make it clear that:

(1) Immediate correction is expected.

(2) For any hazards that cannot be corrected before the team leaves the site, a follow-up letter to the Team Leader indicating the corrective action taken is required. The Team Leader or a team member may return to the site to check the correction.

(3) If site management refuses to correct a situation where the safety and health of employees is endangered, that situation will be referred for enforcement action using the procedure in Section L, below.

g. Explain Status Updates. Explain that the team will keep the applicant regularly updated on the progress of the review and that when the review is completed, the team will discuss its findings with the applicant to clarify any questions or concerns during the closing conference.

F. DOCUMENTATION

F.1. Recordkeeping. The Onsite Team must review the following applicant documentation:

a. OSHA-300 Log Review. A careful review of the OSHA-300 log is important, since injury experience is a qualification for approval and will subsequently be used in evaluating site performance and VPP effectiveness.

The team uses the following guidelines in reviewing documentation, as appropriate to the site:

b. General Industry. For general industry, the most recent three calendar years and the current year-to-date are reviewed for the site's regular employees (including temporary employees) and for all applicable contractors (site hours only) whose employees work 1000 or more hours on the site in any calendar quarter of the year.

(If the approval recommendation will not be made until the next calendar year, the year-to-date rates must be updated at the time of recommendation to include the last full calendar year before approval.)

c. **Public Sector.** In addition to reviewing the OSHA-300 log, the worksite's experience factor will be verified by the VPP Specialist. The experience factor can be found on LINIIS by pulling up the site information on SAF2 or RPOL.

d. Review the OSHA-300 logs for the most recent complete 3-year and current year-to-date periods to see that the logs have been properly maintained for the entire period.

(1) The dates of entry need to be reasonably continuous. If major gaps of time appear, they must be discussed with the record keeper, and an adequate explanation received.

(2) The classification of injuries must be consistent with the BLS definition of recordable injuries. This can be determined by reviewing the description provided on the form and discussing the criteria used for determining recordability with the record keeper.

NOTE: On a general industry site, the site records of all contractors whose employees worked 1000 or more hours in any one (1) calendar quarter on that site at any time during the past three (3) full calendar years and/or in the current year must also be reviewed.

e. Verify that lost workday case entries are recorded properly by reviewing the company's and contractor's OSHA-300 forms or their substitute (workers' compensation or insurance reports of injury).

Also, randomly chosen, personally identifiable health records must be reviewed. Compare each of these types of injury reports with OSHA-300 log entries to assess the accuracy of classification and the thoroughness of log maintenance. Another verification source is the health unit daily log or the first aid station log.

f. If possible errors or omissions are found, discuss them with the record keeper to determine whether changes in the OSHA-300 log entries are needed. Once agreement is reached, the record keeper makes any necessary changes. Bear in mind that DOSH's experience indicates that employers may over-record as often as they may under-record.

g. Based on the verified OSHA-300 log, including any changes made, calculate injury incidence and lost work day rates to the nearest tenth. For general industry, calculate the site rates and contractor(s) rates separately. Appendix A gives examples for these calculations.

h. In like manner, calculate the rates for the current year to ensure they are in line with the previous years. If approval recommendation will not be granted until the next calendar year, the year-to-date rates must be updated at the time of recommendation to include the last full calendar year before approval (as stated above in a.(1)). It is not necessary to return to the site to verify the remainder of the year-to-date information required.

i. The Onsite Team must verify the applicant's rates for the applicant to enter into any VPP program.

NOTE: For evaluation at 3- and 5-year points after the applicant has become a VPP participant, worksites may be eligible to use the best 3 out of the most recent 4 years for calculating incidence rates.

F.2. Review of Safety and Health Program Documentation. The applicant must provide some documented means of determining potential health hazards (such as a basic industrial hygiene survey or chemical process hazard analysis) and monitoring records required by relevant health standards or the site health program to show that the applicant adequately assesses potential/actual exposures.

Check the documentation of the hazard communication system to ensure that worksite personnel are alert to chemical products used and/or stored at the worksite. The documents listed below must be part of the safety and health management system. The documentation must be site-specific.

a. Injury/Illness data. Review data for the most recent 3-year period and for applicable contractors.

b. Incentive Programs. The review of incentive programs must focus on ensuring that any incentive program in operation is not based solely on providing awards to employees for the reduction or absence of safety and health incidents. (See Chapter 2, Section C)

c. First reports of injury. Review for completeness and accuracy.

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

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

f. DOSH Compliance will inspect any workplace that has had a fatality and may inspect an injury requiring in-patient hospitalization of any employee.

F.3. Safety and Health Committee Records. Check the minutes and inspection records of the safety and health committee to verify required committee composition and activities. For other programs, review joint committee minutes for additional information concerning the level of employee involvement.

F.4. Complaint Records. Review a sample of the reports of hazards made by employees to verify that the system works as described, that cases are well documented, and that responses seem reasonable and timely. If an oral notification system has been used, review the written notification and tracking system that is planned for use during VPP participation.

F.5. Chemical Process Systems Documentation. For chemical plants producing or using highly hazardous chemicals, review documents and process monitoring systems describing all the following:

- Identification of critical failure points
- Planned redundant protective systems
- Control system for design or procedure notification

- Emergency procedures for failures of control systems
- Procedures for changing back to normal operations after emergencies, **and**
- Preventive maintenance systems to ensure that the site is in compliance with the process safety management standard.

For chemical industry plants producing or using highly hazardous chemicals, the site must be in conformance with the process safety management standard.

F.6. Safety and Health Program. Documentation is required for all aspects of the program already in place, such as inspections, accident investigations, and the PPE program.

Team members must have a prepared list of questions or topics to address based on review of the application.

F.7. Line Accountability. The Team Leader or his/her designee must review manager and supervisor performance records, in a way that protects confidentiality and anonymity.

G. SITE WALK-THROUGH

G.1. Purpose. The VPP walk-through is intended to determine whether the safety and health program is operating as described in the application, and whether it is adequate.

G.2. Scope. The team must walk through enough of the site to understand the type of work performed and to gain a general sense of overall work conditions. The team may choose to conduct an orientation tour on the first day of the onsite visit.

The team must review work performed by contract workers to ensure that they are provided equally effective protection to that provided to employees.

The safety and health specialists must examine the site in sufficient detail to understand the types of hazards and potential hazards that exist and to determine that such hazards and potential hazards are addressed systematically by the safety and health program.

G.3. Problem Areas. Special attention needs to be given to areas if repeated problems are reflected, and if repeated hazards are identified through inspection records, the OSHA-300 log, and/or other records of illness or injury.

The following areas may provide indications of problems:

- Baseline hazard analysis.
- Trends in injuries or illnesses.
- Employee complaints or concerns.
- Recurring accidents.
- Health hazard surveys.
- Self-inspections.

G.4. Interviews. The team must informally question randomly selected employees (including contract employees) at their work stations about prescribed work procedures, hazards to which they may be exposed, and use (including maintenance, where applicable) of personal protective equipment (See Appendix D).

G.5. Safety Review. The safety specialist member of the Onsite Team must:

a. Follow the process flow where possible.

b. Look for evidence that categories of hazards are appropriately managed. These include, but are not limited to:

- Walking-working surfaces
- Fire safety
- Storage and handling of hazardous materials
- Storage and handling of general materials
- Machine guarding
- Electrical
- Powered tools, **and**
- Welding.

c. Make notes concerning those categories that need improved attention and management.

d. Relate problems seen in the work areas to documents reviewed concerning written work procedures, emergency planning, self-inspection procedures and reports, employee complaints, or reports of hazards.

e. Make connections between information gathered during employee interviews and problems observed. Make notes about program improvements that will strengthen the management systems and prevent these problems from reoccurring.

f. Make notes about any specific hazards that must be corrected. Ensure that a responsible member of management takes notes as well, and agrees on a reasonable time period for correction.

g. Inform the Team Leader of findings at the end of each day.

G.6. Industrial Hygiene Review. The industrial hygienist member of the Onsite Team must:

a. Follow the process flow where possible.

b. Based on review of monitoring records and material safety data sheets, check known potential hazard areas for possible problems in:

- Work practices
- Ventilation
- Storage

- Handling and use of toxic materials
- Emergency equipment
- Respirator usage and maintenance; **and**
- Radiation and noise protective measures, where applicable.

c. For chemical plants producing or using highly hazardous chemicals, check process lines as necessary to verify that the documented system protection conforms to the Process Safety Management Standard.

Include questions concerning system failure procedures during informal interviews with appropriate operators.

Interview maintenance personnel using questions in Appendix D.

d. Look for evidence that hazards are appropriately managed, and that no other potential hazards have escaped management's attention.

e. Make notes concerning any problem areas that need improvement and/or hazards that require correction.

f. Relate these problems to documents reviewed concerning safe work practices and training, the respirator program, industrial hygiene sampling and analysis, and hazard communication systems, and to information gathered from employee interviews.

Make notes about program improvements that will strengthen the management systems and prevent these problems from reoccurring.

G.7. Process Safety Review. The Onsite Team must conduct a process safety review at all worksites producing and/or using highly hazardous chemicals. The review must be conducted by a Level I trained Process Safety Management Specialist in accordance with OSHA CPL 03-00-004, who must:

- Select at least one complete process, and follow the process flow.
- Review process hazard analysis and operating procedures.
- Check process lines as necessary to verify documented system protection.
- Include questions concerning system failure procedures during informal interviews with appropriate operator, maintenance, and contract personnel.
- Formally interview maintenance personnel using questions in Appendix D.
- Review training records.
- Look for evidence that all considerations have been addressed, and that management has identified, and is controlling, all potential hazards and releases.
- Make notes concerning any problem areas that require improvement, relate these problems to documents reviewed concerning process safety and training, and note program improvements, if any, needed to enhance the management systems.

H. INTERVIEWS

H.1. Purpose. Private formal interviews determine the extent of safety and health involvement and program awareness of managers, supervisors, and employees, and obtain information from them to help determine the program's adequacy.

H.2. Guidelines. Conduct formal interviews (supervisors, managers, maintenance personnel, committee members, contract workers, and other employees) in a way that minimizes work disruption. For recommended interview questions, see Appendix D.

- **a. Supervisors.** A few supervisors, the number depending on the size of the facility, must be interviewed using the interview questions in Appendix D.
- **b. Maintenance Personnel.** Normally, some maintenance personnel need to be interviewed. At chemical plants making or using highly hazardous chemicals, maintenance personnel **must** be interviewed.
- **c. The Joint Labor-Management Committee (Safety Committee).** Some committee members must be interviewed.
- **d. Record Keepers.** The person(s) responsible for keeping injury and illness records must be interviewed, using questions in Appendix D, to ensure that records are properly kept and that each record keeper understands the requirements and interpretations for the records.

H.3. Temporary and Contract Employees. Conduct formal interviews with temporary employees who are supervised by the applicant company's employees, to establish the quality of safety and health protection afforded them. This protection must be equal in quality to what is provided to the applicant's permanent employees.

H.4. Other Contract Employees. Interview contract employees who work under their own company's supervision to determine whether they are aware of all the hazards to which they are exposed, and whether they are protected by a safety and health program equal in quality to the applicant's program for employees. Where possible, interview representatives from each craft.

H.5. Occupational Health Care Professionals. If they are available, interview onsite health care professionals to determine the effectiveness of health care services, the effectiveness of timely employee access, and what type of audits are done to ensure the effectiveness of both.

H.6. Process Safety Management (PSM) Coordinator, or equivalent. Ask this person to describe their worksite's overall process safety management program.

H.7 Managers. Interview a representative number of managers at the site to determine the depth of management leadership in the safety and health program.

H.8. Other Employees. ***It is imperative to interview employees during the program review***. Employees may be able to verify aspects of the safety and health program that are not documented in writing.

a. Kinds of Employee Interviews. Use the interview questions in Appendix D to conduct the following two kinds of interviews:

(1) Informal, brief chats with employees at their work stations.

(2) More formal interviews in a private area away from the workstation.

b. Selecting the Employees. The number of employees formally interviewed depends on the time allowed for the whole review.

(1) Allow 15-25 minutes for each formal interview.

(2) Total time allotted to complete all formal employee interviews needs to be no longer than the time needed for specialist team members to complete a thorough walk-through of the work areas. At most sites, this is no more than one day.

(3) One method of selecting employees for formal interviews involves going to areas where most hazards are expected to occur and selecting employees at random. Another method is for the Team Leader to select appropriate employees at random from an employee roster.

(4) The team must be flexible in choosing a method of selection, given the characteristics of the site and any concerns expressed by the employer.

(5) Include interviews of some first-line supervisors to document the results of training.

H.9. Use of Interview Questions (Appendix D). During interviews, assure each interviewee that responses will be treated confidentially, and that the answers they give will not by themselves lead to program approval or denial.

a. Record Responses. Use the list of questions to guide the interview. This list may also be used to record employee responses to support program approval or denial.

b. Assess Question Suitability. Not every question listed need be asked, and others may be substituted or added. Judge whether particular questions are relevant to the site or the interviewee.

c. Record Other Relevant Information. Record your perceptions and any discussion of any relevant topics not indicated on the list of questions.

H.10. Evaluating Responses. Professional judgment is essential in assessing the implementation of a safety and health program.

Managerial, supervisory, and employee perceptions of worksite conditions and the safety and health program only enable the Onsite Team members to obtain general impressions rather than draw conclusions that carry the force of a valid statistical sample.

Look for an overall pattern. Employee responses that are supported by information obtained by document review, observation, or other employee interviews carry the most weight.

I. PREPARATION OF FINDINGS

I.1. Meeting on Findings. When the documentation review, the walk-through, and employee interviews have been completed, the team must meet privately to review and summarize their findings. This meeting may require more than an hour of team time.

a. Discussion of Findings and Conclusions. Allow time for complete discussion of issues, and for reaching consensus, before verbally presenting findings to the applicant and any employee representatives.

b. Discussion Guide. Appendix E may be useful as a discussion guide.

I.2. Responsibility. The Team Leader is responsible for organizing the findings from team input.

a. Organization of Findings. Organize the findings for the briefing presentation as a comparison to the requirements for program participation.

b. Hazard Correction. Technical members of the team must relate, both during this meeting and at the presentation of findings that follows, any hazards they have noted and the correction plans they have discussed with management.

In the discussions, these hazards must be related to the management systems that need improvement. The intent is to correct the hazard and also the management system that allowed the hazard to go uncorrected.

The Team provides a written list of the hazards found to the applicant at this time.

c. Examples of Problems. Where general problems identify trends, the team must be prepared to give examples.

d. Confidentiality. Care must be taken to protect the confidentiality of information provided by employees, specifically or in general, whether negative or positive. The sample of employees will be small enough to make identification fairly simple, but the sample is too small to provide anything more than confirmation of what the team has gathered from other sources.

The team must **never** base any conclusion about site safety and health on a single employee interview.

e. Consensus. The team must reach consensus on an approval recommendation. Should irreconcilable issues or perspectives arise, the team must contact the Special Employer Programs Manager for assistance, and then if there is still no resolution, the Education and Outreach Program Manager.

In the rare instance where consensus is not reached, any team member dissenting must document their opinion, together with supporting data and rationale.

Any dissenting opinion, together with any responses by other team members, must accompany the draft pre-approval report through the Special Employer Programs Manager and above, until the matter is resolved.

I.3. Guidelines. In summarizing the findings, the team must consider the following factors in relation to the requirements of the program applied for: (See Appendix E)

a. What has been observed in the work areas.

b. The kind of injuries or illnesses recorded on the OSHA-300 log and reflected in the workers' compensation data.

c. What employees, supervisors, managers, and, where applicable, committee members, have said about the safety and health program and the work conditions.

d. The degree to which implementation of the written program has been verified.

Example: The team can say without hesitation that the personal protective equipment program for safety is working well if all the following are true:

- The OSHA-300 log and workers compensation data indicate few head, foot, and eye injuries
- The team has seen documentation of training and enforcement of safety rules concerning the wearing of hard hats, safety shoes, and safety glasses
- All employees in areas requiring such equipment were wearing them
- At least some equipment shows signs of wear

I.4. Decision on Approval Recommendation. The team must choose among the following alternatives for Star or Merit:

- The applicant has met all requirements.
- The applicant meets most requirements but needs to make some changes to fully meet VPP requirements. (The applicant has 90 days in which to do so.)
- The applicant is ineligible, or does not meet enough VPP requirements to continue pursuing participation in any VPP program.

NOTE: In rare instances, serious problems are identified for which appropriate resolution cannot be agreed on between the team and the applicant by the end of the onsite visit. This condition demonstrates that the requisite cooperative attitude and management commitment to safety and health are lacking at the site, which renders the site ineligible for VPP.

The applicant must further be informed that the team will recommend that DOSH initiate an appropriate enforcement action to address the unresolved problems. (See Section L of this chapter.)

J. PRESENTATION OF FINDINGS

The findings of the team, must be presented to site management and appropriate employee representatives before the team leaves the site.

J.1. Request Additional Opportunity for Documentation, if Needed.

Before the presentation begins, the Team Leader must determine whether the team has seen everything the site representative feels is relevant, and that the representative is satisfied the team has a good picture of the safety and health program in action. The Team Leader must specifically address any unresolved issues noted by the team.

J.2. Conduct Briefings.

a. Number of Briefings. The number of briefings presented depends upon one or both of the following:

(1) The number of days allowed for the onsite visit and the complexity of processes at the site.

(2) Whether the site safety and health staff desires a more detailed briefing to be followed by a more general briefing to the site management.

b. Focus of Daily Briefings. The daily briefings center on numbers of interviews completed, hazards identified, and items, if any, that the applicant must address within the next 90 days.

c. Deferred Draft Report. Although a recommendation that the applicant be approved for Star, Merit or another VPP program will be decided before the team leaves, a draft of the final report is **not** presented during the onsite review.

The team will not provide the applicant or participant with a copy of the draft report unless it first obtain approval from the DOSH Assistant Director.

J.3. Explain Measurements and Their Ramifications.

a. Comparison to VPP Requirements. Presentation of the findings needs to give the applicant a clear idea of how the site measures up to the requirements of the program. This includes:

- Illness/injury and lost workday rates (DART, TCIR and E-Mod).
- Employee involvement in the safety and health program that has an impact on safety and health decisions.
- Degree of effective implementation of the site's program to identify and track correction of safety and health hazards.

b. Alternatives if VPP Requirements Are Not Met. If the applicant has not met one or more of the requirements of the program applied for, the team must suggest**:**

- Deferred approval. (See Chapter 6, Section D.)
- Approval into an alternative program.
- Re-application when program requirements can be met.

J.4. Address Hazards. If hazards have been noted, they must be discussed along with the agreed-upon time and means of correction. If correction cannot be accomplished immediately, site management must send a letter to the Team Leader or the VPP Specialist describing the correction when it is made, or a correction plan.

J.5. Convey the Team's Recommendation. The team's findings regarding site participation in VPP must always be discussed in terms of meeting VPP requirements and identification hazards. It is not the responsibility of the team or the Team Leader to decide whether or not an applicant will be approved. That responsibility rests with the DOSH Assistant Director and the Director of the Department of Labor and Industries. The team will not discuss its recommendation unless it obtains approval by the DOSH Assistant Director.

J.6. If Applicable, Negotiate Merit Goals. The Team Leader must negotiate Merit goals for all sites recommended for Merit approval. Any Star requirements not met at the site must be included in the goals.

NOTE: Merit goals must relate to deficiencies in Star program requirements and/or to needed improvements in the site's safety and health program. It should **not relate to meeting unmet WISHA standards**.

J.7. Explain Next Steps. If the team recommends approval, the Team Leader must explain the approval and post-approval evaluation procedures.

J.8. Demonstrate DOSH's Positive Approach. The Team Leader needs to express appreciation to site representatives for their assistance and for their interest in VPP, and to inform them that the Team Leader or his/her designee will be their contact person and, if the site is approved, will be available to assist them with their safety and health program.

K. DRAFT REPORT

The Team Leader is responsible for preparing the pre-approval report, following the format in Appendix F.

K.1. Report Drafting Assignments. The Team Leader may assign drafting of sections of the report to other team members, bearing in mind the following drafting parameters:

- Each writer must meet established deadlines.
- Each team member must review the entire draft report in its finished form.
- The draft report must reflect the consensus of the team.

K.2. Review of the Draft Report. The Team Leader must provide an opportunity for the applicant to review the draft report and suggest changes. Incorporating suggested changes rests with the Team Leader. This process normally takes place through e-mail exchanges.

L. HAZARD CORRECTION ARRANGEMENTS

- When hazards that have not been corrected by the final interview have been discussed with management, and correction plans and dates have been agreed to orally, a memorandum outlining this agreement must be written and signed by the Team Leader, and placed in the participant file.
- **This memorandum must not be part of the report or part of the public information file.**
- This memorandum and the letter from the company that describes the hazard correction or the correction plan must become part of the official file.
- The hazard correction letter and memorandum will be made available for the use of the evaluation team at a later date.
- The Region and VPP Specialist must make every attempt to resolve the problem in a manner consistent with the cooperative spirit of the VPP.
- The applicant must be informed that if a satisfactory correction of the hazard(s) cannot be achieved, the team must bring the matter to the attention of the DOSH Statewide Compliance Manager (SCM) and that enforcement action may be taken.
- If the applicant continues to refuse to correct the hazard(s), the VPP Specialist prepares a memorandum to the SCM, with a copy to the Assistant Director, DOSH, detailing the hazard(s) and the efforts made to achieve a cooperative resolution.
- If the SCM and Assistant Director decide that all cooperative efforts have failed and that DOSH must ensure hazard correction, enforcement action will be taken at the site through the Regional Compliance Manager and the CSHO Supervisor.

Figure 5-1
HELPFUL DOCUMENTATION FOR VPP ONSITE REVIEWS

Documentation such as the following may be viewed onsite. Copies are not necessarily required for the application.

1. OSHA-300 log and first-aid logs for three prior years and year-to-date (for the site and contractors).
2. Company policy, goal, and objective statements.
3. Report(s) identifying potential health hazards, and industrial hygiene sampling records, including medical surveillance records.
4. Training programs for safety and health (including committee training, where applicable), and attendance records of training sessions.
5. Self-inspection and accident reports, including tracking.
6. Forms for reports of safety or health problems/suggestions and tracking systems.
7. Records of engineering controls and Lockout/Tagout Program.
8. Preventive maintenance records.
9. Plant safety and health rules and emergency procedures.
10. PPE Program(s) and Hazard Communication Program(s).
11. Safety and health committee minutes (where applicable).
12. Evidence of line accountability (management evaluations, reward or penalty systems, budget accountability, disciplinary system, etc.).
13. Contractor Program, including contractor onsite injury records.
14. Internal audits or evaluations of the entire safety and health program, including analysis of progress toward statistical and structural/programmatic goals.
15. Hazard review and analysis documentation such as process reviews and/or job safety analyses.
16. A list of all hazardous chemicals onsite.
17. **For chemical industry and other worksites falling under the provisions of the Process Safety Management Standard:** Copies of all information required under the process safety management standard, including project reviews or analyses which examine possible failure points.
18. Any other documentation relating to the site's safety and health program.

CHAPTER 6
APPROVAL PROCESS

A. INTRODUCTION

Applications that work through the process to completion lead to a recommendation of approval, deferred approval, or denial.

However, not all applications work through the process to completion. At the end of an onsite review, the team may concur that the site is not capable of meeting and/or sustaining the requirements for participation in the VPP at this time. In this case, the Team Leader upon concurrence with Special Employer Program Manager suggests that the applicant withdraw the application, rather than continuing through the process and having participation officially denied.

This chapter sets out procedures for each circumstance when an application works through the process to completion.

B. PREPARING THE REPORT

The Team Leader is responsible for ensuring that the Pre-Approval Program Review Report (the Report) is produced in a timely manner from the team's findings, for review and approval by the DOSH Assistant Director and the Director of Labor and Industries.

If the application is approved, the report will be used for appropriate public information efforts, for removing approved VPP participants from programmed inspection lists, and for ensuring that the Team Leader provides follow-up assistance, as needed, to approved participants.

The Team Leader generally is responsible for drafting, and coordinating the team review and draft approval of, the Report, and for notifying the applicant informally of the DOSH Assistant Director's decision of approval, deferred approval, or denial.

The Team Leader is responsible for drafting the report and submitting it to the Special Employer Programs Manager and the Education and Outreach Manager for initial review and approval.

The Team Leader, as appropriate, follows the steps given below.

B.1. Compile and Review Notes. Notes taken during the interviews, onsite tour, and onsite review of documentation must be compiled and reviewed.

If the team is recommending Deferred Approval, or if the onsite tour has made it clear that the applicant site is not yet ready for program approval, the VPP Specialist (or Team Leader) follows the instructions in the sections below in either Section D, DEFERRED APPROVAL, or Section E, APPLICATION DENIAL.

B.2. Make Report Drafting Assignments. Under the direction of the Team Leader, each member of the team drafts the Report section(s) to which he or she may have been assigned. Alternatively, the Team Leader may choose to draft the entire report based on team members' notes.

B.3. Pull Together the Team Draft. The Team Leader unifies the team-written sections into a complete draft Report. The final version of this first draft must reflect a consensus of team opinion on the applicant's qualifications for approval, whether written by one or more team members.

The Report generally follows the Program Review Report Format in Appendix F, which is provided for guidance.

B.4. Confirm Team approval. The initial draft report must be approved by all team members prior to review by the applicant. Suggested changes will be reviewed and incorporated.

B.5. Incorporate Applicant Revisions as Appropriate. It is the VPP Specialist's (or Team Leader's) responsibility to prepare a revised version of the report reflecting the applicant's comments and suggestions (to the extent appropriate).

B.6. Send the Completed Report to the DOSH Assistant Director. No later than 30 working days after the applicant completes any 90-day items, the Team Leader sends (upon concurrence by the Special Employer Program Manager and the Education and Outreach Program Manager) the Report to the DOSH Assistant Director, recommending concurrence and that the Report be forwarded to the Director.

Along with the completed Report, the team sends a transmittal memorandum that:

a. Makes clear the Onsite Review Team's recommendation.

b. Suggests noteworthy aspects of the site program that the DOSH Assistant Director may wish to highlight for the Director.

c. Includes the name, title, and address of the person to whom the program approval letter should be addressed, and the name of the designated Contact Person if this person is not the VPP contact.

If there are collective bargaining agents at the site, the transmittal memorandum also includes the names and addresses of these agents.

C. APPLICATION APPROVAL

Bear in mind that although approval is seldom denied when recommended by the Onsite Review Team, this does happen, and it is the decision of the Director, not the Onsite Review Team's recommendation, that determines whether an application is approved. So, while the process described below presumes the application recommended for approval will be approved, actual approval still rests with the Director.

C.1. Approval Package. If the Onsite Review Team recommends the applicant's participation in the VPP, it is the Team Leader's responsibility to oversee preparation of the approval package.

The approval package must be sent to the DOSH Assistant Director to give notice of the review team's findings and recommendations for action on the application. It consists of the following items:

a. Executive summary of the report.

b. VPP application chronological approval process.

c. Onsite evaluation team findings, 90 day items, and recommendations.

d. Applicant's corrective action responses to all findings, 90 day items, and recommendations.

e. Pre-Approval report.

f. A memorandum to the Director, from the DOSH Assistant Director, recommending approval.

g. A letter for the Director's signature, notifying the applicant of approval, with copies for any collective bargaining agents.

C.2. Package Preparation. Preparing the approval package requires the following actions:

a. The review team's Report undergoes a final review for completeness and uniformity before it is submitted to the DOSH Assistant Director. The review is done by the Team Leader.

(1) The Team Leader ensures that the Report clearly documents the evidence on which the approval recommendation is based and on which evaluations will rely, before forwarding the Report to the DOSH Assistant Director.

(2) Although the Onsite Review Team is responsible for making the Report as complete and finished as possible, the Report does not become 'final' until it is sent to the applicant along with the Director's signed letter announcing the site's approval to participate in the VPP.

b. During the Report's final review by the team, the team must notify the Team Leader if the Report needs revisions or additions.

c. When the Report is complete, the Team Leader drafts a letter for the signature of the Director, addressed to an appropriate company official

(specified by the Team Leader after discussion with the company VPP representative).

This letter (Item 7, in C.1 above) notifies the applicant of DOSH's decision to approve the application, and shares the review team's recommendations. This letter must be personalized and must congratulate the applicant on achieving VPP participation approval. At sites with collective bargaining agents, copies of the approval letter must also be prepared for these officials.

d. The approval package undergoes a final review and approval by the Special Employer Programs Manager and the Education and Outreach Program Manager before it is submitted to the DOSH Assistant Director.

C.3. Package Approval. The following happens after the review team submits the approval package to the DOSH Assistant Director:

- No later than 15 working days after receiving the Approval Package, the DOSH Assistant Director must submit the review team's Report and the draft approval letter to the Director, along with a cover memorandum (for the Director) briefly sketching the applicant's background, review team findings and recommendations, concurrence, and requesting action on the application.
- The Director's signature on the approval letter signifies VPP approval, which becomes effective on the date of the letter.

C.4. Applicant Notification.

a. When approval is granted, the DOSH Assistant Director must immediately notify the Team Leader, who in turn immediately advises the applicant informally of the approval and the date it became effective.

b. The Team Leader then works with the department's Public Information Office to prepare a press release announcing the Director's approval of the application.

c. The Team Leader arranges for the award certificate(s) to be printed and for the appropriate flag to be available in approximately one month, to present to the approved applicant.

d. The Team Leader notifies the applicant that:

- An official letter of approval will be sent by mail immediately.
- The department will issue a press release soon.
- An award ceremony may be conducted.
- DOSH officials may be requested to make a formal presentation of the certificate and flag.

Once the approval letter is signed, the Team Leader immediately mails the letter and the final version of the review team's Report to the applicant. This

constitutes official notification that the applicant company has been accepted as a participant in the VPP, and renders the team's Report final.

The Team Leader also notifies the Regional Compliance and Consultation Program Managers by memorandum (attaching a copy of the final report and the approval letter to the site) that the applicant has been approved, and that the site must be removed from the safety and health targeting lists for the duration of its participation in the VPP.

C.5. Public Information File. Once an application has been processed and approved, the Team Leader compiles all documents relevant to the application and places them in a public information file. This file includes clean copies of the:

- VPP application and amendments.
- Pre-approval program review report.
- Director's approval letter to the applicant.

D. DEFERRED APPROVAL

If it becomes apparent at the conclusion of the onsite review that one or more qualifications still need to be met for the site to receive program approval, and that these qualifications could reasonably be met within 90 days, the Team Leader takes the following actions:

D.1. Reviews Qualifications Not Met and Establishes a Timetable to Meet Them. List the qualification(s) yet to be met, and the steps that need to be taken to achieve program approval, and review these with the applicant.

If the applicant immediately agrees to take whatever actions are necessary to qualify, set a mutually agreeable timetable within which these actions must be completed, not to exceed 90 days.

If the applicant doesn't agree to take the actions, or if the 90-day parameter can't or won't be met, see Chapter 5, Section L, for guidance.

D.2. Gives Written Notification. Notify the applicant in writing of the discussed 90-day action items necessary to meet remaining program qualifications, including a reference to the agreed-upon timetable. A copy of the notification is provided to the Special Employer Program Manager.

D.3. Defers the Report. Defer preparing the finished draft of the Report until the agreed-upon actions have been completed and verified.

D.4. Recommends Application Withdrawal, if Appropriate. If approval requirements are not met within the agreed-upon time frame, advise the applicant to withdraw the application (see procedures outlined in Chapter 4, Section E) and to consider reapplying at a later time.

Emphasize to the applicant, however, that reapplying means a completely new application review and onsite visit before approval, just as if they had never applied.

D.5. Completes the Final Report. If, within the agreed-upon time frame or 90 days, the team is satisfied that the applicant has met all approval requirements, works with the team to complete the draft Report and submit it to the DOSH Assistant Director for review.

If the DOSH Assistant Director concurs with the approval recommendation, then the team, the VPP Specialist, and the DOSH Assistant Director must follow the process described in Section B. PREPARING THE REPORT and Section C. APPLICATION APPROVAL, above, as if there had been no delay in the team's approval recommendation.

E. APPLICATION DENIAL

E.1. Application Denial. An applicant may choose not to withdraw an application when that action is suggested by the Team Leader following an onsite review that reveals the site cannot currently meet or sustain all requirements for participation in the VPP at this time. In this case, the team recommends denial to the Special Employer Programs Manager and the Education and Outreach Manager. Upon approval, the Education and Outreach Manager requests concurrence with the DOSH Assistant Director of the denial of the VPP application.

E.2. If an Application is Denied, the Team Leader Ensures the Following:

a. Sends a Denial Letter. Draft a letter of denial for the Director's signature. In this letter, give the applicant the reasons for the decision, thank them for applying, and tell them that DOSH will consider another application when the site can meet VPP requirements. Also advise the applicant that all original documents submitted as part of the application (including any amendments) will be returned by mail.

b. Notifies the Regional Compliance Manager and Consultation Manager of Application Denial. Send an e-mail message to the Regional Compliance or Consultation Manager of the Region within whose jurisdiction the applicant site is located, giving notice that the denied applicant is no longer under consideration for VPP participation.

This message ensures that the appropriate staff will be notified that it is no longer necessary to defer inspection, if the applicant site appears on the programmed inspection list.

CHAPTER 7
POST-APPROVAL ROLE OF THE VPP SPECIALIST

A. INTRODUCTION

This chapter describes the VPP Specialist's responsibilities for post-approval assistance to program participants and outlines procedures for both offsite and onsite assistance programs. It also explains the VPP Specialist's role during approval ceremonies, or if a participant withdraws after approval or is terminated, and the terms of reinstatement.

Instructions are provided to the VPP Specialist for notification of a fatality/catastrophe at a VPP site and details policy and procedures following a work-related fatality or a violation as a result of any DOSH enforcement action at a VPP site.

Important points about onsite assistance:

- Onsite assistance is reserved for situations in all programs where serious problems come to the attention of the VPP Specialist, or where scheduled onsite assistance has been agreed upon at the time of approval or evaluation.
- Onsite assistance will be used as quality assurance audits to review injury and illness records, or changes reported by a VPP employer, and to evaluate safety and health management practices.
- Agreed-upon assistance must occur in the case of some types of general industry sites in the Merit Program.
- This assistance is meant to improve the safety and health program or to resolve serious problems that might otherwise result in the site's VPP program participation being terminated.

B. RESPONSIBILITIES OVERVIEW

The Consultation Manager ensures that the VPP Specialist has access to expertise as needed to assist the VPP participant. The Compliance Manager ensures that copies of all complaints, chemical leaks/spills, and/or fatality/catastrophe investigation reports concerning a VPP participant are provided to the VPP Specialist.

The VPP Specialist is responsible for:

1. Acting as liaison between DOSH and new participants for approval ceremonies.
2. Assuring that VPP sites submit their annual reports on their TCIR and DART numbers, employment figures for the current year, and the most recent safety and health program annual self evaluation.
3. Reviewing and analyzing each annual self-evaluation report for continued compliance with VPP requirements, take appropriate actions when deficiencies are identified,

document deficiencies in the participant file, and notify the Special Employer Program Manager of any identified deficiencies.

4. Reviewing and analyzing the results of any complaint, chemical spill, or fatality/catastrophe investigations. If a participant's internal hazard notification system was not effective, reviewing that system, determining the reasons for failure, and making recommendations for change.

Note: DOSH Compliance will inspect any workplace that has had a fatality and may inspect an injury requiring in-patient hospitalization of any employee.

5. Assisting program participants to resolve any serious problems that develop, including providing participants access to any expertise available within DOSH or recommending sources of expertise not available in DOSH.
6. Providing onsite assistance if problems have developed, or where agreed upon at the time of approval or an evaluation visit.
7. Requesting any technical expertise necessary to fulfill responsibilities.
8. Keeping the Regional Consultation Manager, Special Employer Program Manager, and Compliance Program Manager apprised of any developments during a site's participation in the VPP.
9. Maintaining a public file of all approved VPP participants, and making the following information about each approved participant available to the public on request:
   - VPP application and amendments
   - Onsite review evaluation reports
   - DOSH Assistant Director's recommendation to the Director of L&I
   - Director of L&I's approval letter.
   - Participant's annual self-evaluation reports
   - Related formal correspondence

NOTE: The above information about a VPP worksite becomes available to the public only after the site has been approved for VPP participation.

10. Planning the annual schedule for VPP onsites and re-certifications. The written schedule will be reviewed on a quarterly basis to ensure that onsites occur within three months of the due date except in the case of extenuating circumstances.

C. APPROVAL CEREMONIES

The VPP Specialist acts as liaison between DOSH and the newly approved VPP participant in organizing the approval ceremonies. It is the VPP Specialist's responsibility to:

1. Provide the VPP flag and approval certificate in a ceremony at a time and location that are mutually convenient to the management of the newly approved VPP site and the Regional staff who will attend.
2. Arrange for a DOSH representative or other high level government official, such as the DOSH Assistant Director, the Director of Labor and Industries, or the Governor, if available, to make the presentation.
   - When the management of the approved site requests a DOSH executive representative or a specific official, the VPP Specialist relays that request to the specific official.
3. Suggest that the new VPP participant invite any of their staff who were responsible for recruiting the site for VPP or who were team members for the DOSH review visit. The new participant may also wish to invite the DOSH Onsite Review Team members.

D. OFFSITE ASSISTANCE

The following sections explain what the VPP Specialist expects from participants each year and how and when to give off-site assistance when needed, so the participant can continue to meet VPP requirements.

D.1. By February 15, Receive Participant Annual Review of Rates and Program Evaluation.

By February 15th each year, each site participating in the VPP, identified by name and NAICS, must send the following to the VPP Specialist:

a. Its annual total recordable case incidence rate for injuries and illnesses (TCIR) and for cases involving days away, restriction and/or job transfer (DART) rate along with hours worked and the average employment for the preceding calendar year.

b. The same information for all applicable contractors' employees on the site who worked more than 1000 hours in any quarter in the past year.

c. A copy of the most recent annual self evaluation of its safety and health program. VPP participants whose operations are covered by the Process Safety Management (PSM) Standard must also provide responses to each question in the VPP PSM Questionnaire (Supplement "B") that is applicable to their operations. Responses must cover all PSM-related operations. The questionnaire can be found on the VPP site web page.

- If these have not been received by March 1st, the VPP Specialist must request them from the company VPP representative.
- The VPP Specialist and assigned personnel review the rate information and evaluation when they are received, and compile overall rate information for VPP evaluation purposes.

D.2. Address Problems or Substantial Rate Increases.

a. If a substantial increase in rates or some problem with the program evaluation is noted, the VPP Specialist seeks an explanation from the site.

b. If an unresolved serious problem is evident, the VPP Specialist arranges an onsite assistance visit to the site at a mutually convenient time.

c. If the participant's 3-year rates are above the national average, the VPP specialist will follow the conditions and recommendation in Chapter 8-H.9 Choose An Appropriate Recommendation.

D.3. Review Complaints to DOSH.

The VPP Specialist reviews any complaints and resultant DOSH inspections, investigation reports or letters concerning conditions at the VPP site, to determine if a serious and unresolved safety and health management problem has developed.

If it has, the VPP Specialist must take action to ensure the problem is resolved. If necessary, this may include an onsite assistance visit at a mutually convenient time.

D.4. Investigate Chemical Spills/Releases, Fatalities, and/or Significant Events at a Participating Site. The VPP Specialist must review any reports of investigations for chemical spills/releases at the VPP participant site to determine if a serious and unresolved safety and health program problem has developed.

Significant events may be reviewed onsite by the VPP Specialist.

If information obtained during the VPP assessment and approval process is requested internally during an investigation, only information in the public information file, not the VPP Specialist's files, may be provided.

DOSH Compliance will inspect any workplace that has had a fatality and may inspect an injury requiring in-patient hospitalization of any employee.

If an employee death or probable death, or the in-patient hospitalization of any employee, occurs at a participating VPP site, the VPP Specialist must do the following:

a. The VPP Specialist receives the fatality distribution list. This list is often the first notification received outside of the Region about the occurrence of a fatality. The employer's name and usually the business address is included in this notification along with the victim's information and a brief description of the event. If the VPP Specialist notes that the fatality is related to a VPP site, ~~he/she will contact the Regional Compliance Supervisor or Manager for more information~~ the instructions in Chapter 7, "I. Fatality/Catastrophe at a VPP site" will be followed.

b. When the Region investigation is complete, the VPP Specialist will request a copy of the report. Upon receipt of the Region investigation report, the VPP Specialist will assess the findings ~~and take appropriate~~

~~action upon concurrence~~ with the Special Employer Programs Manager and follow the instructions in Chapter Seven "J. Action Following the Completion of Any DOSH Enforcement Inspection." This includes examining the program deficiencies that led to the event, and may include a partial or complete onsite evaluation.

~~**c.** Depending on the results of the findings assessment and the level of cooperation shown by the participant to the DOSH personnel conducting the investigation, the VPP Specialist makes written recommendations ranging from program improvements, to withdrawal or termination of the site's VPP participation, to the Special Employers Program Manager and the Education and Outreach Program Manager. Upon concurrence, the recommendations are forwarded to the DOSH Assistant Director for approval.~~

D.5. Consult with New Site Owners, or New Site Management.

Whenever ownership or major organizational changes occur that may affect safety and health, the VPP Specialist must discuss the changes with the site's VPP representative, and schedule an onsite visit, if necessary, to evaluate the impact of the change(s).

D.6. Respond to the Need for Additional Services.

DOSH expects its VPP Program participants to develop and maintain self-sufficient safety and health programs. However, in situations where participants cannot solve problems themselves, the VPP Specialist can serve as a general resource for the site and can encourage the site to seek any assistance needed to maintain the quality of its safety and health program.

The VPP Specialist may, as appropriate:

1. Provide requested expertise through:

- The VPP Specialist's own skills and knowledge.
- Other expertise available within DOSH.
- Recommendations of sources of expertise outside of DOSH including the VPP Participants' Association.

2. Ensure that the company VPP site representative receives information about new DOSH standards or technical information relative to the site.

3. For the Merit Program, contact the site representative about 6 months after approval to see if progress is being made toward achieving the goals set, and offer assistance to resolve any problems or obstacles that might have arisen.

E. ONSITE ASSISTANCE

The VPP Specialist can make onsite assistance visits in response to specific problems that come to the VPP Specialist's attention, as quality assurance audits, or as a result of a schedule agreed upon by DOSH and the participant at the time of approval or evaluation.

E.1. Make Onsite Visits for Specific Problems.

When the onsite visit is in response to an identified specific problem, the purpose of the visit is to assist the participant in resolving that problem.

a. Specific problems triggering an onsite visit include but are not limited to the following:

(1) A Star participant's rates for the last three years' combined average are above the industry average for two consecutive years.

(2) A Star or Merit participant's explanation of a substantial increase in either the injury rate or the lost workday case rate indicates a serious unresolved underlying problem.

(3) A review of the DOSH investigation report from a complaint, chemical spill/ release, fatality/catastrophe, or significant event indicates that a serious underlying problem at a VPP site has not been resolved.

(4) The site VPP representative is unresponsive after a change in ownership or a major organizational change.

b. Procedures at the site must include:

(1) Explanation of the reason for the visit and what will be done during the visit

(2) Assurance that the visit is not an inspection, but rather an attempt to provide assistance to the participant in resolving the problem that has come to DOSH's attention, so the site can maintain its participation in the VPP.

(3) Review of the OSHA 300 logs and other records/reports to see if a pattern relating to the problem can be discovered.

(4) Interviews of appropriate management officials and employees who may be able to provide insights as to the cause of the problem and/or its possible solution.

(5) Viewing any areas of the site or machinery involved directly or indirectly in the problem.

(6) An analysis of the problem and recommendations for a solution, where possible.

(7) Briefing management on the findings and recommendations.

(8) Determining whether management can and will act upon recommendations or equally responsive solutions of their own. The VPP Specialist and management will agree to a timeframe to consider the recommendations, make their own assessment, and devise a comparable solution.

(9) Arranging to provide additional expertise through DOSH or by recommending other sources, if needed.

E.2. Make Scheduled Onsite Assistance Visits for Merit Sites.

Although scheduled onsite assistance visits for general industry VPP participants are not expected to be needed frequently, some Merit sites may require such assistance. Helpful and constructive assistance visits may provide crucial support and guidance that can contribute to the full development of an effective safety and health program.

The VPP Specialist must ensure that any onsite assistance is conducted appropriately. An assistance visit can usually be completed in 1 day or less.

When a Merit site is approved for participation, the enhanced assistance role for the VPP Specialist will be established prior to granting approval. This assistance may involve one or more onsite assistance visits during the course of the first year.

Only when one of the provisions of approval requires scheduled visits must the steps below be followed during an onsite assistance visit:

- Assess the progress being made in developing the program.
- Determine whether reasonable progress is being made in meeting commitments made at the time of approval.
- Identify any problem areas.
- Provide advice and information to assist in continued program development.

a. Preparing for an Assistance Visit

The VPP Specialist does the following to prepare for assistance visits:

A week or two before the visit, the VPP Specialist calls the site and determines a specific day that is mutually satisfactory for the visit. If the visit can be arranged on a day when a self-inspection is scheduled, it may be useful for the VPP Specialist to observe how it is conducted.

When scheduling the visit, the VPP Specialist explains the purpose of the visit, and how the visit will be conducted.

The VPP Specialist reminds the site VPP representative that:

(1) A list of the documents to be reviewed will be provided to the site in advance so they will be readily available at the time of the visit.

(2) Although an assistance visit is not an enforcement visit, it is still true that if serious hazards are observed, the site must ensure the hazards are corrected, either immediately or as promptly as possible.

Before making the onsite visit, the VPP Specialist must thoroughly review the company's VPP application, the pre-approval report, specific Merit Program goals established by the company, and any complaints received by DOSH.

b. Conducting an Assistance Visit

The VPP Specialist follows these steps for an onsite assistance visit:

(1) Conduct an initial interview. Experience shows that senior management usually wants to meet with the VPP Specialist on arrival. If so, at that time the VPP Specialist describes for them the purpose of the visit and how it will likely be conducted.

- The schedule for an assistance visit needs to include about 2 hours to review safety and/or health program documentation created since the pre-approval or the most recent evaluation or assistance visit. (Usually there is no value in reviewing documents that were available at the time of the previous visit.)
- A brief walk-through of the site may also be conducted to get a general sense of existing conditions.
- A few informal interviews of randomly selected employees may be conducted during the walk-through. (See Appendix D for guidance on interview questions.)
- A closing meeting is held to summarize findings and provide suggestions for program improvements.

(2) Review relevant documents. The following documents may be helpful in the review (see Appendix G):

- Injury and illness records, including first-aid logs
- Self-inspection records
- Accident/incident investigations
- Records or reports of health/safety problems
- Employee training materials and records
- Industrial hygiene sampling records, if any
- Hazard review records
- Safety and health program self-evaluation reports/safety committee records.

(3) Present the findings. During a closing meeting, the VPP Specialist summarizes the major findings of the assistance visit. Care must be taken to emphasize the accomplishments and strengths of the program as well as to point out, in a constructive manner, specific actions that the employer needs to take to improve the program.

If major deficiencies are found in safety and health program implementation, then agreement must be sought on actions to be taken and dates by which such actions must be accomplished. Deficiencies in rates and program requirements will be addressed

through conditions and recommendations in Chapter 8, Section H.9. and documented in the participant file.

NOTE: If at any time DOSH becomes aware of major program deficiencies, and if any of the conditions listed in section G.1. (following) exist, the VPP specialist must recommend termination of VPP participation to the Special Employer Programs Manager and the Education and Outreach Manager. Upon concurrence, the DOSH Assistant Director terminates DOSH's approval of the site VPP participation.

(4) Summarize findings and recommendations in writing. A brief summary of the major findings and recommendations resulting from the onsite assistance visit must be written and must be sent to the site within 10 working days following the onsite visit. A copy of this summary must also be placed in the VPP Specialist's file for that site (not the public information file), and updated with notes about subsequent results achieved.

E.3. Make Scheduled VPP Quality Assurance Audits. The VPP specialist will perform onsite annual audits on a minimum of 20% of all VPP participants.

a. Each audit visit as a minimum will include a review of the last two completed years of the participant's OSHA 300 log and the current year's injuries and illness records.

b. The VPP specialist will review the most recent two annual self-evaluations to determine the scope of the onsite audit. Significant changes to ownership, organizational structure, and processes will be reviewed.

c. Each VPP participant will have at least one quality assurance audit prior to recertification.

d. At the completion of the audit, the VPP Specialist will include a presentation of findings, an itemized list of hazards that they have noted, if any, and the correction plans they have discussed with site management. The VPP Specialist will relate the discovered hazards to aspects of the safety and health management systems that need improvement. The intent is to correct the hazard and to address the underlying management system issue that allowed the hazard to go uncorrected.

e. All hazards will have completion dates not to exceed 90 days. For all other significant issues, such as elevated injury and illness rates or deficiencies in one or more requirements than cannot be corrected in 90 days, the VPP Specialist will refer to the recommendations in section H.9 of Chapter 8 of this manual. Final decision authority will follow section H.10 of Chapter 8.

F. WITHDRAWAL AFTER APPROVAL

Any approved participant may withdraw from participating in the VPP at any time after approval. Such withdrawals may occur because of plant closing, economic difficulty, or because the management has changed.

In these cases, the participant need not go through the formal termination process and may simply withdraw via written notification to DOSH.

Withdrawal happens through the following steps:

1. The participant must write a letter to the VPP Specialist stating that the site is withdrawing from the program, and stating the reason for withdrawal. The withdrawal becomes effective on the date the letter is written, not the date DOSH receives it.
2. When withdrawal occurs after approval, the VPP Specialist's official file for the site is not returned to the former participant, but instead is retained as a record of DOSH's actions and the site's participation history. The documents in the public information file are no longer subject to public disclosure, and must not be released.
3. The VPP Specialist must notify the DOSH Assistant Director of the participant's decision to withdraw by forwarding a copy of the participant's letter.
4. On receiving the site's withdrawal letter, the DOSH Assistant Director sends the former participant an acknowledgment letter, with a copy to the Director, stating that:
   - DOSH acknowledges the site's withdrawal from the VPP.
   - The VPP flag and certificate may no longer be used, as they are now invalid.
   - The site's VPP application, pre-approval report, and approval letter will no longer be made available to the public.
   - The site will be returned to the DOSH programmed inspection list, if applicable, at the time of the next inspection cycle.
   - DOSH will consider the site's re-application to VPP, if its circumstances change.
5. The VPP Specialist must notify the appropriate Regional Supervisors and Managers that the withdrawn site is no longer participating in the VPP, and that the site must be returned, if applicable, to the programmed inspection list for the next inspection cycle. The site must be treated no differently than any other site of its type in that area.

G. TERMINATION OF PARTICIPATION

DOSH may terminate a site's participation in a VPP program only for ~~cause~~ failure to maintain the requirements of the program.

G.1. Conditions that Are Cause for Termination. Except where employees appear to be at serious risk, termination by DOSH occurs only when all efforts at assisting the site to avoid termination have been unsuccessful and have been exhausted, or one or more serious problems have been identified and the participant refuses to implement technologically feasible recommendations.

~~Examples: the collective bargaining agent has notified DOSH that it no longer supports the company's participation in VPP, or one or more serious problems have been identified and the participant refuses to implement technologically feasible recommendations.~~

Other possible reasons for VPP participation ending include construction work has been completed or resident contractor participation is no longer possible because the host no longer participates in VPP. If a resident contractor leaves the hosting VPP participant's worksite, the resident contractor will no longer be in VPP.

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

b. When the collective bargaining agent has notified DOSH that it no longer supports the company's participation in VPP, the VPP specialist must ask the participant to withdraw from VPP. If the participant does not withdraw, the VPP specialist must institute and properly document termination procedures.

c. A Merit term of approval has expired without a recommendation or approval for a second term.

d. After completion of a two year rate reduction plan, the VPP specialist must determine whether a Star participant has returned its rates to acceptable levels. If the rates continue to be above acceptable levels for Star participation, the VPP specialist must ask the participant to withdraw from VPP. If the participant does not withdraw, the VPP specialist must institute and properly document termination procedures.

e. At the end of a one year conditional period, an onsite evaluation will be performed to determine whether the participant has maintained its safety and health management system at VPP Star quality. If the participant has not returned to acceptable Star quality, the VPP specialist must ask the participant to withdraw from VPP. If the participant does not withdraw, the VPP specialist must institute and properly document termination procedures.

f. The VPP specialist will evaluate actions and documentation related to any fatality, catastrophe, serious injury, or other significant event at a VPP

worksite. The VPP specialist will determine the appropriate action related to VPP participation, and when warranted, recommend termination. This review will be documented in the participant file.

G.2. Termination Process. DOSH must handle termination of a VPP participant in the following way:

a. The VPP Specialist must send to the Special Employer Programs Manager and the Education and Outreach Manager the following items, recommending concurrence with the termination:

- A memorandum explaining the reason(s) for termination of participation; and
- Any documents supporting the decision which have not already been reviewed.

b. Upon concurrence the package is forwarded to the DOSH Assistant Director for review. If he/she concurs, written notification of the intent to terminate participation in VPP will be provided to the participant and union representative(s). ~~the package is transmitted with a memorandum to the Director recommending concurrence, along with a suggested reply letter for the Director's signature, to be sent to the participant, informing the site of the termination decision, and that the site is not eligible to reapply for VPP participation until three years from the date of the termination letter.~~

c. The participant has 30 days from receipt of the notice to appeal the intent to terminate. It must provide in writing to the DOSH Assistant Director, the reasons why it should not be removed from VPP.

d. Upon review of the participant's justification for continued participation, the DOSH Assistant Director will determine whether concurrence with termination will be forwarded to the Director. If the DOSH Assistant Director finds the participant's appeal valid, the participant may continue in VPP and will be notified in writing.

e. With concurrence with termination, the package is transmitted with a memorandum to the Director recommending concurrence, along with a suggested reply letter for the Director's signature, to be sent to the participant, informing the site of the termination decision, and that the site is not eligible to reapply for VPP participation until three years from the date of the termination letter.

f. If the Director signs the termination letter, then:

(1) The VPP Specialist must be notified by telephone immediately; **and**

(2) The VPP Specialist must notify the appropriate Regional Managers and Supervisors that the withdrawn site is no longer participating in the VPP.

The Regional Consultation Manager and the Regional Compliance Manager must be informed within 30 days of the date of the letter that the site must be returned, if applicable, to the programmed inspection list for

the next inspection cycle. The site must be treated no differently than any other site of its type in that area.

The VPP Specialist must also notify the OSHA Region X Administrator.

If the Director finds the participant's appeal valid, the participant may continue in VPP and will be notified in writing.

NOTE: DOSH will not consider re-application by terminated sites for three years from the date of termination.

H. REINSTATEMENT

- There is no such thing as VPP reinstatement. To resume participating in the VPP, a withdrawn or terminated site must reapply, as if it had never been a participant.
- Withdrawn sites may reapply at will.
- Terminated sites are not eligible for approval for three years from the date of termination. Applications submitted before then will not be considered.

I. FATALITY/CATASTROPHE AT A VPP SITE

This instruction provides policy and procedures for notification of a fatality/catastrophe at a VPP site and details policy and procedures following a work-related fatality.

I.1. Notification of a Fatality/Catastrophe at a VPP Worksite. DOSH VPP program will provide written notification to the DOSH Compliance Program, the DOSH Consultation Program, and the DOSH Assistant Director of a Fatality/Catastrophe at a VPP site, including contractors working at the VPP site. To the extent possible, the following information will be included in the notification:

- VPP Participant name
- Location of VPP worksite
- Current VPP status
- Number of years in VPP
- Last evaluation date
- Last approval date
- Date of Fatality/Catastrophe
- Nature of Fatality/Catastrophe, if known
- Involved parties (employee, contractor, or both)

I.2. Status of VPP Participant During DOSH Compliance Inspection Related to a Fatality/Catastrophe.

a. Change in VPP Status-If the Fatality/Catastrophe triggers a DOSH enforcement inspection, the status of the VPP participant will be changed to "Inactive Pending Fatality/Catastrophe Inspection."

b. Within ten days of the initiation of the enforcement inspection, the following will occur:

- The change in the VPP participant's status will be made and reflected in all print and electronic materials, including DOSH VPP website and tracking systems,
- DOSH VPP will notify the VPP participant in writing of the change in status, request that they do not display the VPP flag, plaque, and/or certificates, and that they must not act as SGE's while in "Inactive Pending Fatality/Catastrophe Inspection" status.

c. DOSH Compliance will keep the DOSH VPP Program advised of the facts and findings in the case during the course of the inspection.

J. ACTION FOLLOWING COMPLETION OF ANY DOSH ENFORCEMENT INSPECTION

When the enforcement inspection is completed, the following procedure shall be used to determine the participant's continued eligibility for VPP participation. An enforcement inspection is completed when a citation(s) is issued or it is determined no citation will be issued.

J.1. Termination. When a fatality is deemed work-related, or when a site is placed in the Severe Violator Enforcement Program, or when a willful violation(s) is issued to the VPP participant regardless of the genesis of the enforcement inspection, DOSH VPP will issue a "Notice of Intent to Terminate" letter within ten days of the completion of the enforcement inspection. DOSH VPP will follow the instructions in the DOSH VPP Manual Chapter 7-G.

J.2. Violation Other Than Willful or No Violation Issued.

a. When the enforcement inspection is completed and DOSH issues a serious violation, a Repeat violation, a Failure to Abate violation, an Other than Serious violation, or no violation, DOSH VPP will follow obtain and review copies of all reports resulting from enforcement activity at a VPP worksite.

b. Upon receipt of the Region investigation report, the VPP Specialist will assess the findings and take appropriate action upon concurrence with the Special Employer

Programs Manager. This includes examining the program deficiencies that led to the event, and may include a partial or complete onsite evaluation.

c. Depending on the results of the findings assessment and the level of cooperation shown by the participant to the DOSH personnel conducting the investigation, the VPP Specialist makes written recommendations ranging from program improvements, to withdrawal or termination of the site's VPP participation, to the Special Employers Program Manager and the Education and Outreach Program Manager. Upon concurrence, the recommendations are forwarded to the DOSH Assistant Director for approval. If termination is recommended, the instructions in the DOSH VPP Manual Chapter 7-G is followed.

d. Within 90 days from the date of the enforcement inspection is completed, DOSH VPP will notify the DOSH Assistant Director via a memorandum of the proposed recommendation regarding the participant's termination or continued participation.

CHAPTER 8

EVALUATION OF CURRENT VPP PARTICIPANTS

A. INTRODUCTION

Formal onsite evaluation of a participating VPP worksite's safety and health program enables the DOSH VPP Team to assess the current effectiveness of the program in relation to the hazards at the workplace.

For all participants, an evaluation provides useful information regarding the strengths and weaknesses of the site safety and health program so that the site can continue to improve its program, and maintain gains already made.

Such an evaluation is performed for several reasons:

- **Star.** For Star participants, the evaluation enables DOSH to determine eligibility for continued participation.
- **Merit.** For Merit participants, the evaluation enables DOSH to determine whether the site has become eligible for Star Program participation, or whether VPP participation needs to be terminated.

After the onsite evaluation, formal approval must be made by DOSH for continuing participation in VPP. DOSH will formally recertify VPP participants.

B. GENERAL PROCESS SUMMARY

B.1. Schedule of Evaluations. For DOSH and the VPP Specialist, evaluations of participating sites take priority over pre-approval reviews for applying sites, to ensure that participating sites maintain program qualifications.

Star-participants initially are evaluated between 30 and 42 months following program approval, unless significant problems come to DOSH's attention earlier. The evaluation must be completed no later than 42 months following the anniversary of the site's initial approval to participate in the Star Program.

Subsequent evaluations must be completed within 60 months of the preceding evaluation; however, they may be conducted earlier if one or more of the following occur:

a. The site requests an earlier evaluation.

b. Significant changes in management, process(es), or product(s) happen which may require evaluation to ensure the site is maintaining a Star-quality safety and health program.

c. Significant problems at the site come to DOSH's attention. Such problems may include increasing injury and illness rates, serious deficiencies described in the site's annual evaluation of its safety and health program, and deficiencies discovered through DOSH compliance activity resulting from an employee complaint, fatality, catastrophe, or other significant event.

Merit participants initially are evaluated within 24 months (within 18 months is recommended) following approval.

Subsequent evaluation, when needed, is determined by the VPP Specialist in consultation with the participant seeking Star qualification.

NOTE: If a Merit Program participant requests an evaluation before the scheduled evaluation is due, to determine whether Star qualifications have been met, and if the participant provides evidence that satisfies the DOSH Assistant Director that the site has probably met Star requirements, an evaluation may be held earlier.

During the interval between evaluations, both of the following happen:

- The Central Office VPP team reviews annual reports of approved VPP sites to evaluate adherence to VPP program requirements
- The VPP Specialist, DOSH Central Office, or Regional staff must conduct at least one VPP Quality Assurance onsite visit with VPP Star and Merit sites.

The purpose of these quality assurance visits is to validate information obtained from self-evaluation reports, review injury and illness records, and make contact with site personnel. Additional visits may be warranted if site conditions, processes, ownership, management, or labor experience significant change(s).

B.2. Evaluation Visit. A DOSH evaluation team conducts an onsite assessment of the functioning safety and health program by reviewing records of activities, observing conditions, and interviewing managers, supervisors, and employees.

B.3. Presentation of Findings. When the evaluation visit is completed, the evaluation team discusses its findings with worksite representatives prior to drafting the evaluation report. The team's findings regarding site participation in VPP must always be discussed in terms of meeting VPP requirements and identification of hazards. It is not the responsibility of the team or the Team Leader to decide whether or not an applicant will be approved. That responsibility rests with the DOSH Assistant Director and the Director of the Department of Labor and Industries. The team will not discuss its recommendation unless it obtains approval by the DOSH Assistant Director.

B.4. Reaching a Decision. The evaluation decision process must follow these procedures:

a. Star Participants. The evaluation report for Star participants, when finalized, must be presented to the DOSH Assistant Director recommending

concurrence, and forwarded to the Director who will make the final determination regarding the site's continuation in the program.

A copy of the report and notification of the Director's decision must be forwarded to the Team Leader. If continued VPP participation is approved, the Team Leader prepares the letter for the Director's signature officially informing the participant of the Director's decision. A letter of congratulations may be prepared for the Governor's signature, if appropriate.

b. Merit Participants. Recommendations for continued participation in the Merit Program will follow the procedures for Star participants. A recommendation may also be made to advance a Merit site to Star status.

B.5. Termination Recommendations. All termination recommendations for a participant in any VPP program must be forwarded to the DOSH Assistant Director recommending concurrence, and then transmitted to the Director for a decision. (See Chapter 7, Section G.)

If cause to recommend termination is found, the procedure in Chapter 7 must be used.

C. EVALUATION PREPARATION

C.1. Size and Composition of the Evaluation Team. The size of the team must reflect the size of the site and the complexity of the potential hazards.

The experience and numbers of personnel on an evaluation team must be the same as for a pre-approval onsite review team, as described in Chapter 5, Section D.1.

The evaluation Team Leader's responsibilities are described in this chapter and correspond to the list of Team Leader responsibilities for onsite pre-approval review. (See Appendix C)

C.2. Arrangements. Arrangements for the onsite evaluation will be coordinated by the Team Leader. (See Chapter 7). The Team Leader must determine the evaluation's duration in coordination with the worksite.

Generally, the time needed for the evaluation depends on the size and complexity of the site, DOSH's sense of the ongoing quality of the participant's safety and health program, and program problems that may be observed onsite.

Evaluations may range from two to five days' duration (including travel time) unless there are other unusual aspects to the site.

C.3. Preliminary Preparation. The Team Leader communicates with the VPP participant to determine a convenient time for the program evaluation. The Team Leader needs to first determine several dates convenient to the team and suggest them to the participant. The evaluation must be completed within the period of time described in section B.1, above.

Team members must equip themselves with any special equipment needed at the site (PPE, safety shoes, etc.). Some special equipment may be supplied by the site, as determined by the Team Leader.

The Team Leader must contact the site representative in advance to explain the purpose and general activities of the visit.

- Give the VPP representative a suggested list of items to have ready for the team's review (See Figure 8-1 at the end of this chapter). Normally, request only documents created since the initial approval or the last evaluation. This means Star sites must have at least 30 to 60 months of documentation available.
- For the Merit Program, in addition to the items listed in Figure 8-1, request any specific documentation related to Merit Program goals.
- Provide a list of items that will be discussed in relation to management's reaction to VPP participation. A suggested list of possible areas of VPP impact is found in Figure 8-2 at the end of this chapter.
- Make arrangements for access to any office facilities that may be needed for report writing at the site (e.g., office or desk space and copying services, Internet access, etc.).

C.4. Advance Planning Responsibilities for Evaluation of Team Members.

Team members must become as familiar as possible with the type of industry and the specific site.

If possible, team members need to review all documents about the VPP participant in the Team Leader's site file.

The file must include the following:

- The application
- The Pre-approval Program Review Report
- Any notes about hazard correction
- Any previous re-evaluation reports, and any reports related to onsite or offsite assistance
- Annual injury rate data
- Any complaint, chemical leak/spill, fatality/catastrophe investigation reports, or other correspondence with the DOSH Central Office.

The Team Leader must, at a minimum, take the following documents to the visit:

- The Pre-approval Program Review Report.
- Any previous self -evaluation reports.
- Any hazard correction information.
- Onsite assistance visit summaries, if any.
- Any related DOSH correspondence.

- The current BLS Bulletin on Occupational Injuries and Illnesses in the United States by industry.

The Team Leader must compile a list of documents to be reviewed (See Figure 8-1 at the end of this chapter) and questions to be asked, provide the list to team members during the strategy meeting, and add to the list questions suggested by other team members. As team members note unresolved issues during the onsite review, those questions must also be added to the list.

Use the following guidance in formulating questions:

- Base the questions on the review of the participant's file.
- Compare the current functioning of the safety and health program to its functioning at the time of the pre-approval visit or last evaluation.
- Include questions relevant to any Merit goal aspects of the safety and health program.

D. OPENING CONFERENCE

The opening conference with the site management and the site's employee representatives sets the stage for the review, letting everyone know what to expect and what assistance will be needed during the visit.

Team members need to strive to establish a cooperative atmosphere.

The Team Leader must convey the following information.

1. Clearly state the goals of the evaluation, which are:

- To determine whether Star or Merit Program requirements are being met
- For Merit sites, to assess whether progress is being made toward accomplishing agreed-upon goals
- To analyze the impact of changes in the safety and health program that have occurred since VPP approval or the last evaluation
- To assess the continuing adequacy of the safety and health program for the potential hazards at the site; and
- To assess the satisfaction of management and employees with the program.

2. Briefly cover what activities the evaluation will entail and the approximate timing at the site.

3. Make arrangements to conduct private interviews with joint committee members, managers, supervisors, maintenance personnel, record keepers, occupational health staff (if any), and with randomly selected employees (including contract employees, if any).

4. Review differences between the production area tour that must be conducted and an inspection or consultation visit, and explain requirements for correcting any hazards noted:

(a) DOSH expects immediate correction, if possible, of any hazards found.

(b) For any hazards that cannot be corrected before the team leaves the site, the site management must agree to a timeline for making the correction and send a letter to the Team Leader indicating when the correction has been completed. The Team Leader may return to the site to confirm the correction.

(c) If site management refuses to correct a situation where the safety and health of employees is seriously endangered, the situation must be referred for review and enforcement action if deemed necessary. (See Chapter 5, Section L.)

5. Explain that the team will update the participant on the progress of the evaluation through a briefing at the end of each day. When the evaluation is completed, the team must discuss its findings with the participant and address any issues that may have developed.

The number of briefings presented will depend upon:

- The number of days allowed for the on-site and complexity
- Whether the site safety and health staff desires a more detailed briefing to be followed by a more general briefing to the site management.

The daily briefings will center on numbers of interviews completed, hazards identified and 90 day items.

The opening conference is the ideal time to begin to assess the satisfaction of the onsite participants with their involvement in the VPP. Consider the participant's overall preference regarding the workplace continuing in the program. Determine if anyone has suggestions for changes to the VPP itself.

Determine how management feels about participation. Consider whether you perceive a sense of continuing management commitment, including resources, both to the program and to safety and health generally. Is management able to provide any information regarding impact of VPP participation, such as the subjects in Figure 8-2 at the end of this chapter?

Determine how the employees feel about the program and their participation levels. If the site is unionized, determine how the union perceives participation in the VPP.

E. DOCUMENTATION

See Figure 5-1 at the end of Chapter 5 for a list of documentation to review.

The team's documentation reviewer must check logs, programs, and documents for accuracy, completeness, and changes since the last visit or evaluation.

If the team finds any discrepancy between verified rates and the rates the participant reported in the most recent annual self evaluation, the Team leader must inform the participant to revise its records, including the annual self evaluation.

NOTE: For evaluation at three and five year points, worksites may be eligible to use the best 3 out of the most recent 4 years for calculating incidence rates.

F. SITE WALK-THROUGH

The safety and health specialist(s) on the team must walk through the production areas. The Team Leader and any backup leader required for the review must also participate in at least part of the walk-through.

F.1. Purpose. This is not an inspection, but a review to see how the safety and health program is operating at the site, and to assess the effect of any changes in production processes, working conditions, and the safety and health program since pre-approval or the last VPP visit.

F.2. Problem Areas. If the file on the participant, the OSHA log, or the annual program self-evaluation report suggests potential problems in certain areas, those areas must be given special attention.

F.3. Program Evidence. Look for evidence of a program that is effective in practice in relation to the potential hazards at the site. The following guidance is helpful in determining what is effective in practice:

- Look for evidence that categories of hazards are appropriately managed. These include walking-working surfaces, fire safety, storage and handling of general materials, machine guarding, powered tools, and welding.
- Note any program improvements or possible weaknesses in comparison to the last DOSH VPP visit.
- Make notes concerning any hazard categories that may need improved attention and management.
- Relate the problems that are visible in work areas to documents viewed and to interviews conducted concerning work procedures, emergency planning, self-inspection procedures and reports, and complaints or reports of hazards from employees, if any. Make notes concerning program improvements needed to provide the management systems that would prevent these problems.

- Make notes about any specific hazards that must be corrected. Ensure that a responsible member of the site's management takes notes as well, and agrees on a reasonable time period for correction.

F.4. Informal Interviews During Walk-through. Talk briefly with employees at their work stations to get their views of the safety and health program. See Appendix D for a list of topics that may be covered in informal interviews.

Also, include questions related to:

- The completion of individual Merit Program goals, if appropriate
- The depth of employees' understanding of the VPP at the site and their rights under it
- Their reaction to the site's participation in the VPP; and
- Any changes they have noted in production processes or the safety and health program since the site began participating in the VPP, or since the last DOSH VPP visit or evaluation.

G. FORMAL INTERVIEWS

Use the procedures described in Chapter 5, Section H.

G.1. Basic Questions.

Use interview questions found in Appendix D.

G.2. Additional Questions.

Specific questions may be added that address Merit Program goals, employee knowledge of and reaction to their site's participation in the VPP, and changes in working conditions or the safety and health program since the last DOSH VPP visit.

H. PREPARATION OF FINDINGS

The team needs to follow this standard process to reach consensus and prepare the findings of the evaluation visit.

H.1. Team Findings Meeting. When the documentation review, interviews, and walk-through have been completed, the team must meet privately to review and summarize their findings before meeting with site personnel.

H.2. Discuss and Define Program Changes. Give special attention to modification in the safety and health program since VPP approval or the last evaluation. Assess such changes with regard to Merit Program goals (where applicable) and the evaluation measures.

a. **Reach Consensus.** Allow time for complete discussion of issues and for reaching consensus within the team before orally presenting the findings to the site safety and health staff.

b. **Allow Sufficient Time.** The findings summary meeting may require more than an hour of team time.

H.3. Responsibility. The Team Leader is responsible for organizing the findings from team input.

a. **Use Established Document Organization.** Organize the findings for the briefing presentation according to the evaluation measures listed in this Chapter.

b. **Itemize Hazards Found.** Technical members of the team describe, during this meeting and at the presentation of findings that follows, the hazards that they have noted, if any, and the correction plans they have discussed with site management.

Relate the discovered hazards to aspects of the safety and health management systems that need improvement. The intent is to correct the hazard and to address the underlying management system issue that allowed the hazard to go uncorrected.

H.4. Prepare a List of Specific Examples of Problems. Where general problems identify trends, the team must be prepared to give specific examples that reveal the trend.

H.5. Protect Employee Confidentiality. Care must be taken to protect the confidentiality of information provided by employees, specifically or in general, whether negative or positive.

The sample of employees will be small enough to make identification fairly simple, even though the sample is too small to provide anything more than confirmation of what the team has gathered from other sources.

The team must never base any conclusion about site safety and health on only a single employee interview.

H.6. Suggest Improvements. Specific suggestions for strengthening various parts of the program must be included in the findings.

H.7. Work for VPP Status Recommendation Consensus. The team must strive for consensus on its recommendation regarding participation. Should irreconcilable differences arise, call the Special Employer Programs Manager for assistance.

In the rare instance where consensus is not reached, any team member dissenting must document their opinion, together with supporting data and rationale.

Any dissenting opinion, together with any responses by other team members, must accompany the draft evaluation report through normal channels until the matter is resolved.

H.8. Follow These Summarization Guidelines. In summarizing the findings, the team must consider the following:

a. The injury/illness incidence and lost workday case rates prior to and since initial approval and/or since the last re-evaluation.

b. What employees, management, and committee members have said about the program and conditions at the site.

c. What has been observed during the walk through.

d. The degree to which implementation of the safety and health program has been verified and meets the needs of the workplace.

H.9. Follow These Evaluation Measures. The development of findings must address the following evaluation measures:

a. Injury/illness rates (in comparison with the industry average and past performance)

b. Program improvements or weaknesses since approval for participation or the last evaluation

c. Adequacy of the safety and health program to protect workers against the site's potential hazards

d. Ability to safely control conditions at the site where contractors/ subcontractors are involved

e. If applicable, progress made toward meeting individual Merit Program goals

f. Satisfaction of the participants

g. Nature and validity of complaints, if any, received by DOSH

h. Effectiveness of employee participation or, where a joint labor-management safety committee is involved, effectiveness of the committee.

H.10. Choose an Appropriate Recommendation. The team must choose among the following alternatives:

a. **If the site is participating in the Star Program**, follow these instructions based on the conditions listed:

(1) ***Condition:*** A Star participant continues to meet all requirements.

Recommendation: Recommend continuation as a Star participant upon satisfactory completion of any 90-day items

(2) ***Condition:*** A Star participant is deficient in one or more requirements, which can be satisfactorily adjusted during a 90-day deferral of decision, but requires one year's experience operating at Star quality.

Recommendation:

- Establish written goals for the site to accomplish to re-achieve Star quality.

- Recommend conditional Star participation for one year with quarterly progress reports due and a formal evaluation scheduled at the end of the year. (See Figure 8-3 at the end of this chapter for a complete discussion of the one year conditional process.)

(3) ***Condition:*** A Star participant is deficient in one or more requirements and agreement cannot be reached on correction, correction cannot be accomplished within a 90-day deferral of decision, or the participant has not made good faith effort on agreed-upon corrections.

Recommendation: Recommend termination from VPP.

(4) ***Condition****:* The participant's 3-year rates are above the national average, and an onsite evaluation has been conducted**.**

Recommendation*:* The participant must be placed on 1-Year Conditional status. The Assistant Director DOSH may also allow a 2-year rate reduction plan to provide the participant more time to reduce its rates to below the national average.

(5) ***Condition:*** The participant's 3-year rates are above the national average, and an onsite evaluation has not been conducted.

Recommendation: The participant must be placed on a 2-year rate reduction plan approved by the Assistant Director DOSH.

In conditions (4) and (5), DOSH and the participant must determine the safety and health management system deficiencies related to the high rates. The 1-Year Conditional goals, rate reduction plans, or both, must address the deficiencies, correction methods, and time frames. Quarterly reports to the VPP Specialist are due during the year.

A period of up to 90 days may be allowed to correct any areas of minor deficiency from the Star Program requirements. See the procedures in Chapter 5, Section L, in this manual.

b. **If the site is participating in the Merit Program**, follow these instructions, based on the conditions listed:

(1) ***Condition:*** Term Completed AND…

- Merit Program has met all agreed-upon goals including Star requirements. **Recommend Star participation.**
- Merit Program has not met all agreed-upon goals and/or Star requirements due to extenuating circumstances. **Recommend new Merit approval with new goals.**

- Merit Program has not met all agreed-upon goals including Star requirements, AND EITHER
  - There are no extenuating circumstances

    OR
  - The site has already had a second Merit approval.

This calls for an automatic recommendation for termination from VPP participation.

(2) ***Condition:*** Term Incomplete AND…

- All agreed-upon goals including the Star requirements have been reached earlier than expected. **Recommend Star approval**.
- Merit Program is progressing satisfactorily, and/or the site has agreed with DOSH on resolution of any problems and is acting in good faith**. Recommend continuation of Merit Program approval**.
- Merit Program 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. **Recommend termination.**

  Note that all recommendations must be documented in the participant's file.

H.11. Final Decision Authority. Final Decision Authority is defined below.

a. Continuation in Star and Merit Programs Decision. In all cases, the DOSH Assistant Director makes the decision whether a site is to continue participating in Star and Merit Programs, including granting a one-year conditional Star approval. The Assistant Director consults with the Director before making a final decision.

b. All Other Participation Decisions. The Director of the Department of Labor and Industries makes all decisions relating to advancement from Merit to Star, and termination from the VPP, except for sites where a Merit term has been completed with goals not met and no extenuating circumstances, or the site has reached the end of a second Merit approval time without meeting goals, in which case recommendation for termination is automatic. (See Section H.10.b, above.)

I. PRESENTATION OF FINDINGS

Follow these guidelines in presenting the team's findings to the site management:

I.1. Make Sure Information Is Complete. Before the beginning of the presentation, the Team Leader must determine whether the team has seen everything that the site representative feels is relevant, and whether the site representative is satisfied that the team has a good "picture" of the safety and health program in action. The Team Leader must specifically address any unresolved issues noted by the team.

I.2. Review the Team's Assessment. Provide the team's assessment of the site's performance on the evaluation measures listed in this chapter.

Where program progress or deterioration is discerned in relation to the program at the time of approval or the last evaluation, give examples in the presentation.

I.3. Review Hazards Noted. Review any hazards that have been noted, along with the agreed-upon time and means of correction.

If correction cannot be accomplished immediately, ask management to send a letter to the Team Leader describing what correction was made, when it is accomplished.

These corrections must not be listed in the report, or by themselves be the subject of goals. They usually flag the need for system improvement.

A list of the hazards and corrections must be placed in the file for follow-up.

I.4. Convey the Team's Findings. The team's findings regarding site participation in VPP must always be discussed in terms of meeting VPP requirements and identification of hazards. It is not the responsibility of the team or the Team Leader to decide whether or not an applicant will be approved. That responsibility rests with the DOSH Assistant Director and the Director of the Department of Labor and Industries. The team will not discuss its recommendation unless it obtains approval by the DOSH Assistant Director.

If the recommendation is for VPP termination, offer the site management the opportunity to withdraw before the termination recommendation goes to the DOSH Assistant Director. Remind the site management about the ramifications of being terminated versus voluntarily withdrawing.

I.5. Draft the Report. The Team Leader prepares the draft report in conjunction with team members. Normally the draft is completed only after receiving the 90- day items from the site.

I.6. Emphasize a Positive Approach. Always thank site representatives for their assistance and their continued interest in VPP, and make it clear that the DOSH VPP Specialist remains available to assist approved participants with their safety and health program.

J. DRAFT THE REPORT

The Team Leader is responsible for preparing the draft evaluation report, following the format in Appendix H.

J.1. Make Report Assignments. The Team Leader may assign sections of the report to other team members. Review the following with each team member:

- Each writer must meet established deadlines.
- Each team member must review the entire draft report.
- The draft report must reflect the consensus of the team.

J.2. Review of the Draft Report. The Team Leader must provide an opportunity for the Special Employer Program Manager to review the draft report and suggest changes. The Team leader will not provide the applicant or participant with a copy of the draft report unless it is first approved by the DOSH Assistant Director.

K. HAZARD CORRECTION ARRANGEMENTS

When hazards not corrected before the final interview have been discussed with management, and correction plans and dates have been agreed to orally, a memorandum to the files that outlines the agreement must be written for the Team Leader's signature. **It must not be part of the report.**

This memorandum, and the site's response letter describing the hazard correction made, must become part of the site's file. They must also be made available for use by the team that conducts a subsequent onsite evaluation.

If serious hazard(s) go uncorrected, then:

- The Region must make every attempt to resolve the problem in a manner consistent with the cooperative spirit of the VPP.
- The applicant site must be informed that if a satisfactory correction of the hazard(s) cannot be achieved, the matter must be brought to the attention of the Assistant Director and the Director, and that enforcement action may be taken.
- If the applicant continues to refuse to correct the hazard(s), the VPP Specialist prepares a memorandum to the DOSH Assistant Director, with a copy to the Director, detailing the hazard(s) and the cooperative efforts made by DOSH to achieve resolution.
- If the DOSH Assistant Director decides that all cooperative efforts have failed and that DOSH must ensure hazard correction, the DOSH Assistant Director sends a memorandum to the Statewide Compliance Manager, requesting that enforcement action be taken through the Regional Compliance Manager. Under these circumstances, the worksite would be a candidate for termination from the VPP (see Chapter 7, Section G.).

L. PROCESSING EVALUATION RESULTS

Complete the evaluation by preparing the report for approval, and assembling the site's public information file (available to the public only **after** approval is final).

L.1. Report Preparation and Approval. When the report is in final draft form and when all 90-day items, if any, have been completed, submit the report to the Special Employer Programs Manager and the Education and Outreach Manager. Upon concurrence, the report is forwarded to the DOSH Assistant Director recommending concurrence and that it be transmitted to the Director for review and a decision, as appropriate.

Where the DOSH Assistant Director is concurring in a recommendation for the Director's decision, follow procedures, schedules, and deadlines described in Chapter 6.

L.2. Creating the Public Information File. Once an evaluation has been processed and approved, the Team Leader must compile all documents relevant to the evaluation and add them to the public information file. These additions must include clean copies of:

- The DOSH Assistant Director's memorandum to the Director stating concurrence with the recommendation.
- The Evaluation Report, with any attachments.
- The Director's letter to the participant, which includes notification of a copy being sent to any applicable collective bargaining agent(s).
- Any program changes not submitted in the original application.

Figure 8-1

DOCUMENTS TO BE REVIEWED DURING ONSITE EVALUATION

- OSHA-300 log and first-aid logs for three prior years and year to date (for site and any contractors).
- Company policy, goal, and objective statements.
- Industrial hygiene sampling, audio metric measuring, material safety data sheets, etc. Analysis of potential hazards completed since the pre-approval or last evaluation visit.
- Any new or changed safety rules.
- Any changes in PPE program, hazard communications, emergency procedures, etc., along with documentation of training, drills, etc.
- Job hazard reviews conducted during the period.
- Any new training programs and documentation of training given during period.
- Self-inspection reports, including records of correction for the period since the pre-approval visit or last evaluation.
- Accident reports since the pre-approval visit or last evaluation.
- Records of employee reports of safety and health problems/concerns since the pre-approval or last evaluation visit.
- Documentation regarding the preventive maintenance system during the period.
- Documentation of the use of the line accountability and disciplinary systems since the pre-approval or last evaluation visit.
- Annual internal safety and health program audits/evaluations since the pre-approval or last evaluation visit, with documentation of action taken to address recommendations.
- Safety committee minutes (where applicable) since the pre-approval or last evaluation visit.
- Documentation relating to any other aspect of the site's safety and health program.
- For chemical industry and other worksites falling under the provisions of the Process Safety Management Standard: Copies of all information required under the Process Safety Management Standard, including project reviews or analyses which examine possible failure points, and the VPP PSM Questionnaire (Supplement “B”) that is applicable to their operations. Responses must cover all PSM-related operations.
- Any documentation related to Merit Goals (where applicable).

Figure 8-2

POSSIBLE AREAS OF DIRECT OR INDIRECT VPP IMPACT

Evaluation procedures call for assessment of changes in injury rates, employee awareness and involvement, and safety and health conditions. Other areas of management concern may be affected either directly or indirectly by participation in the VPP.

If management has tracked improvement in these areas and will share the information with DOSH's review teams (the information can be very general, such as an "increase" or "decrease by 10 percent"), the information may be helpful when aggregated with information from other VPP sites.

We are interested in **change** only.

- Absenteeism rate.
- Workers' compensation claims or costs.
- Turnover rates.
- Productivity.
- Other areas that are tracked and appear to change in relationship to the VPP participation.

Figure 8-3
GUIDELINES FOR CONDITIONAL STAR PARTICIPATION

A. Purpose.

When a formal onsite re-evaluation of current Star participants reveals deficiencies in one or more Star requirements for which one year of Star quality experience is required, a 1-year conditional Star participation may be recommended under the following conditions:

- The site desires to remain in the Star Program
- The deficiencies can be corrected satisfactorily within 90 days and the corrections are in place by the end of the 90-day deferral period; and
- A period of one year's experience is needed to establish that the site has:
  - Continued the program(s) as designed; and
  - The program(s) work(s) to correct the deficiency(ies).

B. Goals.

A goal must be established and agreed to with the site for every deficiency that requires correction. Each goal must meet the following conditions:

- It must be clearly stated
- It must relate to a deficiency in Star quality discussed in the onsite re-evaluation report
- It must state specifically what is required to determine that it has been accomplished; and
- It must describe the measure(s) that will verify Star quality has been re-achieved and maintained.

C. Onsite evaluation.

One year from the date when implementing the goals ended the 90-day deferral period, the site must undergo an evaluation.

If it is found clearly to be at Star quality, an approval for continuation in the VPP must be recommended to the DOSH Assistant Director. For future evaluations, the site must be considered to begin a new cycle as a Star.

If the site continues to maintain Star quality at its next evaluation, it is eligible for a 3-year plaque. After five years of continued Star quality, it is eligible for a 5-year plaque.

APPENDIX A

APPLICATION GUIDELINES

For Site Applicants: For efficient processing, your application needs to follow the format below. Address each item. In sections B - E, describe how each program element is implemented at your worksite.

Refer to appropriate documentation after the narrative, if it's provided in an Appendix or available onsite. Use the numbering system below to help speed the review of your application.

Where existing policies, guidelines, forms, etc., describe your programs, we encourage you to enclose them rather than to write new material for this application.

VPP applicants whose operations are covered by the Process Safety Management (PSM) Standard must provide responses to each question in the VPP PSM Questionnaire (Supplement "B") that is applicable to their operations. Responses must cover all PSM-related operations and provide sufficient detail. The questionnaire can be found on the VPP site web page.

A. GENERAL INFORMATION

The following general information needs to be filled in completely and legibly on the application.

A.1. Applicant

Applicant information needs to include the following:

- Site name
- Site address
- Site manager name
- Site manager's title
- Site VPP contact for DOSH correspondence
- Site VPP contact's title
- Phone number
- E-mail address

A.2. Company/Corporate Name

The site company name needs to include the following (make any corporate subsidiary relationships clear):

- Name (if different from above)
- Address
- VPP contact (if applicable)

- Site VPP contact's title
- Phone number
- E-mail address

A.3. Collective Bargaining Agent(s).

If there is one or more collective bargaining organizations active at the site, be sure to list the following information for each one (list information on each separately):

- Union name and local #
- Agent's name
- Address
- Phone number
- E-mail address

A.4. Number of Employees and Contractor Employees.

Provide the number of employees, both direct and contractor, at the site:

- Number of Employees working at Applicant's site
- Number of Temporary Employees supervised by Applicant
- Number of Applicable Contractor Employees

A.5. Type of Work Performed and Products Produced.

Provide a comprehensive description of the work performed at your site, the type of products produced, and the type of hazards typically associated with your industry.

A.6. Industrial Classification Codes.

Provide what you believe to be your site's 6-digit North American Industry Classification System (NAICS) code and your 4-digit Standard Industrial Classification (SIC) code.

Please contact your VPP Coordinator if you are having difficulty identifying an appropriate code.

You can also find NAICS and SIC information on the Bureau of Labor Statistics' website, *www.bls.gov*.

A.7. Record Your Recordable Nonfatal Injury and Illness Statistics.

1. Statistics for Direct Employees.

Using information from your OSHA injury and illness logs (OSHA-300), **complete and submit Table 1** in Section G at the end of this application.

Then, for your reference:

(a) Record your combined 3-year average TCIR[1] here: _____

(b) Record your combined 3-year average DART[2] rate here: _____

Both your 3-year average TCIR and your 3-year average DART rate must be below the 3-year average of the 3 most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by the U.S. Department of Labor's Bureau of Labor Statistics (BLS). DOSH will compare all submitted rates against the 3-year BLS average for your NAIC

2. Statistics for Contractor Employees.

Complete Table 2 on the application form for rates of Applicable Contractors[3], listing each contractor individually. **Submit Table 2 with your application.**

You must also maintain this information at your worksite and make it available to the DOSH review team during the VPP onsite review.

B. MANAGEMENT LEADERSHIP AND EMPLOYEE INVOLVEMENT

Describe management leadership and employee involvement in your site's safety and health program.

B.1. Commitment. Attach a copy of your top-level safety policy specific to your facility.

NOTE: Management must clearly demonstrate its commitment to meeting and maintaining the requirements of the VPP and taking ultimate responsibility for worker safety and health.

B.2. Organization. Briefly describe how your company's safety and health function fits into your overall management organization. Attach a copy of your organization chart.

B.3. Authority and Responsibility. Describe what authority you give managers, supervisors, and regular employees regarding safety and health, and hazard mitigation.

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[1] **TCIR** is the **T**otal **C**ase **I**ncidence Rate for recordable nonfatal injuries and illnesses.

[2] **DART rate** is the incidence rate for recordable injury and illness cases involving **D**ays **A**way from work, **R**estricted work activity, and/or job **T**ransfer.

[3] An **Applicable Contractor** has employees working 1,000 or more hours in at least 1 calendar quarter at the applicant's site and is not directly supervised in day-to-day activities by applicant's management. Construction applicants do not break out this category of site employee. If you are a construction applicant, include all contractor employees in the category of Temporary Employees and include them in your TCIR and DART rate.

B.4. Accountability. Describe your accountability system used to hold managers, line supervisors, and employees responsible for safety and health. Examples are job performance evaluations, warning notices, and contract language. Describe system documentation.

B.5. Resources. Identify the available safety and health resources. Describe the safety and health professional staff available, including appropriate use of certified safety professionals (CSP), certified industrial hygienists (CIH), other licensed health care professionals, and other experts as needed, based on the risks at your site.

Identify any external resources (including corporate office and private consultants) used to help with your safety and health management system.

B.6. Goals and Planning. Identify your annual plans that set specific safety and health goals and objectives. Describe how planning for safety and health fits into your overall management planning process.

B.7. Self-Evaluation. Provide a copy of the most recent annual self-evaluation of your safety and health management system. Include assessments of the effectiveness of the VPP elements listed in these application guidelines, documentation of action items completed, and recommendations for improvement. Describe how you prepare and use the self-evaluation.

B.8. Employee Involvement. List at least three meaningful ways employees are involved in your safety and health management system. These must be in addition to employee reporting of hazards. Provide specific information about decision processes in which employees participate, such as hazard assessment, inspections, safety and health training, and/or evaluation of the safety and health management system.

B.9. Employee Notification. Describe how you notify employees about site participation in the VPP, their right to register a complaint with DOSH, and their right to obtain reports of inspections and accident investigations upon request. (Methods may include new employee orientation, intranet or e-mail if all employees have access, bulletin boards, toolbox talks, or group meetings.)

B.10. Contract Workers' Safety. Describe the process used for selecting contractors to perform jobs at your site. Describe your documented oversight and management system for ensuring that all contract workers who do work at your site enjoy the same healthful working conditions and the same quality protection as your regular employees.

B.11. Site Map. Attach a site map or general layout of your operation.

C. WORKSITE ANALYSIS

C.1. Baseline Hazard Analysis. Describe the methods you use for baseline hazard analysis to identify hazards associated with your specific work environment, for example, air contaminants, noise, or lead.

Identify the safety and health professionals involved in the baseline assessment and subsequent needed surveys. Explain any sampling rationale and strategies for industrial hygiene surveys, if required.

C.2. Hazard Analysis of Routine Jobs, Tasks, and Processes. Describe the system you use (when, how, who) for examination and analysis of safety and health hazards associated with routine tasks, jobs, processes, and/or phases. Provide some sample analyses and any forms used.

You should base priorities for hazard analysis on historical evidence, perceived risks, complexity, and the frequency of jobs/tasks completed at your worksite.

In construction, the emphasis must be on special safety and health hazards of each craft and phase of work.

C.3. Hazard Analysis of Significant Changes. Explain how, prior to activity or use, you analyze significant changes to identify uncontrolled hazards and the actions needed to eliminate or control these hazards. Significant changes may include non-routine tasks and new processes, materials, equipment, and facilities.

C.4. Self-Inspections. Describe your worksite safety and health routine general inspection procedures. Indicate who performs inspections, their training, and how you track any hazards through to elimination or control.

For routine health inspections, summarize the testing and analysis procedures used and qualifications of personnel who conduct them. Include forms used for self-inspections.

C.5. Employee Reports of Hazards. Describe how employees notify management of uncontrolled safety or health hazards. Explain procedures for follow up and tracking corrections. An opportunity to use a written form to notify management about safety and health hazards must be part of your reporting system.

C.6. Accident and Incident Investigations. Describe your written procedures for investigation of accidents, near misses, first-aid cases, and other incidents. What training do investigators receive? How do you determine which accidents or incidents warrant investigation? Incidents should include first-aid and near-miss cases. Describe how results are used.

C.7. Pattern Analysis. Describe the system you use for safety and health data analysis. Indicate how you collect and analyze data from all sources, including injuries, illnesses, near-misses, first-aid cases, work order forms, incident investigations, inspections, and self-audits. Describe how results are used.

D. HAZARD PREVENTION AND CONTROL

D.1. Engineering Controls. Describe and provide examples of engineering controls you have implemented that either eliminated or limited hazards by reducing their severity, their likelihood of occurrence, or both.

Engineering controls include, for example:

- Reduction in pressure or amount of hazardous material,
- Substitution of less hazardous material,
- Reduction of noise produced,
- Fail-safe design,
- Leak before burst,
- Fault tolerance/redundancy, and
- Ergonomic design changes.

D.2. Administrative Controls. Briefly describe the ways you limit daily exposure to hazards by adjusting work schedules or work tasks, for example, job rotation.

D.3. Work Practice Controls. Describe and provide examples of your work practice controls. These include, for example, workplace rules, safe and healthful work practices, specific programs to address WISHA standards, and procedures for specific operations that require permits, labeling, and documentation.

Identify major technical programs and regulations that pertain to your site, such as lockout/tagout, process safety management, hazard communication, machine guarding, and fall protection.

D.4. Personal Protective Equipment. Describe and provide examples of required personal protective equipment your employees use and what PPE the VPP team members will need to bring to your worksite.

D.5. Enforcement of Safety and Health Rules. Describe the procedures you use for disciplinary action or reorientation of managers, supervisors, and other employees who break or disregard safety and health rules.

D.6. Preventive/Predictive Maintenance. Summarize your written system for monitoring and maintaining workplace equipment to predict and prevent equipment breakdowns that may cause hazards. Provide a brief summary of the type of equipment covered.

D.7. Occupational Health Care Program. Describe your onsite and offsite medical service and physician availability. Explain how you utilize the services of licensed occupational health care professionals. Indicate the coverage provided by employees trained in first aid, CPR, and other paramedical skills, their training, and available equipment.

D.8. Emergency Preparedness. Describe your emergency planning and preparedness system. Provide information on emergency drills and training, including evacuations.

E. SAFETY AND HEALTH TRAINING

Describe the formal and informal safety and health training provided for managers, supervisors, and employees.

Identify training protocols, schedules, and information provided to supervisors and employees on programs such as hazard communication, personal protective equipment, and handling of emergency situations. Describe how you verify the effectiveness of the training given.

F. ASSURANCES

VPP applications must include a signed statement affirming that:

1. You will comply with the WISHA Act and correct in a timely manner all hazards discovered through self-inspections, employee notification, accident investigations, DOSH onsite reviews, process hazard reviews, annual evaluations, or any other means. You will provide effective interim protection, as necessary, during any DOSH onsite review. DOSH Compliance will inspect any workplace that has had a fatality and may inspect an injury requiring in-patient hospitalization of any employee.
2. Within 90 days, you will correct safety and health deficiencies related to compliance with DOSH requirements.
3. Your employees support the VPP application. At sites with employees organized into one or more collective bargaining units, the authorized representative for each collective bargaining unit must either sign the application or submit a signed statement indicating that the collective bargaining agent(s) support VPP participation.

   (DOSH must receive concurrence from all such authorized agents to accept the application. At non-union sites, management's assurance of employee support will be verified by the DOSH onsite review team during employee interviews.)
4. VPP elements are in place and management commits to meeting and maintaining the requirements of the elements and the overall VPP.

5. Employees, including newly hired employees and contract employees, will receive orientation on the VPP, including employee rights under VPP and under the WISH Act.
6. You will protect employees given safety and health duties as part of your safety and health management system from discriminatory actions resulting from their carrying out such duties, just as the RCW 49.17.160 and WAC 296-800-120 protect employees who exercise their rights.
7. Employees will have access to the results of self-inspections, accident investigations, and other safety and health data upon request. At unionized construction sites, this requirement may be met through employee representative access to these results.
8. You will maintain your safety and health management system information and make it available for DOSH review to determine initial and continued approval to the VPP. This information will include:
    - Any agreements between management and collective bargaining agent(s) concerning safety and health.
    - All documentation enumerated under Section III.J.4. of the July 24, 2000 Federal Register Notice which pertains in part to Washington's VPP requirements for VPP sites.
    - Any data necessary to evaluate the achievement of individual Merit or 1-Year Conditional Star goals.

    a. Each year by February 15, you will submit the following information to your designated DOSH VPP Specialist:

    (1) Participant Rates.

    - For the previous three calendar years, the average TCIR for injuries and illnesses, and the average DART rate (see tables at end of this appendix).
    - The total number of cases for each of the above two rates.
    - Hours worked and estimated average employment for the past full calendar year.

    (2) Contractor Rates.

    If you are a general industry, maritime, or federal agency site, you will submit data on each applicable contractor. Applicable contractors are those employers who have contracted with you to perform certain jobs and whose employees worked a total of 1,000 or more hours in at least 1 calendar quarter at your worksite. The data will consist of:

    - The site's TCIR and DART rate for each applicable contractor's employees.
    - The total number of cases from which these two rates were derived.

- Hours worked and estimated average employment for the past full calendar year.
- The appropriate NAICS code for each applicable contractor's work at the site.

(3) Annual Self-Evaluation.

Submit a copy of the most recent annual safety and health self-evaluation. Include a description of any success stories, such as reductions in workers' compensation rates, increases in employee involvement, and improvements in employee morale.

b. Whenever significant organizational or ownership changes occur, you will provide DOSH within 60 days a new Statement of Commitment signed by both management and any authorized collective bargaining agents.

c. Whenever a change occurs in the authorized collective bargaining agent, you will provide DOSH within 60 days a new signed statement indicating that the new representative supports VPP participation.

G. RATE CALCULATION AND TABLES

Follow these steps to complete the table below. Submit the table with your application:

1. Provide the site's North American Industry Classification System (NAICS) Code

C**onstruction Sites:** The site's NAICS code is determined by the type of construction project, not individual trades. Construction applicants must provide TCIR and DART rates. All workers, including all subcontractors who worked at the site, must be included in the calculation. The rates must reflect experience from time of site inception until time of application, and must be at least 12 months.

2. Provide the site's Total Case Incident Rate (TCIR)

- For regular site employees, including temporary employees you supervise, provide rates for each of the last three complete calendar years plus the average for all three years combined.
- For contractors whose employees worked 1000 or more hours in any quarter at your site, provide one combined rate as described in 7.a. above for all contractors' employees who qualify.

3. Provide the site's Day Away/Restricted Work/Transferred Incident Rate (DART)

a. For regular site employees, including temporary employees you supervise, provide rates for each of the last three complete calendar years plus the average for all three years combined.

b. For contractors whose employees worked 1000 or more hours in any quarter at your site, provide one combined rate as described in 7.a. above for all contractors' employees who qualify.[4]

Injury incidence Rates are calculated (N/EH) x 200,000 where:

N = number of recordable injuries/illness in one year. (OSHA 300 Log Columns H+I+J)

EH = total number of hours worked by all employees in one year.

200,000 = equivalent of 100 full-time workers working 40 hour weeks, 50 weeks per year.

Days Away/Restricted Work Incident Rate is calculated with the same equation where:

N = number of injuries/illness resulting in days away from work and restricted work activity days. (OSHA 300 Log Columns H+I)

4. Compare the three year TCIR and DART rate to the most recently published Bureau of Labor Statistics (BLS) national average (available online at *www.osha.gov/oshstats/work.html*) for the 3- or 4-digit (if available) SIC or the NAICS code for the industry in which the applicant is classified.

a. These national averages, currently broken down by SIC 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, and can be found at OSHA website: *www.bls.gov/iif/oshsum.htm*

b. BLS has changed from the SIC classification system to the North American Industry Classification System (NAICS), and VPP rates will be compared to the rates generated under NAICS. To convert SIC into a NAICS, go to the following BLS website: *www.naics.com/search.htm*

c. To calculate the percent above or below the national average, use the following formula:

$$\frac{\text{Site rate - BLS rate x 100}}{\text{BLS rate}}$$

5. Use the following table to display the information requested above by using one table for your site employees and the other for contractors with more than 1000 hours in any one quarter of the last three years.

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[4]**Submit applicable contractor rates with your application**, and also maintain them at the site for review by the DOSH VPP Team.

Approved participants submit applicable contractor rate data each year as part of their annual submission to DOSH.

Year / Last three years	Total Work Hours	Average Annual Employment	Total Recordable Injury & Illness Cases	Days Away/ Restricted /Transfer Cases	Total Case Incidence Rate (TCIR)	Days Away/ Restricted and Transfer Incidence Rate (DART)
2006						
2007						
2008						
3 Year Totals & Rates for 2006-2008						
Average of last available 3 years BLS Rates for SIC/NAICS _____						
Percent Above or Below BLS 3 year average rates						

APPENDIX B
INTERPRETATION OF PROGRAM REQUIREMENTS
(ALPHABETICAL LISTING)

ACCIDENT INVESTIGATIONS

All VPP participants must investigate all lost and restricted time accidents, and maintain written reports that include prevention recommendations.

DOSH encourages investigation of all incidents (including near-misses). The investigations need to discover and address root causes, rather than simply blame the employee.

For Star participants, written procedures or guidance must be in place by time of approval. The system must have been in operation for a full year before approval to Star level of participation.

The **results** of accident investigations must be made available to all covered employees on request. However, this does **not** necessarily mean that the actual investigation **records** must be provided.

The report of results that is made available needs to, at a minimum, describe the incident and what corrections have been made to avoid future occurrences.

APPLICATION, SINGLE-SITE

The applicant for VPP for a single facility could be the local management of that site, regardless of whether it is an independent business or part of a larger corporation, or it could be the corporate management when the corporation provides some of the services needed to qualify for VPP. The former is preferable in most cases.

APPROVAL CEREMONIES

Approval ceremonies provide a unique opportunity for recognizing employees and their contributions to the effectiveness of the worksite safety and health program. They are also a great opportunity for increasing community awareness of good corporate citizenship in action.

The elaborateness of the ceremony is up to corporate and/or site management, but a DOSH management representative needs to be available to present the certificate and flag.

The VPP Specialist needs to provide suggestions to company management regarding successful ceremony ideas.

Suggestions for invitees could include local political officials, other area companies that might be potential VPP candidates, DOSH Regional Consultation, any local VPP liaison, any-DOSH staff who recruited the company for VPP, and the onsite team, as well as higher-level Labor and Industries, OSHA, and government officials.

ASSURANCES

For all applicants to Star and Merit Programs, assurances are required for the application. For a full listing, see Appendix A, Section F.

The assurance that employees will not be discriminated or retaliated against for exercising any of their rights is provided under the WISH Act (RCW 49.17.160)

These assurances reflect what the applicant will do as part of the approved program.

The mechanisms to which the assurances refer may already be in place. All the applicant is required to demonstrate is willingness and ability to follow through on all assurances.

Employees need to be aware of the recourse available to them if management reneges on these assurances.

COLLECTIVE BARGAINING AGENT

If employees at a facility are represented by one or more collective bargaining agents, there must be a written statement that the collective bargaining agent supports, or, at a minimum, does not object to, the site's participation in VPP. Preferably the collective bargaining agent will actively support the site's participation in VPP.

It is up to the applicant to decide whether the local collective bargaining agent or its international organization is the appropriate authorizing body.

If only some of the employees are organized, the DOSH VPP Specialist (and perhaps other DOSH personnel) must decide whether a statement of collective bargaining support is needed.

A significant number of employees should be interviewed; however, any particular percentage of organized employees is probably not as important a determinant as the possibility that dissatisfied employees might hamper VPP operations. In making a judgment call of this nature, it is probably better to err on the side of caution.

CONTRACT WORKER COVERAGE IN GENERAL INDUSTRY

Written procedures are required for controlling safety and health conditions for all contract workers who are intermingled with the applicant's own employees. Such procedures are, however, not subject to the 1-year requirement to be in place at application.

Requirements and responsibility for contract workers depend on whether they are regularly involved in the routine site operations, or are engaged in temporary projects such as construction, repair, etc.

Those employees involved in regular site operations must be afforded equal protection by the site safety and health program. Examples of these contract workers include custodial workers, "nested" maintenance contractors, temporaries, etc.

While specialty contractors are not required to be covered in the same manner, they must be prudently selected and informed of relevant site rules and hazards that could affect either them or site employees.

Site management must maintain data on hours worked and injury and illness for all applicable contractors whose employees work a total of 1000 or more hours in any calendar quarter. This annual data must be reported every February for each contractor meeting the criteria, the same as is required for site hours worked.

DOSH INVESTIGATIONS

DOSH will investigate fatalities/catastrophes, and valid employee complaints, during VPP participation.

DOSH will also conduct investigations of significant chemical leaks or spills whenever DOSH is aware of them during VPP participation.

EMERGENCY PREPAREDNESS

Emergency plans must be developed that take the following into account:

- The kinds of potential hazards associated with the work done at the site, particularly explosions, fire, and release of toxic chemicals.
- Likely weather conditions and possible natural disasters (for example, the likelihood of flooding).
- Bomb threats and/or other emergency situations.

Written procedures should be established to cover the following:

- Emergency egress (exit routes, safe houses, assembly points, etc.)
- Emergency telephone numbers
- Responsibility for handling of each kind of emergency
- Emergency shut-down and start-up
- PPE
- Emergency medical care and follow-up.

Training needs to be provided for all employees regarding what their responsibilities are for each type of emergency. Unannounced drills are important on at least an annual basis.

EMPLOYEE INTERVIEWS

Interviewing employees requires management agreement. Management refusal to allow employee interviews would not only make it difficult to document all required aspects of the safety and health program and employee involvement, but would indicate a lack of management commitment to the safety and health program.

EMPLOYEE PARTICIPATION

A. Employee Participation in General Industry

General industry applicants may use some type of active employee participation other than a joint labor-management safety and health committee, provided that applicable DOSH standards are met, and must have at least three ways that employees are meaningfully involved in the site's safety and health program.

- Other appropriate methods of involving employees are available.
- Dealing with safety and health problems on the site in a meaningful and constructive way is the major determining factor in whether this requirement is considered met.
- Activities such as incentive programs or working in a safe manner are not in themselves sufficient to demonstrate active employee participation.
- Employee participation is not intended in any way to shift responsibility for worker safety and health from the employer, where the WISH Act has explicitly placed it.

B. Safety and Health Committee Requirements

The requirements for Star-level participation programs include the following:

1. Committee Membership

The committee must have employee representation at least equal to management; more employee members are acceptable but not more management members.

The employee members must be bona fide worker representatives who work at the site; in other words, a union representative who is not a company or subcontractor employee cannot be a committee member.

Management members need to also work onsite.

The employee members of the committee must be selected by the appropriate union or elected by all employees.

2. Meetings

The committee must meet at least monthly.

Committee meetings need to include activities such as review and discussions of committee inspection results, accident investigations, safety and health complaints, the OSHA Log, and analysis of any apparent injury trends.

Minutes must be kept that include actions taken, recommendations made, and members in attendance.

The committee must have quorum rules that require at least half of the membership to be present to conduct business, and there must not be more management representatives than employee representatives to have a quorum. Quorum must require representatives of both employees and management to be present.

a. Inspections

(See requirements in INSPECTION/INTERACTION HISTORY and INTERNAL INSPECTION SYSTEM in this Appendix.)

b. Accident Investigations

(See requirements in ACCIDENT INVESTIGATIONS in this Appendix)

c. Access to Information

The committee must have access to all relevant safety and health information. The kind of information that needs to be available includes:

- The log of injuries and illnesses, and first-aid logs
- Workers' compensation records
- Accident investigation reports
- Accident statistics
- Safety and health complaints
- Industrial hygiene survey and sampling results, and
- Training records.

d. Committee Training

Committee members who need training in hazard recognition must have access to such training. Journeymen craftsmen might only have expertise on their own craft; for instance, they may not be prepared to recognize chemical hazards. The question is whether the committee members possess adequate experience and knowledge to conduct inspections, or whether training is needed for them to adequately recognize hazards.

The committee may need training in other areas, such as how to use statistics to direct inspections, and how to work together as a group.

There needs to be a mechanism for determining training needs and for meeting these needs.

For Star-level participation approval, the committee must have been operational for one year.

HAZARD REVIEW AND ANALYSIS SYSTEM

A hazard review system involves an analysis of a job, a process, or the interaction of activities, in order to identify hazards that have been or could be "built-in." Where hazards are discovered, the analysis must result in improved work practices and employee training as well as (particularly with process analysis) preventive engineering controls.

A routine hazard review system is not an inspection system.

There must be evidence that the system has been in place for at least one year for Star status, and that some processes have been analyzed and the results used in training in safe job procedures; in modifying work stations, equipment or materials; and in planning for anticipated potential hazards.

For many jobs, safe operating procedures may be incorporated in operating and maintenance instructions developed at the site. The key is to ensure that workers, particularly those newly assigned, are aware of hazards and safety precautions.

INDUSTRIAL HYGIENE (IH) PROGRAM

The written IH program may be an independent program, or it may be an integral part of the safety program.

It is important that the IH program addresses the potential health hazards in the workplace.

The application must include an explanation of how the health program is implemented (for example, is all industrial hygiene work performed by regular staff onsite, are some services contracted out, does the corporate IH department provide some industrial hygiene support?).

Local DOSH consultation services may be used for advice within the scope of their limitations on size of business, but they may not be relied upon as the sole source of industrial hygiene expertise.

A. Star Program. The written program addressing occupational health protection needs to address specific hazards, and include engineering controls, administrative controls, personal protective equipment requirements, and employee training in healthful work practices.

These controls and requirements must be effectively communicated and enforced, must clearly assign responsibilities, and must provide sufficient resources for the size of the workplace and the types of hazards to be addressed.

All potential health hazards must have been identified by appropriately qualified personnel by some means such as a complete industrial hygiene survey or a complete process hazards review. A comprehensive health program must be developed based on knowledge of those hazards and must be in effect at least one year, for Star approval.

Additional surveys must be conducted, along with analyses of safety hazards, whenever processes change.

Periodic monitoring and sampling of any identified problem areas must also be conducted by appropriately trained personnel, with results available for DOSH's review.

DOSH needs to see this documentation, either in the application or during the onsite visit.

The survey needs to be done by an industrial hygienist; however, monitoring and sampling may be performed by safety staff members with special training in the specific procedures for the potential health hazards in the workplace.

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

These services may be contracted out.

B. Merit Program. Merit participants are expected to move toward Star Program health coverage requirements (see "Star Program" above).

INSPECTION/INTERACTION HISTORY

The VPP's success depends on establishing an atmosphere of trust and cooperation among all parties. Therefore, a subjective characterization of the applicant's ability to be involved in a cooperative effort with DOSH is required, based on the available data.

Inspection and DOSH interaction history, required for all programs, needs to indicate good-faith efforts to improve safety and health.

The number of inspections, whether programmed or from complaint, is not a measure, but inspection results need to be evaluated.

Any appealed or upheld citations for willful violations, or any safety and health discrimination complaints that are determined by DOSH to be valid at an applicant site during the last three years, preclude participation in VPP.

Any uncontested or upheld repeat violations need to be analyzed for indications of weakness in the safety and health program.

Correction of any serious violations needs to be reviewed.

One example of a bad-faith approach to safety and health is harassment of compliance officers. Bad-faith interactions with DOSH in the standards development process may also preclude a cooperative working relationship in the VPP.

Any uncompleted enforcement actions such as long-term abatement agreements or appeals need to be resolved before the review team goes onsite.

INTERNAL INSPECTION SYSTEM

A. **Written Procedures.** A system is required that includes written procedures for routinely scheduled inspections (for example, weekly, monthly).

Written procedures need to provide guidance as to responsibility, frequency and schedule of inspection, use of information sources, where to look and what to look for, recording of findings, which findings are reported, and tracking of correction.

For Star-level participation, the system itself must have been in place for a year, and the procedures for the system must be in writing before approval.

B. **General Industry Programs.** Inspections need to be made monthly by knowledgeable personnel, followed up with written reports of findings and documentation of abatement.

Knowledgeable personnel do not have to be certified, although proven access to certified safety and health professionals is required for Star-level participation; but personnel must be qualified to recognize workplace hazards, particularly those unique to their industry. (See also requirements in PROFESSIONAL EXPERTISE in this Appendix.)

Others may participate in the inspection process.

C. **Inspection Coverage.** It is not necessary for each inspection to cover the entire workplace, but at a minimum, the entire worksite must be covered at least each quarter.

DOSH prefers more frequent coverage even of large sites, and expects more frequent coverage of small sites.

The types and severities of potential hazards need to be considered in determining whether an inspection schedule is appropriate.

D. **Hazard Correction.** Hazards identified by the applicant's self-inspections must be systematically corrected in a timely way.

At a minimum, a tracking and control system must be in place by the time of approval for Merit-level participation.

For Star-level participation, a tracking and control system must have been in place for a year at time of application.

MANAGEMENT ACCOUNTABILITY

A. **Star Programs (Star-level participation).** There must be documentation that a system exists and has been in place for at least one year, for management accountability for safety and health, from the chief executive officer to the first line supervisor. A description of the accountability system must be included in the application.

Procedures and blank forms for recording such accountability are also appropriate for the application.

The system must be based on some type of evaluation of supervisors:

- It may be a performance rating system that rates safety and health;
- It may be a management-by-objectives system for safety and health goals;
- It may be a system of rewards for safety and health performance and/or a disciplinary system for managers whose employees do not perform their work in a safe and healthful manner;
- It may be a system involving a central safety and health committee, consisting of top managers and chaired by the plant manager, with impact down to the first-line supervisor, so long as evaluation of performance of safety and health responsibilities is implicit.

The above are several acceptable types of systems; other types that may be demonstrated to be equally effective could be acceptable. The key is that all managers know they are being evaluated individually on the effectiveness of the way they carry out assigned safety and health responsibilities.

Some evidence of the system must be shown to onsite reviewers. The documentation does not become part of the public information file.

B. **Merit Programs.** An accountability system must at a minimum be outlined and ready to put in place upon program approval.

MERIT PROGRAM

- DOSH will work with a site to improve its safety and health program to meet Star-level program qualifications.
- Merit participants must be working toward meeting the Star requirements and must be adding to or improving various aspects of their programs to that end.
- Merit goals must reflect Star requirements not presently in place or aspects of the safety and health program that are not Star quality.
- Identified problems indicate system breakdown and need to be addressed as part of a system renewal, expansion, or improvement effort.

- Merit goals must include recommendations for safety and health program improvements that address identified problem areas and hazardous conditions.
- A list of specific hazardous conditions needing correction is not appropriate for a Merit goal. Training in hazard recognition and appropriate tracking of correction that would eliminate those conditions are appropriate subjects for goals.
- It is important to remember that, unlike Star, Merit Program approvals are for a specific period of time and come to an end.
- Merit approvals are usually one to two years. The time period reflects a practical estimate of the time needed to achieve Star approval plus a "cushion" for any unforeseen delays.
- Merit Program participants generally are expected to be eligible for Star Program at the end of the Merit term, or will be terminated from VPP participation.

METHODS OF INFORMING EMPLOYEES ABOUT VPP

- All employees, including new-hires and contractors as they arrive, must be notified about the site's participation in VPP and the employee's continuing right to file safety and health complaints with DOSH .
- Many methods of notification are suitable. The key for judging appropriateness is the likelihood that employees will pay attention and understand. For example, simply posting a notice on the bulletin board probably would not be sufficient.
- In general, the more personal the explanation, the more effective it is.
- All employees, including those of subcontractors, must be informed in some way about VPP provisions.

NON-DISCRIMINATION

- The applicant must submit a declaration of fact or provide evidence that confirms all employees have safety-related responsibilities and are protected by the WISHA Discrimination Statute (pursuant to RCW 49.17.160) if they voice safety concerns in the workplace. The Applicant must also ensure that those employees (who voice safety concerns in the workplace) are not the recipients of harassment or any other form of retaliatory actions and are guaranteed full protection as provided by the WISHA Act.
- This declaration may be submitted in the applicant's own words provided it meets the requirements of RCW 49.17.160.
- This declaration should also include statements relative to employees' participation on a safety committee and how this activity does not preclude the Employer's decision to terminate when other non-discriminatory reasons (other than their engagement in a safety-protected activity) exist.

OCCUPATIONAL HEALTH/FIRST AID PROGRAMS

- Occupational health care programs, including first-aid-trained employees with current certificates, and CPR/AED, need to be available on all shifts.
- Emergency services, including provisions for ambulances, EMTs, emergency clinics, or hospital emergency rooms, need to be explained.
- Arrangements for needed health services such as pre-placement physicals, audiograms, etc., need to be included.

PERSONAL PROTECTIVE EQUIPMENT (PPE)

- The PPE program must have strictly enforced rules that determine when to use PPE and what type to use. Depending on the hazards at the site, DOSH expects how to use eye protection, hearing protection, and breathing protection to be addressed, as well as the use of hard hats, safety shoes, and other protective clothing.
- Responsibility, availability, fit, and maintenance must be part of the PPE program.
- The employee health training program must include when, where, and how to use PPE, and the care of the appropriate PPE devices.
- Employee training needs to also include safe work practices for the particular job, and proper handling of any hazardous materials in the workplace.
- Where respirators are needed, a written respirator program must be in place and implemented.
- PPE must, of course, be properly used in conjunction with engineering and administrative controls.

PROFESSIONAL EXPERTISE

- For Star Programs, access to safety and health professionals (including occupational health personnel) is required and must have been in place for at least a year.
- Those services may be provided by offsite sources such as corporate headquarters, insurance companies, or private contractors.
- DOSH accepts certification from any recognized accrediting organization. DOSH does not provide certification or establish one certification as the only means of qualifying for VPP.
- DOSH does not accept certification “qualifications” in lieu of the actual certification.

RATES

- Injury and illness rates provide an indication of a safety and health program's effectiveness.
- While they are important as indicators, these rates are not definitive.
- The structural requirements of the comprehensive safety and health program remain the central qualifications for Star and the Merit Programs.
- Rates are calculated per 100 employees per year, and are averaged over three years (to provide a fairer view) for comparison against the most recently published 3-year national average for the NAIC code industry in which the applicant is classified.
- These national averages are found in the Table of Occupational Injury Incidence Rates by Industry of the BLS Occupational Injuries and Illnesses Bulletin published each year.
- All employees at the site, including temporary employees and contract workers under direct supervision of site employees, must be included in the site rates.
- The yearly rates submitted in the application need to be for the three most recent complete calendar years. The current year-to-date rates will be calculated during the onsite visit.
- If the NAIC code submitted by the applicant appears to be in error, an effort to determine the reason for the designation needs to be made. If a NAIC classification question exists, the problem may be discussed between the site and the VPP Coordinator, and a determination made of the proper NAIC code for comparison purposes.
- Workers' compensation insurance experience rating modification factors may be used as additional indicators of safety performance, where offered, and may be used by public sector employers.
- **For Star-level participation**, the general-industry applicant must have both a 3-year average TCIR and a 3-year average DART rate at, or below, the national average (for the average of the three latest years published by BLS Bulletin) for the specific NAIC.

REPORTS/CONCERNS OF EMPLOYEE SAFETY AND HEALTH PROBLEMS

- Star and Merit Programs must have some system for handling employee reports of safety and health concerns.
- This system may recommend, but must not require, that the internal process be used before filing a complaint with DOSH.
- A written system need not have been in place for a year if employees are satisfied, and the company history of complaints to DOSH is not excessive for the industry.
- For approval, however, a written system must be established except where the small size of the site makes the formality of a written system redundant.
- DOSH recommends a system where anonymity is possible.
- Employees must be systematically informed of the results of their notifications (for example, posting of responses to anonymous notifications).
- Employees must be guaranteed protection against retaliation or discrimination for voicing workplace safety concerns.

SAFETY AND HEALTH PROGRAM

- Each applicant must have a written safety and health program that addresses the potential hazards of the workplace.
- Evaluation of each program requires judgment regarding the quality of the program and its appropriateness for the potential hazards present.
- Since each program must be specific to the potential hazards at that particular workplace, each program will be unique while at the same time meeting the criteria.
- Informal systems may be appropriate for small sites with relatively few potential hazards. Oral employee hazard reporting may work effectively at a small site. A formal tracking system for correction of identified hazards may not be necessary at a small site.
- The best evidence that the safety and health program is communicated to employees and is enforced can be obtained by talking with and observing employees where they work.

SAFETY AND HEALTH PROGRAM EVALUATION

A. All Programs. There must be a system in place for evaluating the safety and health program, and this internal program review must be performed at least annually.

A self-evaluation is not an inspection of the worksite; it is a critical review of all of the elements of the safety and health program.

An evaluation of the safety and health program needs to cover the effectiveness of:

- The self-inspection system
- The employee hazard notification system

- Accident investigations
- Employee participation
- Safety and health training
- The enforcement of safety and health rules, and
- The coverage of health aspects including PPE, routine monitoring and sampling, and review of health surveillance data.

The evaluation report identifies the strengths and weaknesses of the program and has specific written recommendations for improvement.

The evaluation may be conducted by qualified onsite or corporate staff, or other outside sources.

An evaluation that is merely a workplace inspection with a brief report pointing out hazards or saying that everything is OK is inadequate for purposes of VPP qualification.

There needs to be documentation of actions taken to satisfy the recommendations found in the evaluation reports.

B. Star Programs. The safety and health evaluation system must have been in place for a year.

While an evaluation system ordinarily requires both procedures and the resulting reports, smaller companies may act more informally without written procedures.

This does not necessarily preclude them from meeting the 1-year requirement. If the reviewer determines that the evaluation is suitably comprehensive, and the company can demonstrate that positive actions have been taken as a result of the evaluation, the 1-year requirement for a full written evaluation system may be waived.

The applicant is expected, however, to complete written procedures for a suitable system before the site is recommended for approval.

Where a formal system is in place one year before the approval date, the applicant must also be able to provide a copy of at least one report based on those procedures, and to demonstrate that positive action has been taken as a result, where necessary.

C. Merit Programs. The annual evaluation system must, at a minimum, be ready to begin operating when the site is approved for participation.

SCHEDULED ONSITE ASSISTANCE

Such assistance is needed on some Merit sites. Merit general-industry sites occasionally need periodic consultation to help them achieve their goals. When this is obvious during the onsite review, an appropriate schedule needs to be negotiated. The schedule may be changed as the site's needs change.

STAR PROGRAM

- The Star Program is meant to recognize the very best workplaces with comprehensive programs for safety and health protection. Judgments often must be made regarding the quality of various aspects of the applicant's program.
- The key to decision-making needs to always be whether or not that particular feature is "Star quality." The idea is to be flexible in judging how an applicant site demonstrates it is meeting the requirement, but be firm in applying DOSH Standards.
- Many companies have safety programs that are more sophisticated than their health programs. If the total program is not Star quality, the site must be recommended for Merit rather than Star participation.
- When a participating Star site is found to have slipped below Star quality in one or more required areas, continued Star participation depends on the site improving the program to ensure Star criteria are met and maintained by the date when the scheduled evaluation must be completed.
- If the evaluation team and the site can agree on needed program improvements, and the correction can be expected to be made in one year, the site may continue in the Star program, contingent on satisfactory quarterly reports during the 1-year period. At the end of that year, the completed evaluation must show that the site has returned fully to Star quality.
- If agreement is not reached, the site must be allowed the opportunity to withdraw, or be subsequently terminated if the site does not withdraw.
- If changes either are not made, or do not return the program to full Star quality within the year allowed, the site must be allowed the opportunity to withdraw, or be subsequently terminated if the site does not withdraw.
- If changes are made appropriately, and the completed evaluation shows that all Star requirements are met, the site may continue to participate in the Star Program.

WITHDRAWAL FROM THE VPP

- An applicant prior to approval, or an approved participant, may withdraw at any time by writing a letter to the DOSH VPP Specialist stating the site's decision. (See Chapter 7, Section F, for Department response to withdrawal.)
- Whether withdrawal happens before or after approval, the VPP Specialist needs to determine the cause of withdrawal and notify the Special Employer Programs Manager of the cause.
- For a pre-approval withdrawal, the application is returned to the applicant. For a withdrawal after approval, however, the participant's document folder needs to be placed in an 'inactive' file, as a record of VPP activity.

APPENDIX C
TEAM LEADER RESPONSIBILITIES DURING VPP ONSITE REVIEWS

1. Review the application.

Be sure to include e-mailed and faxed items in your application review.

2. Decide what documentation you will need to review onsite.

(For a list of examples, see Chapter 5, Figure 5-1, for pre-approval onsite visits, or Chapter 8, Figure 8-1, for evaluation onsite visits.)

3. Determine how much time you expect to need for the onsite visit.

The following is an approximate timetable for pre-approval reviews (evaluations may take less time):

a. Initial interview and site presentation – up to ½ day.

b. Review of the paper program – 1 to 1½ days.

c. Walk-through and any committee or employee interviews – 1 to 1½ days.

d. Team findings meetings – 1 hour per day privately with team, plus ½ to 1 hour with site personnel daily.

e. Report drafting – ½ to 1 day.

f. Final meeting – ½ to 2 hours, depending upon how much material is covered in preliminary meetings.

4. Make arrangements for the onsite visit.

Obtain the site's concurrence, and discuss the list of documents to be reviewed and the purpose of the medical access order. (See Chapter 5, Section C.2.c., about the medical access order.)

5. Send the medical access order and cover letter in a timely manner.

Follow the procedures in WAC 296-802-50005 and 50010 (or any DOSH policy document which subsequently replaces it). The medical access order must be issued prior to conducting the onsite evaluation.

6. Conduct a team strategy meeting.

Hold this meeting immediately before the onsite review.

All members of the review team must attend.

Determine if all team members are familiar with the onsite review procedures and the application. If not, provide a brief review.

Allow ½ hour to 2 hours, depending upon the experience of the team and the complexity of the review.

Discuss the schedule for the onsite review, and team members' responsibilities.

Assignments need to include:

- Reviewing documentation.
- Conducting the walk-through and informal interviews.
- Identifying and conducting formal, private interviews with a random selection of employees.
- Reviewing the injury log, recalculating rates and averages.
- Drafting sections of the Pre-Approval Program Review Report.

Set the tone for conducting the onsite review: helpful, cooperative, and as non-intrusive as possible.

Remind team members to avoid any statements to company representatives during the review about the adequacy of the safety and health program in meeting the qualifications for VPP.

Develop a list of questions that team members have regarding the application. The Team Leader needs to supply an initial list.

Discuss any anticipated problems or concerns.

7. Prepare for the Onsite Review.

The Team Leader keeps the review on track.

Meetings with site officials need to follow an outline or list of questions.

8. Conduct the opening meeting onsite.

- Set the tone of the review. Emphasize administration support for the program. State the desire to keep the review as unobtrusive as possible.
- State the goals of the review:
  - Verify application through documentation.
  - Assess the adequacy of the site's safety and health program to address existing or potential hazards.
- Explain handling of any serious violations noted during the walk-through.
- Discuss authorization and procedures for employee interviews.

9. Conduct the onsite review.

- Review and make notes regarding documentation.
- Ensure that appropriate team members review:
  - Injury/illness records, and recalculate rates,
  - Sampling and monitoring records, and

  - Other medical/health records. (See Chapter 5, Section C.2.c)
- Ensure that appropriate team members see documentation necessary for assigned report sections.
- Walk through production areas.
- For time management, be aware of what each team member is accomplishing. Adjust assignments as needed, so that all can finish together.

10. Keep management posted about the status of the review.

Before leaving the site each day, review the status of the onsite review with the site's safety and health staff, covering:

- What has been accomplished
- What time you will resume in the morning, and
- What you plan to accomplish the next day.

11. Conduct a team meeting to summarize findings.

- Allow approximately 1 hour.
- Discuss any anticipated problems or concerns, and any additional information/clarification needed.
- Organize findings from team input to provide an assessment in each specific program requirement. (The application checklist is a useful reference for this purpose.)
- Identify examples to illustrate findings.
- Attempt to get team consensus on recommendation for approval or disapproval.
- Identify any items needing action before DOSH approval could be given.

12. Provide a briefing on findings.

- Check first to see if the site's safety and health staff feel the team has seen all that they need to see.
- Review the goals of the onsite review.
- Present findings in terms of specific VPP program requirements, illustrating where possible.
- List items needing action, if any.
- Allow expert team members to answer questions on findings that involve their area of expertise.

- Make clear that the team will only recommend for or against approval; the decision about a pre-approval review, advancement from Merit to Star, or termination is made by the DOSH Assistant Director, not the onsite review team.
- Ensure that all questions are answered to the best of the team's ability.
- Be sure to express appreciation for safety and health staff assistance and for the opportunity to see the site's program.
- Keep the atmosphere cooperative and helpful.
- Explain next steps.

13. Write up findings using appropriate report format.

- The various sections need to be drafted by assigned team members.
- Once drafted, each section needs to be reviewed and agreed upon by all team members (to the extent possible).
- Provide an opportunity for the applicant to review the draft report and offer input or feedback.
- Finalize the report. (See Appendix F)

APPENDIX D
EMPLOYEE INTERVIEW QUESTIONS

These questions are intended to guide the DOSH reviewer during employee interviews. Explain your purpose in being at the site and state that the employee's responses will not in themselves determine company approval or disapproval.

To preserve confidentiality, don't record names or other potentially identifying information.

A. GENERAL EMPLOYEES

1. How long have you worked here?
2. Tell me about your job. What do you do during a typical day?
3. What are the safety and health hazards of your job?
4. How do you protect yourself from those hazards? What kind of personal protective equipment do you wear? Were you provided safety and health training?
5. What type of safety and health training have you received?
6. What happens if management disobeys a company safety rule? If an employee disobeys?
7. How do you respond in the event of a fire, hazardous waste spill, alarm, or medical emergency?
8. What does VPP mean to you?
9. What is one method of reporting a safety or health concern? What was the last unsafe practice you reported and/or corrected?
10. How do your supervisors demonstrate their involvement in safety and health?
11. Have you ever seen anyone testing the air, testing noise levels, or conducting other surveys for possible health hazards? Do you know what the results were or what they meant?
12. Have you or anyone you know ever been injured or experienced a job-related illness? What is the procedure when someone is injured?
13. How are you involved in the safety decision-making process?
14. Is safety and health valued in your organization?
15. What is one objective in your department's safety program?
16. How does management support your involvement in safety?
17. What are your rights under DOSH?
18. Is there anything else you think we should know about the safety and health program here?

B. SUPERVISORS

1. How long have you worked here? When did you become a supervisor?
2. What do you see as your role in safety and health?
3. To what kinds of hazards are you and/or your employees exposed?
4. Has the company's upper management provided adequate resources for safety and health programming, such as funding, time, and technical support?
5. What do you do when you discover a hazard in your area?
6. What do you do when an employee reports a hazard in your area?
7. Do you provide employee training in safety-related topics? (If so, please describe.)
8. Please give some examples where you had to use the disciplinary system for infractions of safety and health rules
9. When was the last emergency drill? What is your role in drills?
10. How are you held accountable for ensuring safe and healthful working conditions in your area?
11. 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?
12. 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?
13. Are there routine or unannounced inspections? Who participates?

C. ADMINISTRATORS AND EXECUTIVES

1. How long have you been with (company)?
2. Describe the type of safety and health hazards at this site.
3. How does management ensure that employee exposure to those hazards is eliminated or controlled?
4. How do you demonstrate leadership in and commitment to safety and health?
5. What benefits will a VPP partnership provide for your company?
6. What do you think are your facility's best practices in safety and health?
7. How do you address the competing pressures of production and safety?
8. How do you hold your supervisors accountable for safety and health? Have you ever had to discipline a supervisor for not following the rules?
9. How are you held accountable for your safety and health responsibilities?

D. RECORD KEEPERS

1. Who is responsible for recordkeeping?
2. Is your site recordkeeping centralized? Is it computerized?
3. Do you have a completed Summary of Occupational Injuries and Illnesses for the last 3 calendar years? Do you have the supplemental documentation for each case entered on the log?
4. 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?
5. What is the process by which injury and illness information gets to the record keeper? After an injury or illness occurs, how long does it take to enter it on the log?
6. What type of reference material do you refer to for guidance on keeping illness and injury records?
7. Who decides whether or not a case is recordable?
8. How do you determine whether or not a case is work-related?
9. Do you record any cases on the OSHA forms that are not compensable under workers' compensation?
10. How do you distinguish between an injury and an illness? Between medical treatment and first aid?
11. When does a case involve lost workdays? What constitutes restricted work activity?
12. What is your process for monitoring applicable contractor logs?
13. How do you safeguard the confidentiality of medical records?
14. How do you assure that any work restrictions are applied appropriately?
15. How have you assured timely and clear communications with the health care professional?

E. OCCUPATIONAL HEALTH CARE PROFESSIONALS

1. What are your qualifications and licenses?
2. What procedures are in place to ensure that health care services are delivered consistently and effectively?
3. What type of audit procedures do you use to compare your process with acceptable standards of practice and DOSH requirements?
4. Are employees provided timely access to services?
5. How do you assure that work restrictions or work removal are followed?

6. How are you made aware of the job hazards at this facility? Are you included in identification of workplace hazards, or development of restricted duty jobs, or other onsite issues?
7. What kinds of health surveillance programs are in place?
8. How do you communicate health surveillance data to employees and management to reduce future risk?
9. Explain how you evaluate the effectiveness of your occupational health care program.

F. MAINTENANCE PERSONNEL

1. Is there a scheduled preventive maintenance program? How is it carried out?
2. Do maintenance personnel participate in safety functions?
3. Is there a priority system for safety/environmental related maintenance items? Is it being followed?
4. Does the preventive maintenance program include onsite vehicles, sprinkler systems, detection/alarm equipment, fire protection, and emergency equipment?
5. Do you have input concerning safety and ease of maintenance for new equipment and machinery purchases?
6. Do you have an inventory of spare parts critical to safety and environmental protection?
7. Are you trained in the control of hazardous energy and the proper use of locks and tags?
8. Is there a system in place to track requests for repairs?
9. What methods are used to monitor the condition of critical equipment?
10. What is the ratio of scheduled versus unscheduled maintenance work?
11. What has the trend regarding maintenance been like over the past few years?
12. At sites covered by Process Safety Management (PSM), please ask appropriate questions from the Dynamic Inspection Priority Lists.

G. SAFETY COMMITTEE MEMBERS

G.1. General

a. How long have you worked for this company?

b. How long have you served on the committee?

c. How are committee members chosen?

d. What is the total number of committee members?

(1) Number of management representatives?

(2) Number of employee representatives?

e. How often does the committee meet?

(1) In view of the committee's workload, is this number of meetings too many? Just about right? Too few?

(2) How are members notified of scheduled meetings?

f. How many of the committee members usually attend meetings? All? Most? About half? Less than half?

(1) Are members encouraged to attend the meetings?

(2) What happens if a member misses a meeting?

g. Are committee meetings held on company time?

h. For multi-employer worksites: To your knowledge, do all members work at the site?

i. Are there safety and health professionals on the committee? If so, do these people take the time to explain technical points when they arise?

j. Does the committee have access to the OSHA log of injuries and illnesses?

k. What other safety and health records has the committee been able to review?

l. Does the committee conduct inspections based on review of this data?

G.2. Management Leadership

a. Can you tell me what the safety and health policy is at this worksite?

b. Can you tell me what the overall goal for safety and health is at this worksite?

c. Are you aware of any safety and health objectives for this worksite? If so, tell me about them. And if so, do you know who, if anyone, has responsibilities relating to these objectives?

d. In general, who would you say has responsibility for the safety and health of you and your co-workers?

G.3. Top Management Involvement.

a. Are the top managers at this worksite involved in safety and health in ways that you can see? If so, please give me some examples.

b. On a scale of 1 to 5, with 1 being "non-existent," how would you rate safety and health communication from top management to you and your co-workers? Why?

c. On the same scale, how would you rate the ability of you and your co-workers to communicate with top management? Why?

d. Would you agree with the statement that managers set a good example of safe and healthful behavior? Can you give one or more examples of management behavior that led to your agreement (or disagreement) with this statement?

G.4. Inspections.

a. How often does the committee do whole-site inspections?

b. If inspections cover only part of the workplace, how many inspections are needed before the entire workplace has been inspected?

c. Do you normally participate in the inspection process? What area do you inspect?

d. How many inspections have you made in the past year?

e. Do you consider this an adequate number?

f. In terms of keeping the workplace safe, do you consider the inspections very useful? Somewhat useful? Not useful? How would you change or improve them if you could?

g. What role, if any, does the committee play in accident investigations?

h. Have you seen industrial hygiene inspections at your worksite? Have you accompanied or participated in any of these inspections?

i. Can you describe the committee's role, if any, in the handling of reports of safety and health problems from workers?

j. If the committee oversees the process for notification of safety and health problems, does it verify that hazard correction occurs on valid concerns?

k. Have you ever accompanied a WISHA inspection? How would you compare committee inspections with WISHA's? Are the results similar? Please explain.

G.5. Training.

a. Have you been trained specifically to work on the committee? If so, describe.

b. Who provided the training?

c. Did your training prepare you for committee work?

d. Did your training include information on safety hazards? Health hazards?

e. Since your initial training, have you received supplementary "refresher" training? Describe briefly.

f. How would you change or improve the training, if you could?

H. GENERAL QUESTIONS FOR ONSITE EVALUATIONS TO DETERMINE RE-APPROVAL

1. Describe any changes in your job or in the handling of safety issues since the last DOSH onsite evaluation.
2. How familiar are you with VPP? Has your awareness increased since the last visit?
3. Do you have any increased knowledge of your rights under the program, including your right to receive, upon request, the results of self-inspections or accident investigations?
4. Do you feel that the VPP partnership has had a positive impact on your job and your safety?

APPENDIX E
REQUIREMENTS CHECKLIST

A. A REVIEW TOOL

The following checklist is a helpful tool in ensuring that the onsite team has considered every requirement for VPP approval. It may also be used effectively to guide the discussion in the final interview.

As you use this tool, bear the following in mind:

- This is not a required form. Information may be gathered in some other way/method.
- It is not meant to be a thorough discussion of every requirement and does not address all the details necessary for the report.
- The complete list of requirements and their interpretations are located in Appendix B of this manual.

B. USE FOR STAR AND MERIT

- For best use of the checklist, fill in every item before presenting the team findings (and proposed recommendations concerning approval) to site management.
- For Star Program approval, every requirement on the checklist must be met before approval can be recommended. (Those requirements that must be in place for one year before Star Program approval must have a clear statement to that effect.)
- Any asterisked item denoting a requirement for Merit must be met before approval can be recommended. The 1-year preconditions do not apply to Merit.
- Any item not preceded by an asterisk and not in place at the site must be the subject of a Merit Program goal, if the site is to be approved for Merit.
- Take time before the meeting to get review team consensus on suggested goals for a site that can qualify for Merit, but not Star. This helps make discussion with management more productive, and ensures that goals are negotiated for every requirement not yet at Star quality.

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
* DOSH inspection/interaction record indicates good faith.			
* Written and signed employer assurances received.			
* Where unionized, signed written statement of support for (or no objection to) the VPP received from the authorized collective bargaining agent(s).			
PROGRAM REQUIREMENTS **(ONE YEAR OF QUALITY EXPERIENCE WITH ALL ELEMENTS IS REQUIRED TO QUALIFY FOR STAR)**			
RECORDKEEPING			
3-year average rates for total recordable and lost workday injuries are at or below national average for specific NAIC.			
MANAGEMENT LEADERSHIP AND EMPLOYEE INVOLVEMENT			
Safety and health planning integrated with overall management planning. Safety and health is part of the planning process for changes in equipment, materials, processes, and, in construction, phases. Often called Management of Change.			

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
* Established policies and objectives communicated to all employees, including contract employees.			
Authority and responsibility clearly defined and implemented.			
Line managers and supervisors are held accountable for safety and health through an effective evaluation process. Good performance rewarded. Poor performance corrected.			
Adequate resources in people and equipment available.			
Top management visible, accessible, and setting an example.			
Contract workers are covered by the same or an equally effective safety and health program.			

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
Annual program evaluation conducted. Includes a written report. Includes written recommendations. Includes documented follow-up to recommendations.			
EMPLOYEE INVOLVEMENT			
* General industry: Employees are involved in at least three different ways in the safety and health program in a manner that has a demonstrable impact on decision making.			
WORKSITE ANALYSIS (HAZARD ASSESSMENT PROGRAMS)			
* Baseline industrial hygiene survey with written report or system of process review.			

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
* Industrial hygiene monitoring and sampling, laboratory analysis planned and implemented as necessary. * Monitoring and sampling done in accordance with nationally recognized procedures. * Laboratory analysis of samples done in accordance with nationally recognized procedures.			
* Routine self-inspections with written reports and hazard correction tracking: (1) Procedures are in writing. (2) Monthly inspections with quarterly coverage of whole site (general industry) in place for one year.			
Routine hazard review such as process review or job safety analysis: Review results in improved safe work procedures and/or employee training.			
* Reliable system for employees to notify management about hazards: (1) Receive adequate and timely response. (2) System includes written notification and tracking of hazards.			

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
* Accident investigation system: (1) With written reports. (2) With hazard correction and tracking. (3) Procedures are in writing.			
Analysis of injury, illness, and other related records to determine if any patterns exist, and, if patterns are identified, develop plans to address the patterns.			
HAZARD PREVENTION AND CONTROL PROGRAMS			
Reasonable access to certified industrial hygiene, safety, and health care professionals.			
* Safety and health rules are written and enforced.			
Written safe work practices in place.			
* Disciplinary system for breaking any rules involving safety and health.			

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
Written emergency procedures implemented that include: (1) Any necessary PPE. (2) First aid and occupational health planning. (3) Emergency egress plans and evacuation procedures. (4) Emergency telephone numbers provided. (5) Plans for conducting emergency drills.			
* Effectively implemented program for preventive and routine maintenance of all equipment.			
* Occupational health program with, at least, first aid onsite and quick access to health care services that provide adequate occupational health protection for all employees.			
SAFETY AND HEALTH TRAINING			
* Employees receive safety and health training.			
Managers understand their safety and health responsibilities.			

REQUIREMENTS CHECKLIST			
STAR REQUIREMENTS **(Minimum Merit Requirements are denoted by an *)**	**Fully Met**	**Needs to Be Completed or Adjusted Before Approval**	**Cannot Be Fully Met Before Approval - Needs Merit Goal**
Supervisors know and understand policies, rules, and procedures to prevent hazard exposure.			
Supervisors use teaching and discipline to ensure that employees follow rules and work procedures.			
Employees are taught safe work practices as they learn new jobs.			
Supervisors and employees know what to do in emergencies.			
Emergency drills are run periodically, at least annually.			
If (and where) PPE is used, employees know it is required, why it is required, how to use it, what its limitations are, and how to maintain it. Employees use PPE properly.			

APPENDIX F
FORMAT FOR PRE-APPROVAL PROGRAM REVIEW REPORT

A. PURPOSE OF THE REPORT

- The report provides essential information to the Team Leader.
- It verifies the application information submitted by sites applying for participation in a Voluntary Protection Program (VPP).
- It documents the qualifications of the site for participation in a VPP.
- If the site is approved, the report becomes part of the public information file along with the application, and provides baseline data for later site evaluation.

B. GUIDELINES

- Normally the Team Leader sends an e-mail message showing a sample report format to the onsite review team before the visit. In addition, the Team Leader requests responses to specific questions that were asked in the onsite team meeting.
- Responses need to provide a good representation of the items covered. Note that the "written" and "implemented" aspects of the program are to be documented in the description of the program.
- Do not give just 'Yes' or 'No' responses to the questions outlined. Responses need to be developed into narrative statements and discussions.
- Sources of information for the report are the application, documentation reviewed at the site, conditions observed by team members during the onsite visit, and employee and site representative interviews.
- Statements made in the report need to refer specifically to one or more of these sources of information, so the reader is aware of what evidence supports the statements.
- Compare each aspect of the site program to each Star requirement. Include information not specifically referred to in the interview guidelines or the format, but that are relevant to the subject, especially any findings that relate to the structural qualifications of the program.
- Avoid equivocal words and phrases such as "appears" or "seems to be."
- You may include recommendations for program improvement at appropriate points in the report, provided that these recommendations have been discussed with, and agreed upon by, the applicant. Reserve recommendations that have not yet been accepted by the applicant as a recommendation attachment at the end of the report.

- When approval can only be recommended after the applicant has taken steps to meet remaining requirements, include a statement that approval recommendation is contingent on site management accomplishing the items on the attached list within a specific 90-day period starting at the end of the onsite visit.
- Avoid any conditional phrases so that the report won't have to be rewritten; write the report as though ready for the recommendation for approval. Once the items are completed, delete the contingency statement and the list from the final report before forwarding to the Special Employer Programs Manager.
- **Be sure to complete and attach a copy of Attachment F-I, VPP Team Composition Data Sheet, to the report.** If the site participated in the Mentoring Program, also fill out the Mentoring Program Evaluation (Attachment F-2) and attach a copy to the report. (Both attachments are at the end of this appendix.)

C. THE REPORT FORMAT

The following format outlines the headings and the subjects to be covered and uses questions (except in the Executive Summary) to elicit written discussions.

C.1. REPORT OVERVIEW.

The report is divided into three major sections: Executive Summary, Recordkeeping, and Safety and Health Program.

Major subsections within the program description also need to be identified within the report. These subsections are:

- Management Leadership and Employee Involvement
- Hazard Analysis
- Hazard Prevention and Control
- Safety and Health Training
- General Review of Safety and Health Conditions

The program elements within each subsection may be identified if you so choose. (See Attachment F-3 for the setup procedures to be used when typing the report.)

Organize the report heading lines as follows:

- **First line:** Type of pre-approval report (Star or Merit)
- **Second line:** Name of Company
- **Third line:** Name of worksite if different from company name
- **Fourth line:** Worksite city and state

Write the pre-approval report heading as shown in the example that follows:

"STAR PRE-APPROVAL REPORT

IMA CORPORATION

WHIRLDCLAS MANUFACTURING SERVICE

ANYPLACE, STATE"

The **first** paragraph needs to include the dates and place of the pre-approval onsite, the reason for the onsite, and the names and positions of the team members.

The **second** paragraph needs to describe the sources of information for the report. This includes the application, safety and health program documentation reviewed onsite, interviews with employees, and a tour of the worksite.

Also identify the work areas that were toured, if the whole plant was not toured.

The **third** paragraph needs to provide employee information (numbers of company, temporary, and contract workers), shifts worked, collective bargaining representation, and briefly how employees are involved in the safety and health program.

The number of construction contract employees (excluding resident contractors) needs to be identified separately.

The paragraph needs to conclude by indicating the numbers and types of employees (site, temporary, contract, etc.) interviewed formally.

The same information needs to be included for employees informally interviewed.

The **fourth** paragraph needs to state the North American Industry Classification System (NAIC) code of the facility, identify the main products produced, and describe briefly the size of the facility and its production processes.

The **fifth** paragraph needs to describe briefly the potential hazards at the site.

The **sixth** paragraph needs to summarize the 3-year average total case incidence rate (TCIR), and days away from work, restricted activity and job transfer (DART) rate, and indicate their relationship (below or above, and by what percent) to the most recently published BLS averages for the last three years for their industry NAIC code.

The **seventh** paragraph needs to summarize the site's DOSH inspection activity within the past three years and the site's general history with DOSH. Include any interaction between the site and the DOSH consultation program. Also describe any DOSH inspection activity with the site's parent corporation, if known (and if this applies).

The **eighth** paragraph needs to describe briefly management's attitude toward safety and health at the worksite.

The **ninth** paragraph needs to briefly summarize the quality of the site's safety and health program.

The **tenth** paragraph needs to indicate the VPP program for which the worksite is qualified, and needs to state the specific team recommendation. For Merit recommendations, this paragraph also needs to state the time period for approval.

C.2. RECORDKEEPING.

Provide, in chart form, the injury/illness rates for the last three complete calendar years, the year-to-date, and 3-year averages (recalculated by the team during the onsite visit).

Provide, combined in one separate chart where possible or in separate charts, the same information for all applicable contractors' employees at the site. Compare the 3-year averages to the latest published 3-year averages for each NAIC.

Include the raw data used to calculate the rates, the number of injuries and illnesses or days away from work, restricted activity and job transfer (DART) cases and the number of hours worked, in the chart.

If the final report will not be submitted to the Director for approval during the calendar year in which the onsite visit occurs, the year-to-date figures must be updated to include the complete calendar year, and the 3-year averages must reflect this change before the report is submitted. This may be necessary even if the report is submitted prior to the end of the calendar year.

Consider also the following questions:

a. If there are any temporary workers at the site, do the OSHA-300 log and the calculation of rates include them? This is required even if they are hired through a service that provides temporary employees. Does the review of the log support the information provided in the application? If not, please explain.

b. Do the OSHA forms or the workers' compensation first-reports of injury generally support the data in the log? If there is any other injury data kept at the site, such as the nurse's or first-aid station log, does that data support the OSHA log? If any employees were interviewed concerning injury records, did their answers generally support the log?

c. Does the person responsible for keeping the log understand the requirements for recording the incidence of injury and illness, and days away from work, restricted activity, and job transfer cases? If not, please explain. Does the person responsible for keeping the log vouch for the accuracy of the entries? If not, please explain.

d. Does the log overstate, understate, or generally reflect safety and health conditions at this site? Please explain.

e. Do any monitoring records onsite indicate that required records of industrial hygiene sampling are being kept appropriately? Has the firm gone beyond standard requirements for records, where health professionals have felt it desirable?

f. Give a general summary of the quality of injury, industrial hygiene, and medical recordkeeping at this site, being sure to include strengths and weaknesses, objective facts, and subjective perceptions.

NOTE: If any patterns of safety or health problems are noticed in the log, address them in section C.3.c. (8) of this report.

C.3. SAFETY AND HEALTH PROGRAM.

The following criteria cover Star and Merit sites.

a. Management Leadership and Employee Involvement.

(1) Management Commitment. What management commitment to safety and health protection did you observe? Are authority and responsibility for safety and health integrated with the organization's management system?

What evidence did you see that established policies and results-oriented objectives for worker safety have been communicated to all employees? What evidence did you see of an established goal for the safety and health program and objectives for meeting that goal?

Are the goal and objectives communicated effectively so that all members of the organization understand the results desired and the measures planned for achieving them?

(2) VPP Commitment. Has management shown a clear commitment to meeting and maintaining the requirements of the VPP? How? Did this include management helpfulness in selecting employees for formal and informal interviews?

(3) Planning. Are safety and health part of the planning process for changes in equipment, materials, or processes? If so, please describe.

At construction sites: Does this include pre-job planning and preparation for different phases of construction as the project progresses? (Where high-hazard chemicals are present, skip this item and address this question as part of C.3.c. (2) (c) under Hazard Prevention and Control.)

(4) Written Safety and Health Program. Are all critical elements (Management Leadership and Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training) and sub-elements of a basic safety and health program part of the written program? Are all aspects of the safety and health program appropriate to the size of the worksite and type of industry?

NOTE: If some formal requirements are waived, explain here.

(5) Top Management Leadership. What evidence have you seen of top management leadership in implementing the safety and health program?

Does this include the existence of clear lines of communication with employees? Setting an example of safe and healthful behavior? Ensuring that all workers at the site, including contract workers, are provided equal high-quality safety and health protection?

b. Employee Involvement.

(1) Atmosphere.

- How were selections made for random employee interviews?
- Were employees comfortable talking with you?
- Were there any factors in the relationship between employees and management that may have influenced their responses to you? (If none, a response is not necessary.)

(2) Awareness.

- Were employees knowledgeable about the health and safety program? Did their overall assessment fit your impressions?
- Were employees knowledgeable about employee participation programs? Did their impression correspond with your overall assessment?

(3) Involvement.

- Describe the method used to ensure meaningful employee involvement, the kind of impact on decision-making achieved by employee involvement, and the evidence seen by the team that the method has been in place at least one year.

c. The Safety Committee.

Answer applicable questions.

(1) How is membership of the safety committee divided between management and labor? Do any of the employee members have, or appear to have, managerial duties as regular work assignments?

(2) Do all members work full-time at the site?

(3) Describe the way employee members are selected, and support it with what you have seen or heard.

(4) How frequently has the committee met? Have many regular meetings been missed by more than half the committee? How many meetings? How often have meetings been canceled, and for what reasons? What evidence have you seen of this?

(5) How has the question of a quorum been handled?

(6) Is the committee responsible for site inspections? If so, describe that responsibility. Have members had adequate hazard recognition training?

(7) How often have inspections been conducted? Have inspections been canceled? If so, why? Have all inspections included at least one hourly employee member?

(8) Are inspections planned in such a way that eventually all production areas are covered? How long does this take?

(9) Does the committee have a role in accident investigations? If so, please describe, including any training in accident investigation.

(10) Does the committee have other safety and health functions such as employee safety and health training; complaint response; review of new equipment, procedures, or substances before introduction; or other? If so, describe.

(11) When was the committee formed? If the committee has been newly formed, do the committee members understand their role? Has any training been planned or given regarding their responsibility?

(12) Please give a general summary of the committee efforts including both your own and employee perceptions of its effectiveness. Be sure to describe objective facts separately from subjective perceptions.

d. Contract Workers.

(1) For General Industry: How does the written program cover protection of contract workers who are intermingled with the applicant's employees?

(2) What evidence have you seen that safety and health programs and performance were considered during the process to select onsite contractors?

(3) What evidence have you seen that all contractors and subcontractors at the site are contractually bound to maintain effective safety and health programs and to comply with all applicable safety and health rules and regulations?

(4) Is authority for the oversight, coordination, and enforcement for those programs specified? What documentary evidence of the exercise of this authority did you see?

(5) Do contract provisions provide for the prompt correction and control of hazards by the applicant in the event that the contractor fails to correct or control such hazards?

(6) Do contract provisions require the submission of sufficient injury and lost workday data?

(7) Do contract provisions specify the penalties, including dismissal from the worksite, for willful or repeated non-compliance by contractors, sub-contractors, or individuals? What evidence have you seen that the contract

provisions have been enforced, or will be enforced if a non-compliance situation occurs?

(8) What evidence have you seen that all contract employees employed at the site are covered by the same quality safety and health protection?

(9) Are there any construction contract workers on the site who are separated from the applicants' employees? If so, how does the applicant help ensure safe and healthful working conditions for these employees?

(10) How does the site evaluate the quality of the safety and health protection of its contract employees?

e. Authority and Resources.

Has proper authority been given so that assigned safety and health responsibilities can be met? Have adequate resources, including staff, equipment, and promotions, been committed to workplace safety and health? Give examples.

f. Line Accountability.

(1) How are managers, supervisors, and employees, held accountable for meeting their responsibilities for workplace safety and health? Is this adequate?

(2) Are authority and responsibility for safety and health clearly defined in the written program? Has this been adequately implemented?

(3) Describe the evidence you saw of how the evaluation of general industry line managers/supervisors holds them accountable for safety and health. In construction, describe the evidence you saw that contractors and subcontractors are held accountable.

(4) What evidence did you see that the system has been in place for one year or more?

g. Safety and Health Program Evaluation.

(1) Does the annual evaluation cover and assess the effectiveness of all aspects of the safety and health program?

(2) Is there written guidance for annual self-evaluation of the whole safety and health program?

(3) Is there a narrative, written report that includes written recommendations? What documentation have you seen that the recommendations were responded to? Was the response, if any, adequate?

h. Worksite Analysis.

(1) Does management understand the hazards and potential hazards of the site? Describe the method(s), such as initial or periodic comprehensive surveys or pre-job planning, that management used to determine these.

(2) If industrial hygiene monitoring is needed for the hazards or potential hazards, describe the sampling program. Is it carried out by someone who is adequately trained for the duty? Are sampling, testing, and analysis done following nationally recognized procedures? Are there written records of results? What evidence is there that these systems have been in place at least one year?

(3) Are all new processes, materials, and/or equipment analyzed before use begins to determine potential hazards? Is planning conducted to ensure the prevention or control of any potential hazards identified?

(4) How is routine hazard analysis accomplished? Is one or a combination of the following used: job safety analysis, phase hazard analysis, and/or process hazard review? If so, please describe.

(5) Are employees involved? If so, how?

(6) Are there written procedures for hazard review (job safety analyses, process or project reviews, phase analyses) that include occupational safety and health concerns? If so, describe.

(7) Are procedures adequate? Is there evidence that changes to work procedures or employee training have resulted from hazard analysis performed during the past year?

(8) Are routine management inspections conducted (monthly for general industry with the whole site covered at least quarterly, whole site weekly for construction)?

(9) Are those conducting the inspections trained in hazard recognition? Is this frequent enough? Do the inspections cover the areas required, and are they finding what they need to?

(10) Did the onsite team find hazards that needed to have been found with self-inspection?

(11) Are there written procedures for inspections by management? If not, is there written guidance? In either case, please describe.

(12) If inspections are performed by committee members (required at least monthly in construction), do they have specific procedures or written guidance? Are the procedures or guidance adequate?

(13) Do the resulting written reports clearly indicate what needs to be corrected and who is responsible for the correction? Is each hazard tracked until it has been corrected? How is the tracking done?

(14) What evidence is there that an adequate inspection system with written reports and correction tracking has been in place for at least one year?

(15) Is there a formal, written system that allows all employees to bring their safety and health concerns to management's attention? Do employees feel they have a reliable system for reporting safety and health concerns?

(16) Is the system timely in responding? Are the responses adequate? Are the corrections required by the hazards discovered this way tracked until completion?

(17) What evidence is there that this system has been in place for at least one year?

(18) Under what circumstances are accidents and major incidents investigated by someone other than the supervisor of the area where the accident/incident occurred?

(19) Are there written procedures for accident investigation, with written reports of findings and hazard correction tracking to completion? If so, describe. Are they adequate?

(20) Are investigations thorough? Is there a tendency to blame the accident on worker error? Is the accident investigation system helping to strengthen the prevention program?

(21) Are those conducting the investigations trained in accident investigation techniques?

(22) What evidence is there that an adequate system has been in place for one year?

(23) Is there a system to analyze injury and illness trends over time through a review of injury/illness experience and hazards identified through inspections, employee reports, and accident investigations so that patterns with common causes can be identified and prevented? Is the system used?

(24) Has the site taken adequate steps to reduce those injuries or illnesses identified?

i. Hazard Prevention and Control.

(1) Are Industrial Hygienists and Safety Professionals or Safety Engineers reasonably available to the site? If so, under what arrangements, and how often are they used? Is this use frequent enough for the hazards at the site?

(2) What means, including engineering controls, use of PPE, administrative controls, and safety and health rules, are used to eliminate or control hazards?

(3) Are there written safety rules? Were these in place one year ago or longer? Are they updated as needed by management and used by employees? Are there written safe work procedures? Do these include any PPE needed? Are they appropriate to the potential hazards at the site?

(4) Where respirators are used, is there a written respirator program? If so, is it complete?

(5) If highly hazardous chemicals are produced or used at the site, have appropriate process safety management analyses been accomplished?

Describe the system used to anticipate high-risk chemical hazards and to prevent or control them. To the best of your knowledge, is it adequate?

(6) Has management developed and implemented a system that ensures that operational processes involving highly hazardous chemicals are within safe bounds during normal operations?

(7) Has thorough analysis identified critical failure points and established redundant systems, particularly for hazardous processes that may have overlapping control systems? Do the systems possess adequate depth?

(8) Is the emergency response system adequately designed, communicated to both employees and the community, and implemented?

(9) Do emergency procedures include adequate procedures for emergency situation close-down, and start-up of normal operations?

(10) Is the preventive maintenance system adequate for the "high-risk chemical" hazards?

(11) Describe the system for ongoing monitoring and preventive maintenance of workplace equipment. What evidence is there that this system has been in place for at least one year? Did the walk-through indicate that the system is being implemented adequately?

(12) Describe the system for initiating and tracking hazard correction in a timely manner. Is it adequate? What evidence is there that this system has been in place for one year?

(13) Describe the occupational health program including the availability of physician services, first aid, CPR and AED, and special programs such as audiograms and other medical tests.

(14) Are occupational health professionals appropriately used in the site's hazard analysis, in early recognition and treatment of illness and injury, and in limiting the severity of harm that might result from occupational illness or injury? Is the occupational health program adequate for the size, nature of hazards, and location of the site? What evidence is there that these programs have been in place at least one year?

(15) Is there a written disciplinary system? Are employees aware of it? What evidence have you seen that the disciplinary system works as it is written? What evidence is there that the system has been in place at least one year?

(16) Are employees aware of safety rules, safe work practices, and PPE requirements? What happens if an employee ignores one of these? Is it the same for management? If not, how are management infractions handled?

(17) How frequently are drills run for emergency procedures? Are there written emergency procedures? If so, are they adequate? Briefly describe them. Do they include any necessary PPE, first aid and occupational

health planning, emergency egress and evacuation, and emergency telephone numbers?

(18) Is emergency preparation adequate for the possible emergency situations of the site?

(19) What evidence is there that the system has been in place at least one year?

j. Safety and Health Training

1. Describe safety and health training programs used at the site.

2. What evidence have you seen or heard:

(a) That supervisors carry out their safety and health responsibilities effectively,

(b) That they understand them and the reasons for them,

(c) That they know how to identify unrecognized potential hazards,

(d) That they understand the hazards associated with the job(s) performed by their employees and their role in ensuring that those employees understand and follow rules and practices designed to protect them?

3. What evidence have you heard that employees understand the hazards associated with their jobs, and the need to follow rules set to protect them?

4. What evidence have you seen or heard that supervisors, all employees, and visitors know what to do in emergency situations?

5. Where PPE is required, do employees understand why it is necessary? Do they understand its limitations and how to maintain it? Do they use it properly?

6. What training is conducted for managers so that they understand their safety and health responsibilities?

k. General Review of Safety and Health Conditions

1. Does housekeeping appear to be average or better for this type of industry?

2. Based on your tour, would you characterize the health and safety conditions of this site as above average, average, or below average for this type of industry?

3. Include both your own and, if relevant, employee perceptions. (See employee interview questions in Appendix D)

4. Describe objective facts separately from subjective perceptions.

5. If problem areas have been noted, discuss them in terms of improvements planned in management systems.

I. Attachments Listed

1. **Merit Goals.** When the report supports a recommendation for approval into the Merit Program, the agreed upon Merit Goals that, if successfully completed, will allow Star approval, need to be attached at the end of the report.
2. **Onsite Assistance.** Schedule onsite assistance visits where applicable.
3. **Remaining Requirements.** In the case of a 90-day contingency, list remaining requirements to be met before a recommendation can be made on program approval. (This attachment will be dropped upon completion and not forwarded with a recommendation for approval.)
4. **Recommendations Not Agreed To.** List here any recommendations not yet agreed to.

ATTACHMENT F-1
VPP TEAM COMPOSITION DATA SHEET

Company Name:

Site Name and Address:

Region:

Dates of Onsite:

Check one: Pre-approval _____ Evaluation Report _____

TEAM COMPOSITION		
LAST NAME	ID*	ROLE

BEST PRACTICES CHECKLIST					
	ERGO PROGRAM		CONFINED SPACE		LOCKOUT/ TAGOUT
	PSM		HAZARD ANALYSIS		CONTRACTOR
	INSPECTIONS		ACCOUNTABILITY		TRACKING
	EMPLOYEE INVOLVEMENT		INDUSTRIAL HYGIENE		MENTORED SITE

ATTACHMENT F-2
MENTORING PROGRAM EVALUATION

If the site has been mentored through the VPPPA Mentoring Program, please answer the following:

Name of Worksite:

Name of Mentor(s):

1. What elements of the site's safety and health program did the mentor concentrate on?

2. How effective was mentoring in preparing the site for the pre-approval visit? Why?

3. Did the mentoring process make a real difference in the quality of this site's safety and health program?

ATTACHMENT F-3
REPORT SETUP

The following instructions must be used for typing VPP onsite reports. Items 1, 2, and 3 below must be completed before beginning to type the report. The remaining items must be used when typing the report itself.

1. The report needs to be printed in 12 point Times Roman or a similar font. The text of this manual is an example of 12 point Times Roman.
2. All reports need to be formatted to be left justified, and all margins need to be set at 1".
3. Page numbering needs to be set for the bottom, centered, and page numbering needs to begin at 1.
4. The report heading needs to be in bold uppercase letters, and centered. The first line needs to indicate the type of report.

   Examples:

   STAR PRE-APPROVAL REPORT

   MERIT PRE-APPROVAL REPORT

   MERIT EVALUATION REPORT

   THREE-YEAR STAR EVALUATION REPORT

   SIX-YEAR STAR EVALUATION REPORT

   The second line needs to list the name of the company. The third line needs to list the name of the plant if not included on the second line. The last line needs to list the city and state in which the plant is located.

   A complete example:

   STAR PRE-APPROVAL REPORT

   ANY COMPANY

   NUMBER ONE PLANT

   ANY TOWN, TEXAS

5. All headings within the report need to be in bold uppercase and begin at the left margin. They should not include numbers or letters. (Subheadings may be used.)

   Example:

   EXECUTIVE SUMMARY

   RECORDKEEPING

6. If subheadings are used, they need to be in lowercase letters, except for the first letter in each word; they need to be underlined but not bolded; and they need to be numbered at the left margin, with the subheading indented.

Example:

SAFETY AND HEALTH PROGRAM

1. Management Leadership and Employee Involvement

2. Worksite Analysis

3. Hazard Prevention and Control

4. Safety and Health Training

5. General Review of Safety and Health Conditions

7. All narrative needs to begin at the left margin and needs to not normally be indented or tabbed. Small parts of the narrative may be indented if necessary.

Word processing software automatically "word wraps" to the next line when the end of a line is reached. Hit return (or enter) only when moving on to the next paragraph, for both regular typing and inset/indent typing. Do not tab each line when insetting/indenting. Typing the report with the automatic word wrap makes it easy to add or delete language without reformatting unnecessary line endings (hard returns).

APPENDIX G
GUIDE TO DOCUMENT REVIEW FOR ONSITE ASSISTANCE VISITS

A. INJURY RECORDS

1. Is the log current?
2. Are log entries consistent?
3. How does the rate compare with earlier periods and the average for the NAIC?
4. Are there any trends in the nature of injuries or illnesses that suggest specific preventive measures are needed?

B. SELF-INSPECTIONS

1. Have they been conducted regularly?
2. Are records maintained?
3. Are hazards identified and abated in a timely manner? How often is the entire site covered?

C. ACCIDENT/NEAR-MISS INVESTIGATIONS

1. Have they been conducted when needed?
2. Are the causes identified sufficiently?
3. Are appropriate preventive measures taken?

D. HANDLING OF REPORTS OF SAFETY AND HEALTH CONCERNS

1. Is a log of reports or some other tracking mechanism maintained?
2. Are reports investigated properly and resolved?
3. Are employees notified of the results of investigations?
4. Are employees satisfied with the outcomes of the investigations?

E. EMPLOYEE TRAINING

1. Are safety/health orientations provided for new employees? Does this orientation include employee rights under the WISH Act?
2. Is job hazard prevention training provided on a continuing basis?
3. Is the level of safety and health training adequate to address the hazards in the workplace?

F. HAZARD REVIEW AND ANALYSIS

1. Are results being used in employee training?
2. Is the company on schedule in conducting any additional planned reviews?
3. Are the procedures for conducting reviews and analyses satisfactory?

G. EMPLOYEE PARTICIPATION

1. How are employees involved in the safety and health program?
2. Is the participation active and meaningful?

H. LINE ACCOUNTABILITY

1. Are supervisors aware of their safety and health responsibilities?
2. Do they implement them appropriately?

I. SAFETY AND HEALTH PROGRAM EVALUATION

1. If not already in place, has an evaluation system been developed and a commitment made to complete it each year?
2. Is it a system that will enable a full assessment of the strengths and weaknesses of the safety and health program?

J. HEALTH

1. Is the level of industrial hygiene sampling and/or health surveillance monitoring adequate to meet the potential hazards of the workplace?
2. Are appropriate preventive measures being taken?
3. Is appropriate personal protective equipment available and used by employees?

K. SAFETY COMMITTEE FUNCTIONS (where applicable)

1. Has the committee been meeting regularly?
2. Are minutes maintained? Are they detailed enough to indicate the issues discussed and their resolution?
3. Have a quorum of employee and employer representatives been present?
4. Do committee members participate in inspections?
5. Do committee members participate in or review the findings of accident investigations?
6. Does the committee review complaints and their resolutions?

L. SUBCONTRACTOR COVERAGE (where applicable)

1. Are subcontractors/employees aware of the general contractor/owner participation in the VPP?
2. Do general contractor/owner inspections cover hazards created by subcontractor activities?
3. Are these hazards corrected in a timely manner?
4. Are appropriate preventive measures required of the subcontractors by the general contractor/owner?

APPENDIX H

FORMAT FOR PROGRAM EVALUATION REPORT

A. PURPOSE OF THE REPORT

The evaluation report provides information on the current effectiveness of the site's safety and health program. It becomes part of the public information file and provides the basis for decisions regarding continued participation in the VPP.

Use this format for evaluations of all sites currently participating in a VPP program.

B. GUIDELINES

- A sample report is available from the VPP Specialist via e-mail or on a CD.
- See Attachment H-2 of this appendix for a guideline for conducting the evaluation and writing the report.
- Use headings only for sections, for example, Executive Summary, Recordkeeping, and Safety and Health Program Changes.
- You may use subheadings in the Safety and Health Program Changes section to identify the changed element, to discuss accomplishments toward meeting each Merit or Two-Year Conditional goal, and to identify the subsection "Remaining Program Elements."
- The narrative discussion needs to include evidence or examples to support the conclusions made in the report, regarding aspects of the safety and health program. Include onsite observations of documentation and conditions, and information from interviews.
- The report needs to address Star program improvements, progress in meeting Merit or Two-Year Conditional goals, and the maintenance of Star quality in all other program elements. It needs to include information that is relevant to the subject, especially any findings regarding the structural qualifications of the program.
- Avoid equivocal words and phrases such as "appears" or "seems to be."
- You may include recommendations for program improvement at appropriate points in the report, provided that these recommendations have been discussed with, and agreed upon by, the applicant. Reserve recommendations that have not yet been accepted by the applicant as a recommendation attachment at the end of the report.
- Focus on the current functioning of the safety and health program and changes since initial approval or the last evaluation.
- Be sure to complete and attach a copy of Attachment 1, VPP Team Composition Data Sheet, to the report. (This attachment is at the end of this Appendix.)

C. THE REPORT FORMAT

The following format outlines the headings and the subjects to be covered and uses questions (except in the Executive Summary) to elicit written discussions.

C.1. REPORT OVERVIEW

The report is divided into three major sections: Executive Summary, Recordkeeping, and Safety and Health Program Changes.

Major subsections within the Program Changes section are:

- Section 1: Program Changes
- Section 2: Progress Toward Reaching Merit (or One-Year Conditional) Goals
- Section 3: Remaining Program Elements

For Star evaluations, Section 2 needs to be "Remaining Program Elements."

The program elements within each subsection may be identified if you so choose.

Although evaluation reports now only need to cover program changes, Merit or 1-year conditional goals, and a general discussion of remaining program elements, the team must evaluate all elements of the site's safety and health program following the format in Attachment H-2.

Organize the report heading lines as follows:

- **First line:** Type of pre-approval report (Star or Merit)
- **Second line:** Name of Company
- **Third line:** Name of worksite if different from company name
- **Fourth line:** Worksite city and state

Write the pre-approval report heading as shown in the example that follows:

STAR EVALUATION REPORT

IMA CORPORATION

WHIRLDCLAS MANUFACTURING SERVICE

ANYPLACE, STATE

The **first** paragraph needs to include the dates and place of the evaluation onsite, the reason for the onsite, and the names and positions of the team members.

The **second** paragraph needs to describe the sources of information for the report. These include information provided in the application and previous report(s), safety and health program documentation reviewed onsite, interviews with employees, and a tour of the worksite.

Also identify the work areas that were toured, if the whole plant was not toured.

The **third** paragraph needs to provide employee information (numbers of company, temporary, and contract workers), shifts worked, and collective bargaining representation. Briefly describe how employees are involved in the safety and health program.

The number of construction contract employees (excluding resident contractors) needs to be identified separately. Note any changes since the last onsite.

The end of the paragraph needs to indicate the numbers and types of employees (site, temporary, contract, etc.) interviewed formally.

The same information needs to be included for employees informally interviewed.

The **fourth** paragraph needs to state the North American Industry Classification (NAIC) code of the facility, identify the main products produced, and describe briefly the size of the facility, its production processes, and any changes that have occurred since the last onsite.

The **fifth** paragraph needs to describe briefly the potential hazards at the site, especially if they have changed since the last onsite.

The **sixth** paragraph needs to highlight the safety and health program changes to be discussed later in the report.

The **seventh** paragraph needs to summarize the 3-year total case incident rate (TCIR) and a 3-year day away, restricted, and/or transfer case incident rate (DART rate).

The 3-year TCIR and DART rates must be below the three year average published Bureau of Labor Statistics (BLS) national average for the 5- or 6-digit North American Industrial Classification System (NAICS) code for the industry in which the applicant is classified.

The BLS publishes NAICS industry averages 2 years after data is collected. (For example, in calendar year 2007, calendar year 2005 national averages will be available and used for comparison.)

The **eighth** paragraph needs to summarize the site's DOSH inspection activity since the last onsite, and the site's general history with DOSH.

The **ninth** paragraph needs to describe briefly management's attitude toward safety and health at the worksite. Has it changed? Is the change positive or negative?

The **tenth** paragraph needs to briefly summarize the overall quality of the site's safety and health program.

The **eleventh** paragraph needs to indicate the team's recommendation.

C.2. RECORDKEEPING

Provide, in chart form, the injury rates for the last three complete calendar years, the year-to-date, and 3-year averages (recalculated by the team during the onsite visit).

Provide, combined in a single chart where possible or in separate charts, the same information for all applicable contractors' employees at the site. Compare the 3-year averages to the latest published averages for each North American Industrial Classification System (NAICS) code.

Include the raw data used to calculate the rates, the number of injuries or lost workday cases and the number of hours worked in the chart. How do the rates compare with pre-approval and/or since the last evaluation?

Provide the percentage change in the rates since last evaluation (or pre-approval review). What factors influenced this result? If any, explain.

NOTE: If approval will not occur until the calendar year following the onsite, the 3-year averages must include data from the year of the onsite.

Consider also the following questions:

a. Do you foresee any potential problems concerning the rates or the 3-year averages between now and the next evaluation? If so, explain. Please provide some explanation if the site's TCIR and/or its DART show an upward trend even if they remain well below their industry's average.

- If there are any temporary workers at the site, does the OSHA-300 log and the calculation of rates continue to include them? (This is required even if they are hired through a service that provides temporary employees.)

b. If there is any other injury data kept at the site such as the nurse's or first-aid station log, does the data support the OSHA log? If any employees were interviewed concerning injury records, did their answers generally support the log?

c. Does the person responsible for keeping the log continue to understand the requirements for recording incidence of injury and lost work day cases? If not, please explain.

- Does the person responsible for keeping the log vouch for the accuracy of the entries? If not, please explain.
- Does the log overstate, understate, or generally reflect safety and health conditions at this site? Please explain.
- Address any patterns of safety or health problems noticed in the log.

d. Do any monitoring records onsite indicate that required records of industrial hygiene sampling are being kept appropriately? Has the firm gone beyond standard requirements for records where health professionals have felt it desirable?

e. Give a general summary of the quality of injury, industrial hygiene, and medical recordkeeping at this site, being sure to include strengths and weaknesses, objective facts, and subjective perceptions.

C.3. SAFETY AND HEALTH PROGRAM CHANGES

Consider the following program aspects in assessing program changes.

a. Program Changes

Describe all major changes in the safety and health program since the last onsite visit. Indicate whether or not these changes have improved the program. (Address changes resulting from accomplishing Merit or 1-Year Conditional goals in the next section.)

b. Progress toward Reaching Merit or 1-Year Conditional Goals

For Merit Program or 1-Year Conditional Star evaluations, separately identify each goal, describe the progress the site has made toward each goal, and assess the impact of the progress on the site's safety and health program.

For Star Program evaluations, skip this section.

c. Remaining Program Elements

Provide a brief assessment of the program elements not discussed above. Are all the structural requirements of the VPP program that were in place at the time of approval or last evaluation still being met? Are the requirements that have been changed since the last onsite review or evaluation being met?

ATTACHMENT H-1
VPP TEAM COMPOSITION DATA SHEET

Company Name:

Site Name and Address:

Region:

Dates of Onsite:

Check one: Pre-approval _____ Evaluation Report drafted onsite: ___ Yes ___ No

TEAM COMPOSITION		
LAST NAME	ID*	ROLE

BEST PRACTICES CHECKLIST					
	ERGO PROGRAM		CONFINED SPACE		LOCKOUT/ TAGOUT
	PSM		HAZARD ANALYSIS		CONTRACTOR
	INSPECTIONS		ACCOUNTABILITY		TRACKING
	EMPLOYEE INVOLVEMENT		INDUSTRIAL HYGIENE		

ATTACHMENT H-2
VPP ONSITE EVALUATION FORMAT FOR SAFETY AND HEALTH PROGRAMS

The following criteria cover all participant VPP sites. Use this format to conduct the evaluation. It is important to identify and evaluate any major changes in the site's safety and health program and to evaluate the continuing effectiveness of all program elements.

A. MANAGEMENT LEADERSHIP AND EMPLOYEE INVOLVEMENT

1. Management Commitment

What management commitment to safety and health protection did you observe? What evidence did you see that established policies and results-oriented objectives for worker safety are still being communicated to all employees?

What evidence did you see of an established goal for the safety and health program and objectives for meeting that goal? Are the goal and objectives communicated effectively so that all members of the organization understand the results desired and the measures planned for achieving them?

Are authority and responsibility for safety and health integrated with the management system of the organization?

Has management shown a clear commitment to maintaining the requirements of the VPP? How?

2. Planning

Have any equipment, processes, or materials changed since the last onsite? If so, how was safety and health included in the planning process for the change? If not, will safety and health continue to be a part of the planning process?

3. Written Safety and Health Program

Are all critical elements (Management Leadership and Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training) and sub-elements of a basic safety and health program still part of the written program? Do all aspects of the safety and health program continue to be appropriate to the size of the worksite and type of industry?

NOTE: If some formal requirements continue to be waived, explain here.

4. Leadership

What evidence have you seen of continued top management leadership in implementing the safety and health program? Does this include the existence of clear lines of communication with employees? Setting an example of safe and

healthful behavior? Ensuring that all workers at the site, including contract workers, continue to be provided equal high quality safety and health protection?

5. Employee Involvement.

a. Atmosphere.

(1) Was management helpful in providing access for random employee interviews?

(2) How were employees selected?

(3) Were employees comfortable talking with you?

(4) Were there any factors in the relationship between employees and management that may have influenced their responses to you? (If none, a response is not necessary.)

b. Awareness.

(1) Are employees knowledgeable about the health and safety program? Does their overall assessment fit your impressions?

(2) Are employees knowledgeable about VPP participation? (Please note that employees in general industry needs to know their rights under the program including their right to request and receive reports of inspections and accident investigations, and the results.)

(3) Do employees know they still have the right to lodge a formal complaint with DOSH?

(4) Are they supportive of the company's participation in the program?

(5) Have employees noticed changes in safety and health conditions since approval or the last evaluation? If so, what are they?

(6) If a joint labor-management committee operates here, are employees knowledgeable about it? Do the employees think that the committee is effective in what it does? Do their impressions agree with your overall assessment?

(7) Has there been any significant change in employee awareness of or involvement in the safety and health program since the last DOSH visit? If so, give examples and/or discuss.

c. Involvement.

Describe the method used to ensure meaningful employee involvement, the kind of impact on decision making achieved by employee involvement, and the evidence seen by the team that the method has been effective.

d. The Safety Committee.

Answer the questions that apply:

(1) Has the division of membership between management and labor on the committee changed? If so, describe this change.

- Do any of the employee members appear to have management duties as regular work assignments? If so, does this affect the functioning of the committee?

(2) Do all committee members work full-time at the site?

(3) Have employee member selection procedures changed? If so, do they still meet the VPP qualification requirements?

(4) Do the committee members understand their roles? Has any training been given regarding their responsibility since approval or the last evaluation?

(5) How frequently has the committee met? Have many regular meetings been missed by more than half the committee? How many meetings? How often have meetings been canceled and for what reasons?

(6) If the committee conducts the principal site inspections, have members had adequate hazard recognition training?

- How often have inspections been conducted? Have inspections been canceled? If so, why?
- Have all inspections included at least equal employee participation?
- Are inspections planned in such a way that eventually all production areas are covered? How long does this take?

(7) Has the committee's role, if any, in accident investigations changed? If so, please describe.

(8) If the committee has other safety and health functions (such as employee safety and health training; notification of health and/or safety hazard response; review of new equipment, procedures or substances before introduction), have they changed? If so, please describe.

(9) How do committee members feel about VPP participation?

(10) Please give a general summary of the effectiveness of committee efforts, including both your own and employee perceptions. (See Appendix D, Section G.) Be sure to describe objective facts separately from subjective perceptions.

6. Contract Workers.

a. General Industry.

(1) How does the written program cover contract workers who are intermingled with the applicant's employees?

(2) What evidence have you seen that safety and health programs and performance continue to be included in the process to select onsite contractors? That contractor employees and/or contractors can be dismissed from the site for safety and/or health rules infractions?

(3) What evidence have you seen that all contract employees employed at the site still are covered by the same quality safety and health protection? How does the site evaluate its contractor program to ensure this protection?

b. Construction.

Are there any construction contract workers on the site who are separated from the applicant's employees? If so, how does the applicant help ensure safe and healthful working conditions for these employees?

7. Authority and Resources.

Is proper authority still being given so that assigned safety and health responsibilities can be met? Are adequate resources, including staff, equipment, and promotions, still committed to workplace safety and health? Give examples.

8. Line Accountability.

Has the system for holding managers, supervisors, and employees accountable changed since the last onsite? If so, how? Is this as effective as it was at the last onsite?

Are authority and responsibility for safety and health still clearly defined in the written program? Has this been adequately implemented? Describe the evidence you saw of how the evaluation of general industry line managers/ supervisors continues to hold them accountable for safety and health.

In construction, describe the evidence you saw that contractors and subcontractors continue to be held accountable.

9. Safety and Health Program Evaluation.

a. Does the annual evaluation cover and assess the effectiveness of all aspects of the safety and health program?

b. Are self-evaluations completed since the last onsite in narrative form? Do they include written recommendations? What evidence have you found that the recommendations were responded to? Was the response adequate?

c. Are the reports helpful in understanding any changes made?

B. WORKSITE ANALYSIS

1. Have any changes or new conditions resulted in hazards that exist because of a lack of management knowledge and understanding? If so, what system (initial or periodic comprehensive surveys, pre-job planning) needs improvement to correct the lack of understanding?
2. If the need for industrial hygiene monitoring for the hazards or potential hazards has changed, describe the sampling program. Is it carried out by someone who is adequately trained for the duty? Are sampling, testing, and analysis done following nationally recognized procedures?
3. Does the site continue to analyze all new processes, materials, and/or equipment before use begins, to determine potential hazards? Is planning conducted to ensure the prevention or control of any potential hazards identified?
4. What hazard analysis (job, process, or phase) has been accomplished since the last onsite? How were the results used?
5. Are site inspections covering and finding what they need to? Are they as frequent as they need to be? What kind of hazard recognition training, if any, has been provided?
   - Did the onsite team find hazards that ought to have been found in self-inspections? If so, describe how the site is correcting its management system to prevent this from happening in the future.
   - Is the documentation of tracking complete?
6. Did your document review determine that the employee hazard reporting system is working efficiently? If not, describe any problems.
   - What is the average number of employee hazard reports per year handled over the past year (Merit) or three years (Star)? How many were handled since approval or the last evaluation visit?
   - What is the average length of time for an action response to a report? The range? Do these time periods and actions appear reasonable?
   - If this information is not available, discuss the reason why it is not.
7. Are employees aware of the hazard reporting system? Are they generally satisfied with the way that it works? Do their perceptions about this system generally match yours? Have these perceptions changed since approval or the last evaluation?
8. Are written accident/incident investigation reports descriptive? Are preventive actions being taken? Have hazards discovered through accident/incident investigations been adequately tracked and corrected? Are those conducting investigations adequately trained in the process?
9. Is there a system to analyze injury and illness trends over time through a review of injury/illness experience and hazards identified through inspections, employee reports, and accident investigations, so that patterns with common causes can be

identified and prevented? Is the system used? Has the site taken adequate steps to reduce those injuries or illnesses identified?

10. Has DOSH conducted any complaint inspections or responded to informal complaints since the pre-approval visit or last evaluation? If so, what was the outcome?

- What, if anything, does this tell us about the functioning of the participant's hazard reporting system? Did the complainant try the internal system first? Give examples, if possible.

C. HAZARD PREVENTION AND CONTROL

1. Are Industrial Hygienists, Safety Professionals, and/or Safety Engineers still reasonably available to the site? If so, under what arrangements, and how often are they used? Are they appropriately used?

2. Are engineering controls, administrative controls, safety rules, safe work practices, and PPE requirements still adequate?

a. Have the written safety rules been updated as needed by management and are the rules followed by employees? Have the written safe work procedures been updated?

- Do these include any needed PPE? Are they appropriate to the potential hazards at the site?

b. What happens if an employee disobeys one of the rules? Does the same disciplinary system apply to management? If not, how are management infractions handled? What evidence have you seen that the disciplinary system has been used since the last onsite?

c. Where respirators are used, is the written program still complete?

d. For plants producing or using highly hazardous chemicals, describe any changes to the process safety management systems:

- The system that ensures that operational processes involving highly hazardous chemicals are kept within safe bounds during normal operations,
- The system that identifies critical failure points and establishes redundant systems, and
- The emergency response system or the emergency close down/start up systems.

Are the revised systems adequate?

e. Has the system for monitoring and maintaining equipment changed? If so, how? Does it continue to be effective?

f. Has the system for initiating and tracking hazard correction in a timely manner been changed? If so, how? Is it still effective?

g. Describe any changes to the occupational health program including the availability of physician services, first aid, and CPR, and special programs such as audiograms and other medical tests. Are occupational health professionals appropriately used? Is this availability still adequate for the size and location of the site and nature of the hazards? What was the effect of those changes?

h. How frequently have emergency drills been held since the last onsite visit? Describe them. Have emergency procedures changed? If so, describe the changes and their effects.

D. SAFETY AND HEALTH TRAINING

1. Is appropriate training being provided? Have there been any changes to the safety and health training program? If so, please describe.
2. Do employees understand hazards and their roles in protecting themselves? Do supervisors understand their role in assuring that employees understand and follow protective rules? Do managers understand their safety and health responsibilities?
3. What recent evidence have you seen that supervisors and employees know what to do in emergency situations?

E. GENERAL REVIEW OF SAFETY AND HEALTH CONDITIONS

1. Based on your tour of the worksite, would you characterize the health and safety conditions of this site, including housekeeping, as above, at, or below average for this type of industry? Are workers using personal protective equipment in areas where it is needed?

   If possible, make a general comparison of present conditions and conditions during the pre-approval visit or last evaluation.

   Include both your own and, if applicable, the employees' perceptions. (See Employee Interview Questions, Appendix D)

   Describe objective facts separately from subjective perceptions.
2. If problem areas have been noted, they need to be discussed in general language in terms of planned management system improvements.

APPENDIX I

TEMPLATE FOR VPP SITE ANNUAL SELF-EVALUATIONS

EVALUATING YOUR SAFETY AND HEALTH PROGRAM FOR THE VPP

A. PURPOSE OF THE SELF-EVALUATION

A VPP participant must have a system for evaluating the operation of its safety and health program annually to judge success in meeting the program goals and objectives. This allows those responsible to determine and implement changes needed to improve worker safety and health protection.

The system must provide for an annual written narrative report with

- Recommendations for timely improvements
- Assignment of responsibility for those improvements
- Documentation of timely follow-up action, or the reason no action was taken

The evaluation must assess the effectiveness of all VPP elements and sub-elements, and any other significant aspects of your site's safety and health program.

The evaluation may be conducted by competent corporate or site personnel, or by competent private sector third parties who are experienced in performing such evaluations.

The evaluation needs to be conducted annually at approximately the same time each year. It needs to follow the format outlined in the VPP requirements described below.

The effectiveness of each element and sub-element needs to be assessed briefly in narrative form. Where appropriate, recommendations for improvement need to follow the discussion of each element.

Assignments of responsibility for completing recommended improvements may be made after each recommendation or separately at the end of the evaluation.

Subsequent evaluations need to begin with a description of the previous year's recommendation(s) and the follow-up actions taken and needs to include, in the current narrative, an evaluation of the program changes that resulted from the recommendations.

Your evaluation needs to include a review of the written program, walking through your workplace, and interviewing employees. During this process, you need to be answering the following questions relating to each element and sub-element of your safety and health program:

1. Is it comprehensive?
2. Does it contribute all it could to achieving your overall safety and health program goal?

3. What improvements can be made to make it even more effective?
4. What goal modifications need to be made for the upcoming year?

B. DEPTH OF THE SELF-EVALUATION

A self-evaluation is not simply an inspection of the worksite; it is a critical review of all of the elements of the safety and health management system, including a review of the applicable contractor's injury and illness data, and progress towards Merit or 1-year Conditional goals (if applicable).

An evaluation that is merely a workplace inspection with a brief report pointing out hazards or saying that everything is okay is inadequate for purposes of VPP.

You need to be evaluating your program much like the DOSH VPP evaluation team does. A template form for you to use during your self-evaluation is provided below.

Voluntary Protection Program

Format for Annual Self-Evaluations

1. Company Information

Name of Company: _____

Site Address: _____

_____

Plant Manager: _____

Site VPP Contact(s): _____
(salaried & hourly, if applicable)

Telephone Number(s): _____

Fax Number(s): _____

E-mail Address(es): _____

Corporate VPP Contact: _____
(if applicable)

Telephone Number _____

Fax Number: _____

E-mail Address: _____

Union Name and Site representative _____

Telephone Number _____

Fax Number _____

E-mail Address _____

2. Previous Year Recommendations and Status Report

Listed below are the 200X recommendations and their status.

A. Recommendation:

Status:

B. Recommendation:

Status:

C. Recommendation:

Status:

D. Recommendation:

Status:

3. Company Safety Performance Rates (Injury/illness Data)

TCIR: Total Case Incidence Rate: The total of recordable injury and illness cases, with or without lost workdays or restricted activity. (The combined columns (H), (I) and (J) from the OSHA 300 log for 2006, 2007 and 2008).

DART: Days Away, Restricted, and/or Transfer Case Incidence Rate: The total recordable injuries and illnesses which resulted in days away from work, restricted work activity, and/or job transfer. (The total of columns (H) and (I) from the OSHA 300 log for 2006, 2007 and 2008). (Please do not send the total number of actual days away from work).

Year	Total Work Hours	Average Annual Employment	Total Recordable Injury & Illness Cases	Days Away/ Restricted /Transfer Cases	Total Case Incidence Rate (TCIR)	Days Away/ Restricted and Transfer Incidence Rate(DART)
2006						
2007						
2008						
3 Year Totals & Rates 2006-2008						
2006 -2008 Average BLS Rates for NAICS _____						
Percent Above or Below BLS Rate						

Please include an explanation for any increases in your rates.

If the 3-year rate is above your industry average, include a descriptive plan of action for rate reduction. Your evaluation must include assessments of the effectiveness of all elements of your safety and health program and documentation of recommendations completed.

Remember to address all of the elements under **Management Leadership, Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training**.

Additional descriptive requirements are listed in the July 24, 2000 VPP Federal Register, Volume 65, No. 142, section III, paragraph F (8) Safety and Health Program Evaluation.

4. Contractors Safety Performance Rates

Provide injury/illness data for EACH applicable contractor whose employees worked 1000 or more hours in any calendar quarter at the site.

Contractor(s) name:_____

Year	Average Annual Employment	Total Hours Worked	Total Recordable Injury & Illness Cases	Days Away/ Restricted and Transfer Cases
2009				

5. Evaluation of Elements and Sub-elements

In narrative form, assess the effectiveness of each of the elements and sub-elements listed below. Please indicate what information or data (e.g., # of incident investigation files examined) were reviewed in making your assessment.

Include in each element any needed recommendations for improvement.

Follow by the assignment of responsibility for completing each recommendation and a target date for completion.

The following is an example of the format only. The actual content needs to contain greater detail.

Sample:

1. *Element (i.e., Worksite Analysis).*

   Sub-element (i.e., Comprehensive Safety and Health Surveys-Industrial Hygiene)

A. *2008 Activities - During 2008 all IH services were contracted to outside firms. Quarterly surveys were conducted and the following items completed.*

- *Audiometric testing*
- *Noise survey*
- *Personnel exposure monitoring for lead, asbestos, formaldehyde, wood dust*

B. *Evaluation - Narrative evaluation of effectiveness of the element and sub-elements.*

Example: *Recommendations from reports have been completed. The 2008 activities in this area are marginally effective. Additional monitoring and training will be required in 2009.*

C. *Recommendation(s) for improvement - Hire or contract with a certified industrial hygienist to manage the IH program.*

D. *Assignment of responsibility for completing recommendation - Safety Dave*

E. *Target date for completion - 3/15/2008.*

6. Elements and Sub-elements

a. Management Leadership and Employee Involvement

- Management Commitment to Safety and Health Protection and to VPP Participation
- Policy
- Goals, Objectives, and Planning
- Visible Top Management Leadership
- Responsibility and Authority
- Line Accountability
- Resources
- Employee Involvement
- Contract Worker Coverage

- Worker Safety and Health Management System
- Enforcement (i.e., rules, policies, procedures, disciplinary actions)

b. Worksite Analysis

- Hazard Assessment of Routine Jobs, Tasks, and Processes
- Hazard Analysis of Significant Changes, New Processes, and Non-routine Tasks
- Routine Self-inspections
- Hazard Reporting System for Employees
- Investigation of Accidents and Near-misses
- Trend/Pattern Analysis [for injuries, hazards identified, etc.]

c. Hazard Prevention and Control

- Access to Certified Safety and Health Professionals
- Means for Eliminating or Controlling Hazards [This is the place to evaluate and provide a summary of any audit results on individual programs on the site such as PPE, Safety and Health Rules, Lockout/Tagout, Confined Space Entry, etc., as well as engineering and administrative controls].
- Preventive Maintenance Program
- Tracking of Hazard Correction
- Occupational Health Program
- Emergency Response Program and Procedures

Process Safety Management (if applicable) - VPP participants whose operations are covered by the Process Safety Management (PSM) Standard must also provide responses to each question in the VPP PSM Questionnaire (Supplement "B") that is applicable to their operations. Responses must cover all PSM-related operations and be of sufficient detail. The questionnaire may be found on the VPP site web page.

d. Safety and Health Training

- Managers
- Supervisors
- Employees
- All others on the site [including what to do in emergency situations]
- PPE Requirements [known and used effectively]

7. Summary

Please provide a brief summary of the overall effectiveness of your safety and health program. Discuss safety performance in terms highlighting major accomplishments or deficiencies. List major plans in the upcoming year to improve the site safety and health program.

8. 200X [year] Outreach Activities

Please describe any VPP outreach activities provided by facility staff during the past year.

9. 200X [year] Success Stories (Optional)

Please describe any success stories related to implementing VPP requirements. Include anecdotal as well as statistical evidence of improvements, non-routine safety and health activities, etc.

10. Company/Industry Challenges (Optional)

Describe challenges within your facility, company, and/or industry that significantly affected your safety and health program over the last year. Include challenges you are facing for the upcoming year.

VPP ACTIVITY REPORT FORM (VPP LOG)

For The MONTH OF:

Date Submitted: mm/dd/yy

For ALL Applicants/Participants

Name	City	Region	Sic (4 Digits)	NAICS (6 Digits)	Status (List)	Date Rec'd	Date Read	Date Accepted	**Date Delayed	Delay Code (List)	Onsite Date	90 Day Item Date	SGE(s) Used	#of SGEs