The information in this guide describes the framework of service delivery and philosophy of the Consultation Services Section of the Oregon Occupational Safety and Health Division (Oregon OSHA). This guide also presents material that is established by Oregon statute (law) or administrative rule.
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Goal
The overall goal of the Consultation Program is to assist Oregon employers in implementing and maintaining an effective safety and health program and to ultimately become self-sufficient in managing their program.

Oregon OSHA Consultants
We encourage consultants to be leaders with positive attitudes. They are highly trained and qualified to provide safety and health recommendations to Oregon employers. They function as a team and a state-wide resource where staff and management work together for the common goal of helping employers solve problems and identify potential hazards at their worksites to improve their self sufficiency.

State-Funded vs Federal-Funded Consultants

State-Funded Consultants
The majority of consultants in Oregon OSHA are 100 percent funded by the state of Oregon. This guide provides state-funded consultants with the information necessary to conduct and administer consultations.

Federal-Funded Consultants (21(d))
Oregon OSHA has four consultation positions funded through a federal 21(d) grant. These consultants must follow federal guidelines for conducting consultations. In addition to the procedures presented in this guide, 21(d) consultants should refer to the federal directive and the Consultation Policy and Procedures Manual (CPPM) for their requirements.

Services By Type: Comprehensive vs Specific
Oregon OSHA Consultation Program focuses on safety, health, or ergonomic issues; safety and health program evaluation; SHARP and VPP evaluations; and process safety management (PSM). Some consultations are comprehensive and some are limited to a specific request by the employer.

During specific consultations, consultants take the opportunity to explain to the employer the benefits of a higher level of assistance, including safety and health program reviews.

Comprehensive Consultations
A comprehensive consultation covers the entire establishment – injury and illness records, written programs, safety committee operations, workplace hazards, the safety and health program, industrial hygiene sampling, and ergonomic videotaping as needed. Comprehensive consultations include a written report with findings, recommendations, and the guidance necessary to resolve the problems. Keep your manager informed of any complex comprehensive consultations or when there is a need to send two or more consultants.
Specific Consultations
Specific consultations provide an assessment of specific work conditions of an operation, specific equipment, machines, processes or hazards. There could be just one or multiple items addressed during a specific consultation – it could be something new or unusual that requires research.

The following are a few examples of specific consultations:

Informational Consultation
These are off-site contacts where the consultant spends one hour or more guiding an employer on safety and health program improvements. It includes an informal meeting where the consultant helps the employer plan, implement, and follow through on initiatives that impact the employer’s safety and health program. Merely providing code information does not constitute an informational consultation. (See Pre-Job below also.)

Training Consultation
Training consultations teach employers and employees the skills, techniques, and methodologies that will assist them in establishing and maintaining safe and healthful workplace conditions.

- Training Consultation Related: Training that is related to a current consultation. A consultation related training and the associated consultation will cover the deferral for this training.

- Training Consultation Unrelated: Training provided to an employer or group of employees, associations, or conferences without an associated consultation. This training would not receive a deferral.

Speaking Engagements
See definition under Training Consultation Unrelated.

Presenting at Conferences or Association Meetings
See definition under Training Consultation Unrelated.

Booth
Attending conferences for manning the booth will not be considered a consultation.

Safety and Health Management Consultation
A safety and health program evaluation that is not part of a comprehensive consultation is considered a specific consultation. This includes return visits to clients working towards SHARP or safety and health program evaluations.

SHARP Action Planning Consultation
Following a comprehensive SHARP evaluation, the lead consultant follows with a specific consultation to guide the employer with their action plan for the upcoming year.

Pre-Job Assistance
A pre-job is where no employees are exposed to a hazard and therefore an enforcement deferral is not necessary. Pre-job assistance involves working with the employer before a job begins to assess those hazards that are likely to occur and developing a comprehensive safety plan for the duration of the job. It is primarily requested by employers on mobile job sites, such as logging and construction, although it is not limited to these industries. You should also encourage fixed-site employers to use this particular method of prevention when appropriate. Generate a written response for each of these types of pre-jobs.
Agricultural Labor Housing (ALH) Consultations
ALH operators typically request a consultation for one of five reasons:

1. The operator wants a normal hazard assessment or comprehensive consultation.
2. The employer received Farm Worker Housing Tax Credits and is required to have a pre-occupancy consultation.
3. The employer is registering housing for the first time (must be conducted by a state-funded consultant only).
4. The employer is applying to the state Employment Department for workers (H2A).
5. The employer is fulfilling requirements of the Migrant Seasonal Worker Protection Act (MSWPA).

If you are taking the request for an ALH pre-occupancy inspection, document the reason for the request in the additional information field in the database. (See special instructions for agriculture labor housing consultations in Appendix H – Agricultural Labor Housing.)

Program Review
This type of consultation may follow a comprehensive consultation where programs were found to be deficient and additional assistance is needed.

Follow-Up Consultations
This type of specific consultation is conducted when Oregon OSHA visits an employer to assist or verify results from a previous consultation. This may be to verify that serious hazards were abated effectively.

Process Safety Management
Consultations conducted to address any one of the process safety management subparts are considered specific. If all elements of PSM are addressed, it is considered comprehensive.

Voluntary Protection Program (VPP)
All VPP consultations are to be coordinated by the SHARP/VPP program coordinator. VPP application reviews and onsite assistance do not include a written report, but are considered a specific consultation. VPP onsite reviews are considered a specific consultation and do include a written report that is co-authored by the onsite review team.

Existing VPP sites’ requests for consultations will be evaluated by managers on a case-by-case basis, looking at the reasons for the request, what the site has done to address the issues, and the resources of the site to address the issue themselves. Oregon OSHA’s expectation of a VPP site is that they are able to address safety and health issues and generally do not depend on Oregon OSHA consultation for assistance.

Requests and Scheduling Of Onsite Consultations

Intake
Onsite consultations are provided only at the request of the employer or the employer’s authorized representative. Inform the employer that a comprehensive consultation will normally include a review of the establishment’s injury and illness records, written programs, safety committee functions and operation, workplace hazards, and an informal review of the employer’s safety and health management program. (Details for the intake process are outlined in Appendix A – Consultation Request and Intake Procedures.)
If comprehensive safety and health program assistance is requested, advise the employer of the importance of commitment to the process and that the process will be preceded by a hazard survey and initial program assessment.

If an indoor air quality consultation is requested, an industrial hygienist (IH4) consultant will complete the intake (see Program Directive A-252 for additional information regarding assessing requests for assistance with indoor air quality issues).

At the time of the request, advise the employer not to wait until the consultative visit before correcting or precluding employee exposure to know hazards or risks. Advise the employer how to access our website for helpful material they can review in the interim. Discuss with your manager if there is a need to expedite the request. In the interim send any necessary health and safety code material and self inspections checklists.

During the request, ask if the employer is actively under enforcement. If under enforcement, or a pending appeal, their request will be placed on the backlog, and Oregon OSHA consultation cannot assist them until the enforcement issues are settled.

Request & Scheduling Procedure

An intake must be completed for every consultation request. Enter requests in the database as you talk to the employer, if possible, or use Appendix A. Generally the intakes are reviewed by a field manager prior to any visit from Oregon OSHA.

For self-assignments from the unassigned list, make sure it is within your area of expertise and your geographical area. Discuss it with your manager if it is outside of your geographical area.

1. Prior to contacting an employer to schedule a visit, self-assign the intake or have the manager assign it in the database by entering their identification number in the consultant identification field.

2. Do not self-assign a consultation unless you are able to conduct the consultation within one month, pending the employer’s availability. Otherwise keep the request on the backlog. (See Response Time below)

3. When scheduling consultations, make every attempt to schedule enough time or consecutive days to complete the visit.

4. Contact the employer to set a date for the onsite visit. If the employer cannot schedule the consultation within the next 30-60 days, or the consultation is delayed due to enforcement activity, put it on delay and submit it for the manager to determine the next step. Consultants should attempt to set a date or an approximate timeframe for the future onsite visit.

Note: Enforcement delay means that the employer is under enforcement. Employer delay means that the employer is not able to schedule services within a 60 day window. Official delay means that there is a known event being scheduled in advance, such as VPP, SHARP, and trainings.

a. A note must be made in the “contact notes” tab in the consultation database with the specifics of the delay, including the date or approximate timeframe for scheduling the onsite visit.

b. Delayed consultations should be tracked by managers to ensure prompt service once the forecast time is reached. The manager may request the process for withdrawal be initiated for delayed requests that the employer is unable to schedule.
c. Intakes that are not assigned within 7 days of the initial request will be reviewed by the managers.

**Response Time**

The goal is to have intakes scheduled for a consultation within seven calendar days. If they haven’t been assigned within 7 days, field managers may direct assign. The goal is to close the consultation within 30 working days.

If you use the Appendix A form for intake request, enter the information in the data base (ORCA) that same day.

Promptly send a confirmation letter or email to notify the employer that the request was received, explain the assignment process, and describe what to expect from a consultation. Encourage the employer to have a safety committee member attend the consultation to help improve the hazard recognition skills of the committee.

The goal from initial intake to completion is within a 30 day period. Individual consultant expectations are set by their manager.

The response time expectations are:

- Intake to approval and on the unassigned list, within 3 days.
- Approved intake to assignment and to attempted scheduling, within 7 days.
- Assign to open within 30 days.
- Open to close should normally be same day.
- Close to report should be 10 days or less.

Note: The above days are in calendar days.

Exceptions to the above expectations need to be discussed with your manager.
**Priority/Scheduling**

Our goal is to assign and schedule consultations within 7 days. The priority system establishes a numerical value for each intake based on six criteria: type of industry, hazard classification, company size, previous consultation services, local emphases/outreach, and marketing efforts. The values are then added together providing a total priority score (see Priority Scoring Details tab in ORCA). The total score is then compared to the consultation intake prioritization table.

<table>
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<td>With justification</td>
</tr>
<tr>
<td>7-11</td>
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<td></td>
</tr>
<tr>
<td>1-6</td>
<td>Low</td>
<td></td>
</tr>
</tbody>
</table>

**Withdrawal of Request**

In order for a consultation request to be withdrawn, three documented attempts must be made within 15 days. If contact cannot be made with the employer after three attempts, the consultation request should be forwarded to the manager for withdrawal approval. Once approved, send a withdrawal letter, informing the employer their request will be removed from the unassigned list if no response is received within 10 days.

**NOTE:** Situations that do not lend themselves to the above procedures will be evaluated on a case-by-case basis by the consultation services management team. Prior management approval must be obtained if the above procedures cannot be followed. (Note: Admin staff can help with the scheduling and rescheduling of employers when cancelations occur.)
County Map

Counties are divided among consultation field offices as follows:

Portland Field Office
- Clackamas, Clatsop, Columbia, Hood River, Multnomah, Washington

Salem Field Office
- Benton, Lincoln, Linn, Marion, Polk, Tillamook, Yamhill, Clackamas (shared with PFO)

Eugene Field Office
- Coos, Douglas, Lane

Pendleton Field Office
- Baker, Gilliam, Morrow, Sherman, Umatilla, Union, Wallowa, Wasco

Bend Field Office
- Crook, Deschutes, Grant, Harney, Jefferson, Malheur, Wheeler

Medford Field Office
- Curry, Jackson, Josephine, Klamath, Lake

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1. Portland: Clackamas, Clatsop, Columbia, Hood River, Multnomah, Washington

3. Salem: Benton, Lincoln, Marion, Linn, Polk, Tillamook, Yamhill

4. Eugene: Coos, Douglas, Lane

5. Bend: Crook, Deschutes, Grant, Harney, Jefferson, Malheur, Wheeler

6. Medford: Curry, Jackson, Josephine, Klamath, Lake
Conduct of a Visit

Preparation
Prior to the visit, become familiar with as many factors concerning the establishment’s operation as possible. Review information from the intake, literature on safety and health factors in similar operations, and all applicable codes and standards.

Review past injury records, available workers’ compensation records, sampling data, any previous compliance or consultative visit reports, and site-specific workers’ compensation data available on the query screens provided in the data system.

Prior to going onsite, determine if the employer is self-insured. Self-insured employers must be notified during the opening conference of the requirements specific to them as written in OAR 437-001-1060.

Prior to the consultation, ensure that all necessary technical and personal protective equipment is available and functioning properly.

Team Consultations
Each employer who has requested a multi-discipline consultation (health, safety, PSM & ergo) will be a likely candidate for a team consultation. Schedule team consultations periodically to share consultation skills and to evaluate each other’s application of these operating procedures.

Opening
During the opening meeting, explain to employers that Oregon OSHA considers all information gathered during the consultation and contained in the report as confidential. For their protection, they can sign a statement indicating their desire for the information to remain confidential. It should be explained that while this is no guarantee, it is designed to afford them further protection in the event of a legal challenge for the information. The employer’s signature is completely voluntary and for their own protection from disclosure. (See Appendix D – Opening Checklists)

It is important to identify what PPE is required for the consultation.

Use the opening/closing checklist to establish the scope of the consultation and to discuss the following:

1. Oregon OSHA, our mission, and the general process of a consultation.
2. The relationship between consultation and enforcement activity, including the inspection deferral. (See section Relationship to Enforcement Activity.) Assure employers that under no circumstances is information that we gather provided to the Oregon OSHA Enforcement section. Verify with the employer that they are not under enforcement activity.
3. The importance of a safety and health program and that a review of the existing program is included in a comprehensive consultation.
4. The employer’s obligations to protect employees in the event that hazards are identified. Imminent danger situations could result in either death or serious injury. Inform the employer that they must take immediate action to eliminate employee exposure to such hazards. If the employer fails to take the necessary action, attempt to notify the affected employees and notify his/her local field consultation manager.
The field consultation manager shall notify the manager of consultation and outreach, who shall then notify the company of their obligation to correct the problem.

5. The importance of employee participation in the consultation process, including employee interviews, participation in the walk-around, and sharing the final report. Confer with individual employees during the course of the visit to identify and judge the nature and extent of particular hazards and to evaluate the employer’s safety and health program. (The employer must agree to permit employee interviews before the consultation can proceed.)

6. Employer obligations under the 21(d) program if the consultant is funded under the 21(d) grant.

7. Confidentiality of trade secrets that might be revealed during the visit.

Assessing Safety and Health Program Effectiveness
Assessing the effectiveness of an employer’s safety and health program is accomplished through reviewing records, interviewing employees and supervisors, and examining site conditions.

Records Review
The onsite records review should include a comprehensive review of safety committee records, incident and accident reports, injury and illness records, written safety and health programs, policies and procedures. Gather the information needed to compute the company’s DART rate and compare it to the industry average.

Employee and Supervisor Interviews
Interviewing randomly selected employees and supervisors at all levels of an organization is critical to a comprehensive assessment. These conversations can be a good indication of the effectiveness of the overall program. Discussions should include issues such as how employees are protected from existing hazards, how hazards are reported, how reported hazards are addressed, and where to go in an emergency.

Site Condition Evaluation
An evaluation of the overall condition of the workplace can reveal existing hazards that are indications of the effectiveness of the existing safety and health management system. Analyze the root cause of identified hazards to identify the weakness in the system that allowed the hazards to be uncontrolled. Explain during the consultation, and in the written report when appropriate, how the hazard relates to the absence or deficiency of one or more safety and health program elements.

Evaluate worksites during other shifts (swing, graveyard, etc.) to provide the employer a true perspective of the potential hazards.

Encourage the employer to inform affected employees of identified hazards, establish an action plan for correction, and notify employees of correction. Technical assistance on the correction of identified safety and health hazards may be provided to employers during and after the onsite visit. Advise employers of other assistance available to them, but avoid recommending a specific provider. Provide additional correction strategies where possible and within applicable Oregon OSHA standards.
When a code related hazard or program deficiency is identified in the workplace, indicate to the employer whether the situation would be classified as a "SERIOUS" or "OTHER THAN SERIOUS" item. Make the determination of “SERIOUS” and “OTHER THAN SERIOUS” items according to OAR 437-001-0140.

Closing Meeting
The closing meeting will normally be conducted on the last day onsite. The purpose of the closing meeting is to review identified hazards and deficiencies and to encourage the employer to continue working toward self-sufficiency in safety and health. Stress the importance of integrating a safety and health program into daily business activities and, where appropriate, discuss the results of the Safety and Health Program Assessment.

Discuss the consultation report during the closing meeting. Also discuss the importance of action planning and other services provided by Oregon OSHA, such as training opportunities, workshops, and referrals.

Use the consultation checklist to ensure that the above items are not overlooked. (See Appendix D – Opening Checklists)

Close Date: The close date of the consultation is the date of the closing meeting as described above. The close date of a consultation with sampling that required analysis may be the date you contact the employer with the results. Once you receive the sampling results, contact employers as soon as possible (generally within five working days). Don’t delay completing the report if you can’t contact the employer timely.

Reports
A report shall be written for each consultation and mailed to the employer within 10 calendar days following the close date. The report should follow one of the standard formats. (See Appendix F – Report Format Guides) Consultation reports will not be provided to enforcement. Advise your manager if circumstance prevent you from completing the report timely.

You are responsible for providing a professionally written, technically accurate report for each consultation. You should review each report to assure all references are correct and to check for formatting and grammatical errors. All information must be consistent with section procedures and Oregon OSHA interpretations. Peer review is considered a valuable learning tool in the consultation program – ask another consultant to review your reports.

The field consultation manager will review all reports or assure that they have been reviewed to assess overall quality before they are sent. In the absence of the manager, reports may be e-mailed to other field office managers or a lead worker for review depending on the direction of the local manager.

As soon as you complete the report, update and verify all applicable information in the database. A customer survey is automatically sent 7 days after the report by ORCA.

When laboratory analysis is necessary, an industrial hygienist may elect to send a preliminary report to the employer prior to receiving the laboratory results if a significant number of hazards or serious issues were identified. A report date should not be entered into the database, however, until a final report is issued and the results of all sampling have been received. The close date will be the last contact, whether by telephone or in person, that is made with the employer.

The consultation opening and closing checklists used during the consultation must be filed with each report.
Safety and Health Achievement Recognition Program (SHARP)

Overview
SHARP is a recognition program that provides an incentive and road map for employers to work with their employees to find and correct hazards, to develop and implement effective safety and health programs, and to become self-sufficient in managing occupational safety and health. The overall goal of SHARP is to recognize employers for their achievements in workplace safety and health management and in reducing injuries and illnesses. A SHARP employer is one who has successfully incorporated safety and health management principles into their workplace.

Participation in the Oregon OSHA SHARP program does not diminish existing employer and employee rights and responsibilities under the Oregon Safe Employment Act.

The process of becoming certified as a SHARP company requires a thorough assessment of the employer's safety and health program. (Details of the SHARP program are outlined in Appendix M – SHARP Program Details)

SHARP & Scheduled Inspection Deferrals
An employer who has reached second and subsequent year SHARP approval may be deferred from scheduled Oregon OSHA inspections. Inspection deferral is an acknowledgment by the agency that enforcement resources would be better utilized at worksites where employees may be at higher risks of injury and/or illness. SHARP deferrals are forwarded to the manager of enforcement from the manager of consultation and outreach. Deferrals are made on an annual basis and do not include imminent danger, fatality/catastrophe, accidents, complaints and referrals.

Safety and Health Program Assessment (S&HPA the tool used for SHARPs)
There are seven key elements to an effective safety and health program: hazard anticipation and detection, hazard prevention and control, planning and evaluation, administration and supervision, safety and health training, management leadership, and employee participation. These elements correspond with the Federal OSHA Safety and Health Program Assessment, Federal OSHA’s Injury and Illness Prevention Program Management Guidelines issued in the Federal Register on January 26, 1989, as well as the loss prevention requirements of insurers and self-insured employers contained in OAR 437, Division 1. These key elements should form the basis of your onsite review and recommendations for change.

The goal of a consultation is to help the organization complete future prevention efforts independently. For employers with multiple locations, encourage the employer to include managers from other locations to attend one consultation at one location. Visits may be made to multiple locations or establishments; however, the employer should demonstrate a willingness to apply the knowledge gained during any consultation at other locations where appropriate.

The majority of comprehensive consultations should include a review and discussion of the employer's safety and health program. Use the Oregon OSHA Safety and Health Program Assessment (S&HPA) Worksheet when possible. You can review the safety and health program during a specific consultation or as part of a comprehensive consultation.
If you use the Safety and Health Program Assessment (S&HPA) Worksheet, you must discuss elements and ratings (full or partial, Appendix K – Instructions for the Safety and Health Program Assessment Worksheet) during the closing meeting with top management. Develop an action plan schedule at this meeting with the employer. Place the completed worksheet and explanation in the office file and in the report.

Relationship to Enforcement Activity

**Confidentiality**

Consultative activity by Oregon OSHA shall be separately administered and conducted independently of any enforcement activity per Oregon statute. The Consultation Services Section shall not inform the Enforcement Section of the results of any consultation activity.

Oregon OSHA consultants do not have the legal authority to enter an establishment unannounced and stop work activities because of an observed imminent danger situation. Due to this lack of legal authority, you are not to stop and address observed imminent danger situations at locations or places of business where the employer has not requested a consultation. If you observe an imminent danger situation at a location where consultation has not been invited, notify the local field consultation manager. If a consultation manager is not available, notify the local field enforcement manager. Once back in the office, you may need to make a referral and submit it to the local enforcement office.

If an imminent danger situation is observed at a location where the employer has requested our services, advise the employer of the hazard and the need to take immediate action to eliminate employee exposure. If the employer fails to take the necessary action, notify the local field consultation manager. The field manager will inform the manager of consultation and outreach who will notify the company of their obligation to correct the problem.

**In Progress Consultations**

All consultative visits are considered “in progress” from 7 days prior to the opening meeting through 60 days after the report is issued for fixed sites, 30 days for mobile job sites and agriculture labor housing sites. A consultation already in progress has priority over scheduled compliance inspections. The employer may notify the compliance officer of the consultation in progress and request a delay of the inspection until after the consultation is completed.

Enforcement may ask the local field consultation manager if an employer is under consultation prior to driving a long distance to open an unannounced inspection. In this case, information may be given to enforcement regarding whether a consultation is in progress, but not about the consultation itself.

“In progress” status on construction and logging sites applies only to the employer that has requested the consultation. Other contractors working on the site must specifically request a consultation before being covered under an “in progress” consultation. If you receive such a request while onsite, follow the procedures in Section F of this manual and enter the new request into the database.

SHARP consultations are considered “in progress” as defined above. Working toward SHARP or working on an action plan to fix problems in the management system is not a consultation “in progress” and does not qualify for deferral from inspection.
**In-Progress Compliance Inspections**

Consultation activity shall not take place at a site where any compliance inspection is in progress. A compliance inspection is considered to be “in progress” from the time a compliance officer seeks entry to the workplace until the closing (if no citations are issued), until all citations are paid (if citations are issued), or until the appeal is settled and signed. If a referral is made to another compliance officer, the inspection is considered “in progress” until that compliance officer completes his/her inspection.

A compliance inspection will also be considered “in progress” in cases where entry is refused until the inspection is conducted, the administrator determines that a warrant to obtain entry will not be sought, or the manager of enforcement determines that allowing a consultation to proceed is in the best interest of employee safety and health.

**Services After Enforcement Activity**

Consultation will not normally provide abatement assistance after a compliance inspection. Exceptions may be made where the manager of enforcement and the manager of consultation and outreach have determined it to be in the best interest of worker health and safety. This may occur where unique expertise is needed or in an extended long-term abatement process.

In the rare situation where consultative services occur when an enforcement action is not a final order, do not discuss, advise, or in any way become involved in any process, situation, or hazard that is still under citation. This will only occur under special arrangements and will be monitored by your supervisor and the compliance officer’s supervisor.

**Special Compliance Inspections**

The consultant shall normally cease an onsite consultative visit already in progress when one of the following types of compliance inspections is about to take place:

- Imminent danger investigation.
- Fatality, catastrophe or accident investigation.
- Complaint or referral investigation.
- Other critical inspections as determined by the administrator.

The consultation may be resumed upon completion of the compliance inspection and all related activities.

**Complaint Letters**

Some employee complaints receive an enforcement letter. The letter generally advises the employer to take action and to report the steps taken. This form of complaint resolution may generate a request for a consultation. If this happens, take the following steps:

1. Inform the enforcement supervisor of the request.
2. Be aware that complaints can be generated by labor relations problems; therefore, deal only with safety and health issues.
3. Focus on working with the employer to quickly resolve the problem. Encourage the employer to openly communicate with employees about steps being taken to resolve the hazards.

This concludes the body of the guide – Appendices to follow
Appendix A – Consultation Request and Intake Procedures

The form and a list of questions and suggestions for the intake process. The most current version of the form is in the data base (ORCA).

Intake Employer Questionnaire

Date: ________________________________  (Please enter into ORCA on the same day)

Would you like the Consultation within the next 60 days?  __ No  __ Yes

**Enforcement activity:**  __ No __ Yes

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</tr>
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<td>Mail Address:</td>
<td>County:</td>
</tr>
</tbody>
</table>

| Site Address:           | Nature of Business: |

Source:
__ Previous OR-OSHA Referral  __ Website Conference PE  __ Public Media Radio/TV
__ Onsite Request  __ Workshop/Training  __ Cold Calls
__ Direct Mail  __ HB Letter  __ Other __________

No. of employees: ____________  Private   Public   Tribal

**a) Type of Service Requested**  
(See below Q’s)

__ S = Safety  
__ H = Health  
__ E = Ergonomic  
__ PSM = Process Safety Management

**b) Industry** (See below Q’s)

__ A = Agriculture  
__ C = Construction  
__ G = General Industry  
__ F = Forest/ Logging  
__ L = Ag Labor Housing

**c) Assistance Requested**

__ C = Comprehensive  
__ S = Specific  
__ T = Training

Site SIC/NAICS

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15
Appendix A – Consultation Request and Intake Procedures

General
- Have you ever had a consultation before?
- Why are you calling?
- Who is responsible or in charge of your S&H programs?
- Who will be attending the consultation? (Along with management, encourage them to have employee involvement during the consultation – SC, union, lead, etc.)
- What kind of processes do you have in place?
- What kind of departments do you have?
- What type of equipment do you have?
- How many buildings do you have? Square footage?
- What would you like to accomplish?
- Program review/walk through/both?

Safety
- Construction activity?
- How many subs?
- What type of equipment?
- Phase of project?
- Phase duration for hazard of concern?

Health
- Noise?
- Have you done previous sampling?
- Medical office?
- Hospital?
- Chemical handling?
- Lasers?
- Welding?

Ergo
- Sprain and strain injuries?
- Physical material handling?
- Repetitive tasks?

PSM
- What are your chemicals?
- Are you covered by the PSM standard?
- How much/What is the quantity?
- Do you submit EPA, RMP report?

ALH
- Is your camp registered this year?
- Were you registered last year?
- Are you H2A?
- Have you made significant changes? Normal vs registered and do they need a letter of substantial compliance or full compliance for H2A or not at all.
Types of Businesses that generally require just a Safety consultation or just an IH consultation:

**Safety Consultations**
- Grocery stores
- Auto shops
- Restaurants
- Various types of Retail Stores
- Motel/Hotels
- Gas stations
- Logging
- Trucking firms

**IH Consultations**
- Dentists Offices
- Medical Offices
- Health Clinics
- Barbers/Hair Dressers
- Nail Salons

Types of Businesses that generally require both a Safety consultation and an IH consultation:

**Auto Body Shops**
**Health First:**
Refer to safety or ergo if necessary
- Auto Body Shops
- Health Care Clinics
- Dental Offices
- Assisted Living and Long Term Care
- Small Brewery

**Muscular Need S&H**
- Woodworking Facility (safety first due to amputation emphasis)
- Foundry
- Heavy Manufacturing
- Chemical manufacturing
- Dairy
- Semiconductor
- Water & Wastewater Treatment

**Safety First:**
Refer to health or ergo if necessary
- Most construction projects (health is concrete, siding, coating, remodel of structure older than 1980)
- Auto Repair Shops
- Machining Shops
- Grocery Stores
- Distribution Facilities
- Maritime (should talk them into health once onsite)
- Small to moderate size Food Manufacturing (safety should address use of chemicals for sanitation)
Appendix B – Confirmation Letter
– Sent out automatically via email.

SAMPLE: Wording will change according to discipline requested.

Date

Name
Address

Re: Consultation Request No: 09-01234

Thank you for requesting Oregon OSHA’s consultative services. We are looking forward to visiting your worksite at (site address) to assist you with your safety efforts. An Oregon OSHA consultant will be calling you to arrange a mutually agreeable date and time to visit your worksite. Consultation requests are generally addressed in the order they are received. Our response time may vary as it is determined by the number and complexity of requests we receive. If an Oregon OSHA enforcement inspection is in progress or has recently taken place at this site, your request may be delayed until the enforcement process has been completed.

You have requested a safety consultation. Oregon OSHA also offers industrial hygiene consultations to help you identify employee exposures to health hazards such as noise, respiratory hazards, and hazardous chemicals; and ergonomic consultations to help you evaluate your work environment and develop effective ways to reduce overexertion injuries, such as carpal tunnel syndrome and lower back strains. Please consider requesting an industrial hygiene or an ergonomic consultation if you need assistance in these areas.

If you have a safety committee, the members would benefit by walking around the worksite with the consultant. Many safety committee members have found that they increase their hazard recognition skills by participating in this way.

Thank you for requesting our services. We are looking forward to working with you to improve workplace safety and health for your employees. If you have any questions, call me or see our website at osha.oregon.gov for more information.

Field Consultation Manager
Consultation Services Section
Address
Phone Number
Enclosure
Appendix C – Withdrawal Letter

- Sent out automatically via email.

Date

Company Name Address
City, State Zip

Re: Consultation Request No: 00-0000

(Cannot Contact Employer) The Oregon Occupational Safety and Health Division, Consultation Section, has attempted several times to contact you and arrange a date for an onsite visit without success. For this reason your request for a consultation will be removed from our pending list if we do not hear from you by xxx. In the future if you have a need for our services, call one of the following field offices:

or

(Per Employer Request) At your request, the Oregon Occupational Safety and Health Division, Consultation Section, has removed your name from our pending list for a consultation. In the future if you have a need for our services, call one of the following field offices:

We appreciate your interest in improving safety and health at your workplace and encourage you to contact our offices again upon completion of the enforcement activity (if a citation was issued it must be paid or an appeal settled). Contact the office nearest you from the list below to request a consultation.

<table>
<thead>
<tr>
<th>Field Office</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Portland</td>
<td>(503) 229-6193</td>
</tr>
<tr>
<td>Salem</td>
<td>(503) 373-7819</td>
</tr>
<tr>
<td>Eugene</td>
<td>(541) 686-7913</td>
</tr>
<tr>
<td>Bend</td>
<td>(541) 388-6068</td>
</tr>
<tr>
<td>Medford</td>
<td>(541) 776-6016</td>
</tr>
<tr>
<td>Pendleton</td>
<td>(541) 276-2353</td>
</tr>
<tr>
<td>Salem Central Office</td>
<td>(503) 378-3272 or Toll Free 1-800-922-2689</td>
</tr>
</tbody>
</table>

If you have questions or concerns regarding this withdrawal, contact me or visit our website at osha.oregon.gov for more information.

Field Consultation Manager
Consultation Services Section
Oregon OSHA (name of field office)
Field office address
Field office city
Field office telephone number
Appendix D – Opening Checklists

Report No.: ____________________________________
Consultant: _____________________________________
Legal Name _______________________________________________________________________
DBA _____________________________________________________________________________

Initial Meeting

Confidentiality: The employer has requested, and Oregon OSHA has agreed, to hold all information associated with this consultation confidential to the extent provided for by law. (Employee exposure records must be shared with affected employees per OAR 437 Div. 2, 1910.1020) Yes ___ No ___

Employer or Authorized Representative:
Signature ___________________________________________ Date ____________________________
Title: ______________________________________________________________________________

The parties agree that this agreement may be electronically signed. The parties agree that the electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability, and admissibility.
Check to agree: ☒

__ Name of Employer Representative
__ Name of Employee or Safety Committee Rep
__ Review the Purpose and Scope of Consultation
__ Explain Process (written programs, recordkeeping, hazard assessment walkthrough, safety committee, and safety and health management)
__ Employer’s Obligation to Protect Employees if Imminent Danger
__ Explain the Relationship between Enforcement and Consultation and Inspection Deferral
__ Confidentiality of Trade Secrets

Closing Meeting

__ Participants
__ Observations and Recommendations
__ Safety & Health Management and Self Sufficiency
__ Action Planning
__ Oregon OSHA Services
__ Report and Consultation Evaluation Form

Comments: _________________________________________________________________________
_________________________________________________________________________________
Appendix D – Opening Checklists

Report No.: _____________________________________
Consultant: _____________________________________
Legal Name ................................................................
DBA _____________________________________________________________________

Initial Meeting
Is the employer under Enforcement? ______ Yes ___ No

Confidentiality: The employer has requested, and Oregon OSHA has agreed, to hold all information associated with this consultation confidential to the extent provided for by law. (Employee exposure records must be shared with affected employees per OAR 437 Div. 2, 1910.1020) Yes ___ No ___

Employer or Authorized Representative:
Signature ___________________________ Date ___________________________
Name (print): _______________________________________________________
Title: ______________________________________________________________

Name of Employer Representative
Name of Employee or Safety Committee Rep
Review the Mission, Purpose and Scope of Consultation
Explain Process (cost, written programs, recordkeeping, hazard assessment walkthrough, safety committee, and safety and health management)
Review Employer’s Obligations
   a. Imminent Danger/Referral
   b. Hazard Correction/Verification/Referral
   c. Posting the List of Hazards
   d. SHARP/VPP
Review Employer’s Rights
   a. Modify Scope/Terminate Visit
   b. Correction Schedule/Report Findings
   c. Informing Enforcement
   d. Private Discussion with Consultant

Explain the Relationship between Enforcement and Consultation and Inspection Deferral
Confidentiality of Trade Secrets

Closing Meeting
Participants
Observations, Recommendations, Abatement Dates, and Extension
Safety & Health Management and Self Sufficiency
Action Planning
Oregon OSHA Services
Report and Consultation Evaluation Form

Comments: ______________________________________________________________________________________
Information Request Form

Please have the information on this form available during the inspection. If sent in the mail or copied, the records will become part of the file.

Date: _______________ Report number: ____________________________________________
Employer: _______________________________________________________________________

Injury and Illness Records

__ OSHA 300 Log / 300A form/ last 3yrs
__ 801’s
__ Hours Worked
__ Exempt by NAICS/Size

Safety Committees or meetings
__ Minutes

Personal Protective Equipment
__ Hazard Assessment

First Aid
__ Emergency Medical Plan
__ Fire Evacuation Plan
__ HazWOPER
__ Emergency Response Plan
__ Training Records

Hazard Communication
__ Written Program
__ List of Chemicals
__ SDS’s

Cranes and Hoists
__ Inspection Records
__ Operator Procedures
__ Lifting Attachments
__ Crane Operator Certification
__ Rigging Qualification
__ Signalperson Qualification

Powered Industrial Trucks
__ Inspection Records
__ Maintenance Records
__ Operator Training

Powered Platform
(Ext. Blg Maint)
__ Written Procedures for operation
__ Plan for emergencies

Self-Insured/ Group Insured
__ Health and Safety Loss Prevention Program

Health
__ Air contaminants
__ Sampling Records
__ Medical Surveillance
__ Asbestos
__ Lead
__ Lab/ Chemical Hygiene Plan
__ Tuberculosis Protocol/screening

Noise
__ Hearing Conservation Program
__ Audiometric Testing
__ Noise Monitoring
__ Feasibility Study
__ Training Records

Respiratory Protection
__ Written Program
__ Fit-Testing Records
__ Medical Evaluation Records
__ Training Records

Bloodborne Pathogens
__ Exposure Control Plan
__ Hep B vaccine/declination statements
__ Sharps Injury Log

Confined Space
__ Written Plan
__ Entry Records
__ Instrument records & calibration
__ Training Records

Lock Out/Tag Out [LOTO]
__ Energy Control Procedures
__ Specific Equipment
__ Audits/Annual Review
__ Training Records

Construction
__ Flagger/ Traffic Control Training
__ Aerial Lifts Training
__ Fall Protection Training
__ Scaffold Training
__ Excavations
## Oregon OSHA Consultation
### Onsite Request-Initial Meeting Form

<table>
<thead>
<tr>
<th>Legal Name</th>
<th>Consultant</th>
<th>DBA</th>
<th>Mailing Address</th>
<th>Recent Enforcement Activity?</th>
<th>Yes</th>
<th>No</th>
<th>Contact Name</th>
<th>Title</th>
<th>Contact Phone Number</th>
<th>Contact Email Address</th>
<th>Site Address</th>
<th>Number of Employees at Site</th>
</tr>
</thead>
</table>

**Confidentiality:** The employer has requested and Oregon OSHA has agreed to hold all information associated with this consultation confidential to the extent provided for by law.

**Note:** Employee exposure records must be shared with affected employees per 29 CFR 1910.1020

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
<th>Date</th>
<th>Employer or Authorized Representative</th>
<th>Print Name</th>
<th>Signature</th>
<th>Title</th>
</tr>
</thead>
</table>

### Consultation Opening

Name of employer representative __________________________________________

Name of employee or safety committee representative ______________________

- [x] Review the purpose and scope of consultation
- [x] Explain consultation process
  - Written programs, recordkeeping, hazard assessment, safety committee and safety and health mgmt.
- [x] Employer’s obligation to protect employees if imminent danger
- [x] Explain the relationship between enforcement and consultation deferral
- [x] Confidentiality of Trade Secrets

### Consultation Closing

Participants ______________________________________________________________________

Observations and Recommendations ___________________________________________________

Safety & Health Management and Self Sufficiency _______________________________________

Action Planning _____________________________________________________________________

- [x] Oregon OSHA Services
- [x] Report and Consultation Evaluation Form

**Comments:** _____________________________________________________________________
Appendix E – Instructions for Computing Incidence Rates

Instructions for computing incidence rates for an individual firm

Days Away, Restricted and/or Transfer Rates (DART) and Total Injury & Illness Rates (TIIR)

The incidence rates for an individual establishment or firm may be calculated by using the same formula used to calculate industry-wide incidence rates from the annual Occupational Injury and Illness Survey. The incidence rates (IR) are calculated for numbers of injuries and/or illnesses, or for cases with days away and/or job transfer or restriction, per 100 workers per year. The rate is calculated as:

\[ IR = \frac{N \times 200,000}{EH} \quad \text{or} \quad (N + EH) \times (200,000) = IR \]

Where:

- **IR** = Incidence Rate (either DART or TIIR)
- **N** = Number of cases with days away and/or job transfer or restriction or number of cases with injuries/illnesses
- **EH** = Total hours worked by all employees during the calendar year
- **200,000** = Base for 100 full-time equivalent workers\(^1\) (working 40 hours per week, 50 weeks per year)

The formulas in the following table may be used to determine the Days Away, Restricted, and/or Transfer (DART) Rate, or to determine the total injury and illness rate (TIIR):

<table>
<thead>
<tr>
<th>Incident Rate</th>
<th>OSHA 300 Log Column Entry</th>
<th>Calculations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Days Away, Restricted, or Transferred</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DART Rate</td>
<td>H _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ I _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total = _____ (cases)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>× 200,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>÷ _____ (hours)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>= _____ (rate)</td>
<td></td>
</tr>
<tr>
<td>Was Lost Workday Injury and Illness Rate (LWCDIR)</td>
<td>G _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ H _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ I _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ J _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total = _____ (cases)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>× 200,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>÷ _____ (hours)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>= _____ (rate)</td>
<td></td>
</tr>
<tr>
<td>Total Injury &amp; Illness Rate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>TIIR Rate</td>
<td>G _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ H _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ I _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>+ J _____</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total = _____ (cases)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>× 200,000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>÷ _____ (hours)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>= _____ (rate)</td>
<td></td>
</tr>
</tbody>
</table>

**Note:** Consultants will not normally calculate TIIR unless specifically requested by the employer, or when it is for VPP purposes.

---

\(^1\) Employee hours (EH) are the total number of hours actually worked during the year by all employees from payroll or other time records. The hours worked figure should not include any non work time even though paid, such as vacation, sick leave, holidays, etc. (If actual hours worked are not available for employees paid on commission, salary, by the mile, etc., hours worked may be estimated on the basis of scheduled hours or 8 hours per workday.)
Instructions for comparing incidence rates for an individual firm against published data

For purposes of SHARP evaluation, the company DART rate for the most recently completed calendar year shall be calculated by the consultant. That calculated company rate shall be compared to the most recently published data for the industry.\textsuperscript{2}

There is a three-year lag in this process. When the consultation takes place (this year), the consultant will calculate the DART rate for site’s most recently completed calendar year (last year) and then compare that against the most recently published data (data from two years ago).

The Industry Rates are found in the “Incidence rates of nonfatal occupational injuries and illnesses by industry and case types. Oregon, (year)” This information can be found on the Oregon OSHA SHARP website. The table in this link is updated annually in early January.

The consultant shall compare the calculated company DART rate to the rates published in the “Total” column under “Cases with days away from work, job transfer, or restriction.” If a comparison is made of total injury and illness rates, the comparison will be made to the rates published in the “Total recordable cases” column.

The consultant shall compare the calculated company rate against the most current NAICS code published. First, determine if there’s a matching six digit code, if there’s none, look for a five digit code, if there’s none, look for a four digit code, if there’s none, look for a three digit code, if there’s none, look for a two digit code. If there’s not a two-digit code, locate the main category activity name that has no NAICS code and use those rates. If the six digit NAICS code is not published, refer to the Oregon OSHA NAICS Codes Selection Guidelines for instructions on determining the appropriate code to use.

Both the company DART rate and the industry average rate must be included in the SHARP Executive Summary. For more information on DART, Refer to Program Directive A-249.

\textsuperscript{2} Yearly tables with Incidence rates of Nonfatal Occupational Injuries and Illnesses by Industry can be found at http://osha.oregon.gov/pubs/reports/Pages/default.aspx\#insp or https://www.bls.gov/iif/oshstate.htm\#OR or https://www.bls.gov/iif/oshsum.htm
Guidelines for Selecting NAICS/SIC Codes to Determine Nonfatal Occupational & Illness Industry Rates

When determining incidence rates of nonfatal occupational injuries and illnesses by industry and case types, use the Bureau of Labor Statistics, U.S. Department of Labor, Table 6 for years 1996, 1997, 2003 and 2004. When determining industrial rates for years 2002-1998, use only the five year published Information Management Division, IMD table. These tables are located at http://www.bls.gov/iif/oshwc/osh/os/ostb1765.pdf. Please use only these tables at this website to determine industrial rates for these years and future years. For table years prior to 1997 please contact your manager for verification of the correct table.

Note: When determining a company’s industrial rate always use the table year that is two years prior to the SHARP award year. (Example: The calendar year award date is 2006, use the 2004 table.)

Guidelines for selecting NAICS codes in Table 6.

Select the “Total” column under the heading, “Cases with days away from work, job transfer, or restriction.”

When the company’s six digit NAICS code is identical to the table 6 code simply select the corresponding industrial rate in the “Total” column.

When the company’s NAICS code is not identical to the table 6 code then select the appropriate NAICS code that covers the field of activities. First, determine if there’s a matching six digit code, if there’s none, determine if there’s a matching five digit code, if there’s none, look for a four digit code, if there’s none, look for a three digit code, if there’s none, look for a two digit code. If there’s not a two-digit code, locate the main category activity name that has no NAICS code and use those rates. Refer to the attached table 6 for the following examples.

1. A company’s NAICS is 236270, with SHARP award date 3/1/2005. Since there is no matching six or five digit code, select the four digit code 2362 with rate 4.4.

2. A company’s NAICS code is 111510, with SHARP award date 5/1/2005. Since there is no matching six or five digit code, and no 1115 four digit code, select the three digit code 111 with rate 3.5.

3. A company’s NAICS code is 235110, with SHARP award date 7/1/2005. Since there is no matching six or five digit code, no four digit 2351, no three digit 235 code, select the two digit code 23 with rate 4.4.

4. A company’s NAICS code is 221110, with SHARP award date 10/1/2005. Since there is no two digit 22 code in the NAICS code numeric order on page 1 of table 6, select the four digit code 2211 on page 5 with rate 4.6. In this case the NAIC code is not in numeric order by category.

5. A company’s NAICS code is 611620, with SHARP award date 11/1/2005. The company is Tualatin Hills Park & Recreation. There is a 61 code under the “State government” classification, “Education Services” on page 5, and a 611 code under the “Local government” classification, “Educational services” on page 7. Select code 611 with rate 1.2, page 7, since this organization is part of local government.
Appendix F – Report Format Guides

Comprehensive Report

Date

Name, Title
Company Name
Address
City

RE: Consultation Report xx-xxxx

Dear Mr.:

Thank you for the opportunity to visit your workplace to conduct a comprehensive (safety, health, ergonomic) consultation on date.

All sections below should be included in the written report. If an employer does not have a required Oregon OSHA program, include a discussion in that section addressing the lack of a program as well as recommendations for implementation.

General summary:
Overview of the consultation visit including participants, special circumstances such as new operations or new management, challenges encountered, recommended referrals and other relevant information, such as number of serious and other than serious items found on the walk through.

Safety and health management:
Summary of the discussion on safety and health management specific to the company. Summary should include examples of deficient elements of their safety and health management program as reflected by hazards found.

Written programs:
General discussion of Oregon OSHA mandated programs and any other programs reviewed. Code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

Record keeping / dart:
Discussion of OSHA 300 log, 801, injuries, illness and any notable trends.

Safety committee:
General discussion on the company’s safety committee operations. Any specific code related deficiencies should be addressed in the “Hazard Identification and Correction” section.
Appendix F – Report Format Guides

The following paragraphs are standard language for all reports and their content should not be altered.

Attached you will find the “Hazard Identification and Correction” worksheets that list the hazards observed during the consultation. The observations and recommendations made in this report are designated as SERIOUS (S) or OTHER THAN SERIOUS (OTS) based upon probable severity if an injury or illness were to occur. SERIOUS hazards are those situations or conditions that could result in serious illness, physical harm or death. OTHER THAN SERIOUS hazards are those situations or conditions that could result in employee injury or illness of a less serious nature. These designations are intended to help you prioritize corrective action. You should develop an action plan to ensure prompt correction of these identified hazards.

Your company is exempt from a routine scheduled Oregon OSHA inspection at this location for (60 days or 30 days) from the date of this report. As mentioned during the consultation, this does not exempt your company from enforcement action in the event of an accident investigation, an employee complaint, referral, or the observance of an imminent danger.

During the consultative visit, I attempted to identify all the hazards. However, there may be some hazards that I did not see or identify. It remains the responsibility of the employer to ensure the safety and health of employees and to identify and correct all hazardous conditions or situations. This report cannot result in enforcement activity, nor can Oregon OSHA Enforcement use this report as a basis for citation.

Oregon OSHA does not endorse particular vendors or products. Any information provided in this report about a product or vendor should not be interpreted as an endorsement. Employers are encouraged to conduct their own research on products that will meet their specific needs.

Oregon OSHA values feedback from its customers on the services they received. Please take the time to complete and return the enclosed questionnaire in the postage-paid envelope provided. Thank you for requesting our assistance to improve safety and health in your workplace. Contact me if you have questions regarding occupational safety and health issues.

Signature block
Specific Report

Date

Name, Title
Company Name
Address
City

RE: Consultation Report xx-xxxx

Dear Mr.:

Thank you for the opportunity to visit your workplace to conduct a specific (safety, health, ergonomic) consultation on date.

General summary:
Overview of the consultation visit, including participants, special circumstances such as new operations or new management, challenges encountered, recommended referrals and other relevant information.

Select applicable sections from below as they apply to the scope of the consultation.

Safety and health management:
Summary of discussion on safety and health management specific to the company. Discussion should include examples of deficient elements of their safety and health management program as reflected by hazards found.

Written programs:
General discussion of Oregon OSHA mandated programs and any other programs reviewed. Code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

Record keeping / dart:
Discussion of OSHA 300 log, 801, injuries, illness and any notable trends.

Safety committee:
General discussion on the company’s safety committee operations. Any specific code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

The following paragraphs are standard language for all reports and their content should not be altered
Attached you will find the “Hazard Identification and Correction” worksheets that list the hazards observed during the consultation. The observations and recommendations made in this report are designated as SERIOUS (S) or OTHER THAN SERIOUS (OTS) based upon probable severity if an injury or illness were to occur. SERIOUS hazards are those situations or conditions that could result in serious illness, physical harm or death. OTHER THAN SERIOUS hazards are those situations or conditions that could result in employee injury or illness of a less serious nature. These designations are intended to help you prioritize corrective action. You should develop an action plan to ensure prompt correction of these identified hazards. Information provided to assist you in correcting or abating hazards should not be considered a formal endorsement of any vendor or product.

Your company is exempt from a routine scheduled Oregon OSHA inspection at this location for (60 days or 30 days) from the date of this report. As mentioned during the consultation, this does not exempt your company from enforcement action in the event of an accident investigation, an employee complaint, referral, or the observance of an imminent danger.

During the consultative visit, I attempted to identify all the hazards. However, there may be some hazards that I did not see or identify. It remains the responsibility of the employer to ensure the safety and health of employees and to identify and correct all hazardous conditions and/or situations. This report cannot result in enforcement activity, nor can Oregon OSHA Enforcement use this report as a basis for citation.

Oregon OSHA does not endorse particular vendors or products. Any information provided in this report about a product or vendor should not be interpreted as an endorsement. Employers are encouraged to conduct their own research on products that will meet their specific needs.

Oregon OSHA values feedback from its customers on the services they received. Please take the time to complete and return the enclosed questionnaire in the postage-paid envelope provided. Thank you for requesting our assistance to improve safety and health in your workplace. Contact me if you have questions regarding occupational safety and health issues.

Signature block
IH Sampling Report

Dear Mr.,

Thank you for the opportunity to visit your workplace to conduct a health consultation on _____________ (date) for ________________.

General summary and specifics of the consultation included here.

Use this paragraph if applicable

Attached you will find the “Hazard Identification and Correction” worksheets that list the hazards observed during the consultation. The observations and recommendations made in this report are designated as SERIOUS (S) or OTHER THAN SERIOUS (OTS) based upon probable severity if an injury or illness were to occur. SERIOUS hazards are those situations or conditions that could result in serious illness, physical harm or death. OTHER THAN SERIOUS hazards are those situations or conditions that could result in employee injury or illness of a less serious nature. These designations are intended to help you prioritize corrective action. You should develop an action plan to ensure prompt correction of these identified hazards.

The following paragraphs are standard language for all reports and their content should not be altered

Your company is exempt from a routine scheduled Oregon OSHA inspection at this location for (60 days or 30 days) from the date of this report. As mentioned during the consultation, this does not exempt your company from enforcement action in the event of an accident investigation, an employee complaint, referral, or the observance of an imminent danger.

During the consultative visit, I attempted to identify all the hazards. However, there may be some hazards that I did not see or identify. It remains the responsibility of the employer to ensure the safety and health of employees and to identify and correct all hazardous conditions and situations. This report cannot result in enforcement activity, nor can Oregon OSHA Enforcement use this report as a basis for citation. However, employee exposure records must be shared with affected employees, their representatives, and Oregon OSHA representatives, including compliance officers, per OAR 437 Division 2 1910.1020.

Oregon OSHA does not endorse particular vendors or products. Any information provided in this report about a product or vendor should not be interpreted as an endorsement. Employers are encouraged to conduct their own research on products that will meet their specific needs.
Appendix F – Report Format Guides

Oregon OSHA values feedback from its customers on the services they received. Please take the time to complete and return the enclosed questionnaire in the postage-paid envelope provided. Thank you for requesting our assistance to improve safety and health in your workplace. Contact me if you have questions regarding occupational safety and health issues.

Signature block
### Air Sampling Results for:

<table>
<thead>
<tr>
<th>Person/Task</th>
<th>Contaminant</th>
<th>Sample Time (hr:mn)</th>
<th>Level¹ (mg/m³)</th>
<th>TWA² (mg/m³)</th>
<th>PEL³ (mg/m³)</th>
<th>% of PEL</th>
</tr>
</thead>
</table>

**Sampling Method:**
Air monitoring was completed in the employees’ breathing zone in accordance with NIOSH Method XXX.

**Condition/Work Procedure:**
1. **Level**
   - This is the actual measured airborne concentration during the sampling period.
2. **TWA:**
   - Time weighted average. This is an estimate of the full shift, 8-hour exposure.
3. **PEL:**
   - Permissible Exposure Limit. This is the allowable 8-hour time-weighted average exposure limit per OAR 437-02-382, “Oregon Rules for Air Contaminants.”
4. **%PEL**
   - Severity - greater than 100 percent indicates overexposure.
5. **mg/m³**
   - Milligrams of contaminant per cubic meter of air.
6. **PPM**
   - Parts Per Million. Volumes of solvent vapor per million volumes of air.
7. **TLV:**
   - This is an 8-hour, time-weighted average exposure limit established by the American Conference of Governmental Industrial Hygienists, ACGIH.
8. **STEL**
   - Short Term Exposure Limit. The maximum length of time an employee maybe exposed to a contaminant.
9. **CEILING**
   - Maximum level an employee may be exposed.
10. **ND**
    - Not detected.
11. **NE**
    - None established as a legal limit.
# Noise Sampling Results For:

<table>
<thead>
<tr>
<th>Employee/Job Task/Location</th>
<th>Sample Time (hr:mn)¹</th>
<th>AL (dBA)²</th>
<th>PEL (dBA)³</th>
<th>Exceeds AL/PEL?</th>
<th>NIOSH Noise Criteria⁴</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

¹**Sample Duration:**
The amount of time (hours and minutes) the employee was sampled to evaluate the noise exposure. Where work tasks remain the same throughout the work shift the reported levels are representative of the 8-hour projected noise exposure.

²**Action Level:**
An 8-hour time-weighted average of 85 decibels (dBA) measured on the A-scale, slow response, or equivalently, a dose of fifty percent.

- 8 Hour shift ---- AL = 85 dBA
- 10 Hour shift ---- AL = 83.4 dBA
- 12 Hour shift ---- AL = 82.1 dBA
- 16 Hour shift ---- AL = 80.0 dBA

At or above the AL a hearing conservation program must be administered for the exposed and/or representative employee without regard for the use of hearing protection. Elements of the program include noise monitoring, annual audiometric testing, evaluation of audiograms, hearing protection, employee training, and medical record keeping.

³**Permissible Exposure Limit:**
The PEL is equivalent space to an 8-hour time-weighted average of 90 dBA. This is equivalent to a noise dose of 100%. A 90 dBA threshold is used, so that only noise levels at or above 90 dBA are included in the measurement.

At noise levels equal to or greater than 90 dBA, action must be taken to reduce exposures below the PEL. When feasible, noise exposure above 90 dBA needs to be controlled or eliminated through a combination of engineering and administrative controls, and/or personal protective equipment, in that order. Examples of noise engineering controls include structural noise barriers, equipment modification, etc. Administrative controls can be used to limit the amount of time a worker is exposed to noise above 90 dBA. Proper selection and use of hearing protection devices is the final choice for control when other methods are not feasible, or are being implemented but can not reduce employee noise exposure to 90 dBA averaged over an eight hour shift.

⁴**NIOSH Noise Criteria:**
An 8-hour time-weighted average of 85 dBA measured on the A-scale, slow response using an 80 dBA sampling threshold and 3dB exchange rate. Due to the lower exchange rate, this standard is more protective. To prevent occupational hearing loss, appropriate hearing protection should be worn when noise exposure exceeds 85 dBA.
Training/ Other Services Report

Date

Name, Title
Company Name
Address
City

RE: Consultation Report xx-xxxx

Dear Mr.:
Thank you for requesting our assistance.

General summary and specifics of the presentation or training provided (participants, follow-up to unanswered questions, recommended consultations, or any other relevant information).

It was a pleasure to work with your company to improve safety and health in your workplace.

Oregon OSHA values feedback from its customers on the services they received. Please take the time to complete and return the enclosed questionnaire in the postage-paid envelope provided. Thank you for requesting our assistance to improve safety and health in your workplace. Contact me if you have questions regarding occupational safety and health issues.

Signature block
## Worksheet Sample A - Hazard Identification and Correction

Firm Name: ___________________________ Report Number: ___________________________
Consultation Date: ___________________________

<table>
<thead>
<tr>
<th>No</th>
<th>Item</th>
<th>Location</th>
<th>S</th>
<th>OTS</th>
<th>Recommended Corrective Action</th>
<th>Assigned To</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Sample Hazard</strong>&lt;br&gt;An Emergency Medical Plan to ensure the rapid response and care of an injured employee was not developed. Rule: 437-002-161(4), Div. 2/K</td>
<td>Facility</td>
<td></td>
<td>X</td>
<td>Develop procedures to be followed in the event that an employee is seriously injured.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td><strong>Continue listing hazards or deficiencies found</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix F – Report Format Guides

Item:
Description of hazard or deficiency found. Indicate potential rule violation if applicable or write “Recommendation” if hazard is not rule related. Rule should be formatted in a manner consistent with our standards. For example 1910.1030(c)(1) for a Federal Rule or 437-002-1030(5) for an Oregon initiated rule.

Location:
Location of hazard or deficiency within the site. Write “Facility” if issue applies to the entire facility such as program deficiencies.

S /OTS:
Designate hazard as “S” for serious and “OTS” for other than serious. Severity rating will be based on the definition in OAR 437-001-0140, Evaluation of Severity to Establish Penalties – “a severity rating...on the basis of the degree of injury or illness that is reasonably predictable. If more than one injury or illness is reasonably predictable... the severity based upon the most severe injury or illness. Severity ratings will be selected from the following schedule:

a) Other Than Serious – Conditions that could cause injury or illness to employees but would not include serious physical harm.

b) Serious Physical Harm.”

Corrective Action:
Consultant should provide guidance on how to eliminate hazards. Recommendations, as feasible, should be for first eliminating the hazard, engineering controls, personal protective equipment and administrative controls.

Assigned To:
Explain to the employer the use of the sheet as an action plan form. This column should be left blank so the employer can designate a responsible person as part of their action planning.

Due Date:
This column should be left blank so the employer can designate target dates for correction in the action planning process.
Worksheet Sample B - Hazard Identification and Correction

Firm Name: ____________________________ Report Number: ______________________
Consultation Date: ____________________

Item:
Individually number each hazard or deficiency found. Clearly describe the hazard or
deficiency and indicate location found within the site.

Corrective Action:
Consultant should provide guidance on how to eliminate hazards. Recommendations, as
feasible, should be for first eliminating the hazard, engineering controls, personal protective
equipment and administrative controls.

SERIOUS /OTHER THAN SERIOUS:
Designate hazards as serious or other than serious. Severity rating will be based on the
definition in OAR 437-001-0140, Evaluation of Severity to Establish Penalties - “a severity
rating…on the basis of the degree of injury or illness that is reasonably predictable. If more
than one injury or illness is reasonably predictable… the severity based upon the most
severe injury or illness. Severity ratings will be selected from the following schedule:

a) Other Than Serious – Conditions that could cause injury or illness to employees but
would not include serious physical harm.

b) Serious Physical Harm.”
Indicate potential rule violation if applicable or write “Recommendation” if hazard is not rule
related. Rule should be formatted in a manner consistent with our standards. For example
1910.1030(c)(1) for a Federal Rule or 437-002-1030(5) for an Oregon initiated rule.
SHARP Comprehensive Report

Date

Name, Title
Company Name
Address
City

RE: Consultation Report xx-xxxx

Dear Mr.:
Thank you for requesting our assistance in your efforts to pursue SHARP. A comprehensive (safety, health, ergonomic) consultation was conducted on date.

All sections below should be included in the written report. If an employer does not have a required Oregon OSHA program, include a discussion in that section addressing the lack of a program as well as recommendations for implementation

General Summary:
Overview of the consultation visit, including participants, special circumstances like new operations or new management, challenges encountered, recommended referrals and other relevant information.

Safety And Health Management:
Discussion on the process followed to arrive at the scoring achieved for the safety and health management assessment form.

Written Programs:
General discussion of Oregon OSHA mandated programs and any other programs reviewed. Code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

Record Keeping / Dart:
Discussion of OSHA 300 log, 801, injuries, illness and any notable trends and its relevance to their SHAPR status.

Safety Committee:
General discussion on the company’s safety committee operations and its importance to the SHARP program. Any specific code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

Action Planning:
Recommendations on how to prepare for Action Planning meeting that will follow this report. Include time and date of meeting if already scheduled.
The following paragraphs are standard language for all reports and their content should not be altered.

Attached you will find the “Hazard Identification and Correction” worksheets that list the hazards observed during the consultation. The observations and recommendations made in this report are designated as SERIOUS (S) or OTHER THAN SERIOUS (OTS) based upon probable severity if an injury or illness were to occur. SERIOUS hazards are those situations or conditions that could result in serious illness, physical harm or death. OTHER THAN SERIOUS hazards are those situations or conditions that could result in employee injury or illness of a less serious nature. These designations are intended to help you prioritize corrective action. You should develop an action plan to ensure prompt correction of these identified hazards.

Your company is exempt from a routine scheduled Oregon OSHA inspection at this location for (60 days or 30 days) from the date of this report. As mentioned during the consultation, this does not exempt your company from enforcement action in the event of an accident investigation, an employee complaint, referral, or the observance of an imminent danger.

During the consultative visit, I attempted to identify all the hazards. However, there may be some hazards that I did not see or identify. It remains the responsibility of the employer to ensure the safety and health of employees and to identify and correct all hazardous conditions and/or situations. This report cannot result in enforcement activity, nor can Oregon OSHA Enforcement use this report as a basis for citation.

Oregon OSHA does not endorse particular vendors or products. Any information provided in this report about a product or vendor should not be interpreted as an endorsement. Employers are encouraged to conduct their own research on products that will meet their specific needs.

Oregon OSHA values feedback from its customers on the services they received. Please take the time to complete and return the enclosed questionnaire. A postage-paid envelope has been provided. Thank you for requesting our assistance to improve safety and health in your workplace. Contact me if you have questions regarding occupational safety and health issues.

Signature block

Please include all team members as applicable.
RE: Consultation Report

Dear Mr.:

Thank you for the opportunity to visit your workplace to conduct a comprehensive consultation on July 22, 2008.

**General Summary:**
Overview of the consultation visit including participants, special circumstances such as new operations or new management, challenges encountered, recommended referrals and other relevant information.

**Safety and Health Management:**
Summary of discussion on safety and health management specific to the company. Summary should include examples of deficient elements of their safety and health management program as reflected by hazards found.

**Written Programs:**
General discussion of Oregon OSHA mandated programs and any other programs reviewed. Code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

**Training Provided**

**Record Keeping / Dart:**
Discussion of OSHA 300 log, 801, injuries, illness and any notable trends.

**Safety Committee:**
General discussion on the company’s safety committee operations. Any specific code related deficiencies should be addressed in the “Hazard Identification and Correction” section.

**Safety and Health Program Assessment**
*The following paragraphs are standard language for all reports and their content should not be altered*

Attached you will find the “Hazard Identification and Correction” worksheets that list the hazards observed during the consultation. The observations and recommendations made in this report are designated as SERIOUS (S) or OTHER THAN SERIOUS (OTS) based upon probable severity if an injury or illness were to occur. SERIOUS hazards are those situations or conditions that could result in serious illness, physical harm or death. OTHER THAN SERIOUS hazards are those situations or conditions that could result in employee injury or illness of a less serious nature. These designations are intended to help you prioritize corrective action. You should develop an action plan to ensure prompt correction of these identified hazards. Your company is exempt from a routine scheduled Oregon OSHA inspection at this location for 60 days from the date of this report.
As mentioned during the consult, this does not exempt your company from enforcement action in the event of an accident investigation, an employee complaint, referral, or the observance of an imminent danger.

**Item 1**
Corrective Action
Correction Date
OTHER THAN SERIOUS - *Rule*

**Item 2**
Corrective Action
Correction Date
OTHER THAN SERIOUS - *Rule*

**Posting of Hazards:**
Accompanying this report is a List of Hazards that includes a description of the SERIOUS hazards and the date by which we mutually determined the hazards would be corrected. This List of Hazards must be posted, unedited in a prominent location where it is readily observable by all employees for three working days or until the hazards have been corrected, whichever is later.

**Request for Extension Of Hazard Correction Due Date(S):**
If an extension of abatement time is needed, return the partially completed Hazard Identification and Correction Worksheet, in the enclosed envelope with a letter requesting the extension. You may fax (503-378-4921), or e-mail to request an extension of time for correcting a SERIOUS hazard, if you prefer. The request should indicate that a good faith effort has been made to correct the hazards, that the delay was beyond your control, and what interim measures have been put into effect to protect workers from the hazards. If we approve an extension to the correction due date(s), a new List of Hazards will be sent to you showing the revised dates. This new list must then be posted.

During the consultative visit, I attempted to identify all hazards. However, there may be some hazards that I did not see or identify. It remains the responsibility of the employer to ensure the safety and health of employees and to identify and correct all hazardous conditions and/or situations. This report cannot result in enforcement activity, nor can Oregon OSHA Enforcement use this report as a basis for a citation. Information provided is not a formal endorsement of any vendor or product.

Oregon OSHA values feedback from its customers on the services they received. Please take the time to complete and return the enclosed questionnaire. A postage paid envelope has been provided.

Thank you for requesting our assistance to improve safety and health in your workplace. Contact me if you have questions regarding occupational safety and health issues.
# Hazard Identification and Correction

**Firm Name:** _____________________________  **Report Number:** _______________  **Date:** ____________

<table>
<thead>
<tr>
<th>Item 1</th>
<th>Corrective Action Taken</th>
<th>Assigned To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
<td>See body of letter for recommendations</td>
<td></td>
</tr>
<tr>
<td>Other Than Serious</td>
<td>Rule:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item 2</th>
<th>Corrective Action Taken</th>
<th>Assigned To</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location:</td>
<td>See body of letter for recommendations</td>
<td></td>
</tr>
<tr>
<td>Other Than Serious</td>
<td>Rule:</td>
<td></td>
</tr>
</tbody>
</table>

Employer Signature: _____________________________  Date: ______________________
Extension Letter 21 (d)

Date

Re: Extension Request for Consultation Report No:

Dear:

We have considered your application for an extension of time to correct item ______ of the serious hazard found in your establishment. Your request is hereby granted and the (correction date) has been extended to ____________.

Agreed upon modification or extension of correction due date must also be posted for either three working days or until the serious hazard have been corrected, whichever is later. Posting must be in a prominent place where it is readily observable by all affected employees.

Enclosed is a new hazard correction sheet. Please return it verifying the correction have been completed by the new date. Contact us if you have any questions.

Sincerely,

Enc.: New Hazard Correction Sheet
Appendix G – Customer Survey

Oregon Occupational Safety and Health Division
Consultation Services Section Customer Survey Now Sent Out Automatically By Email

An Oregon OSHA consultant was recently at your worksite to provide assistance evaluating your safety and health program. We would appreciate any feedback regarding this experience. Please take a few minutes to answer the statements below and return to Oregon OSHA using the enclosed self-addressed stamped envelope.

Please answer the following questions regarding your rating of service provided by Oregon OSHA Consultation.

Timeliness
How do you rate the timeliness of the services provided by Oregon OSHA Consultation?

- Excellent
- Good
- Fair
- Poor
- Don’t Know *

Comments _______________________________________________________________

Accuracy
How do you rate the ability of Oregon OSHA Consultation to provide services correctly the first time?

- Excellent
- Good
- Fair
- Poor
- Don’t Know *

Comments _______________________________________________________________

Helpfulness
How do you rate the helpfulness of Oregon OSHA Consultation employees?

- Excellent
- Good
- Fair
- Poor
- Don’t Know *

Comments _______________________________________________________________

Expertise
How do you rate the knowledge and expertise of Oregon OSHA Consultation employees?

- Excellent
- Good
- Fair
- Poor
- Don’t Know *

Comments _______________________________________________________________

Availability of Information
How do you rate the availability of information at Oregon OSHA Consultation?

- Excellent
- Good
- Fair
- Poor
- Don’t Know *

Comments _______________________________________________________________

Overall Service
How do you rate the overall quality of service provided by Oregon OSHA Consultation?

- Excellent
- Good
- Fair
- Poor
- Don’t Know *

Comments _______________________________________________________________

We would appreciate any other comments or suggestions you have regarding the services provided.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Firm Name: ______________________________  Contact Person: ___________________
Report #: __________  Consultant: __________________________  Date: ______________

Please send survey to Oregon OSHA, consultation, PO Box 14480, Salem, OR 97301-9926, or fax: 503-947-7462.

* Survey respondents lacking sufficient knowledge to answer a particular question may opt out of that question by answering “Don’t Know.”
Appendix H – Agricultural Labor Housing

Agricultural Labor Housing (ALH) requests are identified in ORCA as industry type is Labor Camp. When self-assigning work, consultants who conduct ALH consultations should scan the backlog for these requests and make them a priority for scheduling. *Agriculture Labor Housing Pre-Occupancy Consultations being requested for the purpose of registering a facility with Oregon OSHA Enforcement must be conducted by a state-funded consultant.*

All ALH consultations must use the NAICS code for Migrant Workers Camp, 721310.

H-2A – We have 45 days to conduct the consultation. The employers have to correct all hazards, we have to verify correction, and they need the letter of compliance. [H-2A Employer Handbook](https://example.com) (pdf) explains the process.

**Other Resources**

[H-2A main website](https://example.com)

[H-2A and H-2B Temporary Labor Certification Programs](https://example.com) (Filter page for Agricultural and Non-Agricultural)

Sheep: [Standards for Mobile Housing Applicable to Occupations Involved in the Open Range Production of Livestock](https://example.com) (pdf)

[Oregon OSHA and Oregon Employment Department Memorandum of Understanding](https://example.com) for H2A Agricultural Labor Housing

Form ETA 338 [below](https://example.com) (out-of-date but still useful for self-inspection)
## Appendix H – Agricultural Labor Housing

### Employer Furnished Housing and Facilities

<table>
<thead>
<tr>
<th>US Department of Labor</th>
<th>1. Employer’s Name and Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment and Training Administration</td>
<td></td>
</tr>
</tbody>
</table>

### 2. Housing Locations

<table>
<thead>
<tr>
<th>Housing Description</th>
</tr>
</thead>
</table>

### 3. Housing Description

<table>
<thead>
<tr>
<th>4. Sleeps Rooms</th>
<th>a. Dormitory Type</th>
<th>b. Family Type</th>
<th>ES USE ONLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. &amp; Measure</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Length</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Width No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ceiling Height</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Square Feet</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No. of Rooms</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No. Beds, Single</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No. Beds, Bunks, Doubles</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 5. Capacity (Adults)

<table>
<thead>
<tr>
<th>6. Regulations Compliance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(“X” proper box)</td>
</tr>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

### 6. Regulations Compliance

<table>
<thead>
<tr>
<th>Facilities (Number of each)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Flush Toilets</td>
</tr>
<tr>
<td>Privy</td>
</tr>
<tr>
<td>Urinals</td>
</tr>
<tr>
<td>Lav. Or Washbasins</td>
</tr>
<tr>
<td>Showerheads</td>
</tr>
<tr>
<td>Bathtubs</td>
</tr>
<tr>
<td>Movable Bathtubs</td>
</tr>
<tr>
<td>Laundry Machines</td>
</tr>
<tr>
<td>Fixed Laundry Tubs</td>
</tr>
<tr>
<td>Movable Laundry Tubs</td>
</tr>
<tr>
<td>Cook Stoves</td>
</tr>
<tr>
<td>Refrigerators</td>
</tr>
<tr>
<td>Garbage Containers</td>
</tr>
<tr>
<td>First Aid Kits</td>
</tr>
<tr>
<td>Fire Extinguishers (No, &amp; type)</td>
</tr>
</tbody>
</table>

### 2. Comments

### 3. Employer's Certification

I CERTIFY THAT I have reviewed the housing regulations of the U.S. Department of Labor, ( ) OSHA ( ) ETA, and that the housing described herein ( ) meets ( ) does not meet such standards. I hereby authorize representatives of the State Employment Services Office and/or Employment and Training Administration regional office to inspect the above housing at any reasonable time.

**Employer's signature**

Typed Name and Title

Date

### 4. Housing Inspected By:

Signature of Authorized Official

Typed Name and Title

Date

### 5. Approval - Housing approved for occupancy by workers recruited interstate.

Signature of Authorized Official

Typed Name and Title

Date

ETA 338 (Jan. 1981)
Appendix H – Agricultural Labor Housing

Prior to conducting a consultation of ALH, the consultant should review all registration information. If an employer was registered in the previous year, that registration information should be verified during the visit.

There are many core safety and health issues that must be carefully evaluated when conducting a consultation for agricultural labor housing. To effectively evaluate the safety and health conditions, consultants must enter these housing facilities even when they are occupied. An interior walk-through is also necessary to verify the square footage is adequate for the number of occupants. When occupied, consultants should be especially respectful of the occupants and the fact we have been allowed to enter their home.

The agriculture housing checklist is to be used on every ALH consultation is below. A copy of the completed checklist should be left with the employer at the time of the consultation (through a commitment to Oregon Legal Services). Copies of the completed checklist should be scanned and sent to the employer with the report as well as retained in the consultation file.

ALH consultation reports are to be completed as a priority. The report for consultations conducted to evaluate if the employer is substantially in compliance must address, but are not limited to, the adequacy of the water supply, fire prevention, electrical service, sewage disposal, and sleeping quarters.

ALH Consultations Conducted to Meet Tax Credit Requirements:

The Oregon Department of Housing and Community Services offer a tax credit for construction, installation or rehabilitation of farm worker housing. To meet the requirements of the tax credit program, these housing projects are required by law to be in substantial compliance with all agricultural labor housing regulations of the Oregon Safe Employment Act. Consultations conducted to meet these requirements shall include a tax credit letter (see Appendix H) when the housing was found to be substantially in compliance with Oregon OSHA standards.

Oregon OSHA does not conduct safety and health consultations of community-based farm worker housing projects (i.e. multi-unit apartments or duplexes in urban areas). These requests should be forwarded to the consultation manager. In these cases, copies of occupancy permits issued by the local building authority will be accepted as proof of compliance.
Notification to Register Agricultural Labor Housing

Date

Re: Agricultural Labor Housing Report:
Employer ID:

**Housing Name and Addresses**

**Location No:**

The Oregon Occupational Safety and Health Division conducted a safety and health consultation at the agricultural labor housing referenced above on. At the time of the consultation, we found the housing to be in substantial compliance with the requirements of the Occupational Safety and Health Code.

The housing at this location was not registered with Oregon OSHA. Agricultural labor housing in Oregon is required to be registered (separate locations must be individually registered). The registration document is required to be posted at each applicable location.

Please complete the registration and return it, along with a copy of this letter, to Oregon OSHA. If you have questions, contact me or the Oregon OSHA Salem Field Office, where the applications are processed, at 503- 378-3274.

Field Consultation Manager
Consultation Services Section

cc: Oregon OSHA Ag Labor Housing Coordinator
Agricultural Labor Housing Tax Credit Letter Farm Based

Date

Re: Agricultural Labor Housing Safety Consultation Report
Employer ID:

Housing Name and Addresses

Location No:

On __________, I conducted a safety and health hazard consultation of the agricultural labor housing unit at the above addresses as you had requested. The purpose of the survey was to determine if these housing units complied with the Oregon Occupational Safety and Health Code for tax credit purposes. A total of __________ were reviewed for compliance.

All units were found to be in substantial compliance with the requirements of the Oregon Occupational Safety and Health Code.

It is my understanding that farm worker housing tax credits were awarded for construction or rehabilitation recently completed at this location. Oregon statute requires projects receiving farm worker housing tax credits to comply with all requirements of the Oregon Occupational Safety and Health Code. This letter should be retained as proof that this requirement was met at the above referenced location.

Field Consultation Manager
Consultation Services Section
503-378-3272
Agricultural Labor Housing Tax Credit Letter Community Based

Date

ATTN:
RE:

The above referenced community-based housing project has been awarded farm worker housing tax credits by the State of Oregon.

By statute, a taxpayer is entitled to take the tax credit only if the housing complies with all safety and health laws, rules, regulations and standards applicable to farm worker housing. Oregon OSHA is in receipt of the occupancy permits issued by __________ for the _________ project. These permits signify the structure has been inspected by local building officials and meets all applicable state and local building requirements. As such, Oregon OSHA is satisfied that this housing project is suitable for residency by agricultural workers and meets applicable safety and health laws, rules, regulations and standards.

If you need information or additional assistance regarding tax filing, please consult the Oregon Department of Revenue at 503-378-4988.

Field Consultation Manager
Consultation Services Section
503-378-3272
**Appendix I – Labor Housing Inspection Checklist**

**LABOR HOUSING INSPECTION CHECKLIST**
Oregon Occupational Safety & Health Division (Oregon OSHA)
350 Winter St. NE, Salem, Oregon 97301-3882
503-378-3272 or 800-922-2689 (toll-free)

This checklist is intended as an aid and not as a substitute for full compliance with OAR 437-004-1120.

<table>
<thead>
<tr>
<th>Labor housing facility name or employer’s LOC#</th>
<th>Name of owner or operator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site Address</td>
<td>City</td>
</tr>
<tr>
<td>Phone number</td>
<td>Most current registration</td>
</tr>
<tr>
<td>Present # of occupants</td>
<td>Maximum # of occupants</td>
</tr>
</tbody>
</table>

**Registration Information**

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registration certificate is posted/any necessary translation provided for occupants. (5)(b)(D)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Site Requirements**

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grounds are substantially free of wastewater, sewage, refuse, noxious plants. (6)(a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grass, weeds, and brush are cut back at least 30 feet from housing. (6)(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adequate drainage is provided, no flooding during occupancy. (6)(c)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All outside water sources have proper drainage or disposal. (6)(d)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing and facilities are responsibly maintained &amp; operated. (6)(e)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toxic materials stored in a safe place. (6)(f)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Empty pesticide containers are removed from area. (6)(g)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mosquitoes, flies, and rodents prevented/controlled in immediate area and within 200 ft. of housing facilities under the operator’s control. (6)(h)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Livestock operations not located within 500 feet of housing area (6)(i) (See definition and exceptions.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Electricity provided in compliance with Subdivision 4/S. (6)(j) (See checklist of common electrical hazards from Subdivision 4/S at the end of this document.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Electrical extension cords, if used, have circuit breaker/fuse protection. (6)(k)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Site Requirements

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>If built or remodeled on/before Dec. 15, 1989:</strong> facility has ceiling or wall light fixture and at least one wall electrical outlet.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>If built or remodeled after Dec. 15, 1989:</strong> facility complies with code in effect at that time. (6)(l) [Note the year built or remodeled]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A wall or ceiling electric light is provided in toilet rooms, lavatories, shower or bathing rooms, laundry rooms, hallways, stairways, common eating area, and other dark areas. (6)(m)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Privies have inside lights or adequate indirect light from outside. (6)(n)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adequate lighting is provided in corridors and walkways for safe walking at night. (6)(o)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Street numbers easily visible to emergency responders from public road. (6)(p)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lowest point of wooden floors structure is at least 12 inches above ground. (6)(q)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to a working telephone at any time for emergency use (within one-tenth of a mile of the housing) BOLI OAR 839-014-0610(1)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Water Supply

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>All water furnished conforms to Public Health Division standards for safe (potable) water. (7)(a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-occupancy bacteriological analysis is completed – if required. (7)(b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enough water – at sufficient pressure – is provided for each occupant. (7)(c) and (7)(a)(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water supply is protected from contamination. New plumbing is installed to comply with Oregon building code.(7)(d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>When potable water is not available in each dwelling unit, a water source is provided within 100 ft. with at least one sanitary drinking fountain for each 100 occupants. (7)(e)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any accessible non-potable water sources are posted “Unsafe for Drinking” in the language of occupants or universal symbols. (7)(f)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Containers for water storage in housing have spigots, tight-fitting lids, and are made of material that protects water from contamination. (7)(g)(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-usable, portable containers used for water storage in housing are washed and sanitized at least once every 7 days. (7)(g)(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water containers used do not require dipping or pouring. (7)(h)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cups, dippers, or utensils used to provide water are not common-use. (7)(i)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Potable and non-potable systems are not cross-connected. (7)(j)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Bathing, Handwashing, Laundry, and Toilet Facilities</strong></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Adequate hot and cold water under pressure is provided for all common uses. (8)(a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Floor and walls are impervious to moisture and have readily cleanable finish. (8)(b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Common-use facilities are maintained in sanitary and operational condition. (8)(c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Common-use buildings have heating capable of maintaining at least 68º F during use. (8)(d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shower floors are sloped and nonslip, with drains provided. (9)(a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At least one shower head with hot/cold water under pressure provided per 10 occupants of each gender – or fraction thereof – or locking, private, unisex shower(s) in the same ratio. (9)(b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Separate, common-use bathing facilities provided in the same building for both sexes have solid, floor-to-ceiling, non-absorbent privacy walls. (9)(c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Separate bathing facilities are marked “Men” and “Women” in English and native language of occupants or easily understood pictures/symbols. (9)(d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At least one handwashing basin with hot and cold water provided for every six occupants. (10)(a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Only single-use or disposable towels are provided in common-use facilities. Disposal containers are provided if disposable towels used. (10)(b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>At least one laundry tray, tub, or washing machine is provided – with plumbed hot and cold water – for each 30 occupants or fraction thereof. (11)(a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clothes line/clothes dryer that serves the needs of the occupants is provided. (11)(b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Laundry room has drain to remove wastewater. (11)(c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Common use laundry rooms have a slop sink. (11)(d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toilet facilities are located within 200 feet of living area served. (12)(a)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toilet facilities are located in rooms built for that purpose. (12)(b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Usable, unobstructed path or walkway – free of noxious weeds, debris, holes, and standing water – is maintained from living area to common-use toilet facilities. (12)(c)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>One toilet per 15 occupants or fraction thereof provided for each gender. Toilets ensure privacy (12)(d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>For unisex or non-common use toilet facilities, 1 toilet per 15 occupants provided without regard to gender. (12)(d)(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If three or more toilets are required for men, a maximum of one urinal is allowed to be substituted for each three required toilets. (12)(d)(A)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

“Yes” means rule requirements are met. Relate comments to “No” responses.
### Appendix I – Labor Housing Inspection Checklist

#### Bathing, Handwashing, Laundry, and Toilet Facilities

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Yes” means rule requirements are met. Relate comments to “No” responses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Urinals</strong> are constructed of nonabsorbent, noncorrosive material with smooth, cleanable finish. <em>(12)(d)(B)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Common-use toilet facilities are cleaned at least daily – more often if needed to maintain sanitation. <em>(12)(e)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Toilets for separate genders are marked “Men” and “Women” in English and native language of expected occupants or with easily understood pictures/symbols. <em>(12)(f)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Toilets ventilated according to Oregon building code. <em>(12)(g)</em> (See links in the ALH Q&amp;A, “Referenced Rules and Statutes” document.)</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Separate, common-use toilet facilities used for both genders in same building have solid, nonabsorbent, floor-to-ceiling privacy walls. <em>(12)(h)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Tops of toilet partitions are at least 6 feet from floor, bottoms are no more than 1 foot from floor, and the partition extends at least 18 inches beyond the front of toilet seat. <em>(12)(i)(A)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>A door or curtain is provided on the front (entrance to) the toilet compartment for privacy. <em>(12)(i)(B)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Common-use toilet facilities are provided with toilet paper, holders/dispensers, and disposal container(s) with lids. <em>(12)(j)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Free access to toilet rooms is maintained. (If access is through another room that room can not be lockable.) <em>(12)(k)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Location and construction of privies conforms to Oregon DEQ standards. <em>(13)(a)</em> (See links to DEQ’s Division 71 and Division 73 in the ALH Q&amp;A, “Referenced Rules and Statutes” document.)</td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Privies located are at least 100 feet from living areas and from where food is prepared and served <em>(13)(b)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Adequate lighting is provided for portable toilets and privies <em>(13)(c)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>When in use, portable and chemical toilets are serviced often enough to prevent health hazards – at least weekly – and are cleaned at least daily. <em>(13)(d)</em></td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>

#### Sewage Disposal and Plumbing

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Yes” means rule requirements are met. Relate comments to “No” responses.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sewage line is connected to community sewer system, septic tank, or other sanitary means conforming to DEQ standards. <em>(14)(a)</em></td>
<td>Y</td>
<td>N</td>
</tr>
<tr>
<td>Plumbing installation complies with DEQ and Oregon building codes. <em>(14)(b)</em> (See links in the ALH Q&amp;A, “Referenced Rules and Statutes” document.)</td>
<td>Y</td>
<td>N</td>
</tr>
</tbody>
</table>
## Garbage and Refuse Disposal

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Containers used are clean and in good repair (15)(a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At least one 30-gallon (or larger) container – accessible in site area – is provided per 15 occupants. (15)(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>During use, bins and dumpsters are emptied at least weekly – not allowed to become health hazard or to interfere with lid closing fully. (15)(c)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Common-use cans and portable containers are emptied into dumpsters or bins at least twice weekly or when full. No garbage on the ground. (15)(d)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Containers are kept covered and garbage storage area is kept clean to control flies and rodents (15)(e)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burning of food waste or wet refuse is not allowed. (15)(f)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Garbage and solid wastes are disposed of according to DEQ standards. (15)(g)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Living Areas

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>All areas are safe, in good repair, stable on foundations; and provide protection from the elements, ground and surface water, rodents, and insects (16)(a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Walls and roof are tight and solid; floors are rigid and durable with smooth, cleanable finish in good repair. (16)(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>For living areas without permanent heating, free portable heaters capable of keeping 68º F are supplied. Any supplied portable heaters are electric, without defect, and have functional manufacturer’s safety devices. (16)(c)(A)-(C)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| Permanently installed, solid-fuel or gas-fired heaters installed and vented to prevent fire and gas hazards and meet these requirements:  
  • If installed before Dec. 15, 1989, it sits on fire-resistant material that extends at least 18 inches beyond perimeter of stove base.  
  • If installed on or after Dec. 15, 1989, heater meets Oregon building code in effect and manufacturer’s specifications.  
  Wall/ceiling within 18 inches of stovepipe has fire-resistant material installed; vented metal collar installed around any stovepipe that passes through a combustible ceiling/floor/wall/roof.  
  Heating system with automatic control cuts off fuel supply if flame/ignition fail or safe temperature/pressure is exceeded.  
  Gas appliances and piping installed to comply with Oregon building code in effect and manufacturer’s instructions.  
  Stoves and heaters do not block escape from sleeping places. (16)(d)(A)-(E) | | | |
## Appendix I – Labor Housing Inspection Checklist

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>16-mesh screens in good repair are provided on all openable windows and doors. Screen doors are tight-fitting, and if hinged, are self-closing. (16)(e)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Each occupant is provided with a bed, bunk, or cot; and suitable storage is provided for each occupant or family unit. (16)(f)(A)(i-iv)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mattress or pad is provided for each bed or bunk</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Pads provided are thicker than 2 inches and covered</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Mattress or pad is not on the floor</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Sleeping surface is at least 12 inches above floor.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mattresses/pads furnished are clean, in good repair, and free of insects and parasites (16)(g)(A)-(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mattresses/pads are treated or cleaned before each occupancy and stored in clean dry place.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Beds, bunks, or cots are spaced to allow for rapid emergency evacuation (16)(h)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NOTE: As of January 1, 2018, the requirements in (16) (i), (j), and (m) no longer apply. (They are not included in this checklist.)</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Each sleeping rooms with single-level beds provides at least 50 square feet of floor space per occupant. (16)(k)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sleeping rooms with double bunk beds provide at least 40 square feet per occupant. (No triple bunks)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>NOTE: As of January 1, 2018, the requirements in (16) (l), and (n) apply.</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All living areas where workers cook, live, and sleep provide at least 100 sq. ft. per occupant (16)(l).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Only areas with a 7 foot ceiling height are counted towards the required square footage for sleeping rooms or cook/live/sleep areas. (16)(n)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Separate, private sleeping areas are provided for unrelated persons of each sex and for each family unit. (16)(o)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Windows or skylights equal to at least 10 percent of required floor space are provided. At least half of these are openable to the outside. No more than half of the required window space is met with skylights. (See details and exceptions.) (16)(p)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Before occupancy, all living areas are cleaned and free of rodents, insects, and parasites (16)(q)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Fire Protection

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fires only allowed in equipment designed for that use; no open fires within 25 feet of structures. (17)(a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Each living area has working, approved smoke detector at time of each season’s initial occupancy. (17)(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Readily-accessible fire-extinguishing equipment provided within 50 feet of each housing unit.*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Equipment protection rated equal to 2A:10BC. (17)(c)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(*NOTE: Immediately available hoses within 50 ft. may substitute for extinguisher only if water supply is constant and reliable.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living areas built before Dec. 15, 1989 – with more than one room but only one exit door have an exit window that can be readily opened directly to outside, and meets the following requirements: The window opening is at least 24-by-24 inches, and The lower edge of the window is less than 48 inches above floor, and The window is labeled “Emergency Exit.” (17)(d)(A)(B)(C) and (D)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Living areas built on or after Dec. 15, 1989 comply with Oregon Building Codes Division rules. Required exit windows in sleeping rooms have: Clear net openings of at least 5.7 square feet, and A minimum height of 22” and width of 20.” (17)(e)(A)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second story rooms with 10 or more occupants have at least two exits and comply with Oregon state building code. (17)(f)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rooms on floors above the second-story and in basements provide occupants with access to at least two separate exits and comply with Oregon state building code. (17)(g)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** All living areas in labor housing and related facilities must comply with applicable local and state laws and regulations in effect at the time of construction or remodel.

## Common Use Cooking Facilities, Dining Halls, and Single Unit Cooking Facilities

(NOTE: See Definitions in the Rules)

When provided, **all common use cooking facilities, dining halls, and single unit cooking facilities** must meet the following standards:

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gas or electric refrigerator can maintain food at or below 41º F. (18)(a)(A), (19)(a)(A), or (20)(a)(A)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Appendix I – Labor Housing Inspection Checklist

### Common Use Cooking Facilities, Dining Halls, and Single Unit Cooking Facilities

*(NOTE: See Definitions in the Rules)*

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>At least two cooking burners are provided for each 10 occupants (or part thereof) or two families. (18)(a)(B), (19)(a)(B), or (20)(a)(B)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NOTE: Dining halls are considered to have the appropriate number of burners if they are able to satisfactorily furnish meals.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>If gas or electric hot plate or wood stove is within 18 inches of a wall, wall is made of smooth, cleanable, nonabsorbent, grease- and fire-resistant material. (Labeled or listed appliances are exempt.) (18)(a)(B)(i), (19)(a)(B)(i), or (20)(a)(B)(i)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There are no LPG (propane) tanks used inside occupied buildings; outside tanks are connected to appliances with approved lines. (18)(a)(C), (19)(a)(C), or (20)(a)(C)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Food storage shelves, food preparation areas, food contact surfaces, and floors in food preparation areas are finished with smooth, cleanable, and nonabsorbent material. (18)(a)(D), (19)(a)(D), or (20)(a)(D)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Table and chairs (or equivalent) are provided to accommodate the number of occupants using sleeping areas. (18)(a)(E), (19)(a)(E), or (20)(a)(E)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refrigerators and stoves, or hot plates are kept in working order (18)(b), (19)(b), or (20)(a)(F)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Facilities and equipment are cleaned before each occupancy. (18)(c), (19)(c), or (20)(b)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

When provided, **common use cooking facilities, dining halls** must meet the following standards:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>OAR 437-004-1120</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Yes” means rule requirements are met. Relate comments to “No” responses.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dining halls and common-use kitchens are separate from sleeping quarters (no direct opening.) (18)(d), (19)(d)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>If housing operator becomes aware of anyone with a communicable disease listed in (22), the operator bars them from the dining hall or common-use kitchen until they are no longer contagious. (18)(e), (19)(e)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Buildings for dining halls and common-use kitchens have heating equipment capable of maintaining a temperature of at least 68º F during use. (18)(f), (19)(f)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dining halls and common-use kitchens are in buildings or shelters. Doors, windows and openings have screens of at least 16 mesh. (18)(g), (19)(h)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

When provided, **dining halls** must meet the following additional standards:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Yes</th>
<th>No</th>
<th>Remarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>OAR 437-004-1120</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>“Yes” means rule requirements are met. Relate comments to “No” responses.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At a minimum, dining halls comply with the requirements of the 2005 edition of the FDA Food Code. (19)(g)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(NOTE: Links to the Food and Drug Administration’s 2005 Food Code are available in the ALH Q&amp;A, “Referenced Rules and Statutes” document.)</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
### Disease Reporting

<table>
<thead>
<tr>
<th>OAR 437-004-1120</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing operators comply with reporting requirements for communicable diseases. (22)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTE:** Diseases listed in OAR 333-018-0015 that must be reported include anthrax, botulism, diphtheria, Severe Acute Respiratory Syndrome (SARS), plague, paralytic shellfish poisoning, measles, pesticide poisoning, poliomyelitis; rabies (human or animal), rubella, and any known or suspected common-source outbreaks; and any “uncommon illness of potential public health significance.”

### First Aid/Emergency Plan

**NOTE:** OAR 437-004-1120(21) states that the Division 4 Medical Services and First Aid rules in OAR 437-004-1305 apply to all labor housing and related facilities. To meet the requirements, housing operators must evaluate reasonably anticipated injuries at the site; provide appropriate first aid supplies and an appropriate emergency medical plan along with any special plans necessary for summoning and providing help for occupants in an emergency. See requirements in OAR 437-004-1305 Medical Services and First Aid, summarized below.

<table>
<thead>
<tr>
<th>OAR 437-004-1305</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appropriate first aid supplies are provided and available. (2)(a)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplies are protected from contamination; containers are clearly marked. (2)(b)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Timely emergency medical services are available and are summoned when needed. (3)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>An emergency medical plan – based on an evaluation of site conditions and response capability – has been developed:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Potential injuries evaluated</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Local EMS response determined</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualified first-aid person on site, if required. (4)(a)(A)-(C)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employees are trained about the emergency plan and their responsibilities in case of an emergency. (4)(a)(D)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emergency plans are posted where employees gather. (4)(b)and(c)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Electricity

OAR 437-004-1120(6)(j) states that electricity provided in ALH facilities must comply with the requirements in subdivision 4/S, Electricity

(Only common electrical hazards are noted in this checklist)

<table>
<thead>
<tr>
<th>OAR 437-004-2810 General Requirements</th>
<th>Y</th>
<th>N</th>
<th>“Yes” means rule requirements are met. Relate comments to “No” responses.</th>
</tr>
</thead>
<tbody>
<tr>
<td>(5) Lights that are 7 feet or closer to the floor or work surface have a guard, fixture or holder to protect the bulb or tube from breakage.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(14) Electrical equipment is free from recognized hazards that may cause death or serious physical harm. [See criteria in (14)(a)-(d).]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Electricity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>(15) In wet or damp locations, only fixtures approved for those locations are used; they are installed so that water cannot enter or accumulate in electrical parts.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(18) All wall plugs and switches have approved, unbroken covers or faceplates and no broken parts.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OAR 437-004-2860 Flexible Cable and Extension Cords</strong></td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>(1) Extension cords used with portable electric tools and appliances are the three-wire type (minimum) and have an approved grounding plug and receptacle to provide ground continuity.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) Flexible cables and extension cords are not allowed to be used as a substitute for fixed structural wiring.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8) Flexible cables and extension cords are not run through holes in walls, ceilings, or floors or through doorways, windows, or similar openings – except during construction.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10) Extension cords are not plugged together to make them longer unless the resultant cord is rated to carry the load.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OAR 437-004-2870 Attachment Plugs and Receptacles</strong></td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>(6)(e) The terminal for the equipment grounding conductor (bare wire) is grounded and is not attached to any terminal or lead that reverses the designated polarity.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OAR 437-004-2880 Cord and Plug-connected Equipment</strong></td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>(3) Exposed, noncurrent-carrying metal parts of fixed electrical equipment are grounded. (Equipment includes motors, electrical machinery, refrigerators, freezers, electric ranges, clothes dryers, etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>OAR 437-004-2900 Grounding and Bonding</strong></td>
<td>Y</td>
<td>N</td>
<td></td>
</tr>
<tr>
<td>(1) The “electrical pathway” in the facility from circuits and equipment to ground is permanent and continuous.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix J – Accompanied Visit Evaluation

Consultant ___________________________ Date ________________________
Evaluator’s Name ________________________________________________________
Company Name ______________________________ Report # _____________________

A. Preparation

☐ Consultant contacted the employer to clarify the request and ensure adequate management participation.

☐ Consultant researched the company and reviewed claims information and past consultation/inspection history.

☐ Consultant familiarized themselves with the machinery, processes, and hazards normally associated with this type of industry.

☐ Consultant established personal protective equipment needs for the location and obtained the needed equipment.

☐ Consultant asked about employee representation for the consultation.

☐ Consultant advised the employer of any written programs, injury and illness records, or other documents that would be evaluated as a part of the consultation process.

Comments:

B. Opening Meeting

☐ Consultant introduced themselves properly.

☐ Consultant restated the purpose and scope of the visit to clarify the request for service and expectations.

☐ Consultant explained the consultation process to include written programs, record keeping, walk around, safety committee evaluation, and a safety and health management review as applicable.

☐ Consultant talked about interviewing employees during the consultation to gain their participation.

☐ Consultant explained the employer’s obligation to correct any imminent danger situations.

☐ Consultant explained the enforcement/consultation relationship.

☐ Consultant discussed the confidentiality of our services (which includes the report), and the disclosure of monitoring data, if applicable.

☐ Trade secrets and PPE needs were discussed.

Comments:
C. Safety and Health Programs and Hazard Identification

☐ Consultant proceeded in a logical and systematic manner, covering all areas the employer requested.

☐ Consultant identified and explained all hazards observed during the walk around/hazard assessment.

☐ Consultant encouraged employer/employee participation during the walk around/hazard assessment.

☐ Consultant reviewed all written programs as necessary.

☐ Consultant reviewed OSHA 300 information and discussed trends and DART rate.

☐ Consultant reviewed and discussed safety committee operations.

Comments:

D. Closing Meeting

☐ Consultant discussed all hazards and program deficiencies observed during the consultation and provided recommendations for correction to the employer.

☐ Consultant encouraged self-sufficiency and discussed the seven elements of an effective safety and health management system.

☐ Consultant discussed action planning and the need to set priorities for correction.

☐ Consultant discussed other services available through the Oregon OSHA Consultation Services Section and the employer’s workers compensation insurance carrier.

☐ Consultant discussed the time line for the report, and the Consultation Evaluation Form.

Comments:

E. Consultation Process

☐ The consultant was professional and courteous during the consultation.

☐ The consultant stressed the importance of a safety and health management system and tied the hazards and program deficiencies to the seven key elements.

☐ The consultant met the employer’s expectation of the consultation.

☐ The consultant demonstrated good hazard identification skills, some of which were not limited to their discipline or Oregon OSHA codes.

Comments:
F. Written Report

☐ The report was clear and concise.

☐ The report included all items addressed during the consultation.

☐ Proper rules/standards/agency interpretations were referred to in the report.

☐ The consultant provided recommendations that were practical/effective for the hazards observed/identified.

☐ Where applicable, the consultant tied the hazards and deficiencies noted in the report to the corresponding elements of an effective safety and health management system.

☐ The format of the report was consistent with section expectations, including proper grammar.

Comments:
Appendix K – Instructions for the Safety and Health Program Assessment Worksheet

A Safety and Health Program Assessment (S&HPA) is an evaluation of the company’s safety and health management system (using the Safety and Health Program Assessment Worksheet). An S&HPA can be done during a comprehensive consultation or independently of a comprehensive consultation. The S&HPA Worksheet is designed as a tool for use in conducting assessments of an employer’s safety and health program to evaluate the effectiveness of that employer’s safety and health management system.

SHARP companies or companies working toward SHARP must have a full assessment, with all 58 elements evaluated.

All completed assessment forms should have some justification and/or recommendations under the comment section for questions rated as 0 and 1. All completed assessments should be included and/or referenced in the report sent to the employer.

Instructions for using the worksheet are as follows:

Categories: The S&HPA Worksheet is divided into the following seven categories (or elements):

I Hazard Anticipation and Detection
II Hazard Prevention and Control
III Planning and Evaluation
IV Administration and Supervision
V Safety and Health Training
VI Management Leadership
VII Employee Participation

There are several attributes or sub-elements in each category.

Attributes: Each attribute or sub-element is listed as a separate item. All 58 attributes are positive statements to which the evaluator agrees with varying degrees of continuity.

There are 58 attributes that are considered building blocks to effective safety and health management systems.

Rating Instructions: Each survey question or attribute has six possible ratings: 0, 1, 2, 3, NA, or NE. The value for each rating is described in the following table.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
<th>Descriptor</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No Discernable or meaningful indication that the item is even partially in place</td>
<td>Nor or</td>
</tr>
<tr>
<td>1</td>
<td>Some portion or aspect is present, although major improvement is needed</td>
<td>Mostly No</td>
</tr>
<tr>
<td>2</td>
<td>Item is largely in place, with only minor improvements needed</td>
<td>Yes or</td>
</tr>
<tr>
<td>3</td>
<td>Item is completely in place</td>
<td>Mostly Yes</td>
</tr>
<tr>
<td>NE</td>
<td>Not Evaluated: Recognizes that comprehensive evaluations can be incremental</td>
<td>Not Evaluated</td>
</tr>
<tr>
<td>NA</td>
<td>Not Applicable: Must have justification in the comments box why the item is not applicable</td>
<td>Not Applicable</td>
</tr>
</tbody>
</table>
Appendix K – Instructions for the S&HP Assessment Worksheet

Consultants will use their best professional judgment to rate each attribute based on the information obtained during the consultation. To rate an attribute simply put an “X” in the box under the desired rating indicator.

**Rating Cues:** The bits of information obtained in the assessment are rating cues. A rating cue is a specific fact or perception that prompts and supports the rating of a relevant topic. Each attribute is worded as a positive statement. All rating cues will either confirm (support) or negate (deny) the statement. The cues give weight to the rating for the individual attributes.

Cues confirm or deny the existence of the attribute, the extent of the attribute, the character of the attribute, and the effect of the attribute. Cues are found in observations and measurements, interviews, and reviews of documentation. There can be multiple cues, including initial cues, corroborating cues, and conflicting cues. The following table illustrates how cues are used to rate attributes.

**Rating Value**

0 Eliminated by a single CONFIRMING cue
1 Requires a few CONFIRMING cues and one or more NEGATING cues
2 Requires multiple CONFIRMING cues and a few NEGATING cues
3 Eliminated by a single NEGATING cue

**Comments:** The comment section is to be used to give the employer recommendations on how to improve in this specific attribute. Ratings that are “0” or “1” should include a recommendation for improvement. “NA” ratings must be justified by the consultant.

**Some Suggestions:** In reality, there is a very small gap between the 0 (zero) rating and the 1 (one) rating and between the 2 (two) rating and the 3 (three) rating. There is a large gap between the 1 (one) rating and the 2 (two) rating. That gap is the difference between mostly no and mostly yes.

Look for things that are done well and reinforce these things with personnel for their good efforts. The more you can encourage small positive steps, the greater chance that significant positive change will follow and the greater the opportunity to return and provide comprehensive assistance.
Safety and Health Program Assessment Worksheet

Employer ______________________________________________  Visit Date _________________

Site Location ______________________________________________________________________

Consultant _____________________________  Contact Person ____________________________

Consultation Report # ___________  SIC _____  Total Employees _____  Interviewed ____________

Legend: 0 = No  NA = Not Applicable
1 = No, Needs major improvement  NE = Not Evaluated
2 = Yes, Needs minor improvement
3 = Yes

I. Hazard Anticipation and Detection

1. A comprehensive, baseline hazard survey has been conducted within the past five (5) years.
   Comments: 0 1 2 3 NA NE

2. Effective safety and health self-inspections are performed regularly.
   Comments: 0 1 2 3 NA NE

3. Effective surveillance of established hazard controls is conducted.
   Comments: 0 1 2 3 NA NE

4. An effective hazard reporting system exists.
   Comments: 0 1 2 3 NA NE

5. Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs.
   Comments: 0 1 2 3 NA NE

6. Accidents are investigated for root causes.
   Comments: 0 1 2 3 NA NE

7. Material Safety Data Sheets are used to reveal potential hazards associated with chemical products in the workplace.
   Comments: 0 1 2 3 NA NE
### Safety and Health Program Assessment Worksheet

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<table>
<thead>
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</thead>
<tbody>
<tr>
<td>8. Effective job hazard analysis is performed.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>9. Expert hazard analysis is performed.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>10. Incidents are investigated for root causes.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
</tbody>
</table>

### II. Hazard Prevention and Control

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<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>11. Feasible engineering controls are in place.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>12. Effective safety and health rules and work practices are in place.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>13. Applicable OSHA-mandated programs are effectively in place.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>14. Personal protective equipment is effectively used.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>15. Housekeeping is properly maintained.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>16. The organization is properly prepared for emergency situations.</td>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
</tbody>
</table>
17. The organization has an effective plan for providing competent emergency medical care to employees and others present at the site.

Comments: 0 1 2 3 NA NE

18. Effective preventive maintenance is performed.

Comments: 0 1 2 3 NA NE

19. An effective procedure for tracking hazard correction is in place.

Comments: 0 1 2 3 NA NE

III. Planning and Evaluation

20. Workplace injury/illness data are effectively analyzed.

Comments: 0 1 2 3 NA NE

21. Hazard incidence data are effectively analyzed.

Comments: 0 1 2 3 NA NE

22. A safety and health goal and supporting objectives exist.

Comments: 0 1 2 3 NA NE

23. An action plan designed to accomplish the organizations safety and health objectives are in place.

Comments: 0 1 2 3 NA NE

24. A review of in-place OSHA-mandated programs is conducted at least annually.

Comments: 0 1 2 3 NA NE

25. A review of the overall safety and health management system is conducted at least annually.

Comments: 0 1 2 3 NA NE
<p>| | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>IV. Administration and Supervision</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26. Safety and health program tasks are each specifically assigned to a person or position for performance or coordination.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>27. Each assignment of safety and health responsibility is clearly communicated.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>28. An accountability mechanism is included with each assignment of safety and health responsibility.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>NA</td>
</tr>
<tr>
<td>29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comments:</td>
<td>0</td>
<td>1</td>
<td>2</td>
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<td>30. Individuals with assigned safety and health responsibilities have the authority to perform their duties.</td>
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<td>31. Individuals with assigned safety and health responsibilities have the resources to perform their duties.</td>
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<td>32. Organizational policies promote the performance of safety and health responsibilities.</td>
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<td>33. Organizational policies result in correction of non-performance of safety and health responsibilities.</td>
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<td>V. Safety and Health Training</td>
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<td>34. Employees receive appropriate safety and health training.</td>
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35. New employee orientation includes applicable safety and health information.

   Comments: 0 1 2 3 NA NE

36. Supervisors receive appropriate safety and health training.

   Comments: 0 1 2 3 NA NE

37. Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.

   Comments: 0 1 2 3 NA NE

38. Safety and health training is provided to managers.

   Comments: 0 1 2 3 NA NE

39. Relevant safety and health aspects are integrated into management training.

   Comments: 0 1 2 3 NA NE

VI. Management Leadership

41. Top management considers safety and health to be a line rather than a staff function.

   Comments: 0 1 2 3 NA NE

42. Top management provides competent safety and health staff support to line managers and supervisors.

   Comments: 0 1 2 3 NA NE

43. Managers personally follow safety and health rules.

   Comments: 0 1 2 3 NA NE

44. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.

   Comments: 0 1 2 3 NA NE
45. Managers allocate the resources needed to properly support the organization’s safety and health system.
Comments: 0 1 2 3 NA NE

46. Managers assure that appropriate safety and health training is provided.
Comments: 0 1 2 3 NA NE

47. Managers support fair and effective policies that promote safety and health performance.
Comments: 0 1 2 3 NA NE

48. Top management is involved in the planning and evaluation of safety and health performance.
Comments: 0 1 2 3 NA NE

49. Top management values employee involvement and participation in safety and health issues.
Comments: 0 1 2 3 NA NE

VII. Employee Participation

50. There is an effective process to involve employees in safety and health issues.
Comments: 0 1 2 3 NA NE

51. Employees are involved in organizational decision making in regard to safety and health policy.
Comments: 0 1 2 3 NA NE

52. Employees are involved in organizational decision making in regard to the allocation of safety and health resources.
Comments: 0 1 2 3 NA NE

53. Employees are involved in organizational decision making in regard to safety and health training.
Comments: 0 1 2 3 NA NE
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<td>Employees participate in hazard detection activities.</td>
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<td>Employees participate in the safety and health training of co-workers.</td>
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<td>Employees participate in safety and health planning activities.</td>
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<td>Employees participate in the evaluation of safety and health performance.</td>
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Appendix L – Safety and Health Program Formal Assistance

Introduction
There are three basic methods for assessing Safety and Health Program effectiveness. This guide will explain each of them. It also will provide more detailed information on how to use these tools to evaluate each element and subsidiary component of a Safety and Health Program.

The three basic methods for assessing Safety and Health Program effectiveness:

- Checking documentation of activity;
- Interviewing employees and supervisors at all levels for knowledge, awareness and perceptions; and
- Reviewing site conditions and, where hazards are found, finding the weaknesses in management systems that allowed the hazards to occur or to be “uncontrolled.”

Some elements of the Safety and Health Program are best assessed using one of these methods. Others lend themselves to assessment by two or all three methods.

Documentation
Checking documentation is a standard audit technique. It is particularly useful for understanding whether the tracking of hazards to correction is effective. It can also be used to determine the quality of certain activities, such as self-inspections or routine hazard analysis.

Inspection records can tell the evaluator whether serious hazards are being found, or whether the same hazards are being found repeatedly. If serious hazards are not being found and accidents keep occurring, there may be a need to train inspectors to look for different hazards. If the same hazards are being found repeatedly, the problem may be more complicated. Perhaps the hazards are not being corrected. If so, this would suggest a tracking problem or a problem in accountability for hazard correction.

If certain hazards recur repeatedly after being corrected, someone is not taking responsibility for keeping those hazards under control. Either the responsibility is not clear, or those who are responsible are not being held accountable.

Employee/Supervisor Interviews
Talking to randomly selected employees and supervisors at all levels will provide a good indication of the quality of employee training and of perceptions of the program. If injury and illness prevention training is effective, employees will be able to tell you about the hazards they work with and how they protect themselves and others by keeping those hazards controlled.

Every employee should also be able to say precisely what he or she is expected to do as part of the program. And all employees should know where to go in an emergency.

Employee perceptions can provide other useful information. An employee’s opinion of how easy it is to report a hazard and get a response will tell you a lot about how well your hazard reporting system is working. If employees indicate that your system for enforcing safety and health rules and safe work practices is inconsistent or confusing, you will know that the system needs improvement.
Interviews should not be limited to hourly employees. Much can be learned from talking with first-line supervisors. It is also helpful to query line managers about their understanding of their injury and illness prevention responsibilities.

**Site Conditions and Root Causes of Hazards**

Examining the overall condition of the workplace can reveal existing hazards. But it can also provide information about the breakdown of those management systems meant to prevent or control these hazards.

Looking at conditions and practices is a well established technique for assessing the effectiveness of Safety and Health Programs. For example, let's say that in areas where personal protective equipment (PPE) is required, you see large and understandable signs communicating this requirement and all employees -- with no exceptions -- wearing equipment properly. You have obtained valuable visual evidence that the PPE program is working.

Another way to obtain information about Safety and Health Program management is through root analysis of observed hazards. This approach to hazards is much like the most sophisticated accident investigation techniques, in which many contributing factors are located and corrected or controlled.

For example, let's say that during a review of conditions, you find a machine being operated without a guard on a pinch point. You should not limit your response to ensuring that a guard is installed. Asking a few questions can reveal a lot about the safety program's management systems. Why was the guard missing? If the operator says he did not know a guard was supposed to be on the machine, follow up with questions about the existence of safe work procedures and/or training.

If he says that the guard slows him down, and that the Supervisor knows he takes it off, ask questions about the enforcement of rules, accountability, and the clarity of the worksite objective of putting safety and health first.

Oftentimes, a different lead question is appropriate. Has a comprehensive survey of the worksite been done by someone with enough expertise to recognize all potential and existing hazards?

Analyzing the root causes of hazards, while very helpful during a formal assessment, is a technique that also lends itself to everyday use. Attempt to analyze causes whenever hazards are observed during a consultation.

The remainder of this appendix will identify the attributes of excellence found in each of the seven key elements of an effective Safety and Health Program.

Note: The Attributes of Excellence of a Safety and Health Program are under revision in response to the updated seven elements in the Safety and Health Program Assessment Worksheet.

The revision will be partially dependent upon input and suggestions from consultation staff.
Attributes of Excellence of a Safety, Health, and Ergonomics Program

I. Hazard Anticipation and Detection

1. A comprehensive baseline hazard survey has been conducted within the last 5 years.
   a. The comprehensive baseline hazard survey includes safety, health, and ergonomics.
   b. The surveys are conducted frequently enough to timely and effectively address hazards.
   c. The surveys are performed by competent and qualified individuals that can effectively and thoroughly understand the hazards of the industry.
   d. The survey results in an updated hazard list or survey report (action plan).
   e. The survey results in effective controls for hazards found.
   f. The survey drives immediate corrective action on items found.
   g. The survey tries to include outside personnel to help prevent tunnel vision and maintain objectiveness.
   h. The survey was completed by a certified specialist.
   i. The survey identified all serious hazards associated with the facility and resulted in appropriate hazard control programs.

2. Effective safety and health self-inspections are performed regularly.
   a. Inspections of the workplace are conducted in all work areas.
   b. Inspections identify new, reoccurring, or previously missed safety, health, and/or ergonomic hazards and/or failures in hazard control systems.
   c. Inspections are conducted at least quarterly at fixed worksites, weekly at rapidly changing sites, and as frequently as daily where necessary.
   d. Inspectors have adequate training in workplace safety, health, and ergonomics.
   e. Logs, checklist, or other type of written reports are used to document formal inspections.
   f. All hazard findings are addressed as soon as practically possible.
   g. Hazards identified do not appear on future inspections.
   h. The responsibility for inspections rests with more than one person.
   i. The responsibility for inspections is scattered throughout the organization.
   j. Inspections are conducted by teams.
   k. Appropriate time is provided to conduct the inspections.
   l. Tools (such as digital cameras, palm pilots, and computers) are used in self-inspection process.

3. Effective surveillance of established hazard controls is conducted.
   a. Established hazard controls for safety, health, and ergonomics are in place and operational.
b. The hazard controls are prioritized with the emphasis on engineering controls, safe work practices, and administrative controls before PPE.

c. Employees understand the hazard control associated with their work areas.

d. Monitoring evaluation of hazard controls is on going and known to and by the work force.

e. Supervisors receive training in surveillance of established hazard controls.

f. At least some employees receive training in surveillance of established hazard controls.

g. Surveillance activity is required supervisory duty and is tracked in some fashion.

h. Some type of trend analysis of tracked surveillance activity is done.

i. Trend analysis of tracked surveillance activity results in improved performance of established hazard controls.

4. An effective hazard reporting system exists.

a. A system for employee reporting of safety, health, and ergonomic hazards is in place and is known to all employees.

b. The system allows for the reporting of physical and behavioral hazards.

c. Corrective action is taken promptly on all confirmed hazards.

d. While waiting for final correction, the employer finds ways to protect those affected.

e. All personnel are aware that hazards can develop within existing jobs, processes and/or phases of activity.

f. The system provides for self-correction of hazards when possible.

g. Employees are provided positive reinforcement or incentive for using the system.

h. There is an informal method of hazard reporting for employees to report hazards to their supervisors.

i. There is a formal method available to employees to report hazards on a form to the safety department.

j. Reported hazards are collected and analyzed and used to set priorities and action planning on addressing hazards in the workplace.

k. There is a mechanism for formal and informal hazard reporting to promptly communicate (to the person reporting the hazard) the status and intended action regarding the reported hazard.

l. All hazards reported are communicated to the work force in some manner.

m. Few hazards are noted in the workplace.

5. Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs.

a. Change analysis includes a review of safety, health, and ergonomic hazards.

b. Changes in space, processes, materials, or equipment at the facility are planned.

c. Affected personnel are made aware of planned changes prior to implementation.
d. A comprehensive hazard review process exists and is used for all changes.

e. The hazard review (analysis) process encourages recommendations for improvement, which are implemented prior to start-up.

f. The analysis process involves competent, qualified specialists appropriate to the process being evaluated.

g. There is a formal, written process for change analysis.

h. Affected employees are involved in the change analysis.

i. Change analysis procedures include revisions of Job Hazard Analysis (JHA), Standard Operation Procedures, lockout methods, PPE, and other program elements affected by the change.

6. Accidents are investigated for root cause.

a. Workplace policy requires a thorough investigation of all accidents and incidents.

b. All accidents and incidents are investigated as required by policy.

c. All investigations are conducted by personnel trained in accident/incident investigation techniques.

d. All investigations include input from all affected parties and witnesses, where possible.

e. All investigations determine "root causes" and underlying factors.

f. Recommendations designed to adequately address root causes, are made as a result of all investigations and result in prompt corrective action with the intent to prevent reoccurrence.

g. Completed investigative reports are routed to appropriate levels of management and knowledgeable staff for review.

h. Investigations are done by management and employees.

i. Results of investigations are shared with the work force.

j. Top management reviews all accidents and incidents to review if root cause was identified adequately.

k. Standard forms are used to document all accidents and investigations.

l. Top management participates in investigations.

7. Safety Data Sheets (SDS) are used to reveal potential hazards associated with chemical products in the worksite.

a. Employees understand the hazards introduced to their jobs by chemical use.

b. Hazards identified in SDSs are effectively controlled.

c. Employees have seen and understand the SDSs applicable to the chemicals they use.

d. Applicable SDS information is incorporated into written job hazard analysis forms.

e. SDSs are periodically reviewed in order to determine if a safer product could be used, or if current JHAs address the hazard adequately.
f. Information on the SDS is used by personnel performing change analysis to identify potential hazards related to new chemicals being introduced into the workplace.

g. The Safety Committee reviews SDSs to address the prevention, elimination, and/or control of hazards posed by chemical products.

8. Effective job hazard analysis is performed.
   a. Job hazard analysis addresses safety, health, and ergonomic hazards.
   b. There are hazard-analysis systems designed to address routine jobs, processes, or phase hazards in place at the facility.
   c. Hazard analysis systems identify or prompt corrective or preventive action to reduce or eliminate worksite hazards.
   d. All tasks, job processes, or phases of activity are analyzed.
   e. All job processes, or phases of activity are analyzed whenever there is a change, when a loss incident occurs, or on a schedule of no more than 3 years.
   f. Upon implementation of the corrective or preventive actions identified by the hazard analysis process, the written hazard analysis is revised to reflect those actions.
   g. Employees are involved in the hazard analysis process.
   h. Accident and incident investigation leads to job hazard analysis when appropriate.
   i. There is a standard and uniform format used to document job hazard analysis.
   j. JHAs are posted at workstations.
   k. Assessment tools and interviews are utilized in the hazard analysis process.

9. Expert hazard analysis is performed.
   a. The comprehensive hazard review process involves competent, qualified safety, health and/or ergonomic specialists appropriate to the workplace.
   b. All hazard analyses identify corrective or preventive action to be taken to reduce or eliminate the risk of injury or loss, where applicable.
   c. All corrective or preventive actions identified by the hazard analysis process have been implemented or addressed.
   d. Hazard analysis surveys are routinely updated, using personnel competent in the fields of safety, industrial hygiene, ergonomics, and risk management.
   e. Outside professional resources are taken advantage of (associations, insurance loss control, private and public consultants, etc.).
   f. Findings of expert hazard analysis are shared with the work force.

10. Incidents are investigated for root causes.
    a. Workplace policy requires the reporting of all actual and "near miss" accidents.
    b. All investigations determine "root causes."
    c. All accidents and incidents are investigated as required by policy.
    d. Results of accident investigations are corrected immediately or scheduled for correction in the organization’s action plan.
Appendix L – Safety and Health Program Formal Assistance

e. Accident investigators have received appropriate training.

f. All accidents and incidents are reported as required by policy.

g. Workplace policy requires a thorough investigation of all accidents and incidents.

h. Personnel understand the definition of an incident in the workplace.

i. Personnel in the workplace understand the importance of reporting incidences and do so.

j. There is a formal incident reporting form.

II. Hazard Prevention and Control

11. Feasible engineering controls are in place.

a. Safety, health and ergonomic hazard controls are in place at the facility.

b. Hazard controls are selected in appropriate priority order, giving preference to engineering controls, safe work procedures, administrative controls, and personal protective equipment (in that order).

c. Once identified, hazards are promptly eliminated or controlled.

d. Management, supervision, and the safety committee understand and can explain the hazard controls in the correct priority.

e. Employees understand and can explain the hazard controls in the correct priority.

12. Effective safety and health rules and work practices are in place.

a. The rules are clearly written.

b. The rules relate to the safety and health policy.

c. The rules and work practices address potential safety, health and ergonomic hazards.

d. Observations demonstrate that all employees are following safe work rules.

e. Standards cover all work and workplaces at the facility and are readily available to all members of the work force.

f. There are effective means of communicating rules to the work force, such as training classes, employee safety handouts, rules posted in the workplace, and one-on-one discussions between employees and supervisors.

g. Employees support the rules and monitor one another to ensure compliance.

h. Employees have input into the development of workplace safety rules.

13. Applicable OSHA-mandated programs are effectively in place.

a. Required programs are fully in place and operational.

b. Employees and management understand and support the need for mandated programs.

c. Required programs are evaluated and updated at least annually.

d. Employees are involved in the review.

14. Personal Protective Equipment (PPE) is effectively used.

a. PPE assessment has been completed and documented.
b. Employees understand the need for, use of, and care of PPE associated with their jobs.

c. PPE onsite is appropriate to the hazards.

d. Employees use the PPE that is provided.

e. PPE is properly donned and kept appropriately clean.

f. There is documented PPE training for all affected employees.

g. The need for specific PPE in the workplace is adequately communicated by the means of training, postings, signs, JHAs, etc.

h. The PPE is properly sized for each employee.

15. Housekeeping is properly maintained.

a. Aisles and exit ways are clear and unobstructed.

b. Housekeeping is a regular task rather than an afterthought.

c. Routine processes, which generate waste, have housekeeping procedures built-in to them.

d. Storage areas are kept in a clear and orderly condition.

e. There is a written policy regarding housekeeping in the workplace and all personnel have been instructed in the policy and understand it.

f. Supervisors enforce the housekeeping policy.

g. There are specific and routine housekeeping inspections.

h. Appropriate accountability measures are in place to address poor housekeeping.

16. The organization is properly prepared for emergency situations.

a. All potential emergency situations that may impact the facility are identified.

b. A facility plan to deal with all potential emergencies has been prepared in writing.

c. The plan incorporates all elements required by law, regulation, and local code.

d. The plan is written to compliment and support the emergency response plans of the community and adjacent facilities.

e. The plan is current.

f. The plan is tested regularly with drills and exercises.

g. Community emergency responders are involved, where appropriate, in the facility drills and exercises.

h. The plan is effective at limiting the impact of the emergency on the facility and the work force.

i. Emergency communication systems are installed, operational, and redundant.

j. The communication systems are tested at regular intervals (at least monthly).

k. Emergency directions are available, correct and accurate in all spaces, corridors, and points of potential confusion.
17. The organization has an effective plan for providing competent emergency medical care
to employees and others present at the site.
   a. The facility has a plan for providing emergency medical care to employees and
      others present on the site.
   b. Competent emergency medical care is available on all shifts.
   c. The emergency medical plan is followed when medical emergencies arise.
   d. Emergency medical care is provided in accordance with standardized protocols.
   e. Onsite emergency medical personnel are certified to at least the basic first aid and
      CPR levels.
   f. Off site providers of emergency medical care, when utilized, are medical doctors,
      registered nurses, paramedics, emergency medical technicians, or certified first
      responders.
   g. There is an onsite nurse.
   h. There are first aid personnel who are required to provide first aid as part of their job
      duties.
   i. First aid training is offered to all personnel.
   j. There are appropriate plans to direct outside emergency medical personnel into the
      workplace to the correct location.
   k. First aid supplies are appropriate for the workplace, and there is a procedure to
      ensure they remain stocked.
   l. All personnel are aware of the emergency medical plan and how to implement it,
      given their individual responsibilities.
   m. There is a routine training class to review the emergency medical plan with
      personnel.
   n. Outside contractors, vendors, and others are provided adequate instruction to ensure
      their emergency medical care while they are in the workplace.

18. Effective preventative maintenance (PM) is performed.
   a. A preventative maintenance program is in place at the facility.
   b. Maintenance recommendations from manufacturers or builders are being followed
      for all applicable facilities, equipment, machinery, tools, and/or materials.
   c. The preventative maintenance system ensures that maintenance for all operations in
      all areas is actually conducted according to schedule.
   d. Operators are trained to recognize maintenance needs and perform or order
      maintenance on schedule.
   e. Predictive maintenance procedures are incorporated into the system.
   f. The preventative maintenance procedures go beyond operation-related equipment to
      cover the maintenance of engineered hazard controls and emergency equipment as
      well.
   g. There is a scheduled shutdown to address preventative maintenance issues.
h. Operators give positive remarks about the PM of the machines and equipment they operate.

i. There is a PM policy, which not only addresses the issue of production, but also address safety.

19. An effective procedure for tracking hazard correction is in place.

a. The tracking procedure flags and tracks safety, health and ergonomic hazards until they are adequately addressed.

b. There is a timetable for implementation of corrective action.

c. The system covers items identified from various sources, including self-inspections, employee recommendations and reports, Safety Committee, and maintenance logs.

d. Employees are aware of and comfortable using the system.

e. The hazard tracking system prompts feedback after the hazard is addressed.

f. The tracking hazard system uses a computerized spreadsheet format to identify hazards, assign responsibility for completing, completion dates, and follow-up.

g. Employees are allowed to initiate work orders to be placed on the hazard correction form involving safety and health.

h. A review of the tracking hazard form shows that hazards are being promptly corrected.

III. Planning and Evaluation

20. Workplace injury/illness data effectively analyzed.

a. A system exists that tracks safety, health, and ergonomic related trends at the facility.

b. The system addresses trailing indicators, including accidents, occupational injuries and illnesses, hazards identified, and complaints from employees and others.

c. The system addresses leading indicators of safety and health effectiveness, including employee attitudes and employee behaviors.

d. Affected personnel understand the need to systematically, accurately and consistently provide updated information to the system for tracking.

e. Trend data is consistently provided to all facility personnel.

f. All personnel are fully aware of safety, health, and ergonomic trends, causes, and means of prevention.

g. Trend data is utilized to drive improvement and prevention activities.

h. The Safety Committee and other employees participate in analyzing workplace injury/illness data.

i. Evaluation of the OSHA 300 Log and workers compensation data for soft tissue illnesses or injuries is completed at least annually.

21. Hazard incidence data is effectively analyzed.

a. All written reports of inspections are retained for a period sufficient to show a clear pattern of inspections.
Appendix L – Safety and Health Program Formal Assistance

b. Statistical summaries of all routine inspections are prepared, charted and distributed to all personnel so as to show status and progress at hazard elimination.

c. The Safety Committee analyzes hazards to identify deficiencies in the safety and health management system.

d. A method exists for systematic tracking of recommendations, progress reports, resolutions, and outcomes.

e. The system provides for data collection and display as a means to measure the success of the system in resolving identified hazards.

22. A safety and health goal and supporting objectives exist.

a. Safety, health and ergonomic goals and objectives exist in writing.

b. The goals relate directly to the safety and health policy or vision.

c. Objectives exist which are designed to achieve the goals.

d. The goals and objectives are able to be evaluated and revised as needed.

e. A reliable measurement system exists to indicate progress on objectives toward the goal.

f. The measurement system is consistently used to manage work on objectives.

g. The objectives can be easily explained by others within the workplace.

h. Measures used to track objective progress are known to the work force.

i. Goals are specific, measurable, achievable, result-oriented, and clear time frames.

j. Management visibly communicates their support of the goals to the work force.

k. There are concrete examples that the goals and objectives are being met.

l. Employees had input into the development of goals and objectives.

m. Goals and objectives are developed based on audits and analysis of the effectiveness of the Safety and Health Program, along with other safety and health related data.

23. An action plan designed to accomplish the organization's safety and health objectives is in place.

a. A plan is in place to implement the objectives of the Safety and Health Program.

b. The plan objectives are designed to achieve the stated goals.

c. The objectives relate to safety, health and ergonomic deficiencies identified in periodic assessments or comprehensive review.

d. Objectives in the action plan are clearly assigned to responsible individuals.

e. The action plan includes a measurement system to track progress on each objective.

f. Actions planned to accomplish objectives are specific and short-termed.

g. Employees are involved in the development of and implementation of the action plan.

h. Top management visibly supports the completion of the action plan.

i. Top management is involved in the development of and completion of the action plan.
j. The organization communicates the progress of the action plan to the work force and “celebrates” successes with the work force.

24. A review of in-place OSHA-mandated programs is conducted at least annually.
   a. The review examines written materials, the status of goals and objectives, records of incidents, records of training and inspections, employee and management opinion, observable behavior and physical conditions.
   b. The results of the review are documented and drive appropriate changes or adjustments in the program.
   c. The review samples evidence over the entire facility or organization.
   d. The results of the review are documented and drive appropriate changes or adjustments in the programs.
   e. Employees are involved in the review.
   f. The employer has a structured and scheduled system for conducting the review.
   g. Findings are communicated to the work force.

25. A review of the overall safety and health management system is conducted at least annually.
   a. A review of the management system includes safety, health, and ergonomics.
   b. Reviews are used to make positive changes in policy, procedures and programs.
   c. The review includes all facets of the facility.
   d. The Safety and Health Program is reviewed at least annually.
   e. The review examines written materials, the status of goals and objectives, records of incidents, records of training and inspections, employee and management opinion, observable behavior and physical conditions.
   f. The review process drives correction of identified deficiencies.
   g. Evidence exists that demonstrates that program components actually result in the reduction or elimination of accidents.
   h. Positive findings are communicated and celebrated with the work force.
   i. Top management is directly involved with the audit.
   j. Employee representatives are involved in the audit.

IV. Administration and Supervision

26. Safety and Health Program tasks are each specifically assigned to a person or position for performance or coordination.
   a. An individual or group is assigned responsibility for compiling and analyzing records for safety, health and ergonomic trends.
   b. All elements of the company's Safety and Health Program are specifically assigned to a job or of position for coordination.
   c. Individuals within the company can describe the specific safety, health and ergonomic duties assigned to them.
   d. Assigned responsibility is documented.
27. Each assignment of safety and health responsibility is clearly communicated.
   a. The objectives are clearly assigned to responsible individual(s).
   b. Clear roles and responsibility are established.
   c. Assignments are in writing.
   d. Each assignment covers broad performance expectations.
   e. Personnel understand their responsibilities.

28. An accountability mechanism is included with each assignment of safety and health responsibility.
   a. Authority to meet assigned responsibilities exists for all personnel.
   b. Authority is granted in writing.
   c. Methods exist for monitoring performance of responsibilities.
   d. All personnel, including managers, are held accountable to follow the rules.
   e. Positive accountability systems are an integral part of the accountability mechanisms.
   f. Responsibilities are being met appropriately and on time.
   g. All personnel are held accountable for meeting their safety, health, and ergonomic responsibilities.
   h. Personnel meeting or exceeding responsibilities are appropriately reinforced for their behavior with positive consequences.
   i. Members of management at all levels consistently address the safety behavior of others by coaching and correcting poor behavior and positively reinforcing good behavior.

29. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills and timely information to perform their duties.
   a. All personnel with program assignments are familiar with their responsibilities.
   b. Personnel with assigned safety, health, and ergonomic responsibilities have had appropriate training or mentoring to enable them to understand and meet those responsibilities.
   c. Personnel understand the programs or process to which they have been assigned.
   d. Specific skills, knowledge, and information (for safety, health and ergonomic responsibilities) are documented to ensure that personnel assigned the responsibility have these needed qualities.

30. Individuals with assigned safety and health responsibilities have the authority to perform their duties.
   a. Personnel believe they actually have the authority granted to them.
   b. Personnel understand how to exercise the authority granted to them.
   c. Personnel do exercise the authority granted to them.
   d. Authority is exclusively within the control of the individual holding the responsibility.
e. Authority is documented and there is a formal method to ensure personnel recognize their authority.

31. Individuals with assigned safety and health responsibilities have the resources to perform their duties.
   a. Adequate resources (personnel, methods, equipment, funds) to meet responsibilities are available to all affected personnel.
   b. Necessary resources are within the control of the individual holding the responsibility.
   c. Resources are being effectively applied by all personnel in order to meet responsibilities.

32. Organizational policies promote the performance of safety and health responsibilities.
   a. There is a policy that promotes safety, health and ergonomics.
   b. The policy is available in writing.
   c. The policy is clear and straightforward.
   d. The policy can be easily explained or paraphrased by others within the work force.
   e. The safety and health policy fits within the context of other organizational values.
   f. The safety and health policy guides all employees in making a decision in favor of safety and health when apparent conflicts arise with other values and priorities.
   g. The policy provides for consequences that are Positive, Immediate, and Certain (PIC) from the perspective of the employee.
   h. The policy is appropriately communicated throughout the organization including new employee orientation.
   i. There is an incentive policy that promotes safety awareness and worker participation in safety related activities.

33. Organizational policies result in the correction of non-performance of safety and health responsibilities.
   a. The policy statement goes beyond compliance to address the safety behavior of all members of the organization.
   b. Failure to meet assigned responsibilities is addressed and results in appropriate coaching and/or negative consequences.
   c. Accountability data is used to revise goals and objectives so as to facilitate continuous safety and health improvement.
   d. Safe work rules are understood and followed as a result of training and accountability.
   e. Methods exist for monitoring performance.

V. Safety and Health Training

34. Employees receive appropriate safety and health training.
   a. An employee safety and health training program exists at the facility.
   b. The training covers all legally required subjects.
c. The training covers safety, health and ergonomic hazards (awareness, location, identification, and protection or elimination).

d. The training system ensures that the knowledge and skills taught are consistently and correctly applied by the employees.

e. Employees are fully trained in the use of controls and methods to protect themselves in their work area.

f. All members of the work force have been trained on the use of appropriate hazard analysis systems.

g. All personnel involved in inspections have been trained in the inspection process and in hazard identification.

h. Personnel can explain and demonstrate their role under the emergency medical plan.

i. Personnel are trained in the use of emergency equipment available to them and can demonstrate the proper use of the equipment.

j. Post-training knowledge and skills are tested or evaluated to ensure employee proficiency in the subject matter.

k. The safety committee has effective safety, health and ergonomic training.

l. Employees performing high-risk jobs or tasks, where the MSD hazard(s) are not eliminated and/or administrative or work-practice controls are used to reduce MSD incidence, are trained in ergonomic risk factors and descriptions of early signs and symptoms, with an emphasis on early reporting.

35. New employee orientation includes applicable safety and health information.

a. Orientation includes information on safety, health and ergonomics.

b. Orientation covers the facility safety system (policy, goals and objectives, operations, tools and techniques, responsibilities, and system measurement).

c. Orientation covers the facility emergency procedures.

d. The orientation is provided to all new employees and all personnel working onsite, including vendors, temporary workers and contract workers prior to exposure to workplace hazards.

e. There is follow-up action to determine the retention of orientation training for new employees, and there are provisions for retraining when deficiencies are noted in the follow-up.

f. There is a formal and documented program, which is used for new employee orientation.

g. New employee orientation is reviewed in the annual Safety and Health Program audit.

36. Supervisors receive appropriate safety and health training.

a. A supervisory training program addressing safety, health and ergonomics exists at the facility.

b. The training is provided to all supervisors.

c. Training is regularly evaluated for effectiveness and revised accordingly.
d. Post-training knowledge and skills are tested or evaluated to ensure supervisory proficiency.

e. Supervisors receive the same training as employees in their department.

37. Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.

a. The training covers all subject matter delivered to employees.

b. The training covers the facility safety system (policy, goals and objectives, operations, tools and techniques, responsibilities, and system measurement).

c. The training covers supervisory safety, health and ergonomic responsibilities.

d. The training system ensures that the knowledge and skills taught are consistently and are correctly applied by the supervisors.

e. There is a formal and structured training program for supervisors.

38. Safety and health training is provided to managers.

a. A management safety and health training program exists at the facility (where applicable).

b. Safety, health and ergonomic training is provided to all managers.

c. The training covers all subject matter delivered to employees and supervisors to the extent necessary for managers to evaluate employee and supervisory knowledge and skills and to reinforce or coach desired safety and health behaviors.

d. Post-training knowledge and skills are tested or evaluated to ensure management proficiency in the subject matter.

39. Relevant safety and health aspects are integrated into management training.

a. The training covers the facility safety system (management concepts and philosophies, policy, goals and objectives, operations, tools and techniques, and system measurement).

b. The training covers management safety, health and ergonomic responsibilities.

c. The training system ensures that the knowledge and skills taught are consistently and correctly applied by the managers.

d. The training system for all employees is regularly evaluated for effectiveness and is revised accordingly.

e. The training covers the reasons behind and the importance of a formal management of change (MOC) process to ensure that change is properly managed so as not to introduce unnecessary risk.

f. The training covers the importance of long-term safety continuity (safety succession planning) process to ensure the company maintains a continuous improvement-oriented safety culture while providing stability in health, safety, and ergonomic leadership roles.

VI. Management Leadership

40. Top management policy establishes clear priority for safety and health.

a. The safety and health policy is supported by senior management.
b. The goals are supported by senior management and can be easily explained or paraphrased by others within the workplace.

c. Members of the work force can give examples of management's positive leadership.

d. Members of the work force credit management with establishing and maintaining positive safety values in the organization through their personal example and attention to the behavior of others.

41. Top management considers safety and health to be a line rather than a staff function.

   a. Production supervisors are held accountable for safety, health and ergonomics in their departments.

   b. All personnel are held accountable for their safety and health behaviors.

   c. Performance evaluations of individual supervisors take into account the safety and health performance of the employees under their control.

   d. Safety and health staff are utilized as a resource.

   e. Supervisors and employees take ownership for safety in their work area.

   f. Program elements are managed and administered by supervisors and employees.

42. Top management provides competent safety and health staff support to line managers and supervisors.

   a. Competent safety and health personnel are made available as a resource to assist line managers and supervisors.

   b. Clerical support is available as needed for safety and health related functions.

   c. Safety, health and ergonomic issues are a priority topic during production meetings.

   d. Outside resources such as trade associations, private and public consultants are obtained as necessary.

   e. Safety and health staff are available as a resource.

43. Managers personally follow safety and health rules.

   a. Managers throughout the organization consistently follow the rules and behavioral expectations set for others in the work force.

   b. Members of the work force perceive management to be consistently setting positive examples and can explain why they hold these positive perceptions.

   c. Managers give high priority to practicing safe and healthful behaviors and to personally leading by example.

44. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.

   a. Those with safety, health and ergonomic responsibilities are given the authority to meet those responsibilities.

   b. Delegated authority for safety and health is clearly assigned.

   c. Position descriptions not only specifically state the responsibilities of the position, but also state the authority granted to carry out those duties.
Appendix L – Safety and Health Program Formal Assistance

45. Managers allocate resources needed to properly support the organization’s safety and health system.
   a. Safety, health and ergonomic considerations are included in the budget.
   b. Top management ensures adequate resources are provided to meet safety, health and ergonomic responsibilities.
   c. Emergency equipment appropriate to the facility (including sprinkler systems, fire extinguishers, first aid kits, fire blankets, safety showers and eye washes, emergency respirators, protective clothing, spill control and clean-up material, chemical release computer modeling, etc.) is installed or available.
   d. Emergency equipment is distributed in sufficient quantity to cover anticipated hazards and risks, is operational, and is tested at regular intervals (at least monthly).
   e. In addition to budgeting for safety, management allocates personnel, personnel-effort, supplies, equipment, facilities, and services for safety.
   f. Management encourages mentoring and networking relationship with other SHARP or VPP companies, the Oregon SHARP Alliance, a local ASSE or similar health and safety networking organization.

46. Managers assure that appropriate safety and health training is provided.
   a. An employee safety, health and ergonomic training program exist at the facility.
   b. The training covers all legally required subjects.
   c. Training policies and procedures indicate that legally required elements are the minimum acceptable levels of training.
   d. Training procedures cover behavioral-based safety performance activities.
   e. Management ensures the training is specific and applicable to the work task.
   f. Managers use the annual program reviews to identify needed training.
   g. Management performs follow-up to training to ensure the training is appropriate, understood, and being used, and driving the improvements desired.

47. Managers support fair and effective policies that promote safety and health performance.
   a. The employer provides opportunities and mechanism(s) for employees to influence Safety and Health Program design and operation.
   b. Safety, health and ergonomic policies promote positive behaviors while correcting deficient behaviors.
   c. Where applicable, written policies spell out rewards for safe and healthful work activities.
   d. Policies are established that link pay raises, bonuses, and promotions to personnel evaluations.
   e. Position descriptions are developed to assist employees in their understanding of their responsibilities.
   f. Safety incentive policies promote employee involvement in safety activities and do not discourage injury, illness and hazard reporting in any way.
g. A Management of Change policy exists to ensure occupational health, safety and ergonomic hazards are evaluated prior to change implementation.

h. A leadership succession process is in place to ensure long-term stability of health- and safety-related processes and procedures.

48. Top management is involved in the planning and evaluation of safety and health performance.
   a. Top management is routinely involved in activities related to planning and evaluating facility safety, health and ergonomic performance.
   b. Top management is held accountable for facility safety performance though their own performance evaluations.
   c. Top management is familiar with and understands the organization’s planning and evaluation efforts.
   d. Members of the work force perceive management to be exercising positive leadership.
   e. Top management is involved in regularly evaluating training for effectiveness.
   f. Top management ensures that the site Management of Change (MOC) processes address organizational changes (personnel or staffing), activity changes (processes, equipment, infrastructure, software), material changes (new or different chemicals, packaging or product) and changes to the SHMS (policies, procedures).

49. Top management values employee involvement and participation in safety and health issues.
   a. Top management actively encourages employees to be involved in safety and health activities, including participation in local and regional networking and mentoring opportunities.
   b. Management implements a process for employees for early reporting of symptoms.
   c. Management encourages employees to report safety, health and ergonomic hazards.
   d. Management can describe available avenues for employees to participate in safety and health activities.
   e. Participation in the Safety Committee is respected and valued in the organization.
   f. Supervisors and managers actively encourage use of the employee involvement systems and employees feel comfortable using those systems in all situations.
   g. Several avenues have been established by upper management to solicit and gather employee input.
   h. Top management ensures that the site Management of Change (MOC) processes address organizational changes (personnel or staffing), activity changes (processes, equipment, infrastructure, software), material changes (new or different chemicals, packaging or product) and changes to the SHMS (policies, procedures).

VII. Employee Participation

50. There is an effective process to involve employees in safety and health issues.
   a. There are multiple avenues for employee participation in safety, health and ergonomic issues.
b. The avenues are well known, understood, and utilized by employees.

c. The avenues and mechanisms for involvement are effective in reducing accidents and enhancing safe behaviors.

d. Data related to key elements of safety and health performance are accumulated and displayed within the workplace to inform all personnel of progress being made.

e. Employees throughout the company are aware of the methods to involve employees.

f. There are open lines of communication between workers and forum meetings.

g. A Safety Committee is in place and functional.

h. That Safety Committee is structured in accordance with the Safety Committee rules.

i. There are mandatory safety meetings.

j. There is an open door policy.

k. There is a suggestion box type program.

51. Employees are involved in organizational decision-making in regard to safety and health policy.

a. Employees accept personal responsibility for ensuring a safe and healthful workplace.

b. Employees have a substantial impact on the design and operation of the Safety and Health Program.

c. Employees have significant input to the rules.

d. Safety Committee members work with management to review and revise policies on safety, health and ergonomics.

e. Employees are involved in annual program reviews.

f. Employees are involved in change analysis.

52. Employees are involved in organizational decision-making in regard to the allocation of safety and health resources.

a. Employee input is sought in regard to the future allocation of safety, health and ergonomic resources.

b. The Safety Committee is given the opportunity to provide feedback on planned distribution of safety and health assets.

c. The resource allocation goes beyond just budget, and includes allocation of personnel, supplies, equipment, facilities or services.

53. Employees are involved in organizational decision-making in regard to safety and health training.

a. Employees are provided with the opportunity to develop and provide training to peers.

b. Employees have the opportunity to evaluate and update training programs.

c. The employer actively encourages employees to be involved in developing and delivering safety, health and ergonomic training plans for the facility.

54. Employees participate in hazard detection activities.
Appendix L – Safety and Health Program Formal Assistance

a. Employees actively participate and contribute to discussions of hazard correction activity (generally at crew meetings).
b. Employees have input in the development of inspection procedures and employee reporting systems.
c. The hazard detection system provides rapid and regular feedback to employees.
d. Employees are involved in the analysis of the job, process, or phase of activity that applies to their assigned work.
e. All members of the work force have ready access to and can explain the key elements of the hazards analysis, which applies to their work.
f. Personnel at all levels of the organization are routinely involved in safety and health inspections.
g. Employees are active participants in the determination of collection methods, collection, analysis, and intervention selection for hazard detection activities.

55. Employees participate in hazard prevention and control activities.

a. Members of the affected work force actively participate in the comprehensive hazard review process.
b. Safety Committee members evaluate and/or orchestrate hazard prevention and control activities.
c. Workers have authority and feel free to refuse unsafe work.
d. Employees are involved in developing hazard prevention strategies and activities.
e. The facility actively supports and values employee participation in hazard prevention and control activities (such as control hierarchy, safe work rules and procedures, program evaluation, PPE usage, emergency planning and facility maintenance).
f. Employees are encouraged and do take action on self-correcting or minimizing risk.

56. Employees participate in the safety and health training of co-workers.

a. Employees are involved in the planning and preparing of safety, health and ergonomic training topics.
b. Employees conduct training classes.
c. Employees are involved in evaluating and updating training as needed.
d. Employees mentor with each other, using existing policies such as JHA or process hazard reviews.
e. Employees provide on-the-job training and coaching to co-workers.

57. Employees participate in safety and health planning activities.

a. Employees are active participants in the action planning process.
b. Workers are allowed access to information needed to make informed decisions.
c. Employees are active participants in evaluating the facility safety, health and ergonomic planning activities.
d. Company goals, objectives, and action plans are developed with employee involvement.
Appendix L – Safety and Health Program Formal Assistance

58. Employees participate in the evaluation of safety and health performance.
   a. The Safety Committee makes an annual review of the Safety and Health Program.
   b. Employees are regularly involved in evaluating the safety policies for effectiveness and revising them accordingly.
   c. Employee input is considered an important part of supervisory and management safety performance reviews.
   d. As part of an annual review system, employees are interviewed or surveyed to gather their input.

   e. Employees participate in developing solutions.
Appendix M – SHARP Program Details

Safety and Health Achievement Recognition Program
Oregon Occupational Safety and Health Division

I. Program Overview

The Safety and Health Achievement Recognition Program (SHARP) is a program that encourages employer self-sufficiency in safety and health management. SHARP is a recognition program that provides an incentive and road map for Oregon employers to work with their employees to find and correct hazards, to develop and implement effective Safety and Health Management Systems (SHMS), to continuously improve, and to become self-sufficient in managing occupational safety and health. A SHARP employer is defined as an employer who has successfully incorporated safety and health management principles into their workplace.

A. SHARP is a program of the Oregon Occupational Safety and Health Division (Oregon OSHA) Consultation Services Section. The overall goal of SHARP is to:

1. Recognize employers for their achievements in workplace safety and health management,
2. Reduce workplace injuries and illnesses,
3. Provide a means for showing other employers that occupational safety and health can work--for everyone, and
4. Encourage employers to rely less on consultation and more on themselves as they move down a continuum towards self-sufficiency in safety and health management.

B. Participation in the Oregon OSHA SHARP program does not diminish existing employer and employee rights and responsibilities under the Oregon Safe Employment Act. Guidance in this document is intended for consultative staff to use with employers who have requested to become candidates for SHARP.

C. Recognition Program

To promote effective safety and health program management, continuous improvement, and to provide models for others to follow, SHARP recognizes employers who implement effective Safety and Health Management Systems. Recognition is achieved by:

1. Encouraging employers to use Oregon OSHA consultation, technical, and training resources, and to involve their employees in establishing effective safety and health programs. SHARP employers are further encouraged to network with others and to become members of a private SHARP and VPP organization (the Oregon SHARP Alliance), which is also devoted to safety and health improvement and networking.
2. Providing for public recognition of employers and employees as models who have worked together successfully to establish effective Safety and Health Management Systems (SHMS). This includes awarding the employer a SHARP certificate of achievement signed by the Administrator of Oregon OSHA, and using this recognition as a model for other Oregon employers.
Appendix M – SHARP Program Details

D. Program Eligibility

Oregon employers who have been in business for more than one year are eligible to apply for SHARP regardless of size or type of business.

1. Prospective SHARP employers must have had a comprehensive consultation completed within the 12 months immediately prior to pursuing SHARP recognition.

2. The division will emphasize the benefits of SHARP to employers of 250 or fewer employees in high hazard industries.

   SHARP Partnership Agreements will be used for larger sites, multi-location employers and certain service provider clients based on the following criteria. (SHARP Partnerships are further explained in Sections XI through XIII of this document.)

   a. Multi-Site SHARP Partnership agreements pertain to those employers with more than two physical locations.

   b. Large Employer SHARP Partnership agreements are negotiable with employers who have between 251 and 500 employees. Large Employer SHARP Partnership agreements are required for those employers with more than 500 employees at a single location.

   c. Service Provider SHARP Partnership Agreements are available for those companies who provide safety and health related services to multiple clients.

   d. Leasing/Temporary Agency Partnerships are available for certain Leasing Agencies or Temporary Agencies who are committed to improving the workplace safety and health conditions where their leased or temporary employees work.

3. Successful SHARP candidates should have a Days Away, Restricted or Transfer Rate (DART) that is below the most recently published BLS industry average for their Industrial Classification (NAICS). Note: Oregon rates may be used for comparison only after a discussion with the local field consultation manager. If the DART is not below the industry average, there should be a downward trend in those rates over a three-to-five year history.

4. To obtain and maintain SHARP status, management commitment is essential. If a company pursuing SHARP is controlled by a parent corporation or agency, it is essential that those controlling the company understand the SHARP process and the commitment necessary to maintain SHARP status. If during any part of the process, adequate authority, resources and support are not provided, the individual entity may not be able to attain or maintain SHARP status. Therefore, a discussion with the controlling corporation or agency should occur during the SHARP evaluation process to determine their commitment to the process and to the entity pursuing SHARP.

5. Incentive Programs, if any, for a SHARP company must be positive and promote safety awareness and worker participation in safety-related activities. SHARP company incentive programs must not discourage injury, illness and hazard reporting in any way.
II. SHARP Commitment Letter

Early in the SHARP process, employers must agree in writing to the following basic tenets of SHARP (a sample SHARP commitment letter can be found on the Oregon OSHA website under SHARP Program). Follow-up visits toward SHARP certification, after the initial assessment, will not be completed until receipt of the SHARP commitment letter. The written agreement must be signed and sent to the local Oregon OSHA field consultation manager.

In the letter, the employer must agree to:

A. A comprehensive consultation survey of all conditions and operations at the establishment, including a complete safety and health systems review.

B. Involve employees in the development, operation, and improvement of all elements of the written workplace safety and health program as well as in the decisions that affect their safety and health. At union and non-union sites, if the employee representatives object to the site’s involvement in SHARP, the field consultation manager will advise the employer that the application cannot go forward until both labor and management agree on participation in SHARP.

C. Work diligently to accomplish the following:

1. Correct all identified safety and health hazards, and provide the local field consultation manager with written confirmation that each identified hazard has been corrected within an agreed upon time frame.

2. Develop, implement, or improve all elements of an effective safety and health management system at the site.

3. Work to maintain a downward trend in injury and illness Days Away, Restricted or Transfer (DART) rates over the most recent five (5) years.

4. Develop and maintain a written safety and health program.

5. Achieve an acceptable rating on the attributes of the Oregon OSHA Safety and Health Program Assessment Tool.

D. Inform the local field consultation manager prior to making any changes in working conditions or work processes that might introduce new hazards into the workplace. “Changes” mean relocation of facilities, change of ownership or major organizational changes, additions to buildings, new processes, i.e., painting of parts rather than purchasing them already painted, new lines of machinery, etc. “Changes” do not include process changes at construction or other mobile sites.

E. Notify the local field consultation manager when all elements of SHARP have been fully implemented so a follow-up visit can take place.

A sample SHARP commitment letter can be found on the Oregon OSHA website under SHARP Program. Follow-up visits toward SHARP certification, after the initial assessment, will not be completed until receipt of the SHARP commitment letter.
Appendix M – SHARP Program Details

III. SHARP Process

SHARP is a process designed to identify the strengths and weaknesses of an employer’s occupational safety and health management system. The process normally starts with a written request from the employer. The request initiates an intake for a comprehensive consultation including an initial assessment, followed by a report with recommendations. The process includes one or more action plan meetings between the employer and consultant to identify and begin implementation of objectives designed to meet the goal of achieving SHARP certification.

A. Preparation

Once the employer has requested in writing, the initial pursuit of SHARP and has agreed to the basic tenants, the lead consultant will discuss the intended process with the local field consultation manager to ensure the necessary consultative disciplines are involved in the process.

The preparation for a SHARP consultation will follow the format outlined in G. of the Consultation Reference Guide.

B. Conduct of a Visit

In the opening meeting the consultant will review the employer’s request for consultation assistance, and will review the program requirements (including the potential for multiple discipline consultations) with the employer to ensure the employer understands the commitment necessary to pursue SHARP.

As the SHARP process progresses from the hazard identification stage to the Safety and Health Program improvement stage, the employer will need to commit additional resources to develop and complete action plans. The employer will be informed that the consultant will remain available to coach the employer and employees to develop or improve any existing elements, and that Oregon OSHA training resources are available to assist with skill development. Achieving SHARP, however, is the employer’s responsibility, and Oregon OSHA’s time onsite will shorten as the employer builds capacity toward being self-sufficient.

C. Employee Participation

Employers electing to pursue SHARP must be committed to developing a written Safety and Health Program (SHMS) that involves employees in significant ways that affect their safety and health. Employee representatives must be involved in the consultative process including hazard assessment and action plan formulation.

D. Comprehensive Consultation

A comprehensive consultation of the employer’s establishment must be conducted covering all operations, including a complete Safety and Health Program review. All hazards identified will be discussed in light of how the elements of an effective SHMS will address their continued correction and control.

1. For companies with mobile worksites that are in or working toward SHARP, the consultant shall evaluate a representative number of the mobile worksites during the comprehensive consultation process to ascertain the effectiveness of the company-wide Safety and Health Program.

A General Contractors wishing to pursue SHARP will agree to the Tenets outlined in IV. SHARP for General Contractors in Construction Pilot.
Appendix M – SHARP Program Details

2. Using the Safety and Health Program assessment tool, and following the guidance found in the Oregon OSHA Consultation Reference Guide, the consultant will conduct an initial assessment of the employer’s Safety and Health Program and discuss with the employer the elements of an effective program.

3. Successful SHARP candidates must achieve an acceptable safety and health program effectiveness rating following the final assessment of their program. If the employer is weak in an area for which safety and health rules have yet to be adopted, such as Ergonomics, or requires long term investment or improvements, such as ventilation systems engineering, SHARP may be attained if the area needing improvement is part of a continuous improvement action plan.

4. Initial SHARP candidates should have a three- to five-year injury and illness rate that is trending in a downward direction.

E. Closing Meeting

The closing meeting will be conducted according to the format outlined in G. of the Consultation Reference Guide. In the closing meeting, the consultant will:

1. Describe the hazards identified during the consultation and which program elements would have prevented the hazard from occurring.

2. Discuss suggested methods of correction, time frames for correction, and any need for referrals to other section staff for hazards beyond the expertise of the consultant.

3. Describe the adequacies and areas needing improvement of the employer’s Safety and Health Program.

4. Decide with the employer the extent to which additional short coaching sessions may be needed during the interim one year (or longer) period to facilitate and monitor the Safety and Health Program improvement process.

5. Develop a schedule for one or more visits, which are expected to become less frequent as the employer progresses toward self-sufficiency. During the SHARP process the consultant will remain available for contact with the employer, to help the SHARP applicant move forward.

6. Arrange to leave at least one copy of the completed Safety and Health Program Assessment Tool (if already completed) with the employer so the employer can use it as a tool to work toward full program implementation.

7. Remind the employer that at the end of the implementation period, the employer is responsible for requesting a consultation for final, onsite evaluation for SHARP approval.

F. Written Report

After the consultant conducts the comprehensive consultation, the employer will be advised that a written report explaining the findings of the visit and confirming any correction periods will be provided at a later date.

1. The written report will follow the format outlined in G. of the Consultation Reference Guide.

2. All reports must be reviewed prior to mailing according to the format outlined in G. of the Consultation Reference Guide.
Appendix M – SHARP Program Details

3. The written report will reflect the consultant’s findings and recommendations for hazard correction, and necessary Safety and Health Program improvements.

4. If not already completed as in III.E.6. above, the written report shall include or reference the Safety and Health Program Assessment Tool so the employer can use it to work toward SHARP approval.

G. Action Plan

After the employer has received the written report, the consultant will coach the employer to develop action plans that map out the employer’s progress in implementing an effective Safety and Health Program, and other safety or health areas needing long term improvement.

1. The action plan(s) is developed by the employer following the initial comprehensive consultation. The consultant and employer together will discuss the elements of the action plan(s) and the specific time frames for achieving plan items.

2. An action plan outlines the specific steps that will be accomplished by the employer to merit SHARP approval. The action plan should address, where applicable:
   a. The employer’s correction of all identified safety and health hazards that require long term abatement methods, with time frames.
   b. The steps necessary for the employer to implement parts of an effective Safety and Health Program, with time frames.
   c. The steps needed to improve any other deficiencies found during the consultative visits.

H. Initial SHARP File

Prior to the consultant recommending approval, the consultant and the prospective employer must compile a SHARP file, documenting the employer and the consultative process. The following items are required in the SHARP file:

1. Executive Summary. A completed SHARP Packet Executive Summary sheet must be in the SHARP file. The Executive Summary will include:
   a. Company Description: A description of the company, their size, what they do, make or sell, their operations, organization, facilities or equipment. Comment on any interactions with OR-OSHA during the previous 3 years and/or any recent history including mergers, growth or downsizing. Include significant information about the workforce (turnover, pace of work, mobile employees, permanent or temporary, demographic information, training levels, etc.).
   b. Synopsis of the SHARP Process: A description of the SHARP process with this company, when it started, who was involved, what was accomplished. (Reference report numbers and dates of visits to create a clear picture of what the SHARP process entailed. Description should be in chronological order.) Summarize the progress made by the company in terms of improvements made in the safety and health management system.
   c. Claims Data: Completed DART and TCIR data for the most recent 3 completed years. For companies that are renewing SHARP, add the new year and continue to accumulate the data. Describe any anomalies or trends noted in claims data, and discuss accident investigation procedures. If the rates are above the state average, justify the recommendation for SHARP approval.
d. Safety and Health Program Assessments: Describe the findings noted in the initial and final assessments of the company’s safety and health management systems. Note areas of program improvement. Note program strengths as well as weaknesses.

e. Action Plans: Reference or describe the results of last year’s action plan. Include any action items not completed. Describe action plans developed for the coming year. Note relationships to current assessment, as well as time lines, and responsibilities.

f. Consultants Recommendations: Consultants statement verifying serious hazards were abated (or effective abatement plans in effect with interim protection in place, with completion dates) and reason(s) why consultant(s) recommend this company be approved as (or to remain) a SHARP company.

2. Assessments. Include copies of the initial and final Safety and Health Program assessment forms, as well as any interim assessments conducted during the SHARP process.

3. Reports/Verification. Include copies of all the consultation reports generated during the SHARP process and verification that all hazards have been abated, or that action plans are in place to address the long term hazard abatement of complex items.

4. Action Plans. Include copies of all written action plans developed to address identified hazards and to work toward SHARP. Completed action plans should include documentation on the status of individual action plan items.

5. Employer Letters. Include copies of all letters from the employer to Oregon OSHA generated during the SHARP process, including the initial letter of commitment addressed to the local Field Consultation Manager, and the letter from the company requesting final SHARP evaluation.

6. Supporting Documentation. Additional supporting or explanatory documents may be included, as necessary or desired, which illustrate the level of excellence of the employers safety and health programs.

IV. SHARP for General Contractors in Construction Pilot

A. SHARP for specialty trade construction worksite (mobile) will continue to follow the procedures outlined previously in the Oregon SHARP program.

B. General Contractors (GC) in the SHARP process will follow the procedures outlined in the Oregon SHARP program, and will adhere to the following guidelines spelled out in the National Construction SHARP Pilot:

1. SHARP recognition for General Contractor (GC) Participants is available only to general contractors who have their “home base” in Oregon qualify. Once qualified at the “home base” the GC participant may apply for GC Construction SHARP at any of their worksite’s that will be a 24 month or longer project site.

2. SHARP Participation for General Contractors is available only to general contractor employers with 250 and fewer employees on site, and no more than 500 employees corporation-wide.

   a. The GC participant will provide the Consultation Project Manager (CPM) (or their designee) the name and description of the worksite and a schedule for completion of all phases.
b. The GC participant will involve employees, any collective bargaining groups or other recognized employee representatives, to work effectively in attaining SHARP recognition at the worksite.

c. The GC participant will require all sub-contractors on the project to submit the subcontractor’s safety and health management system (SHMS) for review prior to being awarded. If the subcontractor’s SHMS is deemed insufficient by the GC, that subcontractor must work under the GC SHMS for the particular job.

1. The GC participant will provide a list of subcontractors with their injury and illness rates for the immediate preceding 3 year average. If a subcontractor has less than 10 employees and is not required to maintain such records, the rates may be estimated based on the number of injuries/illnesses and the number of hours worked during the previous year.

2. During the GC SHARP Participation, the GC must submit to the CPM:
   i. A copy of the worksite’s OSHA 300 log;
   ii. A copy of all injury and illness incident reports; and
   iii. Information regarding the completion of any item(s) on the SHARP Action plan

d. The GC participant must maintain a combined set of injury and illness records for all employees working at the site including sub-contractors.

3. The GC Participant will be responsible for ensuring correction of all hazards identified on the project, whether they are attributed to the GC or a subcontractor. Due to the short-term nature of construction worksites, identified hazards must be corrected as quickly as possible, but shall be no longer than twenty days after the closing conference. To the extent possible, hazards observed on the worksite must be corrected while the consultant is on the premises. Those hazards not immediately corrected, must be assigned the shortest possible correction due date, but no greater than three days from the closing conference, when at all possible.

   a. The GC shall verify that hazards caused by subcontractors are corrected by the responsible subcontractor.
   b. The GC participant must ensure subcontractors and their employees working at the site are aware of SHARP participation and of their roles and responsibilities.
   c. The GC participant must maintain the following documents in relation to the subcontractors working on the site:
      1. A signed letter from each subcontractor stating that they have received, read, and are willing to work in accordance with the SHARP program;
      2. A record of attendance at all safety meetings;
      3. And safety and health inspection reports, incident investigation reports or other documents that demonstrate the effectiveness of the employer’s SHMS; and
      4. Provide safety and health orientation sessions for incoming subcontractor employees, temporary workers, and permanent employees.
C. The GC participant must agree to periodic safety and health visits during the term of the project that will take place with very little to no advance notice. At least one safety and health visit will take place each year while the project is active.

1. In addition to the periodic visit by the Consultant(s), the GC participant will conduct and electronically submit to the CPM quarterly safety and health self assessment (reports) of the worksite. The quarterly assessment report shall include:
   a. description of training they have conducted (including toolbox talks, orientation for new employees, and other safety and health training);
   b. copies of job hazard analysis conducted;
   c. copies of injury and illness logs;
   d. any other activities they improved (or maintained) regarding the quality of their SHMS.

V. SHARP Approval and Certificate Issuance
When the consultant(s) have verified that the employer has met all of the requirements for SHARP approval and the SHARP file is completed, the SHARP file must be submitted to the local field consultation manager.

A. The local field consultation manager will verify that the SHARP file is complete and that the employer has met all of the requirements for SHARP approval before forwarding the SHARP Executive Summary with the approval recommendation to the consultation manager.

B. Upon receipt of the SHARP Executive Summary, the consultation manager or designee will review and may approve SHARP certification for the employer.

C. The initial SHARP certificate will normally be awarded to the employer by a member of the Oregon OSHA management team. The consultant shall schedule the award ceremony at a time that is convenient to both the company and the Oregon OSHA management person.

VI. Renewing SHARP/Continuous Improvement
SHARP recognition is granted in 12 month increments. To continue in SHARP, employers must apply for renewal during the last quarter of the approval year by contacting the local field consultation manager (or their designee). If contact has not been made by the renewal date, a letter will be sent informing the SHARP company that they must schedule a renewal evaluation within 30 days or they will be terminated from SHARP.

A. The lead consultant and the SHARP team will conduct an in-depth evaluation to ensure the Safety and Health Program is being effectively maintained and continuously improved. The consultant will evaluate three to five years of injury and illness data and look at trends, injury types and severity. Those employers with incidence rates above their industry averages must be evaluated on a case-by-case basis. In addition to reviewing injury and illness rates, the consultant will:
   1. Conduct a hazard assessment of the facility, to verify that workplace hazards at the site remain under control.
   2. Review accident and incident investigation reports and 801 forms from the current and previous year and evaluate trends from the most recent three years of OSHA 300 Logs.
Appendix M – SHARP Program Details

3. Assess all 58 elements of the employer’s safety and health management program.

4. Evaluate the level and effectiveness of employee involvement in the site’s safety and health programs.

5. Review and evaluate the detail and progress in the site’s action plans for the previous and upcoming years.

6. Assess the site’s continuous improvement and their movement towards self-sufficiency.

7. Assess the effectiveness of the safety committee.

8. Review the site’s written safety programs for effectiveness.

B. Second-year SHARP evaluations will consist of a comprehensive consultation as specified in III.D. of this document. Recognizing that incidence rates fluctuate, Oregon OSHA consultation will evaluate incidence rates as part of the criteria for evaluating third-year and subsequent SHARP renewals. The following approach will be applied to incidence rates of second-year and subsequent SHARP renewals.

1. Compare the SHARP employer’s DART to the most recently published BLS average total for all Oregon industries. If the DART is lower than the average, the company can be recommended for renewal.

2. If the SHARP company’s DART is above the Oregon all industry average, compare it to the BLS national industry average for the specific NAICS which they are classified under. If the DART is lower than the industry average for their NAICS, the company can be recommended for renewal.

3. If the SHARP company’s DART is above the national industry average for the specific NAICS, the consultant will average the company’s DART rates for the last three years and compare them to an average of the three most recently published rates for their industry. If the company’s three-year average rate is lower than the average of the three most recently published industry rates, the company can be recommended for renewal.

4. Some SHARP renewal applicants, with limited numbers of employees and/or hours worked, may use a fourth alternative method of calculating incidence rates. The alternative method allows the employer to use the best three out of the most recent four years’ injury and illness experience. The alternative method may only be used after discussion with the field consultation manager.

Note: To determine whether the employer qualifies for the alternative calculation method, do the following:

1. Using the most recent employment statistics (hours worked in the most recent calendar year), calculate a hypothetical lost workday case incidence rate for the employer assuming that the employer had two cases during the year;

2. Compare that hypothetical rate to the most recently published BLS lost workday case incidence rate averages for the industry; and

3. If the hypothetical rate (based on two cases) is equal to or higher than the BLS average for the firm’s industry, the employer qualifies for the alternative calculation method.

For more information on rate calculations, see Appendix E.
C. For second-year and subsequent SHARP evaluations, the consultant will coach the SHARP employer to take an active and ever increasing role in the SHARP evaluation process. Because the employer should be making progress toward self sufficiency, we expect that over time the employer will take more of the responsibility for activities associated with their continued improvement and Oregon OSHA’s involvement will be limited. In the interest of continued improvement and self sufficiency, encourage the SHARP worksite in the following:

1. Explain to the site contact person the calculations for determining DART and TCI rates and show them how to compare their rates against the published industry rates for their industry.

2. To develop, implement and maintain a management of change (MOC) program (or similar systematic process) and incorporate MOC training into their management training processes.

3. To develop and implement a safety program continuity plan (succession planning or similar systematic process) in order to help facilitate long term stability in safety and health processes. The safety continuity plan should be designed to recruit and enlist promising employees, to develop their knowledge, skills, and abilities in order to prepare them to assume ever more challenging roles within the organization, so that as the organization loses key employees, the next generation of safety and health leadership is being groomed to step into new or vacated roles. Such a process is vital to a company in maintaining a continuous improvement oriented safety culture.

4. To develop networking and mentoring relationships with other SHARP or VPP companies, with the Oregon SHARP Alliance, with a local ASSE or other safety and health networking organization in order to keep abreast of current SHMS related information.

D. Renewal is dependent on the consultant’s assessment of continued program improvement and effectiveness. If all requirements for SHARP are verified as operating effectively by the consultant and improvement is verified, Oregon OSHA will inform the employer that the employer’s renewal has been approved.

E. Subsequent SHARP Recommendations.

Prior to the consultant recommending an employer for continuation in the SHARP program, the SHARP file that documents the employer and the consultative process must be updated. The subsequent SHARP file will include an updated executive summary, any new report(s), and the most recent assessment form appended to the initial SHARP packet (see III.H. of this Appendix). Other updated information may be included where applicable.

F. Subsequent SHARP awards.

Second-year and subsequent SHARP certificates will normally be awarded to the employer by a member of the consultation team.

G. File retention.

Electronic copies of the Executive Summary and all S&HP Assessments will be electronically saved under: `\Cbs_osha\DATA\Osha\S\share\Con_temp\All Consultation\ConTrackDocs`
VII. Scheduled Inspection Deferral

An employer who has been approved as SHARP for the second and subsequent years may be deferred from scheduled Oregon OSHA inspections. Inspection deferral is awarded as an acknowledgment by the agency that enforcement resources would be better used at worksites where employees may be at higher risk of injury and/or illnesses.

A. Following the approval of second and subsequent year SHARP participation, the consultation manager will forward the approval to the manager of enforcement, who will defer the establishment from the scheduled inspection lists.

1. The scheduled inspection deferral (SHARP exemption) will be limited to one year, and must be renewed upon the next SHARP renewal. Once awarded, the scheduled inspection deferral may be renewed annually as long as the company continues to be approved for SHARP participation.

2. Upon graduation from the SHARP program, SHARP graduate companies will receive one final SHARP exemption that will last no more than three (3) years.

B. Oregon OSHA will continue to conduct compliance inspections in the following categories: Imminent Danger, Fatality/Catastrophe, Serious Accidents, and Complaints/Referrals. SHARP companies must continue to abide by OAR 437-001-0700, Recordkeeping and Reporting.

1. In the event of a compliance inspection with a serious or repeat citation, the local field consultation manager will determine whether or not an onsite visit shall be conducted to ensure that the safety and health management system is operating effectively.

   a. If an onsite visit is warranted, and the consultant believes there is a connection between a serious citation and reduced effectiveness of the safety and health management system, the consultant must recommend that the SHARP employer withdraw from the program.

   b. If an onsite visit is warranted, and the consultant believes there is no connection, the employer must be counseled on how to prevent a recurrence.

2. If a willful citation is issued or there is evidence that the site’s SHARP information was falsified, the employer will be asked to withdraw from the SHARP program. If the employer does not voluntarily withdraw within 5 working days, participation will be terminated. The employer may reapply after 12 months.

VIII. Failure to Meet or Maintain Requirements

An employer’s SHARP approval and/or inspection deferral will be terminated if the consultation manager, and the Oregon OSHA administrator determine the employer failed to meet, or maintain SHARP requirements.

A. If a SHARP employer fails to renew their SHARP status within two months of their scheduled renewal date, that employer will be automatically terminated from the program.

B. Except in egregious cases, the employer will be given the opportunity to withdraw from the program, rather than be terminated. Companies withdrawing from SHARP should be encouraged to continue using SHARP criteria and to consider re-applying for SHARP in the future.
C. Conditional Approval.

A SHARP facility that is meeting the spirit of SHARP participation, but falls short in certain areas during the renewal evaluation may be considered for a conditional approval. The conditional approval status must be discussed with the field consultation manager and a planned approach developed for the action plan process. SHARP employers who are not eligible for renewal or graduation will be given one of the following two choices:

1. The employer can agree to a time-specific conditional SHARP approval, not to exceed two years, during which time they will focus on completing an action plan aimed at ensuring they are eligible to renew at the end of that time-frame.
   a. If an extension to a conditional approval is recommended, the consultant and the field consultation manager must discuss the reasons behind the recommendation with the consultation manager.
   b. If a second conditional approval is recommended, at any time after the first conditions have been met, the consultant and the field consultation manager must discuss the reasons behind the recommendation with the consultation manager.

2. The employer will be asked to voluntarily withdraw from SHARP.

Note: Conditional SHARP status does not maintain any exemptions from inspection.

IX. Graduation from SHARP

SHARP companies who have completed four consecutive years in SHARP and who successfully renew for a fifth year may be graduated from the program.

A. After a SHARP employer completes its fourth year in the SHARP program, the lead consultant will work with the SHARP employer to jointly complete the final SHARP renewal assessment to determine eligibility for SHARP renewal.

1. If the site is not eligible for renewal, they will be given one of the following two choices:
   a. The employer can agree to a one-year conditional SHARP approval, during which time they will focus on completing an action plan aimed at ensuring they are eligible to renew at the end of that year. Note: The conditional approval status must be discussed with the field consultation manager and a planned approach developed for the action plan process.
   b. The employer will be asked to voluntarily withdraw from SHARP.

2. If the site is eligible for renewal, the site will be presented with a SHARP graduate plaque and flag.

3. Graduation occurs during the scheduled month of renewal.

B. Approximately 3 years after graduation, “graduates” of the SHARP program will lose their SHARP exemption from scheduled Oregon OSHA inspections.

C. Companies that have graduated from SHARP will remain eligible to be full members of the Oregon SHARP Alliance.
D. Initially, the role of the Oregon OSHA consultant is that of an expert consultant who takes a leadership role in guiding the prospective SHARP company through the initial consultative process. This leadership role will continue as the company attains their first year SHARP approval.

1. By the first year SHARP evaluation, the consultant should begin to transition from the role of an expert and leader in the process to the role of a coach and mentor to helping the SHARP employer understand how and why to use the safety and health assessment form as an ongoing evaluation tool. As a coach and mentor, the consultant helps the SHARP employer to understand how and why to properly apply the rating system, to analyze and evaluate injury and illness trends, to identify and locate resources available to them, and to conduct their own evaluation.

2. This transition will gradually occur over the period of participation, with the SHARP company taking on more and more responsibility for the evaluation while the consultant teaches and coaches, so that by the final evaluation, the SHARP employer will take the leadership role in the process with the consultant as a resource. When this transition is complete, the SHARP employer has truly become self-sufficient and is no longer dependent upon the consultant for a comprehensive annual evaluation of their safety and health program.

X. SHARP Graduation Assessment

To graduate from SHARP, 4th year SHARP employers apply for renewal during the last quarter of the approval year by contacting the local field consultation manager (or their designee) and scheduling the evaluation. If contact has not been made by the final SHARP evaluation date, a letter will be sent informing the SHARP employer that they must schedule a renewal evaluation within 30 days or they will be terminated from SHARP.

A. For SHARP graduation (fifth- and final-year) evaluations, the consultant will continue to coach the SHARP employer to take an active role in the evaluation process.

B. The lead consultant and the SHARP employer will conduct an in-depth evaluation to ensure the Safety and Health Program is being effectively maintained and continuously improved. They will evaluate three (3) to five (5) years of injury and illness data including trends, injury types and severity. Those employers with incidence rates above their industry average must be evaluated on a case-by-case basis. In addition to reviewing injury and illness rates, the consultant and the SHARP employer representatives will:

1. Conduct a hazard assessment of the facility to verify that workplace hazards at the site remain under control.

2. Review accident and incident investigation reports and 801 forms from the current and previous year and compare them to any trends noted from the evaluation of OSHA 200 / 300 Logs.

3. Assess all 58 elements of the employer’s safety and health management program.

4. Evaluate the level and effectiveness of employee involvement in the site’s safety and health programs.

5. Review and evaluate the detail in and the progress on the site’s action plans for both the previous and the upcoming years.

6. Assess the site’s continuous improvement and their movement toward self-sufficiency.
7. Assess the effectiveness of the safety committee.
8. Review the site’s written safety programs for effectiveness.

C. The consultant should discuss with the employer the importance of continuing the annual self-assessment process as part of their ongoing quest for continuous improvement.

XI. SHARP Graduation Recommendation

Prior to the consultant recommending an employer for graduation from the SHARP program, the SHARP file must be updated. The SHARP file will include an updated executive summary, any new report(s), and the most recent assessment form appended to the initial SHARP file. Other updated information may be included where applicable.

A. Final SHARP File.

Prior to a graduation recommendation, the consultant and the employer must compile a SHARP file documenting the consultative process. The following items are required in the SHARP file:

1. Executive Summary.

A completed SHARP Packet Executive Summary sheet must be in the SHARP file. The Executive Summary will include:

a. Company Description: A description of the company including size, type of business, operations, organizational structure, facilities and type of equipment. Comments on interactions with Oregon OSHA during the previous years and recent history including mergers, growth or downsizing should be included. This section should also contain significant information about the workforce (turnover, pace of work, mobile employees, permanent or temporary, demographic information, training levels, etc.).

b. Synopsis of the SHARP Process: A description of the SHARP process with this company, when it started, who was involved, what was accomplished. (reference report numbers and dates of visits to create a clear picture of what the SHARP process entailed. Description should be in chronological order.) Summarize the progress made by the company in terms of improvements made in the safety and health management system. Summarize the impact the SHARP process has had on the workplace culture.

c. Claims Data: DART data for the most recent 5 (five) completed years. Describe any anomalies or trends noted in claims data and discuss accident investigation procedures. If the rates are above the state average, the recommendation for SHARP graduation must be clearly justified.

d. Safety and Health Program Assessments: Describe the findings noted in the SHARP assessments of the company’s safety and health management systems. Note areas of program improvement related to the SHARP process, as well as program strengths and weaknesses.

e. Action Plans: Reference or describe the results of last year’s Action Plan. Include any action items not completed. Describe action plans developed for the coming year. Note relationships to current assessment, as well as time lines, and responsibilities.
f. Consultant(s) Recommendation: Include a statement verifying serious hazards were abated (or effective abatement plans with interim protection in place, including completion dates) and list the reason(s) why consultant(s) recommend this company be approved as a SHARP graduate.

2. Reports/Verification.

Include copies of available consultation reports generated during the SHARP process and verification that all hazards have been abated, or that action plans are in place to address the long term hazard abatement of complex items.


Additional supporting or explanatory documents may be included, as necessary or desired, which illustrate the level of excellence of the employers safety and health programs.

B. SHARP Graduation Awards.

When the consultant has verified that the employer has met all of the requirements for SHARP approval and the SHARP file is complete, it must be submitted to the local Field Consultation Manager for review.

1. The field consultation manager will verify that the SHARP file is complete and that the employer has met all of the requirements for SHARP approval before forwarding the SHARP Executive Summary with the approval recommendation to the consultation manager or their designee.

2. Upon receipt of the SHARP Executive Summary, the consultation manager or their designee will review and may approve SHARP graduation for the employer.

3. The SHARP graduation plaque and flag will normally be awarded to the employer during a graduation award ceremony.
   a. A member of the Oregon OSHA management team will normally award the SHARP graduation plaque and flag to the employer. The award ceremony will be scheduled at a time that is convenient to both the company and the Oregon OSHA management representative.
   b. The consultant or SHARP program manager will notify Oregon OSHA’s public information officer (or a designee as identified in Oregon OSHA SOP-21) about the employer’s reaching SHARP graduate status, and make arrangements for a news release and other communications or public relations products to be written and distributed. Notification should occur four weeks prior to any scheduled "graduation ceremony," to allow time for the PIO to gather information, produce materials, and schedule resources to photograph an award ceremony.

XII. SHARP Partnerships

The SHARP program was designed for employers with 250 employees or less. Oregon OSHA has developed a SHARP Partnership process to enable larger employers, multi-site employers and certain companies that provide a service to their clients the opportunity to attain SHARP status.
Appendix M – SHARP Program Details

A. The SHARP Partnership process requires the multi-site partner company to commit additional up-front resources to the SHARP process so that Oregon OSHA Consultation can assist them without over committing Oregon OSHA resources. The multi-site partner company will choose an internal SHARP team that will receive specific training to improve their ability to assess their own sites.

B. In these SHARP Partnerships, Oregon OSHA and multi-site or service provider companies recognize that by working together more of their worksites or client sites can achieve SHARP recognition. And, through effective safety and health programs more workers will be protected.

   1. Partner companies and Oregon OSHA mutually recognize the importance of providing a safe and healthful work environment. To advance our mutual goal, we agree on the need to develop partnerships that foster mutual trust and respect for the respective roles of each organization in the occupational safety and health processes. We recognize the responsibilities inherent in these roles. We are committed to working as partners to achieve occupational workplace safety and health through shared strategies and objectives.

   2. The goal of the partnership is to decrease injuries, illnesses, fatalities, lower workers’ compensation costs, and maximize Oregon OSHA and multi-site partner company resources.

   3. These partnership agreements will not in any way affect employees’ rights under the Oregon Safe Employment Act and Oregon OSHA regulations.

C. Types of SHARP Partnerships

   1. Multi-Site SHARP Partnership agreements (for employers with more than two physical locations).

   2. Large Employer SHARP Partnership agreements (negotiable with employers who have between 251 and 500 employees, required for employers with more than 500 employees at a single location).

   2. Service Provider SHARP Partnership Agreements (for those companies who provide safety and health related services to multiple clients).

   4. Leasing/Temporary Agency Demonstration Partnerships (for certain leasing agencies or temporary agencies who are committed to improving the workplace safety and health conditions where their leased or temporary employees work).

XIII. SHARP Partnership Process

In the SHARP Partnership agreements the partner company will choose one site (representative of their major processes) to go through the SHARP process, including an initial assessment, action planning, and a final assessment by Oregon OSHA Consultation. Note: In some cases, this one site may have gone through the SHARP process prior to the partnership agreement. In other cases, a new site may be chosen.

A. The partner company will designate personnel to be on their “Internal SHARP Team.” Some members of the team will be given the opportunity to accompany Oregon OSHA consultants as they evaluate the chosen worksite.
1. Oregon OSHA will provide training to the multi-site partner company’s chosen Internal SHARP Team and provide them with the knowledge and tools necessary to evaluate a safety and health management system using the Safety and Health Program Assessment Form. This will enable the Internal SHARP Team to evaluate the individual worksites of the multi-site company and help them improve their safety and health management systems to a level required to achieve SHARP.

2. Members of the Internal SHARP Team will work together with their management team to evaluate the safety and health management systems of individual partner sites using the Oregon OSHA assessment tool.

B. When the multi-site partner company’s Internal SHARP Team has evaluated one of their sites and determined that they are qualified for SHARP, they will notify Oregon OSHA Consultation via the SHARP commitment letter that they are ready for a SHARP consultation.

1. Prior to the consultation, consultants working with SHARP partnership sites will familiarize themselves with the written multi-site partnership/collaboration agreement, familiarize themselves with the nature of work and applicable rules covering the site, and have a discussion with the field consultation manager prior to opening with the site. The consultant will hold a pre-consultation meeting with the applicable members of the Internal SHARP Team to discuss and review the work done with the site leading up to the recommendation. The consultant will then conduct the comprehensive consultation with members of the internal team, including them in the site inspection, safety and health program review, and employee interviews.

2. If the partner worksite’s safety and health program qualifies, the consultant will initiate the SHARP approval process.

3. If the partner worksite’s safety and health program does not qualify, the site will be encouraged to develop an action plan to improve the deficiencies.

C. SHARP Partnerships will be re-evaluated every two to three years to determine effectiveness and re-initiation.

XIV. Service Provider and Leasing/Temporary Agency Demonstration Partnerships

SHARP Partnerships may be negotiated with companies who provide safety and health related services to clients or companies that provide leased or temporary employers to their clients, and take an active role in helping client sites improve workplace safety and health conditions. These partnerships are intended to enable the service provider to provide their clients with effective tools to help them better manage their safety and health programs.

A. Because SHARP employers are expected to promote effective safety and health program management and to be models for other employers, leasing/temporary agencies wishing to achieve SHARP will be held to a higher standard than that defined in Program Directive A-246, Worker Inspection Criteria: Temporary Service Providers and Leasing Companies, if they wish to pursue recognition as an Oregon SHARP employer.

B. The leasing/temporary agencies working toward SHARP are expected to go above and beyond simple compliance. They are expected to assist the host employer wherever possible to ensure adequate protection for all SHARP agency temporary or leased employees is provided. Adequate protection must include the following:
Appendix M – SHARP Program Details

1. Hazard control
2. Site specific training
3. Personal protective equipment
4. Safety committee representation
5. Accident reporting
6. Record keeping
7. Accident and incident investigation

C. SHARP leasing/temporary agencies are expected to establish partnerships with their clients (the host employer) for the express purpose of assuring a safe place of employment is provided for agency personnel.

D. In those cases where the host employer refuses to control hazards or provide protection, a SHARP leasing/temporary agency would be expected to refuse to provide leased or temporary employees.
Appendix M – SHARP Program Details

Oregon OSHA
SHARP
Safety and Health Achievement Recognition Program

What is SHARP?
SHARP is a recognition program. It provides an incentive for Oregon employers to work with their employees to find and correct hazards, to develop and implement effective Safety and Health Programs, to continuously improve, and to become self-sufficient in managing occupational safety and health.

SHARP is a program of the Oregon Occupational Safety and Health Division (Oregon OSHA), Consultation Section.

SHARP Process
SHARP was designed as a process to help identify the strengths and weaknesses of an employer’s occupational safety and health management system. The process starts with a comprehensive consultation including an initial assessment, followed by a report with recommendations. The process includes one or more action plan meetings between the employer and consultant(s) to identify and begin implementation of objectives designed to meet the goal of achieving SHARP certification.

Program Requirements
Oregon employers who have been in business for more than one year are eligible to apply for SHARP regardless of size or type of business. Prior to the SHARP process, employers agree in writing to the basic principles of SHARP. That agreement includes, but is not limited to:

- a comprehensive consultation of the site;
- involving employees in the safety and health program;
- correcting hazards, improving the site safety and health management system;
- informing Consultation prior to making changes that might affect safety or health; and
- notifying Consultation when all elements of SHARP are implemented so a follow-up visit can take place.

Employee Participation
SHARP employers must be committed to developing and implementing a written Safety and Health Program that involves employees in significant ways to affect employee safety and health.

SHARP Approval
SHARP candidates must have a Days Away, Restricted, and or Transfer (DART) rate that is below the State industry average for their North American Industry Classification System (NAICS) number.

When consultation has verified that all the SHARP requirements are met, the company can be recommended for approval. SHARP approval is granted in 12 month increments. To continue in SHARP, employers must apply for renewal during the last quarter of the approval year. Oregon employers are eligible to graduate from SHARP after five years of participation in the program.

Inspection Exemption
An employer who has been approved as SHARP for the second and subsequent years can be deferred from scheduled Oregon OSHA inspections. Inspection deferral is an acknowledgment by the agency that enforcement resources would be better used at worksites where the level of accident prevention may need improvement.

For more information, call:
Oregon OSHA Central Office .... 1-800-922-2689
Portland Field Office ............... (503) 229-6193
Salem Field Office ................... (503) 373-7819
Eugene Field Office ................. (541) 686-7913
Medford Field Office ............... (541) 776-6016
Bend Field Office ................. (541) 388-6068
Our website .......................... osha.oregon.gov

Several Oregon SHARP companies have formed the SHARP Alliance to help promote worksite safety and health. Visit their website at http://sharpalliance.weebly.com/
Appendix N – Oregon OSHA Challenge Program

I. Program Overview

Oregon OSHA Challenge is a program that provides employers the opportunity to work closely with Oregon OSHA Consultation to develop or improve their safety and health management program. Challenge participants, through a series of consultations over the course of one year, will work with Oregon OSHA Consultation to find and correct hazards, develop and implement effective safety and health systems and progress toward becoming self-reliant in managing their workplace safety and health. Employers will be provided a one year deferral from scheduled Oregon OSHA enforcement inspections while they are working with consultation during their Challenge year. The overall goal of the Challenge Program is to:

1. Reduce workplace injuries and illnesses.
2. Help employers to become self-reliant in safety and health management.
3. Provide a means to confirm that hazards have been abated.

A. Participation in the Oregon OSHA Challenge program does not diminish existing employer and employee rights and responsibilities under the Oregon Safe Employment Act. Guidance in this document is intended for consultative staff to use with employers who have requested to become candidates for the Challenge Program.

B. Program Eligibility. The employer must agree to correct all hazards identified during the consultation to be eligible to participate in Oregon OSHA Challenge. Initially, employers will be selected from the Assigned Risk Pool as a pilot project.

1. Challenge participation will be limited to employers with a statewide employment of 100 employees or less.
2. The employer must not be under enforcement (as described in the field guide).
3. No SHARP or VPP sites.
4. An employer can only take advantage of this service once every 5 years.

II. Challenge Process

Cold calls will be made to select employers on the Assigned Risk Pool list to explain the Oregon OSHA Challenge. If the employer is interested, an intake will be generated. Challenge consultations will generally require both Safety and Health intakes. An ergonomic intake may also be required based on the nature of the industry of the employer’s claims history. A letter of commitment explaining the terms of the Challenge Program will be sent to the employer for their signature. No Challenge consultation activity will be initiated until the signed commitment letter is returned.

A. Conduct of a Visit. In the opening meeting the consultant will review the Challenge program requirements with the employer to ensure the employer understands the commitment necessary to pursue Oregon-OSHA Challenge.

1. Comprehensive Consultation. A comprehensive consultation of the employer’s establishment will be conducted covering all operations, including a complete Safety and Health Program review and injury analysis. All hazards identified will be discussed in light of how the elements of an effective Safety and Health System will address their continued correction and control.
2. For companies with mobile worksites that are in the Oregon OSHA Challenge program, the consultant shall evaluate all mobile worksites during the comprehensive consultation process to determine the effectiveness of the company-wide Safety and Health System. Mobile sites outside the consultant’s assigned area may be conducted by a local consultant.

3. During the closing conference, the consultant will:
   a. Describe the hazards identified during the consultation and the safety and health management elements that would have prevented the hazard from occurring.
   b. Discuss methods of correction and time frames for correction of hazards identified. Time frames and abatement dates will vary depending on site circumstances. For imminent danger hazards that cannot be corrected immediately, effective interim protective measures must be identified and implemented.
   c. Develop a schedule for one or more follow-up visits to verify abatement and provide further assistance or training. During the Challenge process the consultant will remain available for contact with the employer to help the Challenge applicant move forward. The employer’s worker’s comp carrier could also be included in the Challenge process.
   d. Discuss any need for referrals to other section staff for hazards beyond the expertise of the consultant.
   e. Advise the employer that a written report explaining the findings of the visit and confirming any abatement methods and correction periods will be provided. The employer must respond by filling out an attachment describing how identified hazards were corrected and what steps or measures were initiated to prevent reoccurrence.
   f. Advise the employer that the Challenge enforcement deferral begins when they receive their report and expires in one year. The deferral will be terminated if the employer fails to correct all hazards and/or fails to maintain their Challenge commitment.

III. Report

Challenge reports will be completed in ORCA to allow for and track abatement verification. The report must:
   A. Identify the employer representatives dealt with on the consultation.
   B. Describe the site and the processes evaluated.
   C. Describe how the company is meeting the 7 elements of an effective safety and health system.
   D. Include the DART rate.
   E. Include a section describing the serious and/or other than serious items identified with the associated rule and recommendations for correction. Recommendations for correction must include steps or measures to prevent reoccurrence.
   F. Include an attachment for the employer to return that verifies the correction date and describes the corrective measure taken.
Appendix N – Oregon OSHA Challenge Program

IV. Scheduled Inspection Deferral

An employer who is participating in the Oregon OSHA Challenge program will receive a deferral from scheduled Oregon OSHA inspections for one year. For multi employer work sites, the inspection deferral is for the Challenge employer at that site, not the site itself. The inspection deferral is awarded as an acknowledgment by the agency that enforcement resources would be better used at worksites where employees may be at higher risk of injury and/or illnesses.

A. The consultation manager will notify the manager of enforcement of the Challenge participant, who will defer the establishment from the scheduled inspection lists.

1. The scheduled inspection deferral will be limited to one year.

B. Oregon OSHA will continue to conduct compliance inspections in the following categories: Imminent Danger, Fatality/Catastrophe, Serious Accidents, and Complaints/Referrals. Challenge companies must continue to abide by OAR 437-001-0700, Recordkeeping and Reporting.

C. Consultation activity shall not take place at a site where any compliance inspection is in progress as outlined in the Field Guide. The employer’s continued participation in the Challenge Program will be handled on a case by case basis when there is a citation for serious violations.

V. Employer Process Change

The employer is expected to inform the local field consultation manager prior to making any changes in working conditions or work processes that might introduce new hazards into the workplace. “Changes” mean relocation of facilities, change of ownership or major organizational changes, additions to buildings, new processes, new lines of machinery, etc. “Changes” do not include process changes at construction or other mobile sites.

VI. Failure To Meet Or Maintain Requirements

An employer’s Challenge participation and/or inspection deferral will be terminated if the consultation manager determines the employer failed to meet or maintain Challenge requirements. The standard enforcement deferral will still be in effect if applicable. The employer could apply again for the Challenge Program in one year.

VII. Program Evaluation

The Oregon OSHA challenge program will be evaluated at least on a yearly basis to determine its effectiveness.
Oregon OSHA Challenge Program

Commitment Letter

The management and employees of _______________________ would like to formally declare our commitment to work with Oregon OSHA Consultation as a participant in the Oregon OSHA Challenge Program. The Challenge Program was explained to us by ____________________ on _______________.

By signing this letter we agree to:

1. Participate in comprehensive consultations of all conditions and operations at our work site(s), including a complete safety and health system review.

2. Involve employees in the development, operation and improvement of all elements of our safety and health program.

3. Work diligently to accomplish the following:
   a. Correct all identified safety and health hazards and provide Oregon OSHA Consultation with written confirmation that each identified hazard has been corrected within an agreed upon time frame.
   b. Develop, implement or improve all elements of an effective safety and health management system.

4. Inform Oregon OSHA consultation prior to making any changes in working conditions or work processes that might introduce new hazards into the workplace.

5. Inform Oregon OSHA consultation in the event of an Oregon OSHA enforcement inspection or accident investigation.

The signatures below represent the commitment of the management and employees of _______________________ to use Oregon OSHA Challenge Program to improve our safety and health management systems.

______________________________   ______________________________
Name                       Name
Title                      Title

______________________________ ______________________________
Name                       Name
Safety Administrator       Safety Manager

Primary Contact Person:
Name
541/xxx-xxxx- Office
541/xxx-xxxx- Cell
Appendix O – CCB Continuing Education Credits

I. Overview

The Construction Contractors Board will accept Oregon OSHA consultations as continuing education credits for construction contractors seeking to maintain their CCB license. Contractors who receive a specific consultation will receive 3 hours of credit and those who receive a comprehensive consultation will receive 5 hours of credit. Contractors who successfully complete the Challenge Program will satisfy all their CCB requirements. In order to receive their continuing education credits, the contractor must correct all hazards identified during the consultation. Contractors can earn CCB continuing education credits for one consultation a license period. A license period is 2 years. Here is the link to the CCB web site: http://www.oregon.gov/CCB/education/Pages/CE/safetyconsultations.aspx

Once we are satisfied all the hazards identified during the consultation are corrected, Oregon OSHA Consultation will provide to the contractor a letter of substantial compliance. It is up to the contractor to provide the letter to the CCB in order to receive their credits. The CCB will accept the letter of substantial compliance as proof that all the hazards identified during the consultation have been corrected.

II. Process

1. During the opening conference, explain the CCB continuing education credit program. During the consultation and at the closing conference make sure the correction date and abatement proof is established and agreed upon for those items that were not corrected during the consultation. The established abatement proof is what we must receive from the contractor, by the date agreed upon, before we can issue the letter of substantial compliance.

2. Abatement proof can take on many forms. For some consultations a written statement sent electronically will suffice, for others additional information such as pictures or receipts may be needed. In some cases there may be a need for a follow-up consultation. Be sure the contractor knows what is required.

3. The correction date should generally be no longer than 30 days from the date the contractor receives the report. The contractor should be encouraged to preclude exposure to serious hazards and correct those as soon as possible. Imminent danger situations will be addressed as described in the opening conference and Consultation Field Guide. Other than serious hazards need to be corrected in 30 days. A longer correction time can be entertained by the consultant and may be established after consulting with their manager. The letter of substantial compliance will not be provided after the established correction date.

4. When the consultant receives the abatement proof they will review it with their manager. Once the consultant and manager are satisfied that the hazards identified on the consultation have been corrected, the administrative specialist will then send the letter of substantial compliance to the contractor. The contractor must send the letter of substantial compliance to the CCB to obtain their CEU’s.
5. The consultant can keep track of the CCB/CEU consultations by checking the abatement required box in ORCA. The consultant may contact the contractor if they feel there is a need to remind the contractor of the approaching correction date. It is up to the contractor to send in the correction proof.

6. Situations not addressed by this Field Guide will be handled on a case-by-case bases by the consultant and their manager.