FEDERAL EMPLOYEE OCCUPATIONAL SAFETY AND HEALTH (FEOSH) PROGRAM OVERVIEW

BACKGROUND

Congress established Public Law 91-596, The Occupational Safety and Health Act of 1970 (OSH Act) "to ensure so far as possible every working man and woman in the Nation safe and healthful working conditions and to preserve our human resources." Section 19 of the OSH Act contains broad responsibilities and requirements for Federal agency safety and health programs to ensure safe and healthful working conditions for Federal employees.

Executive Order 12196, Occupational Safety and Health Programs for Federal Employees, contains, among other items, additional responsibilities for the heads of Federal agencies and a requirement for the Secretary of Labor to issue basic program elements for Federal agency safety and health programs in conformance with the OSH Act.

The basic program elements mandated by the President in Executive Order 12196 are issued in the Department of Labor's (DOL) implementing regulations in 29 CFR Part 1960. This OSHA standard establishes and communicates the requirements under which Federal agencies, including the DOE, must develop and implement their FEOSH program.

Some of the principal provisions of 29 CFR Part 1960 is summarized below.

29 CFR Part 1960 Basic Elements

- Federal Agency Responsibilities
  - Designate officials with sufficient authority and responsibility to effectively support the agency head in the management and administration of the agency's FEOSH program. The Chief, Office of Health, Safety and Security (HSS), is the
  - Designated Agency Safety and Health Official (DASHO) for DOE.
  - Ensure adequate financial, personnel, equipment, materials, and other resources to effectively implement and administer the agency's FEOSH program.
  - Furnish employees with employment places and conditions that are free from recognized hazards which cause or are likely to cause death or serious physical harm.
  - Comply with applicable OSHA Standards promulgated under Section 6 of the OSH Act (e.g., 29 CFR Part 1910 and 1926), or with alternate safety and health standards issued pursuant to 29 CFR Part 1960.17.

- Develop and adopt supplementary necessary and appropriate standards for application to agency employees' working conditions for which OSHA has not promulgated an appropriate standard.
- Develop, implement, and evaluate a FEOSH program in accordance with Section 19 of the OSH Act, Executive Order 12196, and 29 CFR Part 1960.
- Acquire, maintain, and require the use of approved personal protective equipment (PPE), approved safety equipment, and other devices necessary to protect employees.
- Ensure that performance evaluation of management officials and supervisory employees measures performance in meeting the requirements of the agency's FEOSH program.
- Disseminate occupational safety and health (OSH) program information to employees and employee representatives.
- Utilize personnel with equipment and competence to recognize hazards.
- Inspect at least annually all workplaces with participation by employees' representatives.
- Set up procedures for responding to employee reports of unsafe or unhealthful working conditions.
- Investigate and report on workplace accidents.
- Post notices of unsafe or unhealthful working conditions found during inspections.
- Ensure prompt abatement of hazardous conditions. Employees exposed to such conditions shall be so informed. Imminent danger corrections must be made immediately.
- Establish procedures that ensure employees are not subject to restraint, interference, coercion, discrimination, or reprisal for exercising his/her rights under the agency's FEOSH program.
- Conduct OSH training programs for top management, supervisors, safety and health personnel, employees, and employee representatives.
- Set up a management information system to keep records of occupational accidents, injuries, illnesses, and their causes; post annual summaries of injuries and illnesses; identify adverse trends; and make corrective actions as necessary.
- Develop and implement a program of self-evaluations to determine the effectiveness of the agency's FEOSH program.

▪ Employee Responsibilities

- Comply with all OSH standards, rules, regulations, and Orders issued by the agency.
- Use safety equipment, PPE, and other devices and procedures provided or directed by the agency.

▪ Employee Rights

- Employees shall be authorized official time to participate in the activities provided in Section 19 of the OSH Act, Executive Order 12196, 29 CFR Part 1960, and the agency's FEOSH program.

- Access agency safety and health information, including data on hazardous substances in agency workplaces.
- Comment on proposed agency standards that differ from OSHA standards.
- Report unsafe or unhealthful working conditions to the appropriate officials.

DOE Order 440.1B, Worker Protection Management for DOE Federal and Contractor Employees, contains the required components to be utilized by DOE Elements in the development, implementation, and management of site-specific DOE Federal employee worker protection programs consistent with the requirements for FEOSH programs in 29 CFR Part 1960.

FEOSH PROGRAM ELEMENTS

Additionally, elements of the DOE FEOSH Program must include the elements of a sound Integrated Safety Management System (ISMS). These ISMS program elements are the cornerstone of the DOE safety management philosophy.

The DOE Integrated Safety Management System information may be found at:

http://www.hss.energy.gov/healthsafety/ism/

An effective FEOSH program defines the program structure and organization, assigns responsibilities for implementation, promotes self assessment and program evaluation, to ensure performance, and defines the integration of these elements to provide comprehensive safety and health protection for all employees.

All FEOSH program management components (i.e., organization, training, inspections, self-assessments, hazard abatement, accident investigations, etc.) should be built around these ISM elements. These “building blocks for excellence” represent the larger perspective of FEOSH program design and implementation.

Written Program

DOE Order 440.1B requires that DOE Elements implement a written worker protection program that (1) provides a place of employment free from recognized hazards which are causing or likely to cause death or serious physical harm to their employees and (2) integrates all DOE Orders and 29 CFR Part 1960 requirements.

A written program is essential to establish, implement, manage, and support overall worker protection efforts. It organizes and describes how worker protection efforts are formally instituted at DOE sites. A written worker protection program implements DOE Order 440.1B at the site level. It necessarily and appropriately should be tailored to the present site activities and hazards while remaining consistent with the Order's requirements and intent. The degree of program detail and complexity will vary among DOE Elements based on the scope of work activities and their hazards.

For example, elements comprised of administrative office functions and small to moderate staffs will require relatively simple written programs, with few detailed technical components and functional area requirements. DOE Elements comprised of research, industrial, or construction related activities will require substantially more detailed written programs, likely containing a number of technical components and functional area requirements.

Note that program documentation by itself does not constitute a comprehensive worker protection program and may simply commit to writing policies, procedures, and approaches that are already in place.

It is the conscientious application of the written workplace worker protection program, based on management commitment and employee involvement, workplace analysis, hazard prevention and control, and safety and health training that result in excellent worker protection performance.

An example written program that you may use as a model may be found at the URL:

http://www.hss.energy.gov/csa/csp/feosh/resource/feoshplan.pdf

Standards

29 CFR Part 1960 requires DOE Elements to comply with applicable OSHA standards (i.e., OSH standards issued under Section 6 of the OSH Act). In addition, DOE Order 440.1A requires compliance with the following worker protection requirements:

(1) American Conference of Governmental Industrial Hygienists (ACGIH), "Threshold Limit Values for Chemical Substances and Physical Agents and Biological Exposure Indices" (most recent edition), when ACGIH Threshold Limit Values are lower (more protective) than OSHA Permissible Exposure Limits

(2) American National Standards Institute Z136.1, Safe Use of Lasers

(3) American National Standards Institute Z88.2, Practices for Respiratory Protection

Because excellence in worker protection is part of DOE's ES&H Policy, compliance with OSHA standards should be viewed as the minimum set of standards for worker protection programs. In many cases, following additional requirements that are not found in OSHA standards will be essential to achieve worker protection. This will require the application of appropriate consensus or industry standards or locally developed standards.

Requirements

The following additional worker protection program requirements are established in DOE Order 440.1B and must be integrated into the written program described above:

- Establish written policy, goals, and objectives for the worker protection program.
- Use qualified worker protection staff to direct and manage the worker protection program.
- Assign worker protection responsibilities, evaluate personnel performance, and hold personnel accountable for worker protection performance.
- Encourage the involvement of employees in developing program goals, objectives, and performance measures, as well as identifying and controlling workplace hazards.
- Provide workers the right, without reprisal, to:
  - (1) Accompany DOE worker protection personnel during workplace inspections.
  - (2) Participate in Order-specified activities on official time.
  - (3) Express worker protection concerns.
  - (4) Decline to perform an assigned task because of a reasonable belief that, under the circumstances, the task poses an imminent risk of death or serious bodily harm to an individual, coupled with a reasonable belief that there is insufficient time to seek effective redress through the normal hazard reporting and abatement procedures established in accordance with this Order.
  - (5) Access DOE worker protection publications, DOE-prescribed standards, and the organization's own worker protection standards or procedures applicable to the workplace.
  - (6) Observe monitoring or measuring of hazardous agents and access the exposure-monitoring results.
  - (7) Receive notification when monitoring results indicate they were overexposed to hazardous materials.
  - (8) Receive inspection and accident investigation results upon request.
- Implement procedures to allow workers, through their supervisors, to stop work when they discover employee exposures to imminent danger conditions or other serious hazards. The procedure shall ensure that any stop-work authority is exercised in a justifiable and responsible manner.

- Appropriately inform workers of their rights and responsibilities, including posting the applicable DOE Worker Protection Poster where it is accessible to all workers.
- Identify existing and potential workplace hazards and evaluate the risk of associated worker injuries or illnesses.
- Implement a hazard prevention/abatement process to ensure that all identified hazards are managed through final abatement or control.
- Provide workers, supervisors, managers, visitors, and worker protection professionals with worker protection training.

FUNCTIONAL AREA REQUIREMENTS

Requirements for specific functional areas, including Construction Safety, Fire Protection, Firearms Safety, Explosives Safety, Industrial Hygiene, Pressure Safety, and Motor Vehicle Safety, are contained in DOE Order 440.1B.

In addition, DOE Order 440.1B delineates worker protection program responsibilities and provides contacts for additional information regarding the Order.

SOURCE DOCUMENTS

DOE Order 440.1B: http://www.directives.doe.gov/pdfs/doe/doetext/neword/440/o4401b.pdf

OSHA 29 CFR 1960: http://www.hss.energy.gov/csa/csp/feosh/part1960.pdf

PL 91-596 OSHA Act 1970:
http://www.osha.gov/pls/oshaweb/owasrch.search_form?p_doc_type=OSHACT&p_toc_level=0

Executive Order 12196: http://www.hss.energy.gov/csa/csp/feosh/resource/eo12196.htm

10CFR Part 850: Chronic Beryllium Disease Prevention Program; Final Rule

10 CFR 835 Rule: Occupational Radiation Protection

Internet Resources

Many of the resources and background materials needed by safety and health professionals and others involved with the FEOSH program are available electronically via the Internet and the World Wide Web. These include various DOE Orders and policies, the Federal Register, OSHA regulations and interpretations, and other guidance.

The following URL takes you to some of the more popular web sites for safety and health professionals. DOE FEOSH Web Site: http://www.hss.energy.gov/csa/csp/feosh

View the DOE FEOSH Program information brochure at:
http://www.hss.energy.gov/CSA/CSP/feosh/resource/FEOSHbrochure_2008.pdf

TECHNICAL ASSISTANCE

For assistance with your program contact:

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FEOSH COMMITTEES

COMMITTEE ORGANIZATION

Guidance, information, and suggested procedures for operating safety and health committees at DOE operations are addressed in this Chapter. It also addresses Federal Safety and Health Field Councils.

Field or establishment-level safety and health committees effectively assist management with improving policy, working conditions, and practices. Committees can facilitate management and employee participation and program "buy-in."

Charter

Committee members, who establish goals, objectives, purpose, and membership expectations, should develop the charter. The charter should be revisited annually, before new members are appointed.

Membership

The membership ratio should have equal numbers of management representatives and employees. Members are full voting associates.

Management representatives should be appointed in writing by the facility manager. They should represent a cross-section of managerial positions and have labor or operational functions. Safety and health manager(s) should be excluded.

Employee and management representatives should be equal in the membership. If employees are represented by a union, the bargaining representative should recommend the membership. If employees are not represented by a bargaining unit, membership should be determined by other methods that will provide effective employee representation.

Employee input should be solicited on how to select members, or members may be appointed. An election should not be held because it may violate the National Labor Relations Act.

Employee membership may be rotated through the organization. Each major organizational unit should be represented. Using volunteers is another approach that may work well, depending on program maturity.

Membership terms are normally 2-year terms. However, when the committee is first formed, certain memberships should be designated as 1-year terms to ensure membership stability when 2-year terms rotate.

A chairperson may be elected by the membership and/or rotated between management and employee representatives. Another option is senior management (e.g., manager, deputy manager) may chair the committee, providing visible top management program support.

Technical advisors (nonvoting) or committee consultants should be safety and health professionals. Meeting notification should be made to members, advisors, and general staff. Interested individuals should be encouraged to attend. Committee meetings are conducted in an open forum.

Meeting minutes document committee proceedings. They should be reviewed and concurred on membership and signed by the committee chairperson. Approved minutes should be made available to the employees by posting or general distribution.

Minutes should include a list of members present, previous minutes approval, guest speakers, old business, new business, and summarized actions.

An action log should be appended to the minutes to track assignment of responsibilities for corrective actions, progress made, issues, and final closure.

DOL Notification

Committee activities notification to DOL is not required. However, organizations may want to report their activities in the annual report to DOE.

ORGANIZATIONAL RESPONSIBILITIES

Responsibilities may vary broadly based on committee functions as defined in the charter. At a minimum, the following elements are normally included.

Information

The organization should ensure that the committee receives sufficient information relating to safety and health program issues to permit them to effectively function. Technical advisors can play a major role in ensuring that the committee is kept informed.

Information provided should be commensurate with the committee's duties. Information should include the following:

Reports include internal and external inspections or program evaluation reports, accident/incident investigation reports, injury/illness reports, and injury/illness summaries.

Employee Concerns include complaint(s) relating to workplace hazards, as well as program concerns or allegations of reprisal for participating in the program.

Requirements include draft or revised safety and health statutes, regulations, or policies.

Training

Members should be provided training to familiarize them with the basic program requirements. One way to accomplish this is to have the technical advisor(s) present one element of the program as an agenda item at each meeting.

If the committee members take an active role in the programs, such as participating in inspections, investigations, or program evaluation, then additional training will be required in hazard recognition, accident investigation, document review, interview techniques, and report writing.

Training curriculum should be tailored to their need to know. Overview classes are probably more realistic than detailed professional course curriculum.

COMMITTEE DUTIES

Committee duties are generally the responsibility of the voting membership, and safety and health professionals normally serve only as technical advisors. This helps ensure maximum ownership and participation by manager and employee representatives.

Organization Committees

Committee duties should be determined by local policy and the membership. These duties should be documented in a charter. Generic suggestions are offered.

Monitor Program

- Participate in internal supervisor or safety and health inspections at the work site(s).
- Participate in program evaluations conducted by external entities.
- Track corrective actions to ensure appropriateness and timeliness.
- Monitor program effectiveness and make improvement recommendations.
- Review and recommend revisions for existing or developing additional organizational policy.
- Recommend changing the level of effort in terms of program resources.

Investigate

- employees' concerns, complaints, allegations of reprisal, and suggestions and recommend changes to the program as required.
- reported accidents, incidents, and injury/illnesses trends. Emphasize reducing the frequency and severity of injuries and illnesses.
- unsafe condition trends that may lead to severe injury or illness. Root cause identification is key to long-term abatement of problems.

Recommend

- changes to senior management on program policy, management commitment in terms of resources, and employee involvement programs.

Participate

- in safety and health awareness programs.

TECHNICAL ADVISORS

Advisors will normally consist of safety or health professionals and may include others on an as-required basis (e.g., health physicists, industrial hygienists, ergonomists, or engineering specialists).

Advisors are available to provide required technical advice or training to committee members. Advisors should not serve as committee voting members.

ADDITIONAL INFORMATION

An example of the DOE Headquarters FEOSH Steering Committee charter may be found at: http://www.hss.energy.gov/csa/csp/feosh/FEOSHCharter.pdf

Information on safety committees may also be found on the DOL OSHA Federal Agency Program web site at: http://www.osha.gov/dep/fap/index.html

View the DOE FEOSH Program information brochure at: http://www.hss.energy.gov/CSA/CSP/feosh/resource/FEOSHbrochure_2008.pdf

For more information contact:

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MANAGEMENT PARTICIPATION

INVOLVEMENT

This section provides DOE supervisors with information on their roles and responsibilities as they relate to safety and health programs that provide protection to their employees.

One of the greatest tasks faced by any supervisor is seeing that his or her workers perform their activities without accident, injury, or occupational illness. Therefore, supervisory involvement is crucial to the success of the safety and health program.

Ways to Become Involved

The following list describes ways in which the supervisor can become involved in the safety and health program that directly impacts the safety and health of workers.

- Be knowledgeable of DOE's FEOSH program.
- Stay in touch with management's OSH policy.
- Transfer management's philosophy down to the employee level. This can usually be done through safety meetings, workshops, and award programs.
- Hold regular safety and health workshops with employees and management to discuss safety and health concerns that affect employees.
- Use staff or "All-Hands" meetings to discuss current safety and health issues.
- Stay current on regulatory changes that affect operations and notify employees of changes through meetings, workshops, notices, bulletins, and similar forms of communication.
- Interface with local safety and health committees to assist in developing innovative ways to address safety and health concerns in your area.

RESPONSIBILITIES

Employees, who exercise supervisory functions must, to the extent of their authority, provide employees a place of employment, which is free from recognized hazards that are causing or likely to cause death or serious physical harm. They must comply with the OSH standards applicable to their divisions/departments and with all rules, regulations, and orders issued by the agency head with respect to the agency OSH program.

Safe Working Conditions

Each supervisor is responsible for maintaining safe working conditions within his or her area of responsibility and directly implementing the FEOSH program.

Among the supervisor's primary responsibilities are the following:

- Demonstrate management commitment. Participate in and encouraging workers to participate in the FEOSH Program, including effectively managing safety and health resources and personnel.
- Consulting with safety, industrial hygiene, engineering, and medical personnel for aid in fulfilling FEOSH duties.
- Maintaining a safe work environment for employees, including stopping work (if necessary) or providing interim protection for workers while hazards are being abated.
- Instructing employees periodically on precautions, procedures, and practices to be followed to minimize exposure to hazardous conditions or harmful agents.
- Ensuring that appropriate work practices are developed and followed, including good housekeeping practices and rules for work with hazardous materials.
- Furnishing employees with proper PPE, instructing them in its proper use, and enforcing its use.
- Promptly informing the medical provider in case of accidental exposure to harmful agents, and sending the employee(s) involved to the medical provider for examination.
- Observing all work restrictions imposed by the medical provider.
- Administering appropriate disciplinary action when health and safety rules are violated.
- Ensuring that accident, injuries and illness are promptly reported into CAIRS and/or ORPS data systems, that workers compensation cases are filed within 9 days, that employees are properly trained, provided with personal protective equipment and are apprised of the hazards associated with the work they are expected to perform. See the FEOSH Information Sheet on Recordkeeping and Reporting, and visit the CAIRS and ORPS web site at: http://www.hss.energy.gov/reporting_dbs.html
- Periodically review accident, injury, and illness statistics and reports to promote lessons learned and ensure corrective action commitments.
- Periodically conduct management safety walk-arounds, and discuss safety a regular staff meetings.

Employee Concerns

Supervisors should encourage employees to come forward with suggestions and concerns related to the FEOSH Program. The Department of Energy Employee Concerns Program may be found at: http://civilrights.doe.gov/Employee_Concerns/employee_concerns.html

The supervisor should:

- Serve as the primary focus for employee concerns.
- Inform employees that the preferred levels of appeal for employee concerns are; first the immediate supervisor and the FEOSH coordinator, next the Facility Manager, the employee representatives, or the employee concerns program, then the EH-5 FEOSH Manager, last the EH Assistant Secretary, and then OSHA.
- Ensure appropriate responsiveness and feedback to identified hazards and employee concerns.

Hazard Identification and Control

The supervisor should take a lead role in identifying and controlling hazards in the workplace.

To fulfill this responsibility, supervisors should:

- Frequently monitor the workplace to identify actual or potential hazards and conduct periodic safety walk-arounds.
- Ensure compliance with all OSH requirements/rules in respective work area(s).
- Ensure appropriate training and orientation of newly assigned employees.
- Notify FEOSH and employee representative POCs of reported concerns.
- Ensure that appropriate safety equipment is available to employees.
- Possess a general knowledge of industrial hygiene.
- Provide the necessary time for employee participation in FEOSH activities.
- Ensure prompt abatement of OSH hazards and monitor progress.

PERFORMANCE ELEMENTS FOR SUPERVISORS

To provide a supervisor with useful feedback related to his or her performance in safety and health matters, criteria for objective judgment in the form of performance elements should be established. The following elements should be used in developing performance plans and included in the supervisor's annual performance evaluation.

Supervisory Performance Elements

- Maintains awareness of Departmental safety and health policies.
- Is knowledgeable of hazardous and unsafe working conditions.
- Is knowledgeable of emergency evacuation and response procedures.
- Communicates effectively with both management and staff concerning safety and health issues.

- Is knowledgeable of the types of personal protective clothing and equipment that should be used in the work area.
- Is knowledgeable of the use and purpose of workplace tools and equipment.
- Conducts routine workplace inspections/accident investigations.
- Promotes safe workmanship.
- Develops practical strategies for accident/loss prevention.
- Supports the safety program.
- Is cognizant of the cost of accidents (lost time and dollars).

Examples of Supervisor Activities

Performance elements can be used in supervisor and manager performance appraisals to give those individuals valuable feedback.

The following examples show how specific performance elements can be stated to provide an objective evaluation.

Supervisors communicate effectively with employees, management, and safety and health staff concerning safety and health issues by:

- Discussing safety and health issues with management at least weekly.
- Discussing safety and health issues with employees to determine problems/solutions.
- Reporting to employees, management, and safety and health staff concerning safety and health inspections conducted in the workplace.
- Answering employee safety and health concerns/suggestions within one week.
- Clearly and specifically communicating safety and health expectations to employees.
- Discussing safety and health issues with safety and health staff.

Supervisors actively participate in the FEOSH program by:

- Systematically identifying hazards and ensuring that personnel are protected until the hazard is abated.
- Establishing work procedures that include appropriate safety and health controls.
- Budgeting for and providing appropriate PPE.
- Investigating accidents, injuries, and illnesses for causes and implementing accident prevention measures.
- Allowing employees time to participate in safety and health projects or committees.

Managers provide top-level support to the FEOSH program and ensure safe and healthful work environments for all personnel by:

- Maintaining qualified safety and health personnel to manage and direct a viable FEOSH program.
- Planning for and providing funds for program management and addressing identified safety and health issues.
- Actively encouraging workers to work safely.
- Personally walking his/her spaces on a weekly basis for the expressed purpose of safety and health.
- Assisting in the development of the organization's safety and health policy, goals, and objectives.
- Holding managers and supervisors accountable (e.g., through performance evaluations) for providing a safe and healthful workplace.
- Serving on HSS committees and task forces (or other such special assignments).

For more information contact:

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EMPLOYEE INVOLVEMENT, ROLES, AND RESPONSIBILITIES

EMPLOYEE INVOLVEMENT AND EMPOWERMENT

When employees become an integral part of the safety process, meaningful and lasting changes occur. Employees develop a sense of responsibility and pride in the success of the overall program, increasing safety and health awareness which affects not only themselves, but coworkers and workplace visitors as well.

While it is ultimately management's responsibility to ensure worker safety and health, employee involvement is the key to making it work. Line employees have the most to contribute to their own safety by their direct involvement in OSH protection efforts. Line personnel are in immediate contact with hazardous chemicals and hazardous situations.

This worksite hands-on knowledge enables them to participate in hazard identification and problem-solving efforts. This employee involvement is a cornerstone guiding principle of our Integrated Safety Management System (ISMS) philosophy.

The DOE Integrated Safety Management System information may be found at:
http://www.hss.energy.gov/healthsafety/ism/

An effective safety and health program cannot succeed without the active participation of all organizational elements. DOE encourages employee involvement in developing the structure and participating in the operation of safety and health programs.

DIRECT AND INDIRECT COMMUNICATION

Employee involvement may take many forms. Methods used to encourage and sustain this involvement vary from facility to facility. However, two basic elements are necessary to increase the probability of success, unrestricted lines of communication and management action to address employee concerns. Lines of communication may be direct or indirect.

Direct communication means follow:

- standard operating procedures and open-door policy
- open meetings
- committee participation and work teams
- worksite inspections participation, hazard analysis, and control and design
- safety and health procedures development and design
- accident/incident investigations participation
- safety and health training development, review, and presentation
- one-on-one discussions with the immediate supervisor

Means of indirect communication may include safety suggestion boxes or an electronic mail (e-mail) system.

Union/Committee Participation

Employee involvement takes many forms, such as participation in:

- union/management safety and health committees
- specific-function committees
- workplace safety committees
- site inspections
- safety observer roles
- routine hazard analysis assistance
- site safety requirements and standard operating procedures development or revisions
- Training Qualified employees who are trainers or mentors are valuable resources.

EMPLOYEE RIGHTS

All DOE Federal employees are responsible for maintaining safe and healthful working conditions. Outlined below are employees' rights and responsibilities. The DOE FEOSH Poster must be posted in all Federal workspaces in an area where employees might congregate, such as

a lunch room area. View the DOE FEOSH poster at the URL: http://www.hss.energy.gov/csa/csp/feosh/pubs/Feosh-2-22-r.pdf

Workers have the right to:

- Accompany DOE worker protection personnel during workplace inspections.
- Participate in FEOSH activities during official time.
- Express worker protection concerns.
- Decline to perform an assigned task because of a reasonable belief that, under the circumstances, the task poses an imminent risk of death or serious bodily harm to that individual, along with a reasonable belief that there is insufficient time to seek effective redress through the normal hazard reporting and abatement procedures.
- Access DOE worker protection publications, DOE-prescribed standards, and the organization's own worker protection standards or procedures applicable to the workplace.
- Receive notification when monitoring results indicate they were overexposed to hazardous materials.
- Receive results of inspections and accident investigations upon request.
- Have one or more employee representatives participate in briefings and the walk-around phase of oversight inspections.
- Report hazards without fear of reprisal.
- Refuse to work when faced with an imminent danger of death or serious injury.
- File a discrimination complaint if punished for reporting hazards or refusing to work with an imminent danger condition.
- Request information about safety and health hazards in the workplace, precautions that may be taken, and procedures to be followed if the worker is involved in an accident or is exposed to toxic substances.
- Receive appropriate safety equipment and/or PPE, as well as appropriate training in its selection, use, cleaning, and disposal.
- Access relevant exposure and medical records.
- Review (or have an authorized representative review) occupational injuries summary information.
- Receive notification and provide input when an organization applies for a worker protection standard exemption or when an alternative worker protection standard is written.
- Receive notification when a worker protection standard or alternative worker protection standard is approved.

RESPONSIBILITIES

Along with rights come certain responsibilities. To ensure that workers participate in and are protected by FEOSH activities, managers, supervisors, FEOSH POCs, employee representatives, and the workers themselves are responsible for FEOSH program aspects.

FEOSH Program Coordinator/Manager

- Administer FEOSH program for office of responsibility.
- Ensure that required workplace inspections are conducted.
- Investigate and document employee concerns and reports of unsafe/unhealthful working conditions.
- Facilitate prompt abatement of OSH hazards and monitor progress.
- Encourage employee participation and involvement.
- Provide regular feedback to management concerning OSH.
- Ensure recordkeeping.

Managers/Supervisors

- Lead through actions.
- Encourage employee involvement.
- Take immediate and meaningful action to learn about and address employee concerns.
- Encourage employees to speak up.
- Listen to and seriously approach all concerns and suggestions.

Employee Representatives

- Represent designated DOE Federal employees in all safety and health matters.
- Provide information to designated employees concerning their right to a safe and healthful workplace.
- Notify FEOSH POCs of any reported concerns.

Employees

- Learn, understand, and comply with OSHA requirements and DOE safety and health policies at all times.
- Review and ask questions if you do not understand the safety and health educational materials posted/distributed.

- Be proactive, safety-conscious, and individually responsible by keeping yourself and fellow employees free from mishaps.
- Be certain that you completely understand instructions before starting work and avoid "shortcuts" from safe work procedures.
- If any doubt exists about the safety and/or healthfulness of doing a job, stop and get instructions from your supervisor or FEOSH POC before continuing the work.
- Use appropriate safety equipment and PPE in accordance with site procedures and training.
- Offer safety and health suggestions to your coworkers or supervisors whenever you feel they may reduce worker risk.
- Support your supervisors, safety professionals, or other fellow employees in their safety and health program roles.
- Understand your responsibilities for each arising emergency situation.
- Immediately report suspected safety and health hazards and concerns found in the workplace to the supervisor.
- Report to your supervisor any site degradation or personal physical condition that may affect the safe performance of your or coworkers' duties.
- Immediately report suspected workplace safety and health hazards, concerns, and violations to your supervisor (and union representative, if necessary and appropriate).

HAZARD REPORTING SYSTEMS

Employees play a key role in discovering and controlling hazards that may occur or already exist in the workplace. Daily contact and hands-on responsibility give them a unique perspective on work procedures and conditions. A reliable system for employees to report hazardous work conditions should be established to increase the effectiveness of the organization's safety and health program.

Several acceptable employee hazard reporting systems are currently used by DOE and the private sector. More common systems include oral reports to supervisors and union representatives, suggestion programs, maintenance work orders, and written forms providing anonymity. Many sites use a combination of some or all of these systems.

Oral Reports

At all worksites, employee oral reports to supervisors, union representatives, and safety and health POCs are encouraged. If the supervisor is properly trained and understands the scope of his/her responsibility for the workers' safety and health, informal oral reports are a natural occurrence.

For valid concerns, the supervisor has the additional responsibility of correcting the hazard, requesting correction by maintenance, or requesting facility management assistance. Facility managers may, in turn, request help from the FEOSH Program Manager/Coordinator.

Most work sites encourage this type of reporting. Used alone, however, it does not provide comprehensive, long-term hazard correction tracking and trending.

Suggestion Programs

The most frequently used written system is a suggestion program where employees are encouraged to make safety and health suggestions. This approach encourages employees to use their imagination when suggesting safer or more healthful work practices as well as reporting unsafe conditions and acts.

If these programs are being used to report safety and health hazards, management must ensure that collection points are checked several times a day and suggestions are read at the time of collection to ensure that hazards are corrected in a timely manner.

If the suggestion program is used as the sole means of reporting hazards or reporting them in writing, management must ensure that employees understand how to use the system for all types of safety and health reporting, not just presenting ideas.

"STOP" Program

Many medium or large worksites develop or buy an employee hazards-reporting system such as "STOP," developed by DuPont. Typical STOP programs include a format for training employees in basic hazard recognition. Employees write unsafe conditions and practices on cards, which are usually forwarded to their supervisor or manager for action and the safety department for checking and tracking valid hazard corrections.
Maintenance Work Order

For unsafe conditions, maintenance personnel normally will have to be called to make the proper correction. Contact your appropriate maintenance dispatcher for specific instructions and procedures; coordinate with your supervisor.

Note: This system should be used by employees reporting hazards only if there is a special high-priority code for maintenance safety and health work orders. In doing so, the maintenance supervisor is required to give them a higher priority than production improvement maintenance. Copies should be immediately carried to the safety department (or site safety and health professional) so that corrections can be tracked.

None of these hazard reporting systems, by themselves, are expected to stand alone in ensuring that hazards are corrected. For example, the maintenance work order system may do an excellent job of correcting hazardous physical conditions. Hazardous work practices, however, may need to be addressed via another reporting mechanism.

Employees should be encouraged to use whatever reporting mechanism (or combination) makes the most sense and allows for imaginative approaches in improving working conditions, work practices, procedures, etc.

Written Forms

While some of the systems described above include writing on forms, the best written system for your worksite may be one that you devise for employee hazard reporting. Anonymity, when desired, may be arranged by asking the reporting employee to not sign his/her name or give the filled-out form directly to the supervisor. Responses to anonymous reports may be provided by posting a typed response on a bulletin board in the area mentioned in the report.

Written safety and health issues should be reported to the supervisor and FEOSH Maanger/Coordinatior on DOE HQ F 3790.7, *Notice of Unsafe or Unhealthful Working Conditions*.

Policy for Reporting Unsafe/Unhealthful Work Conditions

Remember that, in all of these aspects discussed above, some variations will work better for your site than others.

Make sure your policy

- Encourages employees to report hazards.
- Is well-known and understood.
- Protects reporting employees from harassment.
- Responds appropriately in a timely manner.
- Tracks all hazards to correction.

Use the hazard information to revise your hazard inventory and/or improve your hazard prevention program.

REPRISAL PREVENTION PROGRAMS

One basic right of DOE Federal employees is to report hazardous conditions or practices without reprisal. The Department's policy is that no DOE employee shall be subject to restraint, interference, coercion, reprisal, or other discrimination by participating in the DOE FEOSH Program, including filing a report of unsafe or unhealthy working conditions or exercising other rights afforded by Section 19 of the OSH Act, Executive Order 12196, and 29 CFR Part 1960, Subpart G.

If an employee believes that he or she is experiencing a safety and health reprisal, the allegations should be handled through the Office of the Inspector General (IG), Employee Concerns Program, or the current DOE collective bargaining unit agreement, as outlined on the DOE

FEOSH Poster with technical assistance from the appropriate safety office or the DOE FEOSH Program Office.

At each site, the New Employee Orientation should inform employees of appropriate procedures to follow when voicing concerns and protecting themselves against reprisal. Any employee or bargaining unit representative who believes that an act of reprisal or discrimination has been committed may file a complaint under grievance procedures, or the appropriate Article contained in the DOE/employee representative Collective Bargaining Agreement.

Additionally, if an employee feels uncomfortable in reporting a concern to the supervisor or safety professional, concerns may be reported with anonymity to the DOE local or DOE Headquarters Employee Concerns Program.

The Department of Energy Employee Concerns Program may be found at:
http://civilrights.doe.gov/Employee_Concerns/employee_concerns.html

Any act of reprisal however slight or subtle against any employee who has reported a safety and health concern is a “prohibited personnel practice.” A list of proper “personnel actions” is contained in Title 5 U.S.C., 2302 (a)(2)(A). “Prohibited personnel actions” are listed in Title 5 U.S.C., 2302 (b). Any personnel action would become “prohibited” if issued or authorized as reprisal or punishment for whistleblowing or exercising a protected right. Such actions would include significant changes in employee duties, responsibilities, or working conditions when unrelated to merit or position requirements.

Any employee who believes that a reprisal or discrimination act has been committed may file a complaint under grievance procedures, or the appropriate Article contained in the DOE/employee representative Collective Bargaining Agreement. An employee representative grievance must be filed within 15 workdays of becoming aware of the act or occurrence.

When such grievances are carried through an arbitration hearing, an arbitrator can order a stay of any “prohibited personnel practice” (reprisal) and include discipline to the supervisor involved (P.L. 103-424, October 29, 1994). DOE Order 3750.1 Chg 6 provides guidance on discipline for violations of Title 5 U.S.C., 2302.

ADDITIONAL INFORMATION

View the DOE FEOSH Program information brochure at:
http://www.hss.energy.gov/csa/csp/feosh/resource/feoshbrochure_2008.pdf

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PROGRAM REVIEW, WORKPLACE INSPECTIONS, HAZARDS ANALYSIS AND ABATEMENT

INTRODUCTION

This document provides guidance information and suggested procedures for performing program review, workplace inspections, hazards analysis, and abatement, successfully at DOE Federal employee worksites.

Hazards can be identified using many methods, including hazard analyses (e.g., job safety analysis and comprehensive safety and health surveys), accident investigations, routine self-assessment, and inspections. This chapter touches on all these methods.

HAZARD ANALYSES

Informal

Hazard identification and analysis can be formal or informal. Frequently, hazard identification is more effective when performed informally by supervisory and non-supervisory employees during the course of daily work activities, with appropriate technical assistance from safety and health professionals. The worker should be the person most likely to recognize potential hazards.

Formal

Formal hazard analyses can include job safety analysis (JSA), nuclear safety analysis, process hazard analysis, comprehensive safety and health surveys, and investigation of employee suggestions or complaints.

Job Safety Analysis

Job Safety Analyses (JSAs) are step-by-step analyses of each job component and existing or potential hazards. They should be performed by supervisors and workers and supplemented by the safety and health staff. JSAs should be performed initially for all operations and then updated as operations change.

JSAs are the most basic and widely used tool to identify job and task hazards and prevent accidents before they occur. JSAs can satisfy a large portion of the hazard identification tasks at a facility. These analyses are appropriate for dynamic activities and tasks, such as construction projects; however, static work environments are also appropriate for using

Quick completion time and limited resource allocation make JSAs a very adaptable and widely used hazard identification technique. A JSA is performed by breaking down a job into its component steps and then examining each job component to determine hazard and accident causes or those that may potentially occur. Reviewing the job steps and hazards while the employee performs the job will ensure that a comprehensive and accurate list of hazards is identified and documented.

Consideration must be given to job mobility, area of performance, ongoing operations in surrounding areas, and specific hazards in the area, relative age of the workforce and job experience, applicable safety and health rules, and recognition of abnormal or unforeseen problems.

JSAs benefit new employees by providing a basis for them to perform their jobs. Likewise, experienced employees also benefit by undergoing safety awareness "reality check" on their job.

Following are the steps that comprise the JSA process:

- Develop a list of all the jobs at your facility; group the jobs (e.g., job title or function).
- Prioritize the job risks based on occurrence severity and probability. Make a high-risk job list.
- Conduct an initial JSA on the highest-priority job.
- Determine which methods should be used for the JSA (e.g., discussions with employees, direct observation of work by safety and health professionals, videotaping, or a combination of methods).
- Select an employee to assist in conducting the JSA.
- Dissect and define each task involved with the job.
- Perform the JSA and complete a JSA worksheet for each job.
- Evaluate the JSA worksheet and develop solutions to reduce or eliminate discovered hazards.
- Review the JSA with the employee.

Write or modify procedures to accomplish the task. When a JSA is completed, it should be reviewed by a qualified person who was not part of the process and with the involved employee.

Detailed information about conducting JSAs can be found in DOL, Mine Safety and Health Administration Safety Manual No. 5, "Job Safety Analysis," and in OSHA; publications on Job Hazard Analysis, OSHA 3071

Analysis during Design and Development

Hazards that are identified during the design phase of new facilities and facility modifications should be eliminated or controlled through design or procedure changes.

This also applies to hazards identified during the development or modification of procedures. The controls implemented should be commensurate with the identified risk levels.

Hazards that pose a serious threat to employee safety and health should be either completely eliminated or effectively controlled.

Proposed design or procedure modifications that are intended to eliminate or control hazards should be reviewed by OSH professionals to ensure that the change adequately addresses the hazard and does not introduce new workplace hazards. Alternative control measures should be evaluated to determine risk reductions provided by each measure and to identify the most effective practical control for the hazard.

When engineering controls do not reduce the associated risk to acceptable levels, they may be supplemented with work practices and administrative controls. Where necessary, these controls may be further supplemented with appropriate PPE.

Analysis of Equipment, Products, and Services

Hazards should also be addressed when selecting or purchasing equipment, products, and services. Provisions should be made for evaluating pre-engineered or "off-the-shelf" equipment prior to selection and purchase.

This evaluation should focus on whether the worker can perform required tasks with the equipment or procured material without endangering the health and safety of workers, considering existing facility and operational constraints.

Evaluation methods may include:

- Review of equipment or material specifications.
- Observations of equipment or material demonstrations.
- Analyses of change.
- Analyses of operational hazards.
- Analyses of ergonomic/human factors.
- Quality assurance checks for suspect or counterfeit parts for critical safety-related components.

Considerations to be taken into account when reviewing equipment specifications include:

- Health hazards
- Operating noise
- Temperature levels
- Point-of-operation guards
- Lockout provisions

- Presence of hazardous material
- Training requirements for safe operation
- Ergonomic design, worker/machine interface
- Maintenance requirements
- Availability and practicality of "add-on" (post-purchase) safety equipment
- Existing facility and operational constraints (e.g., floor loading, hazards from adjacent operations, congested workplaces, etc.)

After installation of complex or potentially hazardous equipment, a pre-startup evaluation should be conducted by affected workers, supervisors, and OSH professionals to verify safe conditions and identify any previously unforeseen hazards.

USING THE INFORMATION

Collecting information about existing and potential hazards is only the first step in the hazard identification process. Once hazards have been identified, the associated data must be evaluated to assess exposure potential and determine whether there are certain trends that should be addressed.

Usually, a wealth of data is available from various resources (injury/illness reports, inspection findings, accident investigation reports, employee concerns, workers compensation data, etc.). It is important to maintain hazard information in such a way that the data can be tracked and trended to determine the root causes of safety and health problems.

For example, if several workers at the same site suffer similar injuries during a given period, can these injuries are tracked back to a common cause (faulty equipment, inadequate training, poor work practices, etc.)?

Many facilities have formal corrective action tracking systems that employ computer databases to record and manipulate data about existing hazards, root causes, abatement activities, and schedules.

Information from these databases can be used as performance indicators to demonstrate the success of the facility's hazard abatement program. Hazard analysis processes do not need to be formal, but it is essential that you have some means of evaluating hazard information.

Your goal should be to go beyond determining what hazards exist and get to the "bottom line" of why they exist.

CAIRS Database

To assist in data management, DOE maintains the Computerized Accident and Incident Reporting System (CAIRS). The CAIRS accident and incident information is issued in summary reports entitled, Occupational Injury and Property Damage Summary.

The quarterly reports are the "rolled-up" performance statistics of injuries, illnesses, and property damage recorded by DOE and its contractors during a 3-month period throughout the Complex.

The data recorded by DOE are compared with relevant statistics from businesses in private industry performing similar activities. Ad hoc queries can also be made to tailor analyses to specific sites.

ACCIDENT INVESTIGATIONS

Accident investigations are conducted to uncover hazards that were either missed during earlier inspections or are present because of inadequate controls. Another objective is to identify the causal factors associated with the accident, so that both the hazards and the causal factors can be controlled and future occurrences prevented. The process concludes with the issuance of a final report with recommendations for corrective action and follow-up to ensure closure.

The essential elements of an accident investigation follow:

- Establishing effective investigation and communication procedures.
- Selecting knowledgeable impartial experts who ideally should include one individual from another area with similar operations.
- Collecting and preserving physical evidence prior to its being moved.
- Interviewing initially the eyewitnesses at the accident scene.
- Determining and documenting the facts.
- Determining the causal factors by analysis.
- Developing recommendations (actions needed to prevent recurrence).
- Following-up to ensure closure.

The accident investigation should fully cover and explain the technical elements of the causal sequences and should also describe the management system that should have, or could have, prevented the occurrence. Where feasible, the response to the interviews should be documented and included as backup. The basic questions to be answered during the interview are who, what, when, where, why, and how.

Facts must be clearly distinguished from opinions, other expectations, or the investigators. The latter can be included in the report's findings and recommendations for corrective action. Remember the goal of an accident investigation is to improve an organization's ability to maintain a safe workplace, not to place individual blame.

Supervisors and others who investigate accidents should be responsible for clearly documenting the causes uncovered during the investigation. Supervisors should be careful to avoid the tendency to lay sole blame on an injured employee. In most cases where human error is involved, there is often a managerial deficiency involving procedures, training, or staffing levels.

Even if the injured worker openly blames him- or herself, the accident investigator must not be satisfied that all contributing causes have been identified. For more information about accident investigations, see DOE Order 225.1 and DOE Form 5483.3.

SELF-ASSESSMENTS

DOE Federal facilities are responsible for periodically evaluating the management systems that support their safety and health programs. For DOE elements, the self-assessment process should include analyses of the effectiveness of safety and health policies, programs, and procedures and the efficiency of processes and functions that sustain these programs.

Self-assessment activities should be integrated both vertically and horizontally within the line organization to ensure a comprehensive top-to-bottom self-assessment process.

Daily Walkthroughs

Self-assessment, at its most basic, can be as simple as "walking your spaces." Workers and supervisors can police their own work areas, periodically conducting informal safety inspections, and noting hazardous work conditions or activities.

Checklists are helpful to focus attention to particular areas (e.g., electrical hazards, fire exits and extinguishers, ladders, and walking/working surfaces).

The two most important considerations are to be vigilant about performing these walk-throughs and ensure that any noted deficiencies are acted upon.

INSPECTORS

Inspectors must be competent to identify and recommend abatement techniques for potential workplace hazards. Industrial area inspections should be accomplished by safety and health professionals with training and experience in recognizing hazards in the types of work spaces to be inspected.

Inspections of less complex hazards may be conducted by individuals with documented training and experience in identifying the types of hazards that will be encountered in such environments. This provides an opportunity for supervisors to walk their spaces.

Equipment

Inspectors should be provided with the necessary PPE and monitoring/test equipment for the work environment being inspected.

Security Clearance

Inspectors need the necessary security clearance and documentation to allow them unimpeded access to all work sites.

TYPES OF INSPECTIONS

There are many types of inspections and inspection activities that can improve employee safety and health in the workplace. They range from inspections by supervisors and employees in their work areas to ensure that equipment and work areas are safe to a more formal external look at the work environment.

Formal or annual inspections are supplemented by informal identification of deficiencies by professionals when they are in the work area for other reasons. The deficiencies should be handled in the same manner as those identified during the formal inspection activities.

Compliance Inspections

Inspections should be targeted toward high-risk and problem areas. All work areas should be formally inspected at least annually. Frequency should be sufficient to identify and abate hazardous conditions.

The objective of the inspection program is to improve employee working conditions through systematic identification and abatement of hazards. Hazards may not relate directly to a violation of a safety and health standard.

Employee Concerns

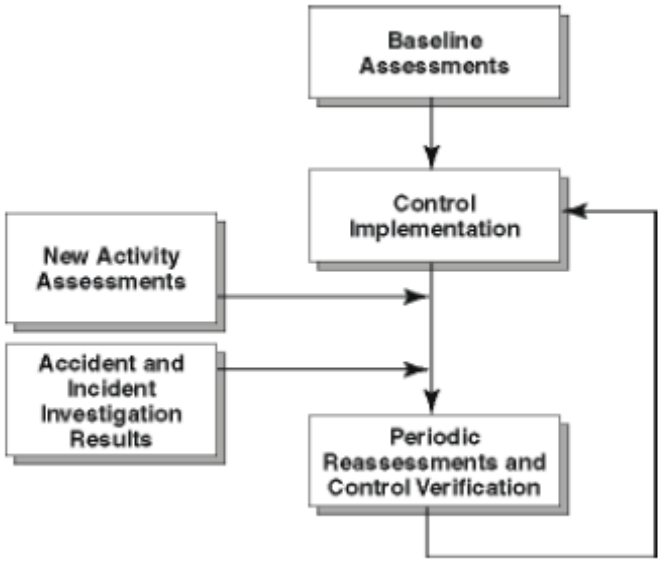
Inspections are required to validate employee concerns of alleged unsafe or unhealthful working conditions. These conditions must be inspected within 24 hours for imminent danger situations, within 3 days for potentially serious allegations, and within 20 days for all other conditions.

Tracking Program

A computer-based inspection management system can be helpful in scheduling inspections, tracking abatements, tracking inspection results, and targeting inspection activities in high-risk or identified problem areas.

CONDUCTING WORKPLACE INSPECTIONS/PROGRAM ASSESSMENTS

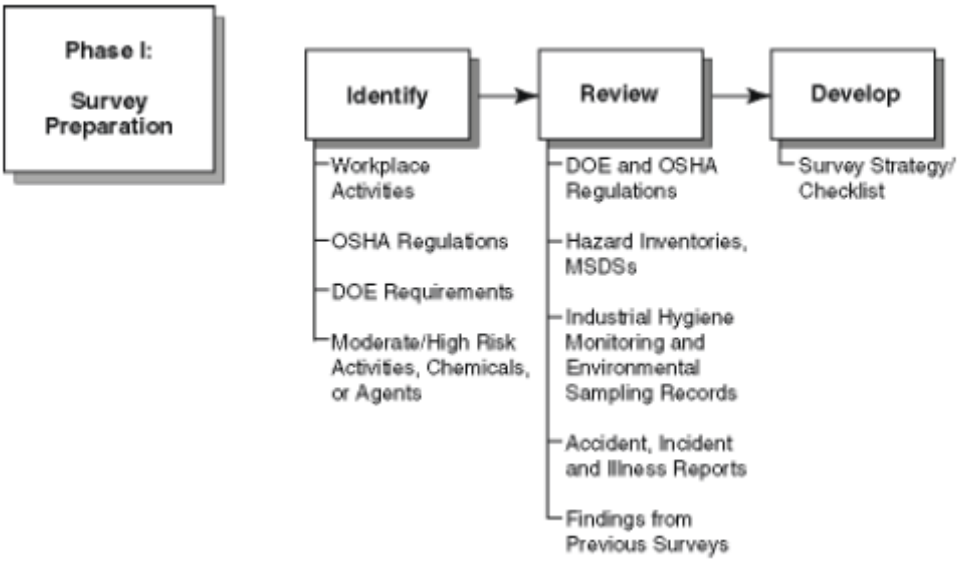
It is crucial that the inspection process be viewed as a beneficial activity. Workplace Inspections/Program Assessments must be a common-sense, practical application of standards and work practices that will eliminate physical hazards from the workplace.



Preparation

Prior to any inspection, the inspectors should review the following items to identify areas that should receive special emphasis or be targeted for inspection.

- Previous inspection trends
- Injury/illness records
- Employee complaint files
- Facility modification/alteration records
- work process or procedure changes
- Equipment needed for the inspection



Checklist

Inspection checklist(s) should serve as memory joggers to ensure a thorough inspection. They should be small (fit in your pocket), short, and to the point. Checklists may include suggested sample size, areas by types of operations requiring special attention, records to be received, reminders of interviews to conduct, or special programs to be conducted.

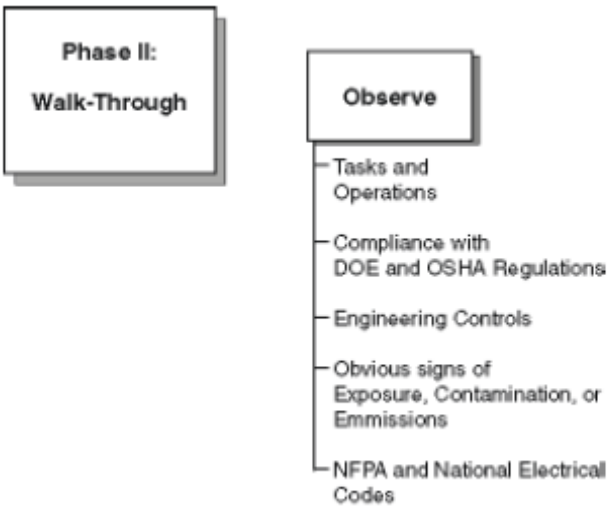
They are not a substitute for thoroughness and professional knowledge. To ensure adequacy of inspection coverage, they are a useful inspector's tool. They should not be used to limit the scope of the inspection.

Checklists should be developed by the inspector to fit the inspector's individual style and should be reviewed and revised frequently. Functional Area inspection checklists may require more detailed requirements than an equipment or facility inspection checklist. View an example FEOSH Office Inspection Checklist

Introduction

Prior to entering a work area to perform an inspection, the inspector should introduce himself/herself to the person in charge. The inspector should give the manager sufficient time to assemble the personnel he or she wishes to be present at the opening conference, including employee representative(s) as well as other supervisors, employees, collateral duty safety or health personnel, etc.

Once everyone is assembled, the inspector should explain the purpose of the inspection, set the tone for the inspection (non-adversarial), and determine special requirements (e.g., protective equipment or security restrictions, the mechanics of the report, posting, and abatement procedures).



Employee Representative

If employees are represented by an authorized representative, that individual should participate in the inspection. If there is no representative, the inspector should consult with two or more employees in each visited work area.

Work Environment Monitoring

If the inspector is not an industrial hygienist and notes an area that requires sampling to validate working conditions, the relevant facts should be recorded; and a referral should be made to an industrial hygienist for professional follow-up and/or monitoring.

Inspection Teams

When possible, a team (e.g., safety, industrial hygiene, fire protection, radiation safety, etc.) approach should be used in performing the inspections. This will ensure more thorough coverage of facilities in a single inspection.

Inspecting Familiar Facilities

Start at one end of the facility and proceed methodically through each work area, storage area, and transition space. It is important that the inspector be methodical to ensure that familiarity does not lead to complacency. A mental grid pattern should be used to ensure full coverage, for example, starting in the upper left rear corner of the room, moving top-to-bottom-to-top, progressing left to right, and moving toward the front of the room. This is sometimes referred to as the stop and look method. It is much more effective than randomly looking around the room. Look over, under, behind, and in all areas.

Inspecting Unfamiliar Facilities

Obtain a floor plan of the facility and request a quick familiarization tour. No inspecting should be done during the tour. The inspector should note areas of most/least concern and utilize this information to plan and pace the detailed inspection. Then proceed to inspect as described for familiar facilities.

Inspecting Functional Areas

This type of inspection can be very beneficial in determining the effectiveness and degree of compliance with the requirements for regulated functional areas such as confined space, lockout tagout, laboratory safety, respiratory protection, exposure records, etc.

The common denominator for these programs is that they all require the employer to develop a written implemented program.

Inspections of these areas should include the opening and closing conference and the other attributes of a typical compliance inspection.

They differ in the following aspects:

- First, the inspector will grade the written program against the requirements and then grade the implementation against the written program.
- The inspection may encompass numerous facilities, programs, and management or employee representatives; a consolidated opening and closing conference may be beneficial.
- Because of documentation to be reviewed, personnel to be interviewed, and geographical areas to be covered, the inspection will normally take longer.
- A text report style may be more beneficial than traditional violation tickets.
- Many of the internal evaluation criteria can and should be applied to these types of inspections.

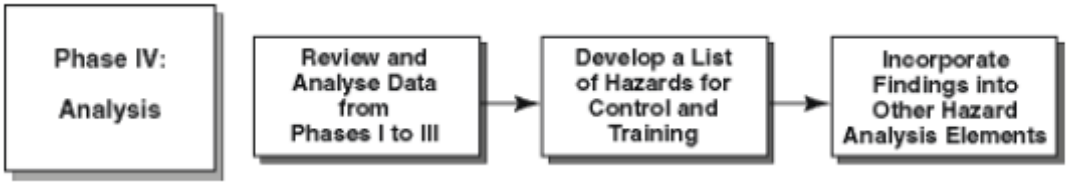
Recording Results

The inspector should take notes on both the positive and negative items noted during the inspection. All notes should be openly discussed with management and employee representatives who accompany the inspector.

Taking pictures of both good and bad practices can be beneficial in providing feedback to supervisors and employees on hazard recognition.

To better evaluate and trend inspection results, it is helpful to record the number of items checked versus the number of items found deficient. For example, “ten exit doors checked and

eight were propped open" or "ten fire extinguishers checked and only one needed a 30-day inspection."



Imminent Danger

If the inspector discovers a condition that could cause immediate death or physical harm, the inspector informs the person in charge to shut down the part of the operation causing the exposure or removes the personnel until the hazard is abated.

Closeout

At the conclusion of the inspection, the inspector discusses the preliminary results of the inspection with management and employee representatives. This includes both positive and negative findings and the relative seriousness of the deficiencies. Official report and deficiency abatement timeframes and procedures should be determined, and violation posting requirements should be reviewed.

There should be no surprises at this point and no disagreement with the findings. The following tips and questions are provided to help the closeout conference proceed smoothly and effectively.

- Be prepared to face high-level, highly specialized people.
- Consider taking your own backup personnel in controversial situations.
- Keep communications clear and concise.
- Control your emotions.
- Keep matters in perspective.
- Proceed from "good" to "bad" in the presentation.
- Confront controversial issues that will be raised in the final report.

The inspectors should make notes on any items brought to their attention by management or employee representatives during their closeout briefing, such as additional facts, disagreement resolutions, and conditions beyond control of the inspected individuals.

FEOSH PROGRAM ASSESSMENT

Example Plan for Conducting a Detailed FEOSH Program Assessment

Objectives

The objective of this assessment is to evaluate the level of formality and depth of the FEOSH Program implementation of management systems, industrial hygiene, health physics, and general worker safety programs**.**

The reviewers will concentrate on performing a top level safety management systems review, and conducting vertical slice reviews down through several technical areas of the program.

These technical slice reviews may include: health physics; laboratory chemical hygiene; hazard communication; employee training; qualifications; compliance with ACGIH Threshold Limit Values (TLVs); work control procedures; personnel exposure monitoring; electrical safety; emergency preparedness; medical surveillance; respiratory protection; hearing conservation; confined space; beryllium and, ergonomics programs.

Program Documentation and Record Review

A review will be conducted of the manuals of practice and selected records that define the procedures and interactions required for worker safety, industrial hygiene, and health physics program at the facility or activity level. The review will also consider the adequacy of the sites documents to meet the criteria noted below, and to determine that the worker safety, industrial hygiene, and health physics programs are effectively integrated into the facility or activity procedures.

A review will be conducted of any lessons learned, occurrence reports, OSHA 300 logs that may provide an opportunity to determine if lessons learned have been effectively used, and corrective actions implemented, within the worker safety, industrial hygiene, and health physics area.

A review will be conducted of the training records of personnel in the industrial safety, industrial hygiene, and health physics area to determine that they meet competency standards.

Document reviews will be conducted prior to the assessors arriving on-site, to the extent possible.

The following documents are requested for review: (Note: these documents should be reviewed prior to the first week of the on-site FEOSH program review.)

- Site FEOSH Program Manual: (List document name and numbers)
- OSHA 300 Log for the past and current year.
- CAIRS and ORPS data report associated with Federal employees for the past and current year.

- Job Safety Analysis (JSA) Numbers: (List document name and numbers)
- Technical FEOSH (IH, HP, and Safety) Procedure Numbers: (List document name and numbers)
- Administrative Procedures: Examples of Training and Qualification Standards, Employee Complaints Process Documentation, (List document name and numbers)

Interviews, Workplace Walk around, and Technical Program Reviews

Interviews

Interviews will be conducted of personnel and responsible managers in the FEOSH, industrial hygiene, safety, and health physics areas assigned. Interviews will be conducted of line managers to assess the establishment of clear roles, responsibilities, and the level of understanding of worker safety, health priorities, needs, and objectives.

It is desirable that individuals performing the following functions be available for interviews.

Day 1

- Senior Site/Facility Manager. (Federal employee)
- Facility Safety and Health Program Representatives. (Federal employee)
- FEOSH Program Manager. (Federal employee)
- Support - Industrial Hygienist, Health Physics, and Safety Engineer. (May be contractor supported)

Day 2

- Medical Program Director (May be contractor supported)
- CAIRS/ORPS Reporting Coordinator. (Federal employee)

Walk around

Day 1

- In briefing with key site/facility staff.
- General familiarization tour of Federal facilities with emphasis on noting operations and work activities preformed in specific areas, and key contact persons.

Day 2

- In-depth, specific walk-around of areas to observe work process, controls, and procedures. This may include visits beyond Federal office areas to include a sampling of operations,

production, and laboratory facilities, which are occupied or frequently visited by Federal personnel.

Technical Program Review

Day 3 and 4

- In depth, vertical slice, interviews, and technical reviews of implementation of the following programs:
  - Hazard Communication Program
  - Office Safety and Health Program
  - General FEOSH Training Program
  - Occupant Emergency Preparedness
  - General Safety, Workplace Inspection, and Use of Personal Protective Equipment Program Elements.
  - Federal Employee Medical and Exposure Monitoring Program

Out briefing

Day 5

- An out-briefing of the preliminary findings and recommendations will be given to interested Federal managers and staff.

INSPECTION REPORTS

Inspection reports provide management with a summary of results, undesirable and noteworthy trends, and a risk assessment associated with each hazard. The report should transmit notices of unsafe or unhealthful working conditions.

Notice of Unsafe or Unhealthful Working Conditions

An inspection form can be used effectively for such notices; it provides uniform recording of information, captures pertinent corrective action/abatement data, and can be used to post the violation notice.

Notices should be issued formally 15 days after the safety condition inspections and no later than 30 days for health condition inspections. The notices should be posted at the infraction site for 3 days or until abated.

Notices of unsafe or unhealthful working conditions should be mailed to the facility or workplace official and the employee representative. Safety and health committees, if they exist, should be provided with a copy.

EMPLOYEE CONCERN REPORTS

Providing employees with a mechanism to report safety and health concerns quickly and easily is an excellent way to gather information on actual or potential worker hazards. Employees are encouraged to inform supervisors of any safety and health concern; however, employees may go to higher management or OSHA with the safety and health concern.

Employee concerns should be documented in writing either by the person making the complaint or the person receiving the report. Employees submitting the concern may request anonymity.

Individual case files should be established for each concern. File coding will ensure that the identity of the individual is protected. See Appendix 9-4 for a sample case file log.

Responding to Concerns

In addition to the recordkeeping and reporting requirements associated with the OSHA and OWCP forms, Federal agencies, under 29 CFR Part 1960.28, "Employee Reports of Unsafe or Unhealthful Working Conditions," must also maintain a log of all existing reports or potential unsafe or unhealthful work conditions at each establishment. A copy of each report alleging an unsafe or unhealthful work condition must be sent to the appropriate site safety and health committee.

In addition, a sequentially numbered case file, coded for identification, is assigned to each report alleging an unsafe and unhealthful working condition. Furthermore, the agency's response to the situation must be documented. Each log should contain the following information: date, time, code/file number, location of condition, brief description of the condition, classification (serious, non-serious, imminent danger), and date and nature of action taken.

An employee submitting an unsafe or unhealthful condition report should be notified in writing within 15 days if the agency determines that a hazard does not exist and an inspection will not be conducted. In addition, a copy of this notice must be sent to the appropriate certified safety and health committee.

Inspection Requirements

DOE Elements must inspect allegations of imminent danger within 24 hours. They must inspect potentially serious conditions within 3 working days and other-than-serious allegations within 20 days.

If, after notifying the safety and health committee, the hazardous condition can be abated immediately, no inspection is necessary.

For more information on your FEOSH program contact:

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RECORDS AND REPORTING

OVERVIEW

DOE Elements, under DOE Order 231.1A Chg 1, must record and report occupational injury, illness, and property data. Federal agencies are also required to analyze their injury and illness data to identify and correct safety and health problem areas by developing and initiating an effective safety and health program. This is done through the Computerized Accident Incident Reporting System (CAIRS), maintained by EH at headquarters. See DOE ES&H Reporting Order 231.1-1A Chg 1 ; and Computerized Accident/Incident Reporting System (CAIRS)

CAIRS is a database used to collect and analyze DOE and DOE contractor reports of injuries, illnesses, and other accidents that occur during DOE operations in accordance with DOE Order 231.1A Chg 1. CAIRS reporting is managed by the Office of Corporate Safety Analysis (HS-30), with hardware and software support from the Office of Information Management (HS-1.22).

The current reporting criteria for CAIRS injury/illness cases are contained in DOE Manual 231.1-1A Chg 2. The Manual, DOE M 231.1-1A Chg 2, requires that all new injury/illness reports be submitted twice each month on or before the 15th and the last workday of the month. However, new or revised accident reports may be submitted at any time, and some organizations do submit this information more frequently. Work hours and revisions are required quarterly.

Trends should be sought and cross-checked with other data sources before targeting inspections to better evaluate OSH performance in those problem areas.

Reporting requirements for DOE Federal employees are the same as those for DOE contractor employees, but they are, for Federal employees, governed by 29 CFR Part 1960. Rule - Federal Agency Recordkeeping and Reporting Requirements - OSHA 29 CFR 1960 Subpart I.

Coordination and Integration

OSH professionals are responsible for reporting or in some way inputting to these systems. DOE Federal sites should have an established mechanism for ensuring that these various reporting systems and efforts to maintain them are properly coordinated and integrated. The DOE Order and information on occurrence reporting may be found at: DOE O 231.1A Chg 1, Environment, Safety and Health Reporting, Order and, Occurrence Reporting and Processing System (ORPS)

Recordkeeping and Reporting Training

Recorded information on OSH incidents establishes the benchmark for the success of the OSH program, and it is the basis of trend analysis. Therefore, it is crucial that people who record and report on occupational injuries, illnesses, and work-related damage or loss of property and vehicular-related incidents be appropriately and consistently trained and knowledgeable about the how to report information into CAIRS and ORPS.

For information on ORPS and CAIRS reporting and training visit the web site at: http://www.hss.energy.gov/reporting_dbs.html

DETERMINING RECORDABILITY

Section 24(a) of the OSH Act says that the Secretary of Labor "shall compile accurate statistics on work injuries and illnesses which shall include all disabling, serious, or significant injuries and illnesses, whether or not involving loss of time from work, other than minor injuries requiring only first aid treatment and which do not involve medical treatment, loss of consciousness, restriction of work or motion or transfer to another job."

Recordkeeping Regulations

29 CFR Part 1960, Sub-part I, and OSHA Publication 2014 expand on the statutory definition, classifying injuries and illnesses as deaths, lost-time cases, or non-lost-time cases. Go to OSHA's Occupational Injury and Illness Recordkeeping Webpage

Obtain OSHA forms and instruction information at: http://www.osha.gov/recordkeeping/new-osha300form1-1-04.pdf

Is the Case Recordable?

OSHA No. 300 "Log and Summary of Occupational Injuries and Illnesses" contains a working definition of what you must record: record information about every occupational death; non-fatal occupational illness; and those nonfatal occupational injuries that involve one or more of the following: loss of consciousness, restriction of work or motion, transfer to another job, or medical treatment (other than first aid).

Statute, regulations, and guidance are printed on form OSHA No. 300 that provides adequate guidance to answer questions about whether a case is recordable or not. There are some difficult cases that require further analysis in determining whether a case is recordable, such as: "Did a death, illness, or injury occur?"

Fault, Preventability.

In determining whether or not a case occurred, first establish whether or not an injury or illness took place. Fault has no role to play in the analysis. The injury or illness is recordable of preventability. An employee does not have to be involved in a specific job task for the injury/illness to be reportable. If the employee is in pay status, the employment relationship is presumed established.

Recurring Injuries.

Report only new injuries and illnesses. Recurrences or complications of previous injuries and illnesses are not recordable. However, if an old injury is aggravated because of a new incident (such as a trip or fall); it is considered a new case and is recordable.

Pre-existing Conditions.

An employee's preexisting condition or physical defect generally does not affect the recordability of an accident. However, if a worker with a preexisting condition, such as a trick knee, falls while walking and there is no other workplace factor such as a wet floor, stone, or loose carpet, the incident is not recordable.

Is It Work-related?

Establish that the case was related to work resulting from a work environment event or exposure.

Work Environment.

A work environment is considered the agency's premises and other locations where employees are engaged in work-related activities or are present as a condition of their employment. A work relationship is established when the injury or illness results from an event or exposure in the work environment.

Employer's Premises.

The employer's premises include the total establishment, as well as hallways, restrooms, snack bars, lunchrooms, and cafeterias.

Certain areas (e.g., parking facilities or recreational facilities) and certain scenarios for workers being present in those areas may or may not be considered work-related, depending on the specific details of the situation. Such determinations would have to be made, on a case by case basis, by the local Human Resources office (or office with this responsibility). The sensible approach is when in doubt, fill out the appropriate forms.

Injury or Illness?

Decide whether the case is an injury or occupational illness. All work-related illnesses must be recorded. Only those injuries which involve medical treatment more than first aid, loss of consciousness, restriction of work or motion, or job transfer are recordable.

Nature/Exposure.

Classifying a case as an injury or illness is determined by the nature of the original event or the exposure which caused the case, not by the employee's medical condition.

Injuries are the result of instantaneous events in the workplace. An occupational injury is any incident such as a cut, fracture, sprain, amputation that results from a work accident or an exposure involving a single incident in the workplace.

Illnesses are cases resulting from factors that are not instantaneous in nature. This definition of occupational illness is flexible enough to encompass acute illnesses that result from exposures during a relatively short time period.

An occupational illness is any abnormal condition or disorder, other than one resulting from an occupational injury, caused by exposure to environmental factors associated with employment. It includes acute and chronic illnesses or diseases which may be caused by inhalation, absorption, ingestion, or direct contact.

Some conditions may be either an injury or illness, such as hearing loss, depending on how the harm occurred. For example, if hearing loss resulted from an explosion (an instantaneous event), it is recorded as an injury. If it resulted from exposure to workplace noise over a period of time, it would be recorded as an illness.

RECORDING ILLNESSES IN THE OSHA 300 LOG

If a case is an illness, record it and check the appropriate illness category on the log. In addition to recording illnesses, record each case in one of the seven categories (a through g) in the illness section.

Diagnosing Workplace Illnesses

Occupational medicine physicians should be involved in diagnosis. Sometimes occupational diseases are difficult to detect and diagnose because they are ordinary diseases of life. Moreover, there may be a long latency period between workplace exposure and the disease onset. Very few physicians are trained in occupational medicine. Often employees may not report an illness as work-related because they do not link their symptoms to the work environment.

Occupational Diseases

Occupational diseases are difficult to detect and document and some investigative work may be necessary. Note that medical records are subject to confidentiality restrictions, and only authorized personnel should have access to personnel medical records.

When evaluating an illness for its possible connection to the workplace, the following diagnostic checklist and list of questions is a guide to assist safety and health and medical personnel identify links to workplace diseases. In some cases, it may be good to seek assistance from OSH personnel.

Questions you should ask include:

1. Has an illness condition clearly been established?

2. Does it appear that the illness resulted from or was aggravated by suspected agents or other conditions in the workplace?

3. Are there suspected agents present in the workplace, or have they been present in the past?

4. Was the ill employee exposed to these agents in the work environment?

5. Was the exposure sufficient in intensity and/or duration to result in the illness?

6. Was the illness solely attributable to non-occupational exposure?

Injuries

If the case is an injury, decide if it is recordable based on a finding involving one or more of these four factors: medical treatment, loss of consciousness, restriction of work or motion, and/or job transfer.

Medical Treatment is any treatment other than first aid, administered to injured employees. Medical treatment involves the provision of medical or surgical care for injuries that are not minor through the application of procedures or systematic therapeutic measures.

First Aid treatment is any one-time treatment and any follow-up visit for the purpose of observation or treatment of minor scratches, cuts, burns, splinters, etc., which do not ordinarily require medical care. Such one-time and follow-up treatment for the purpose of observation is considered first aid even though provided by a physician or registered health care professional.

Treatment and Severity are sometimes difficult to distinguish between first aid and medical treatment. The distinction depends not only on the treatment but also on the severity of the injury.

Recordable Injuries are not minor. Under OSHA recordkeeping guidelines, first aid is not emergency treatment of serious injuries.

The following must be recorded if:

- Medical treatment by a physician or licensed medical personnel is required.
- Bodily functions are impaired, such as normal use of senses and limbs.
- Superficial damage to the physical structure of the body results, for example a fracture.
- Complications which require follow-up medical treatment are involved.

Medical Treatment Checklist.

The following procedures are usually considered medical treatment, and injuries associated with them are usually recordable.

- treatment of infection
- application of antiseptics during second or subsequent visits to medical personnel
- treatment of second- or third-degree burns
- application of sutures, stitches, or staples
- application of butterfly adhesive dressings or sterile strips in lieu of sutures
- removal of foreign bodies embedded in eye

- removal of foreign bodies from wound if removal is complicated due to depth of wound or the size or location of the wound
- use of prescriptions, except for a single dose on first visit for minor injury or discomfort
- use of hot or cold soaking therapy during the second or a subsequent medical visit
- use of hot or cold compresses during the second or a subsequent medical visit
- cutting away dead skin
- heat therapy during the second or a subsequent medical visit
- whirlpool bath therapy during the second or a subsequent medical visit
- positive X-ray findings, such as a fracture or broken bone
- admission to a hospital or equivalent medical facility for treatment

First-Aid Treatment/Non-recordable Checklist. The following procedures generally are classified as first aid and should not be recorded if the work-related injury did not involve loss of consciousness, restriction of work or motion, or job transfer:

- use of antiseptics during first medical visit
- treatment of first-degree burns
- use of bandages during medical visit
- use of elastic bandages during first medical visit
- removal of non-embedded objects in eye if only irrigation (flushing) is required
- uncomplicated removal of foreign bodies from wound, such as by use of tweezers
- use of non-prescription medications and administration of single dose of prescription medication on first visit for minor injury or to relieve discomfort
- soaking therapy on initial visit or removal of bandages by soaking
- use of hot or cold compresses during first medical visit
- use of ointments on abrasions to prevent drying and cracking
- use of heat therapy during first medical visit
- use of whirlpool bath therapy during first medical visit
- negative X-ray findings
- observation of injury during medical visit

Loss of consciousness resulting from a work-related injury is recordable, no matter what type of treatment was provided.

Restriction of work or motion is automatically recordable under OSHA, Bureau of Labor Statistics (BLS) guidelines. Restricted work activity occurs when, as the result of a job-related

injury or illness, an employee is physically or mentally unable to perform all or any part of his or her normal assignment during all or any part of the workday or shift. This is often the only factor that makes a case recordable.

A cut on a finger that, when bandaged, cannot bend enough for a typist to perform his or her normal duties would be recordable.

Job transfer as a result of injury is recordable regardless of the type or extent of provided medical treatment. Typically, these cases are classified easily because any injury severe enough to require job transfer is recordable based on other criteria, such as medical treatment or restriction of work or motion.

RECORDKEEPING FORMS AND REPORTING REQUIREMENTS

Two forms are used for OSHA recordkeeping: OSHA No. 300 and an appropriate supplemental form, which is DOE Form 5484.3 for DOE Elements. Both forms contain detailed instructions.

OSHA No. 300 serves two purposes. First, it is used to record the occurrence, extent, and outcome of cases. Second, it serves as the Summary of Occupational Injuries and Illnesses, which is posted in the workplace.

Within 6 working days, Federal agencies are required to log all injuries, illnesses and fatalities for which a CA-1, CA-2 or CA-6 is filed with the Office of Workers' Compensation Programs (OWCP). Where there is no time lost or medical reimbursement involved, CA forms documenting injuries or exposure should be placed in the employee's medical or personnel folder. Office of Workers' Compensation Programs (OWCP), CA forms may be found at: http://www.dol.gov/esa/regs/compliance/owcp/forms.htm

DOE Forms

DOE Form 5484.3, "Individual Accident/Incident Report," is used as the supplemental record in lieu of the OSHA No.301 to record and report worker-related fatalities, injuries and illnesses, and damage or loss of property.

Form Retention. DOE Forms 5484.3 containing information about fatalities, injuries, illnesses, and property or vehicle loss are retained in accordance with DOE O 243.1, "Records Management Program."

Accident Investigation Requirements

In addition to the completion of DOE Form 5484.3, all recordable accidents involving DOE operations will be investigated to some degree in accordance with DOE Orders 225.1A and 440.1B.

CAIRS Database

The CAIRS is a DOE database containing injury/illness and vehicle loss records for all DOE and contractor organizations from 1981 to the present and property damage records from 1975 to the present. Database information is analyzed, and data performance statistics are issued in quarterly reports entitled Occupational Injury and Property Damage Summary.

Tabulation of Work Hours, Vehicle Usage, and Property Valuation

DOE Form 5484.4 is used to record work-hours, vehicle usage, and property valuation. This information is used in calculating incidence rates, determining trends over time, and conducting other forms of data analysis.

The information obtained from Part A of 5484.4 is used to normalize DOE accident statistics. On a quarterly basis, Part A is completed and mailed to the CAIRS Input Coordinator for receipt on or before the 25th of each January, April, July, and October.

The information obtained from Part B of 5484.4 is used to estimate replacement value of all property in each DOE organization's jurisdiction. An annual summary report estimating the property valuation must be transmitted to the CAIRS Input Coordinator for receipt on or before March 31 each year.

Form Retention. All personal injury and illness records need to be retained in accordance with DOE O 243.1. If DOE Form 5484.4 does not include injury or illness data, then it needs to be retained for 5 years. The DOE Form 5484.4 used to record work hours, vehicle usage, and property valuation is to be retained for 10 years.

FATALITIES AND CATASTROPHES

OSHA requires that all Federal agencies notify them within 8 hours of each occupational fatality, whether the fatality occurred from an accident or occupational disease. In addition, each catastrophic event defined as in-patient hospitalization of three or more people (including both agency and non-agency people) must be reported to OSHA within 8 hours. The fatality needs to be reported into ORPS and the DOE FEOSH Program Manager should be notified at the same time.

Notification Methods

The Federal Agency head or designee shall orally report the fatality/multiple hospitalization by telephone or in person to the OSHA Area Office, DOL, which is nearest to the incident site, or by using the OSHA toll-free central telephone number (1-800-321-OSHA). This requirement applies to each fatality and hospitalization of 3 or more employees which occurs within 30 days of an incident.

The fatality must be reported to DOE through the ORPS system. For more information, read the DOE Order and visit the ORPS web sites at: DOE O 231.1A Chg 1, Environment, Safety and Health Reporting, Order and, Occurrence Reporting and Processing System (ORPS)

Notice Content

Notification of a fatality/catastrophe should include the following information: (1) establishment name, (2) location of incident, (3) date and time of incident, (4) number of fatalities or hospitalized employees, (5) contact person and phone number, and (6) a brief description of the incident.

Summary Report

In addition, each Federal agency must provide OFAP with a summary report of each fatality and catastrophic incident investigation. The summary shall address the date/time of the accident, agency/establishment name and location, and consequences, description of operation and the accident, causal factors, applicable standards and their effectiveness, and agency corrective/preventive actions.

ANNUAL SUMMARY/ACCESS TO RECORDS

A portion of OSHA No. 300 is used to summarize injuries and illnesses for the previous calendar year. The summary is prepared by totaling the column entries on the log and signing and dating the certification portion of the form at the bottom of the page.

Posting the Summary

Federal agencies are required to inform their employees that establishment injury and illness logs and annual injury/illness summaries are available and accessible. OSHA No. 300 must be completed and posted in each establishment no later than February 1 and must remain in place until April 30.

The summary must be posted in a conspicuous place or places in the establishment where notices to employees are customarily posted. If activities at the facility are dispersed, the notice may be posted at the location where employees report each day.

Access

These documents must be accessible to the establishment's safety and health personnel, the facility's OSH committees, employees, employee representatives, and former employees with a need to know. In addition, these documents must be made available to the Secretary of Labor, Secretary of Health and Human Services, and their authorized representatives.

Retention

Safety and health records and reports must be maintained by Federal agencies for 5 years after the end of the fiscal year to which they relate.

WORKERS' COMPENSATION

Authority

The Federal Employee Compensation Act (FECA) provides compensation for disability and death and medical care for employees of the U.S. Government who sustain injuries or occupational diseases resulting from their employment. Claims are managed by the DOL Office of Workers Compensation Program (OWCP). Each DOE site should have a workers compensation claims manager, who processes and submits the OWCP claims through the OWCP coordinator at DOE headquarters.

Visit the OWCP web site at:
http://www.dol.gov/esa/regs/compliance/owcp/INDEXofResources.htm

Definitions

FECA recognizes and compensates two distinctly different types of cases. A traumatic injury is a wound or other condition of the body caused by an external force, including stress or strain. It must occur at a specific time and place, affect a specific part or function of the body, and be caused by a specific incident or series of incidents occurring within a single day or work shift.

An occupational disease is, for practical purposes, any workplace-related condition that does not meet the definition of a traumatic injury. These include contagious diseases, repetitive motion injuries, and long-latency diseases in which there is an incubation period between exposure to a toxic substance and manifestation of symptoms.

Exclusive Remedy

Employees injured at work have no right of legal action against the United States for the effects of the injury or disease other than the right to receive the benefits provided by FECA. Workers' compensation benefits, as such, are an "exclusive" remedy.

Injured employees or survivors have the initial burden of proving entitlement to benefits under FECA. Benefits are not automatic—employees and survivors must claim them.

Eligibility

In determining an injured employee's eligibility for benefits, OWCP looks at five basic issues:

- Was the employee covered by FECA?

- Did a personal injury actually occur? The term injury includes all occupational diseases proximately caused or aggravated by the employment. Proximately caused means closely related, as a result of, or following—in addition to direct cause.
- Timely filing. Did the employee meet the time limitations of the statute?
- Performance of duty. Did the injury occur in the performance of duty?
- Causal relationship. Is the disability claimed directly connected, or otherwise causally related to the personal injury sustained while in the performance of duty? Under FECA, employees can receive benefits if they can show how workplace conditions aggravated, accelerated, or worsened a pre-existing condition (e.g., osteoarthritis of the knee worsened by repeated entering and exiting from a vehicle).

Burden of Proof

The burden of proving a claim is the responsibility of the employee, not the employing agency. Filing a claim is not enough. All evidence necessary to establish his/her eligibility for all disability benefits must be submitted.

Notification

Injury.

With few exceptions, an employee or someone acting on the employee's behalf must give the supervisor written notice of a traumatic injury within 30 days after occurrence.

While CA-1, Federal Employee's Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation, can be used, written notice can be in any format if it gives the name and address of the employee; states the year, month, day, hour, and locality where the injury occurred; states the cause and nature of the injury; is signed and contains the address of the individual giving notice; and is given by personal delivery or deposited in the mail, properly stamped and addressed.

Occupational Disease.

Employees are required to give supervisors written notice of occupational diseases within 30 days after occurrence. Form CA-2, Federal Employee's Notice of Occupational Disease and Claim for Compensation, is available for occupational disease cases. These claims must be filed within 3 years. However, the clock does not begin to "run" in these cases until the employee is aware of the disease and its link to the employment.

In many disease cases, time begins to run when a physician informs the employee that he or she has a disease and that it may be work-related. However, in cases where the worker continues to be exposed, time does not begin until the last date of exposure. In long-latency cases, such as leukemia caused by radiation, time does not begin to run until the employee has compensable disability and is aware of the causal relationship of the disability to the employment.

There is no administrative "penalty" for failure to file a written notice of occupational disease within 30 days, since Continuation of Pay (COP) benefits are not payable in occupational disease cases. Aside from the 30-day notice requirement, a written claim for occupational disease benefits must be filed within 3 years, or compensation will be denied.

Continuation of Pay

To be eligible for COP benefits, the employing agency must be satisfied that a work-related traumatic injury occurred and that written notice, or a CA-1 Form, was filed within 30 days.

Under COP, an agency may pay the injured employee for up to 45 days of the disability. The 45-day duration, however, is not automatic. The period of disability must be documented by medical evidence. As with other factors involving work-related injuries, the duration of COP will vary with severity of the injury and the healing proclivities of the individual.

While a traumatically injured employee cannot receive COP benefits unless he or she reports the injury within 30 days, the time requirement for a compensation claim will have been met. In reality, claims filed long after the injury occurred are known as "stale claims." Because of their unique circumstances, OWCP carefully reviews these cases.

Documentation

The most difficult part of the workers' compensation process is obtaining reliable, probative, and substantial written medical evidence. A claim will be denied unless it can be established, through medical evidence, that the claimed disability is related to employment.

As far as OWCP is concerned, probative value means its use in serving to prove a particular fact or contention. A doctor's report containing the physician's opinion, but with no medical backup (e.g., test results, X-rays) to back up the opinion, has less probative value than one based on objective data.

Weight of the evidence refers to its quality, not quantity. Thus, a report from an appropriate medical specialist, a board certified orthopedic surgeon in a broken foot case would have more weight than the opinion of an internist.

Obtaining credible medical evidence is also difficult because:

- Doctors are busy people; they would rather practice medicine than fill out papers.
- Some doctors simply do not take workers' compensation referrals.
- Many doctors do not understand the workers' compensation system and the need
- to provide fully documented, substantiated, well-rationalized opinions.
- A workers' compensation form cannot be designed that anticipates all the types of cases and situations that can arise.

When such problems with medical evidence develop, they usually involve such issues as the period and extent of the disability. Physicians should be encouraged to review their reports to make sure they have clearly shown the period during which the employee is medically unable to work, discuss the extent of the disability (e.g., is it total or partial), and discuss the medical reasons for the employee's injury-related work limitations for partial disability.

Injury.

List all injured parts of the body when filling out workers' compensation forms. A severe injury to one part of the body may overshadow a less serious injury. If delayed symptoms occur, establishing a causal relationship between these new symptoms and the injury may be difficult.

Occupational disease cases are much harder to prove than traumatic injury cases and therefore require more detailed factual and medical evidence. In these cases, claimants must factually prove that they were exposed to certain conditions while working and medically prove that these conditions caused the disease. Since there is often a latency period between the exposure time and onset of disability, the burden of proof is often difficult. Board-certified occupational health physicians may be consulted (e.g., physicians with specialized expertise in asbestos, if that is the toxic substance involved in the case).

Written Report

In complicated injury and all occupational disease cases, the employee should first provide the physician with a detailed report of the accident and injury or, in disease cases, the work and exposure history.

Employment conditions believed to be the causative factors should be described along with copies of all relevant medical and environmental monitoring reports. Other information such as MSDSs, NIOSH criteria documents, NIOSH Health Hazard Evaluations, and reports of other workers with similar symptoms should be included.

Go to: National Institute of Occupational Safety and Health (NIOSH) Resource Documents

Physicians should refer to this information and use it in their written reports. In complicated trauma cases, occupational disease cases, and cases involving continuing (long-term) disability, physicians should, in addition to filling out the OWCP forms, prepare a narrative report.

Narrative Reports

Since everyone has an interest in having the compensation system work smoothly, it is a good idea to give these narrative reports to physicians along with the CA forms, which are maintained for 5 years after the end of the fiscal year to which they relate. Alternatively, they can be given to the employee at the same time the CA forms are provided with the advice that they may help the doctor prepare a report that contains all the OWCP needed information to adjudicate the claim.

Employees

- Meet burden of proof.
- File claim in a timely manner.
- Be truthful in claiming benefits and filling out forms.
- Have independent medical exams if requested.
- Report earnings from employment or self-employment while disabled and receiving benefits.
- Return to work when able to perform usual duties or work of a different nature.
- Accept work or offer to work when it is made.
- Undergo rehabilitation if directed by OWCP to do so. (Refusal results in the risk of reduced or terminated benefits.)

Employers and supervisors

- Willingly and expeditiously fill out OWCP forms and reports.
- Be truthful in filling out forms and reports.
- Maintain an adequate supply of claim forms.

No-Fault Program

Workers' compensation is a no-fault, non-adversarial program. Claims are adjudicated by a neutral party, the DOL's OWCP.

Except for filling out forms and reports, the supervisors do not actively participate in the FECA Claims adjudication process. However, they may submit affidavits and other relevant statements regarding a claim. Suspected fraudulent claims should be controverted.

For complete Workers' Compensation information, see DOL publication CA-810, Injury Compensation for Federal Employees, revised February 1994.

EXAMPLE: TRAUMATIC INJURY CASE

The Injury Occurs At 11:15 a.m. on Tuesday, May 11, 1995, a DOE employee is moving a typewriter from one desk to another when it slips from his hands and drops, and breaks his foot. Co-workers notify the supervisor. What happens next?

First Aid and Help for the Victim. The first priority is the injured worker. The onsite clinic, staffed by nurses, is notified. They immediately respond with a wheelchair and an ice pack. Because of the possibility of a broken foot, an ambulance is called to take the employee to the hospital for X-rays and a consultation with an emergency room physician.

CA-16 Authorizes Emergency Medical Treatment. The supervisor or nurse, acting on standing orders, fills out a CA-16 and sends it with the injured employee. A CA-16 is the OWCP Form

entitled “Request for Examination and/or Treatment.” This form authorizes the health care team to provide emergency care, including surgery, to the injured employee.

If Possible, Get Information from the Injured Person. To the extent possible and consistent with the medical needs of the victim, the supervisor and/or facility health personnel should obtain information with respect to the time, date, place, circumstances, and witnesses to the accident. Information on the name, occupation, agency, branch, or division where the employee works is also useful.

Interview co-workers while the information is still fresh; the supervisor should interview co-workers with respect to what they know about the accident/injury.

CA-1 Must Be Filled out If a CA-1, “Federal Employee’s Notice of Traumatic Injury and Claim for continuation of pay/compensation,” was not filled out (perhaps due to the need to rush the injured person to the hospital), the supervisor should send the form to the employee, and even sending the form to the person’s home if need be.

The injured person, or someone acting on his/her behalf, should fill out the employee’s section and return it as soon as possible to the supervisor. The supervisor then follows the instructions on the form to fill out his or her part of the CA-1, “Official Supervisor’s Report.”

COP is authorized assuming the 30-day filing notice is timely; the supervisor should send the forms to the agency official who is charged with authorizing COP. By this time, the supervisor should have the emergency room doctor’s report and possibly a report from the patient’s treating physician.

Employee’s right to choose his/her physician (remember, employees have a right to choose their physicians for workers’ compensation purposes. Going to the nearest hospital or clinic for emergency care, even emergency surgery, does not constitute “choosing” a physician.)

As described in the injury reports, the CA-1, CA-16, and doctors’ reports, the employee broke several bones in his foot and will be out of work about 14 days. Since this is a traumatic injury and the employee is expected back to work within 45 days, the agency can authorize COP for the next 2 weeks.

Under COP, the employee receives the same base pay and deductions and because he is on compensation his sick and annual leave balances will not be affected.

Bypassing workers’ compensation can have serious consequences, sometimes employees and supervisors are tempted to bypass the workers’ compensation system, knowing they can be treated at the agency clinic, they have Blue Cross coverage, or they can use some sick or annual leave. This way, they avoid paperwork and the facility’s injury record looks pretty good.

Cases like this can turn tragic if, for example, an injury like the broken foot was handled this way and a few weeks later a blood clot in that foot started moving and the victim suffered a severe stroke.

In straightforward traumatic injury cases, like the broken foot example, the workers' compensation system functions smoothly.

RECORDKEEPING FORMS

Report of Injury/Illness/Lost Work Days on OSHA No. 300 Log and Summary of Occupational Injuries and Illnesses is a record all Federal employee occupational injuries and illnesses. Maintain at the establishment. (Record on the log within 6 working days after receiving information on an occupational injury or illness.) Post in the workplace at the end of each year. Reporting though the CAIRS system generates the required OSHA 300 form.

DOE Form 5484.3, Individual Accident/Incident Report. Use as a supplemental record, in lieu of OSHA No. 301, to record and report each work-related fatality, injury and illness, damage or loss of property amounting to $5,000 or more, or estimated costs of $5,000 or more for cleaning, renovating, replacing, or rehabilitating structure, equipment, or property. Damage that exceeds $1,000 to government owned, rented, or leased vehicles while on official business is also recorded and reported. DOE Form 5484.4, Tabulation of Work-Hours and Vehicle Usage, and Property Valuation are used to quarterly report work-hours and vehicle usage.

ANNUAL FEOSH REPORT TO THE SECRETARY OF LABOR

29 CFR 1960.74 and Executive Order 12196 require all Federal agency heads to submit to the Secretary of Labor an annual report on their agency's occupational safety and health program, containing such information as the Secretary prescribes. Each agency shall submit to the Secretary of Labor by January 1 of each year a report describing the agency occupational safety and health program of the previous fiscal year and objectives for the current year. The report includes a summary of the agency's self-evaluation findings. Guidelines for agency annual reports to OSHA are prescribed in OSHA publication 2014.

The Chief, Health, Safety and Security Officer, as the Designated Agency Safety and Health Official (DASHO), prepares submits the DOE report of behalf of the Secretary of Energy.

The HSS FEOSH Program Manager collects data and information for the various headquarters and field program elements during the period of November and December of each year. This information typically includes; numbers of fatalities, workers compensation costs, lost work days, new worker compensation case rate, timeliness in filing cases with DOL, motor vehicle accidents/seat belt usage, training conducted, FEOSH staffing levels, a discussion of specific program accomplishments, and other information on special initiatives sponsored by either DOE or DOL.

As a FEOSH coordinator, you should be periodically collecting and reviewing this information from your site, and may be called upon by EH to provide input to the Annual FEOSH Report to the Secretary of Labor.

ACCIDENT INVESTIGATION (A/I) CATEGORIZATION

Type A

Human Effects

- Fatal, or likely to be fatal, injury, chemical or biological exposure
- Accident requiring hospitalization for treatment of three or more individuals, or has a high probability of resulting in permanent total disability due to injuries, chemical or biological exposures.
- Single individual radiation exposure resulting in:
- Total effective dose equivalent of 25 Roentgen Equivalent Man (REM) or more,
- Dose equivalent to the lens of the eye of 75 REM or more,
- Shallow dose equivalent to the extremity or skin of 250 REM or more,
- Sum of the deep dose equivalent for external exposure and the committed dose equivalent to any organ or tissue other than the eye lens of 250 REM or more and,
- Dose equivalent to the embryo or fetus of a declared pregnant worker of 2.5 REM or more.

Environmental Effects

- Release of a hazardous substance, material, waste, or radionuclide from a DOE facility (onsite or offsite) resulting in serious environmental damage in an amount greater than five times the reportable quantities specified in 40 CFR Part 302.

Property Effects

- Estimated loss of, damage to, or requiring costs for cleaning, decontaminating, renovating, replacing, or rehabilitating structures, equipment, of DOE or other property, including aircraft damage equal to or greater than $2.5 million.
- Any apparent loss, explosion, or theft involving radioactive or hazardous material under the control of DOE, contractors, or subcontractors in such quantities and under such circumstances to constitute a hazard to human health and safety or private property.
- Any unplanned nuclear criticality.

Other Effects

- Any accident or series of accidents for which a Type A investigation is deemed appropriate by the Secretary or the Chief, Officer of Health, Safety and Security (HSS).

Type B

Human Effects

- One or a series of injuries or chemical or biological exposures that results in hospitalization or permanent partial disability of one or more individuals for more than 5 continuous days

- One accident or series of accidents within a 1-year time period, resulting in five or more lost-workday cases.
- Single radiation exposure to an individual resulting in:
- Total effective dose equivalent of at least 10 REM but less than 25 REM
- Dose equivalent to the eye lens of at least 30 REM but less than 75 REM
- Shallow dose equivalent to the extremity or skin of at least 100 REM but less than 250 REM
- Sum of the deep dose equivalent for external exposure and the committed dose equivalent to any organ or tissue other than the lens of the eye of at least 100 REM but less than 250 REM and,
- Dose equivalent to the embryo or fetus of a declared pregnant worker of at least 1 REM but less than 2.5 REM

Environmental Effects

- Release of a hazardous substance, material, waste, or radionuclide from a DOE facility (onsite or offsite) resulting in serious environmental damage in an amount equal to or greater than two times but less than five times the reportable quantities specified in 40 CFR Part 302.

Property Effects

- Estimated loss of, damage to, and requiring costs of cleaning, decontaminating, renovating, replacing, or rehabilitating structures, equipment, of DOE or other property, including aircraft damage, of more than $1 million but less than $2.5 million.
- The operation of a nuclear facility beyond its authorized limits.

Other Effects

- Any accident or series of accidents for which a Type B investigation is deemed appropriate by the Secretary; the Chief, Office of Health, Safety and Security (HSS); Associate Deputy Secretary for Field Management; Cognizant Secretarial Officer; or Head of the Field Element. This includes for example, Departmental cross-cutting issues and issues warranting the attention of local news or interest groups.

ADDITIONAL INFORMATION

View the DOE FEOSH Program information brochure at:
http://www.hss.energy.gov/CSA/CSP/feosh/resource/FEOSHbrochure_2008.pdf

For more information on CAIRS contact:

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