



## Veterinary Hospital Safety

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The Occupational Safety & Health Administration (OSHA) was created under the Department of Labor to enact and enforce those measures necessary to ensure that every American has a safe and healthy work environment. These "rules" are known as standards and are published in Chapter 29 of the Code of Federal Regulations.

The Federal OSHA does allow a state to operate its own OSHA program; however, the state must set standards that are at least as effective as the federal standards and obtain approval from the federal OSHA. New York's state plan covers only public employees; private sector employees still fall under the Federal rules.

Regardless of whether the OSHA rules are enforced by the federal or state government, there are stiff penalties for non-compliance with the regulations. For example, the recommended fine for failure to display the Workplace Safety & Health Protection poster (OSHA 3165) is \$1,000; penalties for willful violations (meaning you were aware of the requirement and the potential dangers, but failed to act on the information) can be up to \$70,000 for each infraction! According to OSHA statistics, almost all inspection are a result of employee complaints or workers' compensation claims. OSHA generally utilizes two criteria for evaluation of a workplace program: documentation and training. Most veterinary hospitals have a safety plan for the staff to one extent or another, but few have the program down in writing for all to see, and fewer still have taken the time to properly train the staff on safety and emergency issues.

### Administrative Requirements

- Every employer must maintain or post at a prominent location, certain materials in the workplace. These include:
- Job Safety & Health Protection Poster (OSHA 3165) or state equivalent.
- Summaries of petitions for variances from standards or record keeping procedures. You may ask OSHA for a variance from a standard or regulation if you can prove your facility or method of operation provides employee protection "at least as effective" as that required by OSHA.
- Copies of all OSHA citations for violations of standards.

- Summary of Occupational Injuries and Illnesses (OSHA 300 & 300A) and Supplementary Record of Occupational Injuries and Illnesses (OSHA 301). These are only required if the business has 11 or more employees or if the business is selected to participate in a DOL survey. Worker's Compensation forms may be used in lieu of OSHA 301 if the information is essentially the same.
- Appropriate warning or identification signs. This usually refers to exits, hazardous areas (radiation), or situations (hearing protection required) and will be explained in those sections.
- Emergency Action & Prevention Plans. This is required to be in writing when you have 10 or more employees.

### **Hazards for the Entire Staff**

#### **Food and Beverages**

The potential for illness from ingestion of pathogens or harmful chemicals is definitely present in most veterinary hospitals. Although some veterinarians jokingly imply that immunity only comes from exposure, OSHA takes eating and drinking in hazardous areas seriously. Several years ago, a veterinarian was fined for allowing employees to eat lunch on the treatment table. Although not specifically mentioned in OSHA standards, the treatment table is a potential contamination source. Consumption of food and beverages must be limited to areas free of toxic and biologically harmful substances.

This rule also applies to preparation of foods and beverages. Many hospitals have a staff coffee pot and utensil area co-located with the lab. Sometimes the cabinets above a coffee or food area will contain hazardous chemicals or supplies. This is generally an unacceptable situation.

Hospital refrigerators are another area of concern. Staff lunches, drinks, condiments and snacks must be stored in an area free from biological or chemical hazards. Vaccines, drugs and laboratory samples are all potential contamination sources. It is acceptable to store patient food in a refrigerator with human food.

#### **General Housekeeping and Maintenance**

OSHA requires all workplaces to be maintained in a manner free from physical and health hazards. Hospitals should continuously look for unsafe or hazardous conditions by implementing daily "walk-through" inspections.

#### **Fire & Emergencies**

Prior planning for emergencies is essential to workplace safety. Pre-designated duties, routes of egress, notification procedures and personnel accountability are essential elements of an emergency action plan. Fire prevention plans must include a list of the major workplace fire hazards and control methods, the names or job titles of persons responsible for the maintenance

of emergency equipment or fuel sources, housekeeping procedures to prevent fire emergencies, training of the staff in fire prevention and the scheduled maintenance of emergency equipment.

Emergency telephone numbers, including fire, police, ambulance (or Emergency Medical Service), and emergency maintenance personnel should be assembled and prominently displayed near each telephone. Don't assume that everyone knows to dial 9-1-1 for an emergency. Since a few seconds could make the difference in an emergency, write down clear instructions and a "script" for the person to read.

All workplaces must have appropriate fire extinguishers available. In general, most veterinary hospitals would be safe to have dry chemical type extinguishers, but check with your local fire marshal to be sure. Normally, the fire extinguishers must be placed strategically throughout the hospital, and less than 75 feet apart.

There must be a program to ensure that fire extinguishers are inspected annually by a qualified technician. A record of the inspection must be maintained. This is usually done by placing a tag directly on the extinguisher. Monthly, a designated individual from the hospital must visually check each extinguisher to ensure it still properly "charged," and that it hasn't been removed or damaged. This monthly check should be annotated on the reverse side of the inspection tag.

Emergency exits and egress (escape) routes must be identified, properly marked and maintained free from obstructions. If an exit is not clearly visible, the route to the nearest exit must be properly marked. Exit doors must not be locked or fastened in such a way as to prevent free escape from the inside of the building. Normally, this means that exit doors should open outward and be equipped with a push-type latching device ("panic bar"). In no circumstances should a deadbolt or lock requiring a key to exit from the inside be installed on an exit door.

For work areas that are located in basements or other "isolated" places, it is usually required to have two means of egress so arranged as to minimize the possibility that both may be blocked by a fire or other emergency. Exit doors must be marked with a sign bearing the word "EXIT" in plainly legible letters not less than 6 inches high and 3/4 inches wide. Where the direction of travel to reach the nearest exit is not immediately apparent, a sign reading "EXIT" with an arrow indicating the direction must be posted. Exits, signs and egress routes must not be decorated or "hidden" so as to detract from their visibility.

### **First Aid**

Hospitals should make advance arrangements with the community hospital or physician for the treatment of emergencies. First-aid kits for humans are not mandated unless there is no hospital, infirmary or clinic in proximity to the workplace. Procedures to summon Emergency Medical Service (EMS) personnel in the event of a serious accident should be established, and emergency phone numbers should be posted near all telephones.

## **Electricity**

One of the most common (and most often overlooked) hazards in today's veterinary practice is electricity. In recent years, workplaces have been inundated with new labor-saving and service-enhancing technologies - most of which require electricity to operate.

Hazards from the equipment include electric shocks and maybe even physical trauma from moving parts, but the real danger comes when the buildings electrical service is not adequate to handle the demand. Most practices simply do not have enough outlets in areas where equipment is located. In older buildings, sometimes the wiring is simply not up to the task. In some cases, outlets are not grounded to meet the safety codes of today.

Since the veterinary profession has a history of "making do with what we have," these shortfalls don't stop us. We improvise with extension cords, power taps, outlet multipliers and surge protectors! Oh, these things are usually OK for temporary applications such as a work light, saw or drill for a specific job, but they were not designed for constant use. Nobody sets out to intentionally overload electrical cords or outlets, but it happens. Over time we add "just one more" thing to the circuit until something becomes the proverbial straw that broke the camel's back. Fortunately, these types of problems are easy to fix.

Electrical services and equipment have many safeguards built into the designs, but those safeguards can't work if they are worn out or damaged. Wiring insulation, outlet and switch cover plates and strain relief devices all play a vital role in protecting the user and the facility from hazards. Damage to the insulation on an appliance or extension cord can cause an electrical shock without warning. Damage to the wiring, plugs or outlets themselves can weaken the current-carrying elements of the system and result in overheating and possibly a fire. Appliances and equipment with flexible electrical cords will usually have a clamp or rubber grommet where the cord attaches to the case or housing. This clamp is designed to prevent any strain on the electrical connections from use or accidents - thus the name strain relief clamp. Short circuits, fires and even electrocution can occur when the strain relief clamp is loose, damaged or missing.

With the proliferation of technological equipment in today's workplace, many facilities, including veterinary hospitals are faced with a common dilemma: not enough outlets to support the equipment. At least not enough outlets in the right places!

Computers, hair clippers, cage dryers, lab equipment, autoclaves, automatic processors and even telephones all require electricity to operate. Because a practice must keep up with technology to stay competitive and modern, we find our fixed resources stretched to the maximum.

When we add a new piece of equipment to the practice we first have to find a place for it. Most of the equipment is now "desktop" or "countertop" models. Although these devices tout their space saving features, they also lend themselves to "overcrowding" counters and shelves. In a lab where there were 4 outlets, we now have six devices needing electricity. At the front desk, we have two outlets and now need at least eight to support the new computer. In the grooming area, we have six outlets, but they are not in the right places.

All of these challenges happen every day in the average practice. At first the solution may seem as simple as using an extension cord, surge suppresser or outlet multiplier, but that may just be the beginning of new problems. These devices typically have one thing in common: a significantly lower capacity to carry a load than the permanent wiring of the building. When we use these devices to make multiple outlets out of a single receptacle, we not only add load to that outlet, but we also place an additional demand on the entire circuit. For example, imagine an electrical circuit with 10 receptacles. What would happen if we added a six strip power tap to just two of those outlets? We would increase the load from 10 to 20 receptacles. That's double the designed load!

## **Stairs**

Stairs in the practice must be safe and sturdy. The lighting level must be adequate to clearly see the treads when ascending or descending the stairs. Headroom must be adequate. Any set of stairs with four or more risers must have a hand railing.

## **Vehicles**

OSHA's concern for employee safety does not stop at the doors to the practice. According to a recent survey by OSHA, motor vehicle crashes are the leading cause of death for American workers. Because of this, there are many standards in effect that deal with the safety of practice vehicles and machinery.

- First and foremost, make sure every employee who operates a vehicle while on duty has a valid driver's license in your state. Even if the employee uses his or her own vehicle, if they are on an "official" errand for the practice, then the practice is probably liable for any accidents they have - even before their own insurance carrier!
- Ensure that all lights, signals, wipers and the horn works properly.
- Make sure the tires are inflated to the proper pressure and have adequate tread remaining.
- Check to be sure that both the regular and parking brakes operate normally.
- If the operator's view to the rear is obstructed by the load or the vehicle design, then an audible (sound) back-up alarm must be installed.
- Finally, make sure the vehicle's seat belts work properly and are in good repair. Make sure there is a hospital policy that requires the use of seat belts and compliance with posted speed limits!

Is there a tractor in use at your practice right now? If so, then you should be aware that OSHA has specific standards for these type of vehicles also. These rules are not unlike the ones for industrial forklifts or heavy construction equipment.

- Make sure every person who operates the equipment has been properly trained to do it safely. They must know the functions of all the buttons, dials, lights, gauges and levers. As always, you should have a record of all employee training, and this is no exception.
- The tractor must be equipped with a roll-over protective structure (ROPS) , even if it's used exclusively on level ground. More commonly known as a "roll bar" the ROPS is to protect the operator from being crushed by the tractor if it should roll over.
- There must be an operable auto-type seat belt for the operator as well as a written hospital policy requiring its use.
- As you could imagine, there is a requirement for operable brakes and brake lights.
- If the operator's view to the rear is obstructed, then there must be an audible back-up alarm.

## **Ergonomics**

OSHA is currently studying the whole issue of repetitive motion disorders in the workplace. In general, the most common ergonomic injury suffered in the veterinary profession is slips, falls and lifting incidents. At the present time, the best advice is to make sure staff members wear appropriate footwear and have repeated reminders of the necessity for proper lifting techniques.

There is some concern that groomers may suffer from repetitive motion disorders more than any other staff member. Until more data is known, the best advice is to take an appropriate number of breaks, vary the routine and practice hand/forearm dexterity exercises frequently throughout the day.

## **Violence**

We have all heard the spectacular news stories of disgruntled former employees going on a shooting rampage in retaliation for whatever perceived injustice they have suffered. This is the image that we most associate with workplace violence. The truth is that most incidents of violence against workers doesn't make the news because it is more common than we like to believe. On the average, two American workers are assaulted, murdered or raped while on duty every minute of every day!

In any business, including that of a veterinary hospital, violence typically happens due to one of these four reasons:

- Robbery or intentional assault (stalking);
- Customers or clients under extreme duress who "lash out;"
- Workers who have a dispute with supervisors, coworkers or just "the establishment;" and
- Unhealthy personal relationships (jealous or estranged domestic partners).

As the veterinary profession adapts to meet the needs of a changing society, we are gradually increasing our risk of a violent act happening in the practice. Perhaps the greatest example of this is today's veterinary emergency clinic. The emergency clinic is open throughout the night and often in dangerous neighborhoods. They are typically staffed with a skeleton crew that is preoccupied with internal cases to be very aware of external threats.

But it's not just emergency clinics that are at risk. The traditional veterinary practice shares many of these same concerns. Although violence in the veterinary profession is not as common as in other industries or fields, it does happen. The accurate prediction and preventing of workplace violence is not exact, but already we see emerging trends. Perhaps the most promising news is that increased awareness and preparation seem to be the best prevention strategies.

Although the leadership is faced with the challenge of balancing the need for security with the rights of privacy for employees and the demand for service from the public, it is reasonable to have an appropriate mix of all three. Here are some situations that could and have happened in veterinary hospitals. Discuss these scenarios at your next staff meeting and have each person think about what they would do in the same situation.

- **The angry client that turns belligerent.** Given the strength of the human-companion animal bond, it is no surprise that some people take misfortune to their pet very hard. An unexpected loss or even the stress of an unexpectedly high bill can send some people who are prone to violence into an uncontrolled rage. The best defense is to keep the lines of communication open and keep the client truthfully informed all during the case. The article on page 7 has more help on delivering bad news.
- **An employee leaving the building is approached by a stranger before she can get in her car.** It's after 7p.m. and the last of the staff is leaving for the day. She is anxious to get home and rushes out. She didn't notice the two people standing by a car at the far end of the parking lot until she was halfway to the car. They approach her saying, "Hey, what's your hurry?" If only she would have taken a few seconds before she left the safety of the building to look outside and make sure the area was clear.
- **An intoxicated or impaired person who has no business in the hospital "just wants to talk."** People who are drunk or on drugs are often unpredictable. Instruct staff members to summon assistance from a coworker at once. Politely ask the person to leave explaining that the staff is busy and must get back to work. If they do not comply, call the police at once. Don't wait until the situation escalates.
- **A person with a weapon demands drugs or money.** Crime happens in every neighborhood sooner or later. Staff members must be instructed to always cooperate and give them what they want. Never have the employee resist unless they are in physical danger of injury or abduction.
- **The estranged husband of a staff member enters the clinic and is obviously intoxicated.** He stands in the waiting room and generally makes a scene.

- **A staff member is making the bank deposit and is involved in a traffic accident that turns violent.** Remember that a staff member is considered “on duty” whenever they are enroute to or engaged in company business. Remind everyone that while on company business, they must obey all traffic and laws and courtesies, even if they are in their own vehicle. Never use obscene gestures or phrases directed at another motorist. If you are involved in an accident, be polite and cooperative - never confrontational - with the other driver. Wait until the police arrive to discuss the incident and notify the hospital about the incident as soon as possible.
- **Another staff member is making a “supply run” to the store and is assaulted while loading the materials in the car.** The best defense is to cause a scene and attract attention. Criminals rely on the predictable cooperation of their victims. If the parking lot is not very visible (e.g., underground garages) or very well lighted in the evening hours, ask the store for assistance in loading the supplies.
- **While working alone on a holiday, the kennel attendant is confronted with an angry client demanding to take their pet home from the hospital.** We have all had a situation where a boarding or hospitalized pet was scheduled to go home on the day before a long holiday weekend, but for some reason or the other, the client never made it before everyone left. The client, not wanting to pay for extra days and missing their companion, sees a car in the parking lot while passing the next day and decides they will get their pet. Make sure every staff member follows the safety rules for working alone (see article on next page) and understands the practice’s steps for releasing a pet to the owner. Be sure to instruct weekend or part-time workers on how to reach the doctor or supervisor when necessary.

Remember the best way to deal with incidents like these is to anticipate them, stay alert, be observant of your surroundings and institute safeguards when necessary.

## **Chemical Hazards**

The Hazard Communication Standard (HCS) or "Right-to-Know Law" mandates that every business which handles, stores, or uses potentially dangerous chemicals develop a written plan for these procedures. These rules apply to all chemicals on the premises, regardless of whether they are currently used in the process or not. There are some exceptions:

- “Any consumer product...as defined in the Consumer Product Safety Act (15 USC 2051 et seq.)...where the employer can demonstrate it is used in the workplace in the same manner as normal consumer use...,”
- “Any drug...when it is in solid final form for direct administration to the patient (i.e. tablets or pills),”
- “Food, drugs, or cosmetics intended for personal consumption by employees while in the workplace.”
- “Any food or food product...”

- “Articles...which do not release or otherwise result in exposure to, a hazardous chemical, under normal conditions of use.”

Here are the basic rules:

- Develop a Hazard Communication Plan including a list of all hazardous products;
- Obtain a Material Safety Data Sheet from your distributor for those items on your list;
- Ensure that all containers of hazardous materials, including secondary containers such as table wash bottles, are labeled with the chemical name and the appropriate warning; and
- Train workers on the safety aspects of handling the chemicals.

### Ethylene Oxide

Electrical drills, rubber products, and sharps are commonly exposed to Ethylene Oxide (EtO) as a sterilization agent in human and veterinary medicine. This method has distinct advantages, but since EtO is a potent human carcinogen, special precautions must be maintained. OSHA standards require hospitals who use EtO to develop a comprehensive written plan for the safe handling, storage and use of the agent if there is a chance that workers may be exposed to concentrations at or above the Permissible Exposure Level (PEL). At a minimum, the hospital's plan must include the following elements:

- Designation of an appropriate location for storage and use of the agent.
- An acceptable receptacle or device for performing the procedure. Rubber trash cans and thermal coolers are NOT acceptable.
- Initial monitoring of exposure levels. This is accomplished with badges, similar to the ones used for radiation monitoring. Short term exposure limits (STEL) of 5 parts per million (ppm) and an 8 hour time weighted average (TWA) of 1 ppm are the maximum PELs in the workplace.
- Detailed emergency procedures for accidents involving release of EtO gas into the workplace (e.g., accidental breakage of an ampule, etc.) This includes emergency warning procedures, evacuation protocols and the availability of appropriate respirators for clean-up operations.
- EtO in large compressed gas containers (instead of the ampules) usually have a concentration of 12% EtO and 88% Fluorocarbons. When the 88/12 mixture is used, biweekly (every two weeks) inspections for leaks around doors, gaskets, hoses, piping, filters, valves and cylinders with a Fluorocarbon leak detector is required. A written log of these checks and the values obtained must be maintained.
- Appropriate employee training covering the provisions of the OSHA standard, the methods used for monitoring, the physical and health hazards of EtO, measures for protection, and the details of the hospital's written hazard communication plan.

## Formaldehyde

Since formaldehyde is a known human carcinogen, OSHA takes its use very seriously. The standards for use of formaldehyde are very similar to the standards for use of ethylene oxide. At a minimum, the hospital's plan must include the following elements:

- Designation of an appropriate location for storage and use of the agent.
- Initial monitoring of exposure levels. This is accomplished with badges, similar to the ones used for ethylene oxide monitoring. Short term exposure limits (STEL) of 2 parts per million (ppm) and an 8 hour time weighted average (TWA) of 1 ppm are the maximum PELs in the workplace.
- Detailed emergency procedures for accidents involving release of formaldehyde gas into the workplace (e.g., accidental breakage of a container, etc.) This includes emergency warning procedures, evacuation protocols and the availability of appropriate respirators for clean-up operations.
- Appropriate employee training covering the provisions of the OSHA standard, the methods used for monitoring, the physical and health hazards of formaldehyde, measures for protection, and the details of the hospital's written hazard communication plan.

Whenever possible, order formalin in small, pre-diluted containers so that the potential for exposure above the PEL is minimized. Very often the laboratory will supply pre-labeled vials at no charge.

## **Hazards for the Medical Staff**

### **Animal Handling**

Although handling animals in itself is not a dangerous job, the unpredictability of some animals or situations can turn a routine episode into a very dangerous event. There are many situations that OSHA doesn't address directly, but getting caught in a run with a vicious dog is definitely dangerous. The hospital director should make sure all people (including volunteers) who handle animals are properly trained in restraint procedures. There should be a mechanism for workers to summon assistance when they get into trouble. Could someone yelling for help from the kennels be heard in the front of the hospital above the chorus of barking dogs? What about weekends or off-hours when there may be only one person in the building?

### **Rabies Vaccinations for Employees**

There is no direct OSHA standard that requires veterinary healthcare workers to be vaccinated against rabies. That's the simple answer. However, there are many more factors that must be considered before making this decision.

Although there is no direct requirement, OSHA's General Duty Clause does require employers to provide a workplace free from unnecessary dangers. In past situations involving other industries (professions), when protection (such as vaccinations for hepatitis-B) was available and the risk was found to be greater than the average population (such as human healthcare workers),

OSHA has required the employer to provide the protection at no charge to the employee or obtain the employee's written waiver of the vaccine. In any case, it is necessary to inform the worker of the exact nature and degree of risk, as well as the everyday safety methods to use.

Although requiring the vaccinations will not alleviate the necessity for adequate training and procedures, it will go a long way in solidifying the employer/employee relationship as a synergistic one. Of course the decision on exactly who should be vaccinated and the associated costs must still be addressed.

Not all employees should be vaccinated. That is the first decision that must be explored. Unless the worker has significant contact with animals that pose a risk, protection is not usually necessary. Receptionists, bookkeepers, and other administrative staff members, if restricted from contact with high risk animals would need the protection. Groomers would normally not be at an increased risk because the animals they handle are always healthy and properly vaccinated. Animal caretakers, technicians and veterinarians should be considered at risk if they examine, treat or care for high risk animals. Not all veterinarians, technicians or animal caretakers need to handle these cases; designate a high risk team to handle and treat all wild, feral or suspicious animals. Only the members of the high risk team will then need to be vaccinated.

Of course this approach would not be for every hospital, especially smaller ones where one staff member performs many functions or must routinely work alone. In those instances, it is advisable to make the safe decision and provide the protection. For the positions with high turnover rates, the decision to provide vaccinations could be deferred for several weeks to find out if the new employee will perform and remain in the position. If this method is chosen, then the leadership should make every effort to limit the new employee's exposure to high risk animals during the probationary period. Although the decision to provide the pre-exposure vaccinations is one that must be made by every individual practice owner, most people feel the benefits outweigh the drawbacks in most instances.

## **Noise**

OSHA standards require a hearing conservation program when workers are exposed to noise levels above 85 decibels (db) based on an eight hour time-weight average (TWA). As a general rule, the louder the noise, the shorter exposure is permitted.

The hearing conservation program can take many forms, including medical evaluations and periodic audiograms for employees, safety equipment, reduction in noise levels by absorption or dissipation, training of employees, and posting of warning signs identifying noise hazard areas.

The design and configuration of kennels and wards vary from one hospital to another, but regardless of their layout, kennels can be very noisy places. Outdoor runs generally do not have the echo or "bounce" of sound waves common to an indoor area, but they still can be noise hazard areas. Noise from dryers and clippers in a grooming room can also present a hazard. Depending on the size of the room, the number of dryers and clippers in use, and the texture of the walls, noise levels can get up to 100 decibels.

Although it will vary from one breed to another, as well as one animal to another, noise level from a barking dog can reach 80 or 90 decibels. It doesn't take much of a chorus of barking dogs to exceed the threshold limit for a noise hazard area. In hospitals the author has consulted with, noise levels in the kennels typically ranged from 95 to 115 decibels measured at the center of the room. At the upper end of this range a person could work approximately 15 minutes in the area without hearing protection during an average 8 hour work day.

If the noise levels cannot be reduced below the threshold limit by architectural or engineering means, then personal hearing protection is required for workers. There are literally hundreds of varieties of ear plugs and phones available. Choose one that is rated to reduce noise levels by at least 20 decibels. Disposable, foam rubber ear plugs are the most common, and are relatively inexpensive. Keep these ear plugs away from animals since they are easily swallowed and will cause digestive problems.

Noise hazard areas must be identified by means of a poster, placard or sign. The wording should reflect the degree of danger. Typically, a sign stating "Warning: Noise Hazard Area. Hearing protection required for prolonged exposure" is sufficient for most areas. Place the sign at all entrances to the areas, including exterior doors.

## **Anesthesia**

The NIOSH established limits for occupational exposure to waste anesthetic gasses is less than 2.0 parts per million (ppm) for all halogenated agents (methoxyflourane, halothane, isoflurane). Exposure to the nitrous oxide must also be maintained below 25 ppm. Most hospitals are unaware of the actual concentration levels of waste anesthetic gasses in the workplace, but with a comprehensive WAG management program, the risk of unnecessary exposure can be minimized. A comprehensive WAG management program should consist of the following elements:

- Application of a well-designed WAG scavenging system. This is the single most effective means of reducing exposures of WAGs in the workplace. A proper scavenging system will capture the excess gasses directly at the source and transport them to a safe exhaust port, usually outside the building. There are three general methods of WAG removal currently in use: active scavenging, passive exhaust and absorption. Each has a place, but rarely does one method fit all circumstances.
- Routine maintenance and evaluation of anesthesia equipment. Anesthetic machines must be checked for leaks and serviced periodically. Although there is no "set" interval, the machine manufacturer's recommendations should be followed. At a minimum, daily "pre-use checks" for leaks in the hoses or connections should be performed, and examination or calibration by a qualified medical equipment repair technician should be completed every four months.
- Developing or revising work practices that minimize leaks and non-scavenged operations. Detailed training for staff members who operate or clean anesthesia equipment is a must. Training should include all areas of anesthesia agent use, including

storage of the liquid agents, refilling of the vaporizers, emergency procedures if a bottle is dropped and broken, as well as general operating instructions for the machine.

- Training of the staff in proper principles of anesthesiology so that only the minimum amounts of anesthetic agents are used. Many hospitals use the "about that much" method of gas anesthesia and can significantly reduce the quantity of anesthetic agents used if flow rates were calculated prior to induction.
- Adequate general ventilation in the work areas. Some procedures, like masking, defy collection of waste gasses. In those instances, make sure the ventilation in the room is good. Exhaust fans for evacuating room air to the outside are recommended. Be conscious of air handling systems that recirculate the air; exposure of others may be the result. Induction chambers can be connected to the scavenging system or absorption canisters to reduce the levels of escaping gasses.

### **Compressed gas cylinders**

Compressed gas cylinders should be stored in a dry, cool place, away from potential heat sources such as furnaces, water heaters, and direct sunlight. They must be secured in an upright position by means of a chain, or strap. Cylinders stored inside closets should also be secured since they can still fall against the door and injure someone who opens the door. Transportation carts and floor mounting collars are also acceptable methods of securing compressed gas cylinders. If equipped with protective caps, they must be in place when the cylinder is not in use. Large cylinders should be moved with the aid of a cart.

Special care should be taken when connecting or disconnecting tanks, as gasses compressed to several thousand pounds can cause serious injury to eyes and extremities. Impact resistant protective goggles should always be worn when handling compressed gas tanks.

### **Radiology**

This area is sometimes confusing to veterinarians since there is often a state registration and inspection requirement for radiation machines. Veterinarians in states with Atomic Energy Commission approved radiation protection plans would be in compliance with OSHA's requirements if they followed the guidelines of their state regulations. Currently, such approved plans are in effect in Alabama, Arizona, Arkansas, California, Colorado, Florida, Georgia, Idaho, Kansas, Kentucky, Louisiana, Maryland, Mississippi, Nebraska, New Hampshire, New York, North Carolina, North Dakota, Oregon, South Carolina, Tennessee, Texas and Washington.

In all other states, the regulations enforced by OSHA are independent of those required by the state, and the veterinary hospital must follow the most stringent requirements.

A complete hospital radiation safety program must include the following elements:

- Regular evaluations of equipment and procedures.

- Approved monitoring devices for all personnel exposed to ionizing radiation. At a minimum, notification to workers of their exposure measurements must be made annually. Many consultants suggest this become part of the employee's annual performance review.
- Identification and posting of radiation areas. Signs containing the conventional, three blade, radiation caution symbol (magenta or purple on a yellow background) and the words "CAUTION RADIATION AREA" must be conspicuously posted in all radiation areas.
- Availability of appropriate protective equipment. At a minimum, usable lead gloves and aprons must be available. Thyroid and retinal protection is recommended, but not required.
- Written safety policies, operating instructions, and training programs. Staff members performing radiographic duties must be made aware of the hazards associated with radiation, the hospital's policies for minimizing exposure, the proper operation of equipment, and the provisions of OSHA's Ionizing Radiation Standard. A copy of OSHA's standard, as well as the documented rules and operating procedures must be readily available.

Some very simple practices will greatly enhance the effectiveness of a radiation safety program. Things like collimating to isolate the area of concern (leave a clear border around the film), proper measuring and settings to avoid retakes, and rotating radiographic duties among all qualified staff members will significantly reduce the dangers.

### **Sharps and Medical Waste**

This is an area of double concern. The OSHA recognizes that the handling of sharps (needles, scalpel blades, etc.) is a serious safety hazard in veterinary hospitals, but the Environmental Protection Administration (EPA) is the agency responsible for most of the attention and regulations for disposal of medical wastes. Although sharps could definitely be a regulated medical waste, not all waste from a veterinary hospital is considered harmful to humans or the environment.

The federal guidelines for handling and disposal of medical specific wastes provide some good "common-sense" principles of workplace safety. New York has enacted a medical waste tracking acts which details medical waste disposal.

The practice of reusing syringes requires that someone remove the needle, clean the syringe, package and sterilize, then re-stock the syringes. This places someone at an increased risk of injury and is usually not allowed after an OSHA inspection.

Current recommendations suggest the immediate disposal of the entire needle/syringe unit into a puncture-proof, leak resistant container is the best method of containing sharps. This is sound advice, and already practiced in many facilities. The term "puncture-proof, leak resistant" is

very misunderstood. Ordinary plastic milk containers are not sufficient. Try pushing a 22 gauge needle through one. The containers made for this specific purpose are the most effective and are usually very economical.

The practice of cutting needles prior to disposal increases the potential for aerosolization of the contents and should be discontinued. Likewise, the practice of collecting sharps in a smaller container and transferring them to a larger container for disposal places someone at an increased risk of exposure and is not recommended.

## **Chemotherapy**

The occupational risks associated with cytotoxic drugs (CDs) are a combination of the drugs' inherent toxicity and the extent to which the worker is exposed to the drug on the job. The chance of exposure can occur at many points in the handling process, and in the veterinary practice, the most probable routes of exposure are through inhalation of drug dusts or droplets, dermal absorption, and ingestion through contact with contaminated food or cigarettes. The first step in controlling or eliminating these probable exposures is to design a workstation that supports the safe completion of the procedure. In this section, we'll discuss the physical or facility concerns that must be addressed to safely use these drugs.

Perhaps the most basic purpose of physical safeguards is to prevent or control environmental exposure. Typically, this exposure comes in the form of splattering, spraying, and aerosol generation of the material. Aerosols can be generated by many activities, exposing not only the employee immediately involved, but also other staff members in the area. Therefore, it is strongly suggested that all CDs be prepared in one centralized area; this will minimize the risk of "extraneous" contamination. A Biological Safety Cabinet (BSC), where only CDs are prepared, should be used. If the BSC does not vent to the outside, then an appropriate HEPA filter must be installed. If the hood is exhausted outside, the discharge opening should be at an appropriate level and away from air intake units.

Warning signs designating the area as a cytotoxic drug preparation area that should not be entered by unauthorized staff should be clearly posted. Spill clean-up procedures should also be posted nearby for easy referral in an emergency. Additionally, smoking, drinking, applying cosmetics, and eating should never take place in the preparation area, as they greatly increase the chance of exposure.

Labeled sealable plastic or wire tie bags should also be available so that contaminated boxes, gloves, gowns and paper liners can be contained properly. There should be a closable, puncture-resistant, shatter-proof container for disposal of contaminated sharp/breakable materials within the work area. Mixing and preparation of the solutions should be done on a disposable absorbent pad; the pad should be discarded in an appropriate waste container (not general trash) upon completion of the procedure or if it becomes soiled. This will prevent any spilled liquids from evaporating too quickly.

The area should be cleaned thoroughly with 70% alcohol at least daily, when the procedure is completed or whenever a spill occurs. Normal disinfection procedures with a germicidal agent

are inappropriate for CD areas. Germicidal disinfectants are largely ineffective against these substances because they are not biological agents and in some cases may cause a chemical reaction.

Aftercare of the patient receiving CD treatments requires a little discussion. Workers who will change soiled bedding or cage materials should be instructed on the hazards of the patient excreting the drugs in body secretions for up to 48 hours after administration. Any staff member who must clean up blood, vomitus, or excreta from patients who have received CDs in the last 48 hours should follow these procedures:

- Always wear surgical latex gloves and disposable gowns when cleaning up spills involving excretia or blood. The gowns and gloves should be discarded after each use.
- Always use surgical latex gloves and a disposable gown when cleaning cages or runs. Contaminated bedding should be placed in a specially marked laundry bag and the laundry bag placed in a labeled impervious bag. This laundry bag and its contents should be washed twice with normal detergents. Laundry personnel should wear surgical latex gloves and gowns while handling this material. No additional gain is made by autoclaving items contaminated with CDs since chemicals are not inactivated like biological organisms simply by sterilization.
- Disposable materials like cage paper should be placed in a separate plastic bag and immediately sealed. The sealed bag should be disposed of according to the hospital hazardous waste plan.
- When possible, patients receiving CD therapy should be exercised in a separate area from other patients. Feces from patients deposited in exercise areas should be removed promptly following the same precautions.
- Of course, proper personal hygiene practices should be followed after handling any patient. A thorough hand washing using a detergent soap should be performed after completion of these tasks.

Most practices will hospitalize the patient for this treatment, but if it is to be performed on an outpatient basis, or if the patient will go home less than 48 hours after the treatment, then it is important to inform the client of the safety precautions also. Although OSHA has no interest in the clients because they are not employees, and their long-term risk is very low because they are not chronically exposed to these drugs, it is vital that the clients understand the patient may expel these drugs in urine, feces and sometimes even saliva. Again, protective gloves and proper personal hygiene are the cornerstones of protection.

### **Staff Safety Training**

Have you been putting off your safety training because you just don't know what to cover? Are you confused about what information to pass on and how in-depth it should be? You're not

alone. Most managers feel the same way. Although there are over 100 current OSHA Standards that require some sort of training for the employee, there are only a few topics that apply to the veterinary practice. Many of those topics, like radiation and anesthesia safety are already discussed on an informal level at every hospital so you're probably already on the road to success!

Sometimes there is not a specific OSHA standard covering a topic, but since the task has known hazards, OSHA will use the General Duty Clause in requiring the business to inform the staff of the hazard.

For instance, there is no special standard that regulates exposure to waste anesthetic gasses, but the Hazard Communication Standard requires that the practice educate the staff members of the risks and procedures to follow when working with that hazardous chemical and to take the necessary steps to ensure the workers are not exposed to the chemical above the permissible level.

To get started on your training program, keep a running list of all the topics you want to cover. (See the sidebar in this section) Don't try to cover all the topics at once but spread them out over several months. Assign different staff members to become the "in-house expert" on each topic; they will be the person who delivers the training to the rest of the team.

Although some standards require specific points to be covered (e.g., the personal protective equipment standard), you would generally be safe to structure the information so that it covers the following aspects in all training materials:

- ▶ information or identification of the hazard or procedure;
- ▶ how the hazard affects the worker;
- ▶ what the individual worker should do to protect themselves; and
- ▶ how to report problems or request additional information, including the location of the written plan that was developed to deal with that hazard.

Make a training schedule for the next six months or even a year and show when each topic will be addressed. Even if the practice is inspected before the complete schedule is covered, the mere presence of a training outline will often impress the inspector enough that he or she will not issue a citation!

No matter what method of instruction is used, there must be a way for employees to ask questions or provide feedback. In staff meetings and formal training sessions, that's no problem, but for individual training times (new employees, etc) the supervisor must make sure the employee understands the information by having him or her answer questions or even demonstrating the technique that was just taught. The supervisor or trainer does not have to be present during the learning phase (e.g., watching the videotape) but they must follow-up the session with personal involvement.

The main point of every training session must be concern for the worker's safety; avoid giving the impression that the training is only being done so the business will stay out of trouble with OSHA. Staff members will relate to the message better and grasp the information quicker when

they feel a personal involvement. If the staff feels the practice leadership is only doing this training to stay out of trouble with the government, then they often don't pay attention. If the staff believes this is the practice's attitude toward safety, they will do just enough to stay out of trouble with you. They'll also push the limits at every chance to see exactly where you will enforce the rules.

Keep a record of all employee training. It's not enough that you provide the information and evaluate an employee's competence, you have to be able to prove it. Have an attendance sheet to pass around for group meetings and make sure everyone signs it. It's also a great idea to maintain an individual training record for each staff member. Many human resource professionals suggest keeping the individual sheets in a folder or three ring binder that is accessible to the employees. The employee and their supervisor are jointly responsible for keeping the training record current.

Here is a list of OSHA standards that specifically require employee training. Use this list to start your training schedule and remember - your practice should add topics that are appropriate to the given situation. The goal of many practices is to complete the list once every year.

- General duty clause-Worker's rights and responsibilities under the Act.
- 1910.38-Emergency & fire prevention plans
- 1910.95-Occupational noise exposure
- 1910.96-Ionizing radiation
- 1910.132-PPE
- 1910.145-Signs and tags
- 1910.15-Medical services and first aid
- 1910.157-Portable fire extinguishers
- 1910.1047-Ethylene oxide
- 1910.1048-Formaldehyde
- 1910.1200-Hazard communication (chemicals)

In addition to the standards-mandated subjects, these topics also require some training for veterinary practice workers:

- Waste anesthetic gas exposure
- Animal handling
- Zoonotic disease prevention
- Medical waste and sharps
- Personal safety/violence prevention
- General workplace guidelines (lifting, proper dress, etc)
- Handling chemotherapeutic drugs
- Electrical safety

Just remember, the bottom line when it comes to safety training is: "the employee must be competent to perform the task or job in a safe manner."

Since most OSHA inspections are the result of an employee (or former employee) complaint or a reported injury or illness, very often the inspection will focus on a specific area of concern within the workplace. Just as medical professionals specialize, the inspector's expertise in occupational health or general safety rules will also play a role in what portions of a hospital safety program are evaluated. With that in mind, we'll discuss the elements of an entire hospital safety program. Remember, this is not an overnight project. There are few definitively right or wrong answers. The important objective is to document the policies and practices that are in effect now. Changes and revisions will come with time. When you have completed a section's policy statements and training materials, add it to the Hospital Safety Manual binder. This will demonstrate a comprehensive program.

### **Summary**

Just like any other program or procedure, a good hospital safety program doesn't have to be complicated. It should be practical and understandable. If the staff doesn't remember the rules, then training is lacking or the program is too complicated. Only by understanding the requirements and applying the safeguards that are necessary to protect the worker, patient and practice owner can the practice continue with the primary mission of healthy pets. It is the leadership's responsibility to set and enforce the safety rules of the practice and the employee's responsibility to learn and follow those rules.

# American Humane's Complete OSHA and Safety Guide for Animal Shelters

By Dena J. Fitzgerald, CAWA



AMERICAN HUMANE

*Protecting Children & Animals Since 1877*

## Disclaimer

While American Humane has made every attempt to ensure that the information in this guide is accurate, up to date and comprehensive at the time of publishing, we make no guarantee that it will cover all possible safety and liability risks and applicable laws that may be encountered, and we assume no responsibility for injury, loss or noncompliance with the law.

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Unless otherwise noted, all information in this publication regarding OSHA standards and guidelines is taken from the OSHA website at [www.osha.gov](http://www.osha.gov).

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## 1.0 Introduction

The Occupational Safety and Health Administration (OSHA) is an agency of the U.S. Department of Labor created under the Occupational Safety and Health Act of 1970. OSHA's mission is to prevent work-related injuries, illnesses and deaths by issuing and enforcing federal standards for workplace safety. These standards are published in Chapter 29 of the Code of Federal Regulations (CFR). The Occupational Safety and Health Act allows individual states to develop their own workplace safety plans, as long as they cover public sector employees and provide protection equal to that provided under federal OSHA regulations. As of January 2010, there are 22 states/territories with approved plans covering both public and private sector employees, and four states/territories with approved plans covering public employees only. For the most part, these individual state standards are identical to the federal OSHA standards. However, some state plans also include additional requirements that are not part of the federal program.

States/territories with approved plans covering both the public and private sectors:

Alaska	Michigan	Tennessee
Arizona	Minnesota	Utah
California	Nevada	Vermont
Hawaii	New Mexico	Virginia
Indiana	North Carolina	Washington
Iowa	Oregon	Wyoming
Kentucky	Puerto Rico	
Maryland	South Carolina	

States/territories with approved plans covering the public sector only (private sector employees in these states are covered under federal OSHA standards):

Connecticut	New York
New Jersey	Virgin Islands

***If your shelter is located in a state or territory that has its own approved OSHA plan, you should refer to those state OSHA standards when implementing compliance.***

In addition to the many OSHA standards, there have also been several sets of guidelines issued by OSHA in recent years. Employers are required by law to comply with all published OSHA standards, but compliance with guidelines is voluntary. An example of this is the guidelines issued for ergonomics in the workplace. All OSHA standards and guidelines can be found on the OSHA website at [www.osha.gov](http://www.osha.gov).

There are several critical safety risks found in animal shelters — such as animal bites and zoonotic diseases — which are not specifically addressed by any OSHA standard, but are covered under Section 5(a)(1) of the Occupational Safety and Health Act. This section, also referred to as the General Duty Clause, requires employers to “furnish to each of his employees employment and a place of employment which are free from recognized hazards that are causing or likely to cause death or serious physical harm to his employees.”

For many animal shelter managers, achieving OSHA compliance seems like a daunting task. Reading, interpreting and applying the information from the federal OSHA website or your state's website can be extremely difficult due to the format in which the information is presented. The standards are published exactly as they were written into law by the legislators, reading like “legal jargon” to most laypeople.

There are a significant number of OSHA standards that do not apply to most animal shelters, and differentiating between them and those that do apply can be challenging.

Whether you are starting your shelter's safety program from scratch or just need to resolve a few compliance issues, this guide will help you through the process step by step and in a format that is easy to understand and apply. This guide covers federal OSHA standards and guidelines that are applicable in all U.S. states and territories, but please keep in mind that those states/territories with their own OSHA plans may also have some additional standards or guidelines that you need to be aware of.

## 2.0 Creating a Safety Manual

Although not required by OSHA, creating and maintaining an up-to-date, comprehensive safety manual is by far the best way to organize all the OSHA- and safety-related information for your shelter in one place, and to ensure that it is easily accessible to staff. The safety manual should be the primary means of communicating and enforcing your shelter's safety policies and procedures. The safety manual should be a separate document from the employee policies and procedures manual. Ideally, every employee should be furnished with a copy of the safety manual upon hire, and a copy should also be readily available in a convenient location within the workplace, such as the employee break room. Creating an electronic PDF version of the safety manual and making it accessible on a CD or shared computer drive is a good alternative to printing hard copies. If you are going to create hard copies, a three-ring binder works best so that you can easily remove and replace pages in the future when a policy or procedure is updated.

The contents of a comprehensive animal shelter safety manual should contain, but not necessarily be limited to, written policies and procedures for the following topics:

- Employee Rights and Responsibilities
- Safety Training
- Work-Related Injuries and Illnesses
- Hazard Communication Plan
- Secondary Container Labels
- Personal Protective Equipment (PPE)
- Safe Animal-Handling Practices
- Zoonotic Diseases
- Food and Beverages in the Workplace
- Noise Hazards
- Eyewash Stations
- First-Aid Kits
- Waste Disposal
- Chemical Spills
- Electrical Safety
- Fire Prevention Plan
- Fire Extinguishers
- Routes of Egress
- Ladder Safety
- Driver and Vehicle Safety (if applicable)
- Compressed Gas (if applicable)
- Waste Anesthetic Gases (if applicable)
- Radiology (if applicable)
- Ergonomics
- Workplace Violence
- Building Security
- Disaster Preparedness Plan

If you are starting your shelter safety program from square one, it is strongly recommended that you develop an implementation plan that will allow you to address one topic at a time, beginning with the most serious safety risks. Thoroughly addressing one issue at a time with a written policy, staff training, implementation and enforcement will be much more effective than trying to juggle multiple issues in various stages of policy development. As the saying goes, "Rome was not built in a day," and the same can be said of achieving OSHA compliance. If an OSHA inspector visits your shelter when you are not fully prepared and compliant, it will be extremely beneficial to demonstrate that you have

created a full outline of your safety program in the form of a safety manual, even if some of the policies and procedures have not yet been written. During an OSHA inspection of an animal sheltering facility, the areas that inspectors tend to focus on most intently are the reporting of work-related injuries and illnesses, the hazard communication plan and PPE. That is not to say that an OSHA inspector won't find fault with another issue, but these three areas are key, and it is recommended that you give them first priority when creating your shelter safety program.

Although your safety program must comply with OSHA standards, you do have some flexibility when writing your specific policies and procedures. It is recommended that you involve your staff as much as possible in the development process to ensure that their practical and logistical concerns are addressed. When your staff feels that their opinions have been considered and incorporated into the safety program, implementation and enforcement of the policies will be a much easier process.

### 3.0 Performing a Hazard Assessment

The first step in determining what protective measures are needed is to establish a list of what hazards exist within your facility. Performing a hazard assessment should be a thorough process during which you examine every part of your facility and every work process performed by your staff.

Recommended steps in performing a hazard assessment:

1. Interview staff and ask them for their opinions and concerns. Assure them that this process is not an evaluation of their performance, but rather an attempt to address the safety aspects of the tasks they perform on a daily basis.
2. Observe all tasks as they are performed, focusing on the actions of staff members and the products used for each task.
3. For tasks that require the use of chemicals, be sure to consult the Material Safety Data Sheets (MSDSs) for safe handling procedures and required PPE.
4. Note all conditions in each room or area of your facility, including the following:
  - Lighting
  - Flooring
  - Routes of egress
  - Proximity to fire extinguishers
  - Electrical outlets, extension cords and surge protectors
  - Noise levels (take actual decibel readings)
  - Broken equipment or cages
5. Fill out a Work Hazard Assessment Form (included in Appendix A) for each task and area that you evaluate. Be sure to include the date of the evaluation and the name of the person who performed it. These forms should be included in your shelter's safety manual.
6. Based on your completed hazard assessment, you will likely need to make changes or adjustments to improve workplace safety. When evaluating solutions to the safety issues identified in the assessment, OSHA requires businesses to solve problems in the following sequence:
  - a. Employ engineering controls to eliminate the hazard whenever possible. An example of an engineering control in an animal shelter would be the use of a scavenging system for anesthetic waste gases or the use of certain animal restraint equipment. If engineering controls are possible, it is not acceptable to substitute another means of control.

- b. Employ procedural controls when engineering controls are not possible. Procedural control means modifying the way something is done in order to eliminate or reduce the hazard.
- c. Utilize PPE only when neither engineering controls nor procedural controls are possible.

## 4.0 Employers' Rights

Under the Occupational Safety and Health Act, employers have the right to:

- **Implement and enforce safety rules in the workplace**  
OSHA's standards do not define the parameters of the employer-employee relationship and in no way restrict the rights of the employer to set rules of conduct or operation for the staff.
- **Be present or designate a representative during any inspection or investigation by OSHA**  
In order to ensure that this right is protected, all staff should be informed in writing that they do not have the authority to allow access to an inspector in the absence of a manager. Otherwise, an OSHA compliance officer who is admitted by any employee can use anything discovered during an inspection against the employer, even when there is no manager present.
- **Require that the compliance officer obtain a warrant before entering or inspecting the business**  
Although employers have this right, requiring a warrant is not generally recommended since it may create an adversarial relationship between the business and OSHA.
- **Request that the inspection be postponed to a more convenient time**  
Upon receiving notification of an inspection by OSHA, it is reasonable that a business may need to request that the date or time be changed. Unless the compliance officer suspects that there is an imminent serious danger to staff, he or she will usually honor such requests.
- **Maintain confidentiality of trade secrets**  
Although OSHA inspections and any violations are public information, OSHA will not disclose any proprietary information that may give one business a competitive edge over another.
- **Consult an attorney before, during or after an inspection and before responding to any inquiry**  
This is particularly useful in limiting the scope of the investigation and preventing self-incrimination.
- **View any complaint that has been alleged against the business**  
The employer does not have the right to know the name of the complainant, but is entitled to read the actual complaint. This can be useful in ensuring that any inspection or investigation is limited solely to the scope of the complaint.
- **Require that employees be interviewed at a time that does not unreasonably impact their job duties**  
Although the employer does not have the right to be present during such interviews, he or she does have the right to ensure that interviews do not have any significant effect on business operations.
- **Appeal findings or citations issued by OSHA**  
The burden of proof for any alleged violation is on OSHA, and an employer has the right to a hearing to contest the allegations before any fine is imposed.

## 5.0 Employers' Responsibilities

Under the Occupational Safety and Health Act, the employer has the responsibility to:

- **Provide a workplace free from recognized or unnecessary hazards**  
The employer must implement procedural controls to minimize or eliminate hazards, and perform regular inspections of the business to identify new or previously unrecognized hazards.
- **Implement and enforce safety rules and communicate those rules to employees in a clear manner**  
The most effective way to achieve this goal is by creating a comprehensive written safety program in the form of a safety manual.
- **Provide all required PPE and adequate training for its use**  
The employer must furnish all PPE that is necessary to protect workers from specific hazards, and he or she must train the workers on how and when to use it.
- **Provide safety training to all employees on the potential hazards associated with their jobs and the steps necessary to perform their jobs safely**  
OSHA considers the employer to be the expert on all safety issues within the workplace, and it is therefore the employer's responsibility to ensure that all staff members are appropriately informed and trained.

## 6.0 Employees' Rights

Under the Occupational Safety and Health Act, employees are guaranteed the following rights:

- **Work and a workplace free from recognized hazards**  
This does not mean that the hazard must be completely eliminated, but rather that it must be adequately controlled through engineering, PPE or work practices that lower the risk of illness or injury to an acceptable level.
- **Be informed of their rights under the Occupational Safety and Health Act**  
This means that they must have access to view the OSHA Workplace Rights Poster 3165.
- **Be informed of known hazards in the workplace and be trained to safely perform their job duties**  
This is commonly known as the "Right to Know" law, which requires the employer to truthfully disclose known hazards to employees and provide adequate safety training. The employee has the right to make a decision about what risks are acceptable based on the information provided by the employer. This does not mean that the employee has the right to ignore rules or required safety practices.
- **Be provided with and instructed on the use of all PPE that is required for safe job performance**  
The use of required PPE is not optional for employees and should be a condition of employment.
- **View and receive copies of all applicable OSHA standards**  
Every animal shelter should have a copy of every OSHA standard that is applicable to its operation. Copies can be obtained from the OSHA website ([www.osha.gov](http://www.osha.gov)).

- **Access to all medical and exposure records that are maintained as part of the business**  
This does not mean that employees should be allowed to view private medical information about other employees, but it does mean that they are entitled to see the relevant data compiled as a result of reporting workplace exposures, illnesses or injuries.
- **Be present in the workplace when safety testing or monitoring is performed**  
This does not mean that every employee must be allowed individual access during testing or monitoring, but it does require that the testing and monitoring be done in such a way so that the employee is assured the process is properly performed.
- **File a complaint with their employer and/or OSHA when a hazard requires correction**  
Workers must be able to bring complaints to the attention of their employer or OSHA without fear of reprisal.
- **Speak with an OSHA compliance officer privately during an inspection of the workplace**  
If a workplace is investigated by OSHA, the employer must notify employees of the time and place that the compliance officer will be available for private interviews.

## 7.0 Employees' Responsibilities

OSHA requires all employees to “comply with all occupational safety and health standards and all rules, regulations, and orders issued under the Occupational Safety and Health Act.” This includes OSHA standards, as well as the rules established by individual employers as follows:

- **Read the OSHA poster 3165.**
- **Comply with all applicable OSHA standards.**
- **Follow all lawful employer safety and health rules.**
- **Use required PPE.**
- **Report any hazardous conditions to their employer.**
- **Report any job-related injury or illness to their employer promptly and seek treatment.**
- **Cooperate with an OSHA compliance officer during an inspection.**

OSHA cannot cite employees for failing to comply with standards or rules; however, an employer can discipline or terminate an employee for a willful violation of any safety rule, provided that the employee has received proper instruction on that rule. In most states, employees terminated for willful violation of a safety rule can be denied unemployment benefits. Disciplinary policies should be clearly outlined in the employee manual and safety manual to avoid any confusion on the part of the employees.

## 8.0 Required Postings

- **OSHA poster 3165 (“It’s the Law” poster)** — Each workplace must display this poster in a location that is accessible to all staff. The employee break room is usually a good choice. It is strongly recommended that you designate one bulletin board within your facility to be used only for safety issues. If your organization operates more than one facility, the poster must be displayed in each facility. If you are located in one of the 25 states or territories that has an approved state plan, you must display the state version of this poster rather than the federal one. A copy of the federal poster is included in Appendix B.
- **OSHA Form 300A (Summary of Work-Related Injuries and Illnesses)** — See Section 14.0 for more information.
- **Notices of inspections** — If OSHA notifies you of an inspection or investigation, that notice must be displayed in an area that is accessible to all staff until after the investigation is complete.
- **Citations** — Any citations received from OSHA must be posted in an area that is accessible to all staff for three days or until the violation is corrected, whichever is longer.
- **Hazard warning signs** — Signs must be posted in appropriate areas to warn of hazards, such as radiation or noise hazards (e.g., “Hearing Protection Required”).
- **Exit signs** — Exit signs must be posted over all exits and emergency exits.
- **Written safety plans** — Plans for fire prevention and the handling of hazardous chemicals must be posted in an area accessible to all staff.

## 9.0 Training Requirements

OSHA standards do not specify a time frame for the completion of safety training; however, OSHA does require that employees be trained before they are exposed to a hazard, or as soon as a new hazard becomes known to the employer. Since animal shelter employees will likely be exposed to potential hazards from the first moment they are on the job, they should go through safety training immediately upon hire. New staff members should be required to sit down and read the shelter’s safety manual at the start of their first day on the job, as well as participate in an interactive training session with their manager to ensure that they fully understand all safety rules and regulations. Using a checklist is recommended and will help keep training sessions organized and consistent for all new hires. Training sessions should focus on worker safety, not OSHA compliance. Employees will be more open to this training if they feel a personal involvement. If staff members are given the impression that the purpose of safety training is merely to comply with a government requirement, they will be much less likely to retain the information and follow the rules.

OSHA mandates that employee safety training be documented. The most efficient means of documentation is to issue a certificate of completion for each training topic. The certificate must be signed by both the trainer and the employee, and the original should become part of the employee’s personnel file. It is important to remember, however, that proof of training is not proof of competency.

OSHA has identified a list of standards that specifically require employee training, which includes:

- General Duty Clause
- Workers' rights and responsibilities
- Emergency and fire prevention plans
- Occupational noise exposure
- Ionizing radiation
- Personal protective equipment (PPE)
- Signs and tags
- Medical services and first aid
- Portable fire extinguishers
- Hazard communication (chemicals)

Additionally, it is strongly recommended that all animal shelters specifically cover these topics with formal safety training:

- Animal handling
- Zoonotic diseases
- Biohazardous waste disposal
- Waste anesthetic gases
- Workplace violence
- Electrical safety
- Safe lifting techniques
- Driver/vehicle safety (if applicable)

## 10.0 Multi-Employer Workplaces

Many shelters share their facilities with more than one employer. Some nonprofit organizations share a building with the municipal animal control agency. Some shelters allow their facilities to be used by other nonprofit rescue groups or feral cat trap/neuter/return (TNR) groups for the purpose of spay/neuter or vaccination clinics. All of these are examples of multi-employer workplaces and require special safety considerations.

Since each employer must conduct and document a hazard assessment of its own respective areas, as well as any common areas shared with another employer, that information must be shared with all entities working within the facility. When staff employed by outside entities is working within your shelter, you must ensure that hazard information for your facility is made available to them. You do not need to conduct safety training for these individuals. Providing them with a copy of your safety manual will suffice.

If any outside entities are bringing in their own chemicals that your staff may be exposed to, they must provide you with all applicable MSDSs. In this situation, it is strongly recommended that all MSDSs be included in your master MSDS binder and kept in one central location.

If facility repairs or maintenance are necessary for safety compliance, the entity with renovation or improvement authority is generally responsible for those repairs. If, according to a lease, the tenant is responsible for improvements, then the tenant will generally be responsible for safety repairs. However, if the tenant must first obtain approval from the landlord for facility improvements, then the landlord is most likely responsible for maintaining the structure in compliance with safety standards.

## 11.0 Multi-Site Workplaces

Many animal sheltering organizations operate more than one facility located on different properties. In regard to OSHA standards, you should implement the same safety rules, written safety plans and training at all facilities if feasible. If your separate facilities serve different purposes (such as a shelter, a thrift store and a pet cemetery) and the staffing is always exclusive to each facility, you will need to create specific safety rules, plans and training that are unique to each location. In regard to the required OSHA postings and MSDSs, observe the following requirements:

- OSHA poster 3165 must be posted in each facility.
- OSHA Form 300A must be posted appropriately at each facility and include the list of all work-related injuries and illnesses occurring at that facility. (See Section 14.0 for more information.)
- An MSDS binder must be located within each facility in an area easily accessible to all staff. You only need to include MSDSs for the chemicals present within that individual facility.
- Notices of inspections and citations must be posted appropriately within the individual facility they pertain to.
- Exit signs and hazard warning signs must be posted appropriately in all facilities.
- Written safety plans for fire prevention and the handling of chemical hazards must be posted at each facility.

Note that if your shelter has multiple buildings located on the same property, you can treat these as one facility for OSHA purposes. In this case, all required postings should be displayed in the main building in a staff break room or other accessible location. The MSDSs should also be kept in a central location in the main building.

## 12.0 Independent Contractors and Leased Employees

Many shelters utilize contract employees, such as a contract veterinarian. There is also a growing trend toward leased employees who are employed by a management company, but perform the duties of kennel or customer service staff. For both of these types of employees, OSHA requires that the shelter assume the role of employer with regard to safety issues. Contracted or leased employees should undergo the same safety training and be expected to follow the same rules as the shelter's regular employees.

## 13.0 Volunteers

Volunteers are not covered by OSHA. Therefore, you do not need to report injuries to volunteers, require them to wear PPE or provide them with safety training. However, if a volunteer is injured, your organization is at risk for liability. Therefore, it is recommended that you provide your volunteers with safety training as part of their orientation process, and also make PPE available to them. Volunteers who are adequately trained in safe animal handling and use of chemicals are much more likely to have a positive experience at your shelter. A good volunteer training program will generally yield good volunteer retention.



*Courtesy of Rachel Cooper - SPCA, Inc., Lakeland, FL*

## 14.0 Work-Related Injuries and Illnesses

An occupational-related injury or illness is defined as any incident that occurs while an employee is working and meets one or more of the following criteria:

- Death of an employee on the job
- Loss of consciousness of an employee on the job
- The employee loses at least one day of work as a result of an illness or injury that occurred on the job
- The employee's abilities or duties are restricted due to an illness or injury that occurred on the job
- The employee receives medical treatment other than first aid because of an injury or illness that occurred on the job. If the incident requires only first aid, it does not need to be reported. First aid includes any of the following treatments:
  - Use of non-prescription medications
  - Cleaning, flushing or soaking wounds on the surface of the skin
  - Use of wound coverings, such as bandages or gauze pads
  - Use of hot or cold therapy
  - Use of any non-rigid means of support, such as elastic wraps or non-rigid back supports
  - Use of eye patches
  - Use of irrigation or use of a cotton swab to remove foreign bodies not embedded in the eye
  - Use of irrigation, tweezers or other simple means to remove foreign bodies from areas other than the eye
  - Use of finger guards
  - Massage
  - Tetanus immunization
  - Drinking fluids to relieve heat stress
- The employee suffers a fractured bone while on the job
- The employee suffers a punctured eardrum while on the job
- The employee suffers any chronic or irreversible disease as a result of his or her job
- The employee develops cancer, tuberculosis or is removed from his or her job for medical reasons under the OSHA health standard
- The employee is stuck with a needle or other sharp object that is contaminated with human blood or infectious material while on the job

Although not specifically required by OSHA, it is strongly recommended that shelters report any animal scratch or bite that breaks the skin, even if the wound is only treated with first aid. All animal bites or scratches that break the skin pose a risk of infection and potentially rabies. Many state rabies laws require that these injuries also be reported to the state's department of health.

Documentation of work-related injuries and illnesses can be done either by completing your Worker's Compensation Insurance Form or OSHA Form 301. It is not necessary to use both forms.

Additionally, OSHA requires businesses with 11 or more employees to maintain a Log of Work-Related Injuries and Illnesses (OSHA Form 300). If your shelter employs a total of 11 or more employees during the calendar year, including both part-time and seasonal employees, then you must maintain this log. If a business has more than one facility, a separate log must be maintained for each location, although employees from all locations are counted together in calculating a total of 11 or more. An up-to-date copy of this log must be present at each worksite at all times. This log does not need to be posted, but it must be made available to employees upon request.

Any business that is required to maintain OSHA Form 300 must complete a Summary of Work-Related Injuries and Illnesses (OSHA Form 300A) at the end of each calendar year, and post it in an area accessible to all staff by Feb. 1 of the following year. This log must remain posted until at least April 30.

Animal shelters are not required to report work-related injuries or illnesses to OSHA unless the incident involves workplace violence, the death of an employee or the hospitalization of five or more employees for the same cause.

OSHA randomly selects some businesses to participate in an annual statistical analysis of workplace injuries and illnesses. If your shelter is among those businesses selected, OSHA will provide you with the necessary reporting guidelines.

All records related to work-related injuries or illnesses must be maintained for at least five years. All OSHA-mandated records must be readily available for inspection by any authorized federal or state government official while working in his or her official capacity. Employees and former employees are only permitted to access the Log of Work-Related Injuries and Illnesses (OSHA Form 300) and Summary of Work-Related Injuries and Illnesses (OSHA Form 300A). Access to these forms must be provided by the close of business on the next scheduled workday after the request is made, and copies of the log must be provided within seven days of the request.

OSHA Forms 300, 300A and 301 may be found in Appendix A of this manual.

## 15.0 Personal Protective Equipment (PPE)

OSHA's personal protective equipment (PPE) standard requires employers to provide protective devices whenever the hazards of the job cannot be reduced to acceptable levels through engineering or procedural controls. Employees must follow all safety rules set by the employer, including the requirement to wear appropriate PPE. The wearing of PPE for tasks that require it is not optional, and it is the employer's responsibility to enforce all safety rules at all times. Refusal to wear PPE when required should be grounds for disciplinary action up to and including termination of the employee.



*Courtesy of Rachel Cooper - SPCA, Inc., Lakeland, FL*

Based on your hazard assessment, you can determine which tasks require PPE and then select the appropriate PPE for these tasks. It is essential to purchase adequate quantities of PPE and to get the appropriate sizes where indicated. It is strongly recommended that you ask your staff for input when selecting styles of PPE. The staff members who perform the tasks are often better qualified to choose the PPE that will work best, and they also will be much more likely to wear it if they are included in the selection process.

Like any equipment in your shelter, PPE must be maintained in a useable and sanitary condition. Disposable items, such as exam gloves, should never be reused. Other items should be inspected and sanitized on a regular basis and promptly replaced when worn or damaged.

The following is a list of PPE that would typically be required in most animal shelters:

- Disposable exam gloves (both latex and non-latex varieties should be available)
- Disposable N95 respirator masks
- Surgical masks
- Disposable Tyvek® lab coats
- Hearing protection (staff members ideally should be able to choose the style most comfortable for them)
- Neoprene rubber gloves
- Rubber boots
- Rubber aprons
- Goggles
- Face shields
- Animal-handling gloves
- Kevlar® vests (for field staff)
- Lead aprons, gloves, glasses and thyroid protectors (for taking X-rays, if applicable)



*Courtesy of Robert Sexton – Montgomery County Animal Resource Center, Dayton, OH*

## 16.0 Noise Hazards

OSHA requires a hearing conservation program when staff members are exposed to noise levels above 85 decibels (dB) based on an eight-hour time-weighted average (TWA). The TWA calculates the potential danger to an employee's hearing based on the intensity of the noise and duration of exposure. The louder the noise level, the less exposure is needed to cause hearing damage. The vast majority of animal shelters have unacceptable noise levels in dog housing areas. The noise levels in an average dog housing area typically range from 95 to 115 decibels. Under those conditions, an employee can spend only about 15 minutes in that area without hearing protection during an eight-hour workday. Although not required by OSHA, it is recommended that you take actual decibel readings in your kennels on a regular basis in order to monitor employee exposure to noise. A digital sound-level meter can be purchased from Radio Shack for around \$50. Formulas for calculating the TWA can be found on OSHA's website at [http://www.osha.gov/pls/oshaweb/owadisp.show\\_document?p\\_table=STANDARDS&p\\_id=9736](http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=9736).

Ideally, engineering controls should be employed to reduce the noise level in your shelter as much as possible. Adding sound-absorbent panels or baffles to the ceilings of your dog kennels is recommended. However, it is unlikely that the use of these devices will reduce the noise level sufficiently, so hearing protection must be required for all staff members while they are working in the dog kennel areas. There are many styles of earplugs and earmuffs available, and it is strongly recommended that each employee be permitted to choose the style that is most comfortable for him or her. The use of a portable media player with earphones is not an acceptable form of hearing protection and should not be permitted in the kennel areas.

OSHA also requires that noise hazard areas be identified with appropriate signage, such as this example:



These types of signs are commercially available or you can make your own. It is strongly recommended that all signage be laminated and waterproof. Signs that become damaged or unreadable must be replaced promptly.

You may also want to consider annual hearing tests for your employees as part of your hearing conservation program. Even with the use of baffles and hearing protection, employees may still be at risk for hearing loss after long-term exposure to continuous loud noises.

## 17.0 Hazard Communication Plan

The Hazard Communication Standard (HCS), also known as the "Right to Know" law, is intended to ensure that employees are adequately informed about hazardous chemicals in the workplace. When employees are required to be exposed to a hazardous chemical as part of their job, they have a right to be informed of the hazard, to be able to identify hazardous chemicals in the workplace and to know how to take protective measures to minimize their exposure.

The HCS requires every business that handles, stores or uses potentially hazardous chemicals to have a specific written plan for informing workers of the necessary safety information. This OSHA standard applies to all chemicals on the premises, even those that are not currently in use.

The HCS has five specific requirements:

1. The plan must be in writing.
2. A complete list of all hazardous chemicals must be maintained at all times.
3. A Material Safety Data Sheet (MSDS) must be maintained for each chemical on the list.
4. All containers of hazardous chemicals must be properly labeled.
5. All employees must be trained on the hazards and safety aspects of each chemical.

The written plan should include all pertinent safety information related to the handling of hazardous chemicals. The plan must be comprehensive in addressing the day-to-day use of chemicals in your facility. The following outline should serve as a basis for developing your written plan:

- An introduction stating the purpose of the written Hazard Communication Plan. You should also provide the name(s) and contact information of the person(s) designated to handle safety issues within the shelter.
- A description of the identification system used to label hazardous chemicals, along with a sample label. Provide the name and contact information of the person responsible for ensuring that all chemicals are properly labeled.
- MSDS information, including the location of the MSDS binders and the method by which the sheets are filed (i.e., alphabetically). Provide the name and contact information of the person responsible for keeping the MSDSs up to date.
- Detailed staff training information for hazardous chemicals, including the scheduling, materials used, objectives and name of the person(s) responsible for conducting the training.

The written plan needs to be reviewed at least once a year and updated as necessary. Be sure to note the dates of the reviews and updates on the cover page of the plan. A template for creating a written Hazard Communication Plan is included in Appendix C.

## 18.0 Hazardous Materials List

OSHA requires that employers compile and maintain a list of all hazardous materials located on the premises of the business. A typical animal shelter will usually have 200 or more hazardous products on the premises. Many of these products will seem obvious, such as bleach and Trifectant®, but many will not. *With few exceptions, the list must include all products that are in liquid or powdered form, no matter how innocuous they may seem.* Your Hazardous Materials List must include all medications, disinfectants, cleaning products, soaps, shampoos and laboratory reagents. You do not need to note the quantity of each product. Exemptions that do not need to be included on the list are:

- Medications in solid form that are administered directly to the patient. This does not include capsules, gels, powders or tablets that are crushed prior to administration.
- Food and nutritional products, such as kitten milk replacer, intravenous (IV) fluids and liquid vitamin supplements

- Food, drugs or cosmetics intended for personal consumption or use by employees while in the workplace
- Articles that contain hazardous materials, such as thermometers, autoclave tape and highlighter pens
- Any common consumer product when it is used in the same way as a normal consumer would use it. Although this exemption would include products like laundry detergent, window cleaner and hand soap, many of these products are used in much greater quantities and with much greater frequency in an animal shelter than by a normal consumer, and are therefore not exempt. It is strongly recommended that shelters err on the side of safety and include all of these products on their list. Some products that are sold at the consumer level, such as bleach, hydrogen peroxide and isopropyl alcohol, are never considered to be exempt.

Compiling this list can be a very time-consuming task. It is recommended that you assign one staff member to be responsible for compiling and maintaining both the Hazardous Materials List and the MSDSs. The best way to go about making the list is to simply go through your shelter room by room, cabinet by cabinet and drawer by drawer, and write down the name of every individual liquid or powdered product. Most shelters tend to have stockpiles of old or donated products that they do not use, so you may want to consider discarding these items in order to keep your list more streamlined. If you have 18 different types of dog shampoo, each one is considered a different product and needs to be listed separately. Products of the same brand, but with different formulations, also need to be listed as separate products.

Once you have compiled your Hazardous Materials List, it is recommended that you enter it into a spreadsheet and sort it alphabetically. A copy of the list should be included in your safety manual and at the front of your MSDS binder.

## 19.0 Material Safety Data Sheets (MSDSs)

You must have an MSDS on file for every product on your Hazardous Materials List. If your shelter uses more than one brand of the same product (e.g., bleach), you must have an MSDS for each specific brand. All MSDSs must be in English, but you can also include bilingual copies if your shelter employs Spanish-speaking staff members. It is recommended that you file your MSDSs in a large, three-ring binder to allow for easy removal and replacement of pages when necessary. Be sure to label the binder on both the front and the spine so it can be easily recognized. You may also want to place each MSDS into a plastic sheet protector.

MSDSs must be filed in a uniform way. Alphabetically by product name is the most logical choice. Some shelters may choose to divide them into categories such as “Disinfectants,” “Drugs” and “Shampoos,” and then file them alphabetically within each category. However, this filing method can create confusion if staff members are not sure which category a product falls under. For products that are known by both a brand name and a generic name, you should file the MSDS only once. In some cases, you may want to file the MSDS under the generic name (i.e., bleach instead of Clorox®), but in some cases you may want to use the brand name (i.e., Strongid® instead of pyrantel pamoate). The decision is up to you. Because this issue can get confusing for staff, it is recommended that when a product has more than one name, you use a placeholder to refer staff to the correct location. For example, file a placeholder page where Clorox® would normally be found that says “See bleach.”

Many MSDSs are available online from the manufacturer's website. If you are unable to obtain one online, you can request one from the distributor where you purchased the product or call the manufacturer directly.

The MSDS binder must be readily retrievable by all staff at all times. The staff break room is an ideal location. The binder should not be stored in a manager's office, even if it is kept unlocked, because this may cause some employees to be reluctant to access the information. Commercially available MSDS binders like the one below usually come with an attached chain. This mechanism allows employers to secure the binder to a shelf or wall in order to prevent it from being misplaced.

There are several commercially produced, comprehensive MSDS directories available in both hard copy and on CD-ROM. However, OSHA does not consider these to be an acceptable substitute for compiling and maintaining the MSDSs for the specific chemicals present in your shelter. Likewise, a computer database cannot serve as your MSDS library. OSHA requires that MSDSs be available in a readily retrievable manner and without potential complications in retrieval. Computers and servers can break down, which could cause MSDSs to be inaccessible to your staff. You can certainly have electronic copies available to staff, but you must also have hard copies that are readily accessible at all times while staff is working.

MSDSs contain important safety information regarding required PPE and instructions for handling exposures. The person in charge of your shelter's safety program must review every MSDS for any PPE requirements, and ensure that staff is informed of and trained on these requirements via your Hazard Communication Plan.



*Courtesy of Lottie Miller – Kansas Humane Society*

## 20.0 Secondary Container Labels

OSHA recognizes two types of container labels: primary and secondary. A primary label is one that is created by the manufacturer of the product and is affixed to the container before it is shipped to the consumer. Primary labels are required to meet OSHA requirements, and therefore, employers do not need to re-label chemicals that are used directly from their primary containers. However, it is common practice in animal shelters to transfer chemicals from their primary containers to smaller containers for ease of use. These smaller containers are known as secondary containers. All secondary containers, regardless of size, must be properly labeled according to OSHA's Hazard Communication Standard (HCS). Spray bottles containing bleach or Trifectant® are obvious secondary containers, but some others are less obvious, such as jars containing gauze pads soaked in surgical scrub, a thermometer holder containing alcohol, buckets containing disinfectant or detergents, and cold sterilization trays. The only exception to this requirement is if the staff member who fills the secondary container will be the only person to use it, and the entire contents will be used during that employee's shift. If these conditions are met, then you do not have to apply a secondary label.

OSHA does not require a specific type of secondary label, but does mandate what needs to be communicated on the label. The label can be commercially produced or handmade, and it can use words, colors or symbols to communicate the hazard information. However, it is strongly recommended that you choose one style of label and use it consistently throughout your shelter. Consistency will make it much easier to explain the labeling system in your written Hazard Communication Plan, and it will reduce the chance of misunderstandings by staff.

Secondary labels must contain the following information:

- Name of the chemical. You can use either the brand name or chemical name, whichever is consistent with your MSDS filing system.
- Strength of the chemical, if indicated (e.g., Bleach 1:32 or Isopropyl Alcohol 70%)
- Appropriate hazard warnings from the MSDS. Hazard warnings must include the following:
  - Health Hazards
  - Fire Hazard
  - Reactivity/Physical Hazards
  - Special Hazards/Designated PPE

Although not required by OSHA, you may want to consider utilizing a pre-designed secondary-label format such as the National Fire Protection Association (NFPA) hazard diamond, the Hazardous Material Identification Guide (HMIG) or the Hazardous Material Information System (HMIS®).<sup>1</sup> The HMIG and HMIS® systems are nearly identical. The NFPA system was designed primarily for firefighters and those working with flammable materials, whereas the HMIG and HMIS® systems were both designed specifically as an HCS compliance tool. Labels for all three of these systems are commercially available through various distributors of safety equipment.

All three of these systems use a four-color code to indicate the following hazards:

- Blue — Health Hazard
- Red — Flammability
- Yellow or orange — Instability (NFPA — yellow), Reactivity (HMIG — yellow) or Physical Hazard (HMIS® — orange)
- White — Special Hazard (NFPA) or Designated PPE (HMIG and HMIS®)

All three systems also use the numbers 0 to 4 in the blue, red and yellow/orange sections to indicate the severity of the hazard, with 0 being the least and 4 being the greatest. However, the numbers assigned to these hazards for the same chemical may differ among the NFPA, HMIG and HMIS® systems. The HMIS® system also provides more information about a chemical's physical hazard(s). There are eight specific physical hazards that OSHA's Hazard Communication Standard addresses: flammability, compressed gases, explosives, organic peroxides, oxidizers, pyrophorics, unstable-reactive chemicals and water-reactive chemicals. The HMIS® system not only specifically incorporates each of these eight hazards, with specific criteria to evaluate the degree of hazard, but also permits employers to identify the hazard(s) present with an icon. The HMIS® system also provides users with icons for the eight health-hazard target organ systems.

Both the HMIG and HMIS® systems use letters in the white section to indicate the kind(s) of PPE that are required. These letters have the same meaning in both systems, and both systems may also augment the letter codes with icons showing the kinds of PPE to be used. The HMIS® system also includes a second box on the Health Hazard (blue) bar. An asterisk is placed in this box if the health hazard may be chronic in nature.

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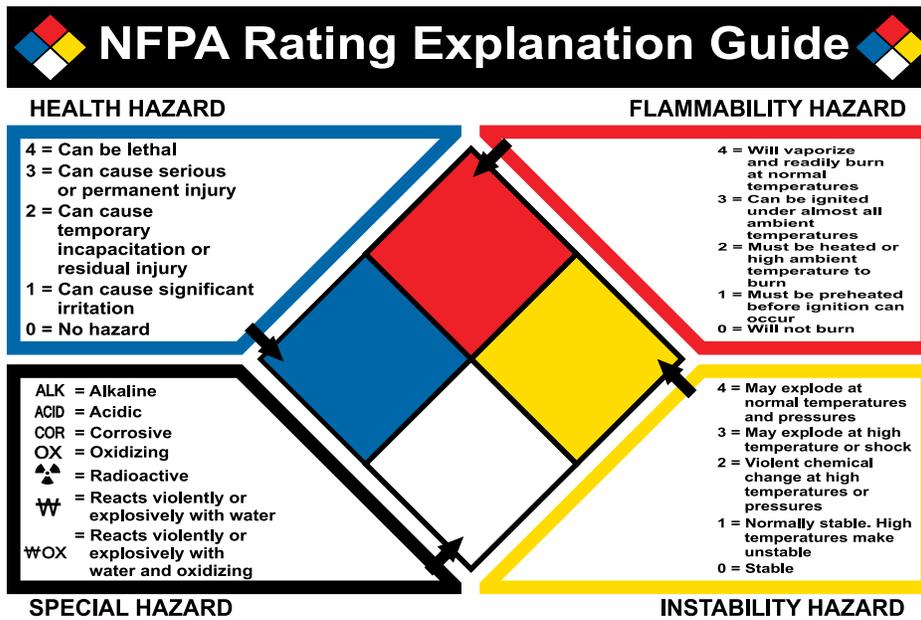
<sup>1</sup> HMIS® is a registered mark of the American Coatings Association (ACA)

If you choose to use any of these systems, you should post an accompanying interpretation guide in a readily accessible area of your shelter so that staff can understand the meanings of the colors, numbers, symbols and letters. Following are examples of the three systems' labels and interpretation guides.

1. National Fire Protection Association (NFPA)

NFPA Rating Explanation Guide					
RATING NUMBER	HEALTH HAZARD	FLAMMABILITY HAZARD	INSTABILITY HAZARD	RATING SYMBOL	SPECIAL HAZARD
4	Can be lethal	Will vaporize and readily burn at normal temperatures	May explode at normal temperatures and pressures	ALK	Alkaline
3	Can cause serious or permanent injury	Can be ignited under almost all ambient temperatures	May explode at high temperature or shock	ACID	Acidic
2	Can cause temporary incapacitation or residual injury	Must be heated or high ambient temperature to burn	Violent chemical change at high temperatures or pressures	COR	Corrosive
1	Can cause significant irritation	Must be preheated before ignition can occur	Normally stable. High temperatures make unstable	OX	Oxidizing
0	No hazard	Will not burn	Stable	☸	Radioactive
				☹	Reacts violently or explosively with water
				☹ OX	Reacts violently or explosively with water and oxidizing

*This chart for reference only - For complete specifications consult the NFPA 704 Standard*



*This chart for reference only - For complete specifications consult the NFPA 704 Standard*

NFPA-Chart\_2 www.ComplianceSigns.com

Courtesy of Compliance Signs - [www.ComplianceSigns.com](http://www.ComplianceSigns.com)

2. Hazardous Material Identification Guide (HMIG)



Courtesy of Lab Safety Supply, Inc. - [www.labsafety.com](http://www.labsafety.com)

**HAZARD RATING INDEX**

**Health Hazard**  
 4-Extreme: Highly Toxic. May be fatal on short-term exposure. Special protective equipment required.  
 3-Serious: Toxic. Avoid inhalation or skin contact.  
 2-Moderate: Moderately Toxic. May be harmful if inhaled or absorbed.  
 1-Slight: Slightly Toxic. May cause slight irritation.  
 0-Minimal: All chemicals have some degree of toxicity.

**Flammability Hazard**  
 4-Extreme: Extremely flammable gas or liquid. Flash point below 73°F.  
 3-Serious: Flammable. Flash point 73° to 100°F.  
 2-Moderate: Combustible. Requires moderate heating to ignite 100° to 200°F.  
 1-Slight: Slightly Combustible. Requires strong heating to ignite.  
 0-Minimal: Will not burn under normal conditions.

**Reactivity Hazard**  
 4-Extreme: Explosive at room temperature.  
 3-Serious: May explode if shocked, heated under confinement or mixed with water.  
 2-Moderate: Unstable. May react with water.  
 1-Slight: May react if heated or mixed with water.  
 0-Minimal: Normally stable. Does not react with water.

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**HAZARDOUS MATERIAL IDENTIFICATION GUIDE**

**PROTECTIVE EQUIPMENT GUIDE**

A	Eye Protection
B	Eye Protection, Hand Protection
C	Eye Protection, Hand Protection, Body Protection
D	Eye Protection, Hand Protection, Body Protection, Foot Protection
E	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection
F	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection
G	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection, Head Protection
H	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection, Head Protection, Hearing Protection
I	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection, Head Protection, Hearing Protection, Fall Protection
J	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection, Head Protection, Hearing Protection, Fall Protection, Life Support
K	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection, Head Protection, Hearing Protection, Fall Protection, Life Support, Climbing Equipment
X	Consult your supervisor for special handling instructions

HEALTH  
 FLAMMABILITY  
 REACTIVITY  
 PROTECTIVE EQUIPMENT

11/96 Reorder No. 36669

3. Hazardous Material Information System (HMIS®)

Caution: HMIS® ratings are based on a 0-4 rating scale, with 0 representing minimal hazards or risk, and 4 representing significant hazards or risks. Although HMIS® ratings are not required on MSDSs under 29 CFR 1910.1200, the preparer may choose to provide them. HMIS® ratings are to be used with a fully implemented HMIS® program. HMIS® materials may be purchased exclusively from J. J. Keller & Associates at 800-327-6868.



**HAZARDOUS MATERIALS IDENTIFICATION SYSTEM**

**HAZARD INDEX**

4 = SEVERE HAZARD  
 3 = SERIOUS HAZARD  
 2 = MODERATE HAZARD  
 1 = SLIGHT HAZARD  
 0 = MINIMAL HAZARD

**PERSONAL PROTECTION INDEX**

A	Eye Protection	G	Eye Protection, Hand Protection, Respiratory Protection
B	Eye Protection, Hand Protection	H	Eye Protection, Hand Protection, Body Protection, Respiratory Protection
C	Eye Protection, Hand Protection, Body Protection	I	Eye Protection, Hand Protection, Body Protection, Respiratory Protection, Foot Protection
D	Eye Protection, Hand Protection, Body Protection, Foot Protection	J	Eye Protection, Hand Protection, Body Protection, Respiratory Protection, Foot Protection, Head Protection
E	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection	K	Eye Protection, Hand Protection, Body Protection, Respiratory Protection, Foot Protection, Head Protection, Hearing Protection
F	Eye Protection, Hand Protection, Body Protection, Foot Protection, Respiratory Protection, Skin Protection	X	Consult your supervisor or S.O.P. for "SPECIAL" handling directions

A	n	o	p	q	r	s
t	u	w	y	z	Additional Information	
Safety Glasses	Splash Goggles	Face Shield & Eye Protection	Gloves	Boots	Synthetic Apron	Full Suit
Dust Respirator	Vapor Respirator	Dust & Vapor Respirator	Full Face Respirator	Airline Hood or Mask		

The entire HMIS® Implementation Manual can be downloaded for free, and HMIS® labels may be purchased, at: <http://www.jjkeller.com/promotionscollect.html?lid=124308&productcode=325-NI&nexturl=promotions/hmis/home.htm>

If a container is too small for a secondary label, such as a thermometer holder, or the container is a stationary fixture, such as an X-ray developer, it is acceptable to hang the secondary label on the wall above or next to the container.

It is also acceptable to forego labels altogether and use color-coded bottles instead. If you choose this system, you must post an index near where the products are used showing which color corresponds with which product, and listing all of the required hazard information on each of the products. This type of system would generally be impractical for animal shelters due to the sheer number of different hazardous chemicals placed in secondary containers.

Secondary containers that are taken or transported from the premises — such as those used on field service vehicles or at off-site adoptions or mobile spay/neuter clinics — must also have the name and address of the manufacturer printed on the label.

## 21.0 Eyewash Stations

OSHA requires that eyewash devices provide an uninterrupted flow of tepid water and flush both eyes simultaneously. The hand-held bottles of eyewash that can be placed in holders on the wall are not acceptable under OSHA standards. These bottles are designed for flushing foreign bodies from the eyes, and would not be adequate for flushing hazardous chemicals since they contain a limited amount of solution and can only flush one eye at a time. Spray attachments for sinks are also inappropriate because the water pressure is unregulated and could potentially damage the eye. Faucet-mounted eyewash stations, such as the Opti-Klens™ brand pictured here, are generally the best option for animal shelters.

Eyewash stations must be available within a few seconds' walking distance of the places where chemicals are used without requiring staff to go up or down stairs or through more than one door. Eyewash stations should never be located in an area that may be locked or inaccessible. Larger shelters will typically need more than one eyewash station to comply with OSHA standards. You do not need to shut off the hot water supply to the faucets that have eyewash stations. In fact, you should not do this, because eyewash stations should supply tepid water, which requires the combined use of hot and cold water.

Although not specifically required by OSHA, you should routinely check eyewash stations to ensure they are working properly. Creating a monthly checklist for all safety equipment, including PPE, fire extinguishers and eyewash stations, is strongly recommended.



Opti-Klens™ Faucet-Mounted Eyewash

## 22.0 Chemical Spills

OSHA standards do not require a chemical spill kit for most animal shelters unless cytotoxic drugs are used by the shelter's veterinary staff. Most cytotoxic drugs used in veterinary medicine are chemotherapeutic agents used in the treatment of cancer, and are therefore not commonly used in animal shelters. However, spills of other hazardous chemicals are likely to occur in a shelter setting, so it is always a good safety practice to maintain the components of a basic chemical spill kit. Having these items ready and accessible in one place will expedite the cleanup process and reduce staff exposure. There are commercially produced spill kits on the market, but it is generally much more cost effective to make your own with the following items:

- A 5-gallon Rubbermaid® or similar durable container with a lid to house the spill kit. Be sure to label the container as a chemical spill kit.
- Three gallons of clay kitty litter for absorbing chemical spills. This will be enough to clean up about 1 gallon of spilled chemical.
- Two pairs of neoprene rubber gloves
- Two pairs of protective goggles
- Several heavy-duty 30-gallon trash bags with twist ties
- Dustpan and brush
- A laminated copy of your shelter's written chemical spill cleanup procedures.

The spill kit should be stored in an easily accessible location. Ideally, any items used from the kit should be immediately replaced, but because this may not always happen in a busy shelter setting, it is recommended that you implement a monthly check of the contents.

Spills should be cleaned up as soon as they happen, to minimize hazard exposure to staff, volunteers and customers. Postponing the cleanup may allow the spilled material to expand and vaporize, thus increasing the hazard. You should include the general steps for spill cleanup procedures in your shelter's safety manual:

1. **Remove all animals and people from the area.**
2. **Place signs or barriers to prevent people from accidentally entering the spill area.**
3. **Consult the product's MSDS before attempting any cleanup of the spill.** The MSDS will identify required PPE to be worn during the cleanup, and prescribe the proper disposal methods for the waste.
4. **Gather all the materials needed for the cleanup or access the shelter's spill kit.**
5. **Put on the required PPE.**
6. **Clean up the spill.**
7. **Dispose of the waste material appropriately as prescribed by the MSDS.**
8. **Report the spill to the proper authorities if required.**

Spills are classified into the following five types:

1. **Minor chemical spill:** A spill of a minimally or moderately hazardous chemical that can be cleaned up by one staff member without additional assistance. Generally the waste from a minor spill can be disposed of in the regular trash, and the spill does not need to be reported to the authorities.
2. **Serious chemical spill:** A spill of 1 gallon or more of a moderately hazardous material or 5 gallons or more of a minimally hazardous material. The waste from a serious spill must generally be disposed of as hazardous waste through a licensed hazardous waste hauler. City or county regulations may also require that serious spills be reported to the proper authorities. Check with your local waste management authority for these regulations.
3. **Major chemical spill:** A spill of 50 gallons or more of a minimally or moderately hazardous chemical, or the spill of any amount of a severely toxic chemical that would be likely to contaminate the environment and/or pose a threat to the general public. The cleanup of a major chemical spill generally requires the use of specialized recovery equipment and protective equipment. The cleanup of such a spill is beyond the scope of a shelter's staff, and should be reported to the proper authorities immediately so that an emergency response team can be deployed to assist with cleanup. The waste materials from this type of spill must be disposed of as hazardous waste through a licensed hazardous waste hauler.
4. **Biomedical waste spill:** A spill that contains human blood, medical waste contaminated with human pathogens or regulated medical waste, such as sharps or cultures. Animal blood is not considered pathogenic, unless the animal is known to have a zoonotic disease. In a shelter setting, the greatest concern would typically be danger of injury from spilled sharps.
5. **Complex spill:** A spill that contains multiple hazards. An example would be a broken mercury thermometer, which would present the physical hazard of broken glass and the chemical hazard of the mercury.

A mercury spill from a broken thermometer, although seemingly small, is one of the most dangerous chemical spills that can occur in an animal shelter. Exposure to mercury can cause nausea, diarrhea, chest pain, coughing, dyspnea, stomatitis, gingivitis, salivation, chills, weakness, fatigue and weight loss. Exposure can occur both through exposed skin and through inhalation of the vapors. These risks can easily be eliminated by the use of digital thermometers rather than mercury thermometers in the shelter environment.

## 23.0 Waste Disposal

OSHA does not specifically regulate the disposal methods for waste in an animal shelter, but it does require that staff members be protected from harm when handling various waste materials. There are five basic types of waste generated in an animal shelter:

1. Animal waste
2. Biological hazardous waste
3. Chemical hazardous waste
4. Sharps
5. General waste

Biomedical waste disposal, including some biological waste and sharps, is regulated by your state's department of health and/or department of environmental protection. Most states require that you have a biomedical waste disposal plan that identifies procedures for packaging, storage and disposal of any medical wastes that may pose a health risk to staff or the environment. You will need to contact your state authorities to determine whether you have these specific requirements, which may vary from state to state.

Animal waste — including urine, feces, vomitus and blood — is not considered to be hazardous to humans, and can therefore be handled and disposed of using good sanitation practices. The exception would be if the animal is suspected of having a zoonotic disease, such as rabies or leptospirosis (see Section 44.0 on Zoonotic Diseases).

In most states, biological waste — such as blood tubes, syringes, vaccine vials, catheters, IV lines, bandages, sponges and animal tissue — is considered to be biomedical waste only when it contains human pathogens or when it has been used on an animal that is infected with a zoonotic disease. Generally, these materials can be disposed of in the regular trash using good sanitation practices. However, be sure to consult your individual state's requirements, as they may vary.

Sharps are defined as any device that is capable of puncturing, lacerating or penetrating the skin. Sharps include all needles, scalpels and glass objects (intact or broken). In some states, syringes are also classified as sharps, even by themselves. All sharps must be disposed of in appropriate containers. Sharps containers must be rigid, puncture-proof, leak-proof and able to inhibit rapid microbial growth. One of these containers should be located in each area where sharps are used, such as intake rooms, exam rooms and surgical suites. Most shelters contract with a biohazardous waste service that provides routine pickup and replacement of their sharps containers. Most states require that you maintain a copy of the waste hauler's permit within your facility. This permit may be filed with a copy of the contract and does not need to be openly displayed. Each time the waste hauler receives a shipment from your shelter, you will be issued a written record of the shipment, which you must then keep on file for a minimum of three years.

Staff members should avoid recapping needles whenever possible, as this is how most needle-stick injuries occur. When it is necessary to recap a needle, a recapping device, such as the one pictured here, is highly recommended.



Alternatively, use the one-handed scoop method of recapping pictured here:



*Lay the cap on a flat surface and hold the syringe in one hand so that it is in line with the cap.*



*Move the syringe forward until the needle is inside the cap, then bring it upright using a scooping motion.*



*Push the cap down firmly onto the syringe.*

Although there is no OSHA guideline that prohibits the reuse of syringes, it is strongly discouraged. This practice requires employees to routinely recap needles in order to remove them and clean the syringes, putting the employees at unnecessary risk for injury. OSHA has been known to issue citations for this practice as a violation of the General Duty Clause.

Some hazardous chemical waste can be allowed to go down the regular drain. Chemical detergents and disinfectants used during routine cleaning generally fall into this category. However, you should contact your local city or county department of health or water authority for specific guidelines. Some jurisdictions require that the types and quantities of these chemicals be reported on a regular basis, and some also assess an environmental surcharge to businesses that put large amounts of chemicals into the sewage system.

Some hazardous chemicals — such as pesticides, drugs and X-ray fixing solutions — should not be poured down the drain. Always read the labels on these products, and follow instructions for proper disposal. Small quantities of liquid pesticides and drugs can sometimes be disposed of in the regular trash if they are first absorbed in cat litter. Larger quantities of hazardous chemicals typically need to be picked up by a professional disposal company.

General solid waste comprises the majority of waste materials generated at an animal shelter. The vast majority of communities now have comprehensive recycling programs for paper, aluminum cans, plastics and glass, which have created the need for businesses to have multiple types of indoor and outdoor waste receptacles. Although unrelated to OSHA requirements, shelters may want to consider requiring all staff members to participate in the recycling of appropriate waste materials while on the job. Indoor trash receptacles should be maintained in a sanitary condition at all times and be emptied once a day, or more frequently if needed, into an outdoor dumpster or recycling bin.

## 24.0 Electricity

OSHA standards require that all components of a building's electrical system — including outlets, switches and power cords — be free from damage and adequate to meet the needs of the business. Some shelters, especially those located in older buildings, do not have adequate internal wiring or enough outlets to handle the demands of the equipment being used. Additionally, outlets in older buildings may not be properly grounded to safely power the equipment.

OSHA prohibits the use of extension cords, power strips and outlet-multiplying devices as a substitute for permanent wiring in a building. If there are not enough outlets for the equipment being used, management must have an electrician install permanent outlets. Surge protectors are permitted for use with computers and other sensitive electronic devices, but they are not acceptable as a substitute for permanent outlets.

Extension cords may be used for temporary connections when needed. Verify that the ampere (amp) rating of the extension cord is adequate for the device you are plugging into it. Always use a heavy-duty, grounded, three-pronged extension cord, as this type provides greater protection against electrical shock. Never use any cord that is frayed or cracked.

OSHA requires that businesses use only electrical devices that have been evaluated and approved by a Nationally Recognized Testing Laboratory (NRTL). The most common NRTL is Underwriters Laboratories (UL), but there are several others as well. The NRTL label will be clearly visible on approved devices.

Many electrical devices and appliances have grounded, three-pronged plugs that help reduce the risk of electrical shock to the user. These plugs must be plugged into a grounded outlet (one with three holes). Never use a grounding adapter or extension cord that converts three-pronged plugs into two-pronged plugs.

The National Electric Code requires a ground fault circuit interrupter (GFCI) when an electrical outlet is near a water source, such as a sink or kennel area. GFCIs can either be mounted in the wall outlet or in the circuit breaker panel. Both are easily recognized by the presence of a "test" and "reset" button. GFCIs sense any leakage of current into the ground and will automatically break the circuit. All newer buildings are required to meet the requirements of the National Electric Code and will have GFCI outlets near any water sources. Many older buildings do not have GFCI outlets, and there is currently no requirement to bring them up to National Electric Code standards unless renovations are being performed. However, it is strongly recommended that all shelters have GFCIs installed on circuits in all areas where water is used.

It is extremely important that electrical equipment be unplugged from the power source prior to any repair or maintenance work being performed. However, this is not always possible with some permanently mounted equipment, so a lock-out system must be implemented to prevent someone from accidentally turning on the equipment while it is being serviced. The most efficient way to create a lock-out system is to have an electrician install a mechanical disconnect box near where the electricity enters the equipment. The disconnect box must

have a padlock designed to be used in the lock-out system. Once it is put in place, the padlock should only be removed by the person who applied it. Be sure to create written standard operating procedures (SOPs) for the lock-out system.

Electrical circuit breakers must always be accessible. In many shelters, the fuse boxes are located in storage areas, so it is imperative that the area immediately surrounding the boxes and the path leading to them are clear at all times. All the circuits must be clearly labeled. In an emergency situation, staff must be able to quickly discontinue the flow of electricity to the proper circuit. Be sure to note the location of all fuse boxes in your shelter's Safety Manual.

## 25.0 Fire Prevention and Emergency Response Plan

Common causes of fires in animal shelters include overloaded electrical outlets, improper or faulty wiring, failure to clean dryer lint screens and the storage of flammable materials too close to a heat source. All of these situations can be prevented with proper training and maintenance.

OSHA requires that every business have a Fire Prevention and Emergency Response Plan. For businesses with 10 or more employees, this plan must be in writing. All businesses are also subject to local fire codes, which can vary significantly among cities and counties across the country. This *OSHA and Safety Guide* addresses only OSHA requirements, but it is strongly recommended that all shelters obtain a copy of their local fire code and ensure that they are in compliance with it. Your local fire department can usually facilitate this process.

- **Prevention**

Monthly inspections of fire extinguishers, smoke detectors, emergency lighting and sprinkler systems (if present) must be performed to ensure that they are in good working order. One staff member should be assigned to perform these inspections and record them in a log book. Regular checks for fire hazards, such as overloaded outlets or flammable materials stored near heat sources or in stairwells, must also be performed. Although OSHA does not require specific documentation for these checks, it is advisable to perform and log them monthly at the same time that you perform your equipment inspections. A simple log can be created in a spreadsheet program and should include the date, the name of each item and the initials of the person performing the inspection.

- **Response**

The response portion of the plan must include procedures for evacuating people from the building and procedures for accounting for all staff members. Staff members should not be assigned to rescue animals during a fire or emergency. OSHA is only concerned with the safety of staff. Although OSHA does not specifically prohibit employees from participating in the rescue of animals, such rescue attempts would place staff at risk. Additionally, if staff members are allowed to perform animal rescue duties, OSHA requires that they be properly trained and equipped. In the case of fire rescue, this would require the use of oxygen and protective clothing like that worn by firefighters, as well as professional training, neither of which would be feasible or affordable for most shelters. Therefore, the rescue of the shelter's animals should be left to professional firefighters. Your plan should identify an alternate facility to house the animals once they are rescued, as well as procedures for transporting them safely to this facility.

Although not specifically required by OSHA, it is strongly recommended that all shelters have a comprehensive disaster preparedness plan covering all potential emergencies, such as tornadoes, hurricanes, floods and earthquakes where applicable. For more information on developing a disaster preparedness plan, please visit the following websites: <http://www.avma.org/disaster/> or <http://www.fl-adpac.org/> or <http://www.aspcapro.org/disaster-preparedness/>

OSHA requires that the Fire Prevention and Emergency Response Plan include the following:

- **Escape routes:** A floor plan that shows the location of all fire extinguishers and escape routes is the easiest way to fulfill this requirement.
- **Procedures for staff members who will remain behind to perform critical operations before they evacuate:** This requirement is not applicable to animal shelters.
- **Procedures to account for all staff members after emergency evacuation:** Designate a central meeting place for staff to assemble after the evacuation. One person should be assigned to check that all employees are present and accounted for.
- **Rescue and medical duties for staff assigned to perform them:** This requirement is also not applicable to animal shelters.
- **Methods for reporting fires and other emergencies:** Generally, this will mean activating the central fire alarm system and dialing 911. Specific staff members should be assigned to perform these duties or to ensure that another staff member has done so.
- **Name of the person responsible for developing and updating the plan:** Make sure that the plan is reviewed and updated annually or more often as necessary.

A copy of the Fire Prevention and Emergency Response Plan must be readily accessible to staff at all times, and it must be explained to staff at the following times:

- When the plan is first developed
- Upon hiring
- Whenever the plan is changed or updated
- When the employee's duties in the plan change

## 26.0 Fire Extinguishers

OSHA does not require fire extinguishers for most general businesses, as long as they have a written Fire Prevention and Emergency Response Plan that requires employees to activate an alarm and immediately evacuate the facility in the event of a fire. However, the majority of local fire codes do require portable fire extinguishers in any commercial building. Additionally, portable fire extinguishers are extremely valuable in preventing small fires from becoming major ones, and it is strongly recommended that all shelters have them available.

When fire extinguishers are present, the following guidelines must be followed:

- Fire extinguishers must be placed so that any employee is never more than 75 feet away from accessing one.



Courtesy of Diane Smutney Photography

- They should be located near exits whenever possible to minimize the chance that a fire will block egress from the building.
- They should be wall-mounted between 32 and 48 inches from the floor and easily visible. Fire extinguishers should not be stored in closets or cabinets where they would not be easily found.
- All fire extinguishers must be inspected yearly by a qualified service company and display the appropriate inspection tag.
- They must be checked monthly by a designated staff member to ensure that each is present and free from obvious damage, and that the pressure gauge indicates an adequate charge.

OSHA does not require automatic sprinkler systems for animal shelters. However, some local fire codes do require sprinkler systems for all commercial buildings. Older buildings are often subject to “grandfather” clauses that exempt them from certain requirements and only require compliance when renovations are made to the facility. As previously mentioned, it is essential that all shelters work with their local fire department to ensure compliance with their local fire code.

## 27.0 Routes of Egress and Emergency Exits

Every animal shelter must have at least two exit routes from the facility. Preferably, these exits should be located so there is minimal possibility that both could become blocked by a fire at the same time. If employees are required to work in a basement area, there must be at least two means of egress that meet the definition of an exit.

To qualify as a viable exit, a doorway must be at least 28 inches wide and 6 feet 8 inches high. Any hallway that leads to or from an exit doorway must be at least 28 inches wide and 7 feet 6 inches high. Any protrusions from the ceiling, such as pipes or lights, must hang no lower than 6 feet 8 inches from the floor.

If the route to the nearest exit is not obvious, then the route must be marked with a sign reading “EXIT” with an arrow indicating the direction.

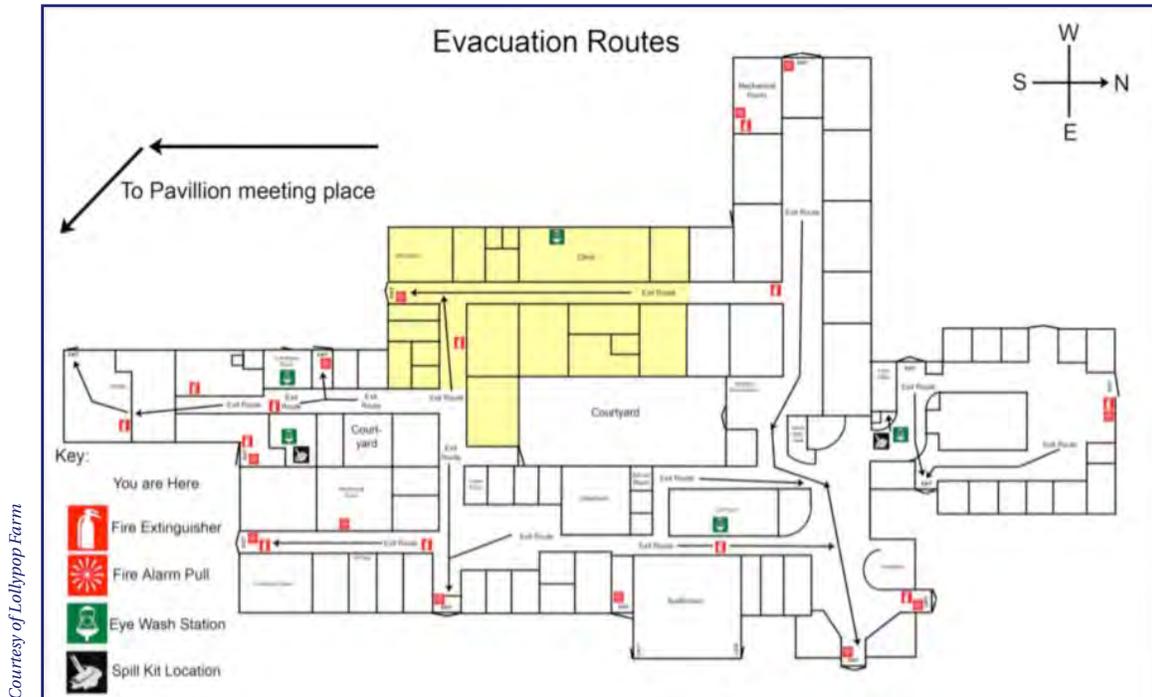
Exit doors must not be locked in any way that would prevent escape from inside the building. Locks requiring a key, swipe card or code to open from the inside should never be used on exit doors. Deadbolts are permitted on exit doors only if they can be opened from the inside without a key. Generally, the exit doors should open outward and be equipped with a panic bar-type latch that disengages the lock when pushed.

Any door that does not allow escape from the building, but that could potentially be mistaken for an exit, must be marked with a sign that states “NOT AN EXIT.” Be sure to mark any doors that lead to enclosed areas, such as dog runs, in this way.

The letters of an “EXIT” sign must be at least 6 inches high and three-quarters of an inch wide so as to be clearly visible from a distance. OSHA does not require illuminated exit signs in animal shelters as long as there is normally enough light present to see the sign. However, many local fire codes do require illuminated exit signs in commercial buildings, so be sure to check your local regulations. If illuminated exit signs are installed, they must be maintained in working order at all times regardless of whether or not they are required.



The routes of egress away from the exit doors outside the building must be free from debris. In areas where snow and ice may occur, OSHA requires that outside exit routes either be covered with a roof or canopy, or that there be provisions for the immediate removal of snow and ice during business hours.



OSHA does not specifically require the posting of evacuation diagrams, but it does require employers to develop a plan that includes descriptions of the evacuation procedures that employees are to follow. Exit route diagrams are by far the easiest way to fulfill this requirement. Exit diagrams should be posted in enough places throughout the shelter to enable employees to orient themselves and easily find the nearest exit. Exit diagrams should identify not only the routes of egress, but also the location of fire extinguishers and any compressed-gas cylinders and emergency gas shut-off valves. Exit diagrams may be hand-drawn, or you can use copies of your shelter's floor plan.

## 28.0 Emergency Lighting

OSHA requires emergency lighting to illuminate routes of egress in the event of a power outage. Emergency lighting must be adequate so that staff can find the nearest exit from any location inside the facility during a loss of power.

OSHA also requires emergency lighting in areas where employees may be involved in a hazardous situation when a power outage occurs. Since animal handling always poses a potential risk of injury, shelters must have adequate emergency lighting in all areas where employees are likely to be engaged in procedures involving animals. Therefore, animal sheltering facilities generally need a great deal of emergency lighting.

Emergency lights must come on automatically when there is a power outage. Standard battery-powered emergency lights are relatively inexpensive and can be purchased at any home supply store.

Alternatively, battery ballasts can be installed on existing light fixtures. While it is a good idea to have a supply of hand-held flashlights located throughout the facility, they are not an acceptable substitute for emergency lighting.

## 29.0 Ladder Safety

OSHA has specific requirements for ladders used in the workplace:

- Both foldout (free-standing) and leaning ladders must be able to support 4 times the weight of the intended load, except for extra heavy-duty metal and plastic ladders, which must be able to support 3.3 times the intended load.
- Ladders that lean against a wall or other support must be positioned at such an angle that the horizontal distance from the top support to the foot of the ladder is about one-fourth the working length of the ladder.
- Foldout ladders must have a metal spreader or locking device to hold the front and back sections in an open position when in use.
- Ladder rungs must be parallel, level and uniformly spaced between 10 and 14 inches apart.
- For extension trestle ladders, the rung spacing must be between 8 and 18 inches for the base and between 6 and 12 inches for the extension section.
- Rungs must be skid resistant and shaped so that the foot cannot slip off.
- Ladders must be kept free from slipping hazards, such as oil, grease and wet paint.

## 30.0 Driver and Vehicle Safety

Motor vehicle accidents are the number one cause of work-related deaths in the United States, according to the Bureau of Labor Statistics. If an employee operates a motor vehicle as part of his or her job responsibilities, even if the vehicle is not owned by the employer, it is the employer's responsibility to ensure that the vehicle is maintained in safe operating condition and that the employee has a valid driver's license. Even if the employee uses a personal vehicle for work-related duties, such as running an errand, the employer is generally liable for any accidents that occur during that work-related activity. If possible, shelters should not allow staff members to use their own vehicles to perform work duties, since it is nearly impossible to ensure that employees' personal vehicles are properly maintained.

Every employee who is permitted to drive a company-owned vehicle must have a valid driver's license. The employer must maintain a current copy of that driver's license in the employee's personnel file. Be sure that you have a written policy requiring employees to notify Human Resources if their driver's



*Courtesy of Washoe County Regional Animal Services*

license is suspended or revoked. While not required by OSHA, be aware that your auto insurance carrier may require copies of employee driving records, and may deny coverage or charge higher rates for employees with moving violations or accidents on their license.

At a minimum, vehicles owned by the shelter should undergo a comprehensive maintenance and safety inspection by a professional mechanic once per year. Additionally, it is recommended that the following key parts and functions be checked at each routine oil change and tire rotation (typically done every 3,000 miles):

- Lights (headlights, brake lights, turn signals)
- Brakes (front, rear, parking)
- Wipers (blades and fluid)
- Tires (pressure and tread)

Be sure to maintain all maintenance and repair records for each vehicle in a secure location within the shelter. These records should not be left in the vehicle, where they could easily become lost or damaged.

Seat belts must be maintained in good working condition at all times. Be sure that you have a written policy requiring that seat belts be worn by all drivers and passengers.

If the driver's rear view is obstructed by a load or by vehicle design, OSHA requires that the vehicle be equipped with an audible back-up alarm.

OSHA also has specific requirements for agricultural vehicles, such as tractors:

- All operators must be properly trained on all functions of the equipment, and this training must be documented.
- Tractors must be equipped with a rollover protective structure (ROPS), which will protect the operator from being crushed in the event of a rollover accident.
- Tractors must be equipped with a seat belt, and there must be a written policy requiring its use.
- If the rear view from the tractor is obstructed, the tractor must be equipped with an audible back-up alarm.

## 31.0 Stairs

OSHA has stringent requirements for stairs in the workplace:

- The angle of the stairway must be between 30 and 50 degrees.
- Stairways must be at least 22 inches wide. The width of the stairway must be measured clear of all obstructions except the handrail.
- Any uniform combination of tread-to-riser dimensions can be used as long as the run of the tread (front to back) is at least 8 inches and the rise is no greater than 10 inches.
- The tread width and riser height must be uniform throughout the entire flight of stairs.
- Broken or loose treads or risers must be repaired immediately.
- Treads must be slip resistant.
- Stairs must be strong enough to support a load 5 times the normal anticipated workload or 1,000 pounds, whichever is greater.
- If a platform landing is required in the stairway, it must be at least as wide as the stairway, and at least 30 inches in length measured in the direction of travel.

- When a door or gate opens directly onto a stairway, a platform landing must be present. This landing must be large enough so that the swing of the door or gate does not reduce its width or length to less than 20 inches.
- Any flight of stairs that has four or more risers must be equipped with a standard stair railing or handrail.

A handrail consists of a rail mounted to a wall by means of brackets attached to the lower side so as not to obstruct the surface along the top and both sides. A handrail must meet the following requirements:

- It must provide an adequate handhold to prevent falling.
- It must be mounted with a distance of 30 to 34 inches from the upper surface of the rail down to the riser at the forward edge of the tread.
- Hardwood handrails must be a minimum of 2 inches in diameter.
- Metal handrails must be a minimum of 1.5 inches in diameter.
- The length of the mounting brackets must allow for a clearance of at least 3 inches between the handrail and the wall.
- The brackets cannot be spaced any more than 8 feet apart.
- The mounted handrail must be able to withstand a minimum of 200 pounds applied in any direction at any point on the rail.

A railing consists of a top rail, intermediate rail and posts. A railing must meet the following requirements:

- The top rail must be between 30 and 34 inches from the surface of the tread in line with the face of the riser at the forward edge of the tread.
- The top rail must be smooth surfaced the entire length of the railing.
- The intermediate rail must be located approximately halfway between the top rail and the floor, ramp or platform.
- The ends of the rails must not overhang the terminal posts except where such an overhang would not cause a projection hazard.
- The posts, top rail and intermediate rail of a hardwood railing must be at least 2 inches by 4 inches thick, and the posts must be spaced no more than 6 feet apart OR the top rail can be made of two right-angled, 1-inch-by-4-inch-thick pieces with a 2 inch by 4 inch intermediate rail, and posts spaced no more than 8 feet apart.
- The top rail, intermediate rail and posts of a metal-pipe railing must be at least 1.5 inches in diameter with the posts spaced no more than 8 feet apart.

OSHA requirements for when and where to use handrails and railings are:

- Stairways less than 44 inches wide that have walls on both sides must have at least one handrail, preferably on the right side as you are descending.
- Stairways less than 44 inches wide that have one side open must have a railing located on the open side.
- Stairways less than 44 inches wide that are open on both sides must have a railing on each side.
- Stairways that are more than 44 inches wide, but less than 88 inches wide, must have a handrail or railing on each side (a handrail where there is a wall and a railing where there is an open space).
- Stairways that are 88 inches wide or more must have a handrail or railing on each side and a center railing.

Never store items in stairwells. This can present a significant fire hazard and is an OSHA violation, as well as a violation of most local fire codes.

## 32.0 Restrooms

OSHA mandates a minimum of one working toilet and one hand-washing station per 15 employees present in the facility at any given time. OSHA requirements do not address the need for public restrooms or take into consideration that restrooms may be shared by both staff and the public. OSHA specifically prohibits the storage, preparation and consumption of food and beverages in restrooms.

## 33.0 General Housekeeping and Maintenance

OSHA requires the workplace to be maintained in such a way that prevents unnecessary physical and health hazards. This requirement includes preventing vermin infestations — such as mice, rats, roaches and flies — which are a common problem in animal shelters. Although not specifically mandated by OSHA, it is strongly recommended that shelters have a written housekeeping and maintenance plan that includes a daily, weekly, monthly and yearly checklist. The plan should outline step-by-step instructions for each task, including the equipment and supplies needed, and designate the person responsible for performing it.

Animal waste accidents and liquid spills must be cleaned up immediately. After cleanup, the use of a sandwich board-type “Wet Floor” sign is recommended to alert staff and the public to the slipping hazard. In areas where the floor is consistently getting wet, such as the grooming room, the use of non-slip rubber mats is strongly recommended.

Trash and waste material must be removed often enough to maintain the facility in a sanitary condition. Trash receptacles should have lids to contain odors and keep out vermin.

Trips and falls are a common source of injury in the workplace. Animal shelters tend to have very limited space and therefore often have equipment or furniture located in areas where they can present a tripping hazard. Floor scales, hoses, electrical cords, furniture, fans and office equipment can all be hazardous when there is insufficient space to maneuver around them easily. These items should not be placed in hallways or allowed to protrude into walkways. Uneven floor surfaces also present a tripping hazard. Loose or damaged carpeting or floor tiles should be repaired or replaced immediately. Floor mats and foot baths should have a non-slip backing.

OSHA standards prohibit open drains or gutters in walking areas. Many shelters do have drains and gutters located in animal housing areas where staff members walk. These must be kept covered at all times except when staff members are actively utilizing them during cleaning. Drains and gutters that are not located in walking areas, such as inside or behind kennel runs, do not need to be covered.

## 34.0 Food and Beverages in the Workplace

Employers are not required to provide a break room for staff. However, if the employer allows staff to store, prepare or consume food on the premises, then the employer must provide a space that is free from biological and chemical hazards. Since virtually all areas of an animal shelter contain both biological and chemical hazards, this generally means that either a break room must be provided or staff must be prohibited from bringing food and beverages onto the premises. Food and beverages must never be permitted in any animal areas, regardless of whether or not animals are present at the time. This includes kennels, exam rooms, adoption rooms, intake areas and surgery suites. Food and

beverages must never be stored in areas where there are biological or chemical hazards, including refrigerators where vaccines, drugs or laboratory samples are stored. It is acceptable to store human food and commercially produced pet food, such as canned cat food, in the same refrigerator.



Courtesy of Robert Sexton – Montgomery County Animal Resource Center, Dayton, OH

### 35.0 Compressed Gases

OSHA regulations regarding compressed gases apply to all gas-containing cylinders, regardless of the size or whether the cylinder is empty or full.

- Compressed-gas cylinders must be stored in a cool, dry place away from potential heat sources and direct sunlight.
- They must be secured in an upright position via a bracket, chain or strap attached to either a wall or floor mount or on a transport cart.
- Cylinders equipped with protective caps must have them in place whenever the cylinder is not in use.
- Large cylinders should always be moved on a transport cart. Never roll or drag a compressed-gas cylinder.
- Impact-resistant safety goggles must be worn when connecting and disconnecting cylinders. Compressed gases have the potential to cause serious eye injuries.
- Gas valves should always be shut off when not in use.
- The location of compressed-gas cylinders and the emergency shut-off valves (if applicable) should be identified in your Fire Prevention and Emergency Response Plan and emergency exit diagrams.
- Central-supply gas systems should be inspected for leaks by a qualified technician at least yearly.



Courtesy of Robert Sexton – Montgomery County Animal Resource Center, Dayton, OH

## 36.0 Waste Anesthetic Gases

Exposure to waste anesthetic gases has been linked to reproductive disorders in women, so this safety issue must be taken very seriously in animal shelters that perform spay/neuter and other surgeries. OSHA does not have established exposure limits for the most commonly used veterinary anesthetic gases, isoflurane and sevoflurane, but it does enforce the National Institute for Occupational Safety and Health (NIOSH) recommendations of 2 parts per million (ppm) for halogenated agents and 25 ppm for nitrous oxide. Halothane, isoflurane and sevoflurane are all halogenated anesthetic agents. The hazards and regulations for an anesthetic gas safety program are the same regardless of what agent is used.

Your anesthetic gas safety program must include both engineering controls and specified work practices. You must have a written Anesthetic Safety Plan that includes the following:

1. **Policy statement:** The employer must clearly state that the safety policies and required procedures related to anesthetic gases are official rules, and that any violation of these rules will result in disciplinary measures.
2. **Scavenging system:** An appropriate scavenging system must be in place whenever anesthetic gases are in use. If more than one type of scavenging system is available, the plan must specify when each one should be employed. The written plan should also designate a staff member responsible for ensuring proper operation and maintenance of the scavenging system(s), and also a staff member responsible for providing training on the proper use of the device(s).
3. **Written procedures:** Written procedures for anesthetic gases should address both patient handling and staff safety.
4. **Equipment maintenance:** Both the routine maintenance procedures performed by staff and the required periodic professional maintenance of the anesthesia machines and equipment should be detailed in the Anesthetic Safety Plan. The names and positions of responsible individuals should also be noted in the plan.
5. **Emergency procedures:** The written Anesthetic Safety Plan must include detailed instructions for cleaning up spills.
6. **Monitoring of waste anesthetic gas (WAG) levels:** The Anesthetic Safety Plan must include a description of the procedures for monitoring WAG levels, frequency performed and name of the staff member responsible. OSHA does not specifically require the measurement of WAG levels; however, the hazard communication standard requires employers to ensure that employees are not exposed to any chemical above the permissible exposure level (PEL) for that chemical. The only reliable method of ensuring that employees' exposure to anesthetic gases is consistently within the PEL is to measure WAG levels regularly. The simplest way to measure WAG levels is by using personal dosimetry badges for all employees who work in areas where anesthetic gases are used.
7. **Staff training:** Staff training on anesthetic gases should include the following:
  - Information on the dangers of exposure
  - Required procedures for reducing exposure
  - Instruction on the proper operation and maintenance of anesthesia machines and scavenging equipment
  - Emergency procedures

### **Scavenging Systems**

An effective anesthetic-waste scavenging system and efficient room ventilation are essential in protecting employees from exposure to anesthetic gases. There are three common methods of WAG scavenging systems: active scavenging, passive exhaust and adsorption. Each method has pros and cons, and one method does not consistently meet the needs of all situations in an animal shelter environment. Therefore, many shelters have more than one scavenging system in place.

An active scavenging system typically has a fan that creates a vacuum through a series of hoses that are connected to the patient or anesthesia machine, and transports the WAG to an exhaust port outside the building. Active scavenging systems are ideal for shelters that perform a high volume of surgical procedures, as they are the most effective in removing WAG. The disadvantages of active scavengers include:

- Initial cost: about \$500 to \$1,000
- Maintenance: potential need to repair or replace the fan motor on a regular basis
- Manual activation is required: Active scavenging systems generally need to be turned on by a switch, and there is the possibility that employees will forget to turn it on.

A passive exhaust system utilizes a hose to channel WAG to an appropriate place for evacuation from the building. The method is practical only for short distances, since its only means of propelling the gas are the movement of the patient's diaphragm and the flow rate of the gas. This system works well in shelters where the surgical suite is in a room with an exterior wall so that the hose can be placed directly through the wall. The initial cost of a passive system is very low, and the associated maintenance is minimal. The disadvantages of a passive system include:

- Limited distance: The anesthesia machine must be within 15 to 20 feet of an outside wall. Also, the hose should not be run vertically for more than 5 feet.
- Limitations with small animals: Very small animals, such as puppies and kittens, may not be able to move the WAG effectively through the system. This is of particular concern in animal shelters where juvenile spay/neuters are common practice.

A charcoal adsorption system is an acceptable method of WAG removal for halogenated hydrocarbons, such as isoflurane and sevoflurane. It is not effective in removing nitrous oxide, which is rarely used in shelters. Charcoal adsorption canisters are very useful for mobile purposes when a primary active or passive scavenging system cannot be used. The disadvantages of an adsorption system include:

- Consistent monitoring of saturation level: The charcoal canister must be replaced as soon as it gains 50 grams of weight. Failure to replace the canister promptly will result in the WAG overflowing into the ambient air and dangerous exposure levels for staff.



Active scavenging system – Washoe County Regional Animal Services

### ***Patient Recovery***

The aspect of reducing WAG exposure that presents the greatest challenge is the recovering patient. A significant amount of anesthetic gas is expelled during patient recovery. The size of the recovery room, the ventilation system and the number of recovering patients are all factors that affect the WAG levels. It is recommended that you measure the levels of WAG in the recovery area regularly. If the levels are too high, you will need to improve the ventilation system in that area. Alternatively, you could keep patients attached to a scavenging system during recovery, but this option is generally impractical for most shelters that are performing a high volume of spay/neuter surgeries. The ventilation system in the recovery area should include an exhaust fan or separate heating, ventilating and air conditioning (HVAC) system that vents the air outside the building. An HVAC system that re-circulates the recovery room air throughout the building is not acceptable and will potentially expose your entire staff to dangerous levels of WAG. An open window is also an unacceptable method for removing WAG from the recovery area, since there is no method of ensuring the WAG actually moves to the outside.

### ***Gas Anesthesia Machines***

According to NIOSH, up to 90 percent of the WAG found in the ambient air during surgical procedures is attributable to leaks in the anesthesia machine itself. Proper anesthesia machine maintenance will prevent leaks and greatly reduce staff exposure to WAG. OSHA does not set specific procedures or intervals for anesthesia machine maintenance, but it does require both user and professional service in accordance with the guidelines of the machine's manufacturer. Generally, user maintenance includes regular checks and changes of soda lime and adsorption canisters (when applicable), regular cleaning to maintain proper operation and a daily leak check of the machine and hoses. Professional maintenance should be performed every three to 12 months depending on how heavily the machine is used.

The following procedure can be used to perform the daily leak check of your anesthesia machine:

1. Turn on the oxygen supply.
2. Close the pop-off valve.
3. Using your thumb, seal off the open end of the hose that attaches to the patient's endotracheal tube.
4. Turn on the oxygen valve until the manometer reads 20 (or, if there is no manometer, until the bag is slightly inflated) and then close the valve.
5. Watch the manometer for any decrease in pressure. (If the machine does not have a manometer, then observe the bag.) Any drop in pressure indicates a leak in the system.
6. If a leak is present, check the bag and hoses for cracks and deterioration. Also check all connections and seals. If you are unable to determine the source of the leak and replace the necessary parts yourself, then you must have the machine serviced by a qualified technician.

In addition to checking for leaks, there are simple measures that can be taken in the operation of the machine that can help to minimize WAG exposure:

- Always calculate flow rates for each patient prior to induction. Use the least amount of anesthetic gas required to maintain an adequate depth of anesthesia.
- Select the proper size hose, re-breathing bag and endotracheal tube for each patient.
- Properly inflate the endotracheal tube cuff prior to connecting the patient to the machine.

- Never start the flow of anesthesia until after the patient is connected to the machine.
- Before disconnecting the patient from the machine, turn off the flow of anesthesia, but maintain the flow of oxygen to flush the WAG through the scavenging system.

### ***Masking and Tank Inductions***

Masking and tank inductions make it extremely difficult to control WAG levels in the surgery room. If you are using a mask or tank, it is imperative that the surgery room be equipped with an excellent ventilation system. Generally, one or more exhaust fans that evacuate room air to the outside are recommended. Keep in mind that exhaust fans are not a replacement for an appropriate scavenging system. To minimize WAG exposure when using a mask or induction tank, always adhere to the following guidelines:

- Only use masks or induction chambers when medically necessary, not for everyday use.
- Always check masks for cracks or deterioration before each use.
- When using a mask, make sure that it fits snugly over the patient's nose and mouth.
- Turn the oxygen on before placing the mask on the patient, and turn the flow of gas on after placing the mask on the patient. Reverse the order when removing the mask.
- Always use an appropriate flow rate when masking a patient. If the re-breathing bag is continuously overinflated, then the flow rate is too high and gas is likely escaping from the mask into the room.
- The induction chamber should have tight-fitting seals and should always be connected to a scavenging system when in use.
- After removing the patient from an induction chamber, leave the chamber connected to the scavenger with pure oxygen flowing for a few minutes in order to purge the WAG. If this is not possible (e.g., in shelters that have only one anesthesia machine that will be immediately needed for the patient), the lid should be replaced on the chamber immediately after the patient is removed. The chamber should then be promptly taken outdoors and opened to allow the gas to dissipate.

### ***Staff Training***

All training must be documented, and the records should be maintained in each employee's personnel file. Staff training on anesthetic gases should include the following:

- Handling of the anesthetic agent, including proper storage, procedures for refilling the vaporizer and emergency procedures in the event of a spill
- General operating and maintenance procedures for the anesthesia machine
- Procedures for performing a simple leak check of the anesthesia machine
- Risks of WAG exposure
- Work practices for minimizing WAG exposure

## 37.0 Radiology

Both OSHA and some individual states regulate radiation exposure in the workplace. Animal shelters that are located in states with a Nuclear Regulatory Commission-approved radiation program are in compliance with OSHA's requirements if they adhere to their state's requirements. The following states have an approved program:

Alabama	Kansas	North Carolina
Arizona	Kentucky	North Dakota
Arkansas	Louisiana	Oregon
California	Maryland	South Carolina
Colorado	Mississippi	Tennessee
Florida	Nebraska	Texas
Georgia	New Hampshire	Washington
Idaho	New York	

If your shelter is located in one of these states, you must follow your state regulations, which in some cases may be more stringent than OSHA's. In all other states, radiology regulations are enforced by OSHA.

A standard radiation warning sign (the magenta radiation caution symbol displayed on a yellow background), such as the one here, must be posted on the outside of all doors leading into the radiology room.



*Courtesy of Compliance Signs*

Additionally, most states with an approved radiation safety program also require a notice informing employees of their rights and responsibilities under their state's program. A copy of this notice can be obtained from your state's regulatory agency responsible for radiation exposure, usually the department of health. This notice must be posted either in the radiology area or the location where other safety information is posted, such as the employee break room.

OSHA requires that employers have a written SOP addressing the safe operation of the radiograph machine. In order to produce quality radiographs and prevent unnecessary staff exposure to x-rays, operation procedures and policies must be standardized and enforced. This SOP should be included in your shelter's safety manual, as well as prominently posted near the machine so that staff can refer to it when operating the equipment. A technique chart should also be posted near the machine. Calipers should always be used to accurately measure the patient's body part to be x-rayed. Accurate measurements will ensure that you select the correct settings on the machine, and therefore produce a good quality radiograph and avoid the need for retakes. Retaking radiographs not only wastes staff time, but also increases their exposure to x-rays.

Other policies that should be included in your radiology SOP include the following:

- Always collimate down on the area of concern as much as possible.
- Rotate radiology duties among as many qualified staff members as possible to minimize exposure to individuals.

- Staff members should never place any body part within the primary beam, even when wearing PPE.
- Have the radiograph machine and developer serviced regularly by a qualified professional.

Although not required by OSHA, it is strongly recommended that shelters maintain a radiology log to record the date, patient, views, settings and staff member(s) involved in taking the x-ray. This log will be a valuable aid in determining staff rotation of radiology duties; keep in mind that simply assigning staff members to an equal distribution of days in radiology will not necessarily result in an equal distribution of x-ray exposures.

OSHA does not require special shielding of veterinary x-ray machines, but it does require that access to radiation areas be restricted. Some states require an engineering assessment for proper shielding, so it is important to check your state regulations prior to installing a new x-ray machine. Placement of an x-ray machine in a work area, such as a treatment room, is acceptable as long as the room can be cleared of all personnel when the machine is in use. For most animal shelters, this will be very inconvenient, if not utterly impractical. Therefore, it is recommended that an x-ray machine be located in its own room. The walls of the x-ray room do not necessarily need to be of a thicker density than those of the rest of the shelter. If they border areas that are not frequently in use, such as storage rooms or hallways, then normal 1-inch-thick sheetrock is sufficient. However, if the x-ray room is adjacent to constant-use areas, such as offices, kennels, treatment rooms, restrooms or surgery suites, then double-thickness, 2-inch sheetrock is recommended. All radiology room doors should be leaded.

Employers must provide a personal monitoring device for each employee exposed to ionizing radiation while on the job. Dosimetry badges must be worn on the outside of the lead apron and thyroid protector at the neck level. Badges should be protected from sunlight and full-spectrum fluorescent lighting. Badges should be exchanged monthly. OSHA requires that staff members receive a written report of their exposure levels annually or anytime there is an exposure above 25 rems (a unit used to measure radiation dose) in a monthly reporting period. Written reports should contain the shelter's name and address, employee's name, date, exposure data and the phrase, "This report is furnished to you under the provision of OSHA Standard 1910.96 and applicable state regulations. You should preserve this report for future reference."

Staff must wear protective lead gloves and aprons when operating an x-ray machine. Single-sided lead hand shields do not meet OSHA's standards for radiation protective apparel and therefore should not be used. Employees who restrain a patient during x-ray exposure must wear lead gloves that enclose the entire hand and forearm. Although not required by OSHA, thyroid protectors and lead glasses are also strongly recommended. There must be enough of the appropriate PPE for every employee involved in taking the x-ray, which means you will need two of everything at a minimum. All radiology PPE must be maintained in good condition without cracks or holes. Never fold lead gloves, aprons or thyroid protectors, as this can weaken the material or cause cracking. Ideally, these items should be laid flat for storage. Alternatively, they can be hung on hangers. Never use lead gloves as protection against an aggressive animal, since even one bite from a cat or small dog can damage the glove and cause it to be ineffective in protecting against radiation exposure. For cleaning purposes, radiology PPE should be regularly wiped down with a mild detergent. Any item that shows evidence of a crack, tear or hole must be repaired or replaced immediately.

Because damage to lead gloves, aprons, glasses and thyroid protectors is not always detectable by visual inspection, they must be radiographed regularly in order to evaluate their efficacy. These items should be placed on a large cassette and radiographed using a table-top technique. Aprons must be done in a serial fashion since they are too large to fit in one view. The setting used for gloves must be powerful

enough to penetrate both layers. Any cracks, tears or insufficiencies will be very obvious and appear as dark areas on the radiographs. Items that no longer provide adequate protection should not be used, and must be discarded or professionally repaired immediately. The recommended interval between these inspections is generally one to three months depending on how frequently the items are used.

OSHA requires that staff members be fully trained in safety and competency before they are allowed to take radiographs. Even if an employee has had prior experience in radiology at another job, he or she must still be thoroughly trained on your shelter's specific policies and procedures before operating your x-ray machine. Training must include proper operation of the x-ray machine, required PPE and information on the health hazards associated with radiation. Long-term exposure to low doses of ionizing radiation can cause cancer, genetic mutations, cell damage and bone marrow disorders. Fortunately, if safety procedures are implemented and followed, the risk of radiation exposure is extremely low. Since rapidly growing tissues are more sensitive to radiation, the health risks associated with low-dose exposure are of greater concern during pregnancy, especially during the first trimester. OSHA does not specifically prohibit pregnant women from taking radiographs; however, employers may want to consider setting a policy that prohibits pregnant staff members from operating the x-ray machine or being present in the room while the machine is in operation.



Courtesy of Dumb Friends League, Denver, CO

The x-ray developer can also present specific safety hazards. Whether you have an automatic developer or use a manual system, there needs to be adequate ventilation in the darkroom to prevent fumes from reaching hazardous levels. An exhaust fan should be installed over the x-ray developer. X-ray processing chemicals are hazardous and must be handled and disposed of appropriately. Most states and local cities or counties regulate what substances can be disposed of in the sewer system. Many also require any business that operates x-ray developing equipment to register as a hazardous waste generator. Be sure to obtain a copy of your local regulations from your waste management authority. It is generally acceptable to dispose of developer in the regular sewer system, but not fixer. Fixers contain heavy metals that are dangerous environmental pollutants, so they must be properly disposed of by a hazardous-waste disposal company. Remember that any chemical spills

should be cleaned up immediately using appropriate PPE and disposal methods. X-ray developers should be professionally serviced on a regular basis according to the manufacturer's instructions.

## 38.0 First-Aid Kits

OSHA generally does not require that a first-aid kit be available in the workplace. A first-aid kit is required only when the workplace is not located in “near proximity” to a physician, hospital or clinic, or when Emergency Medical System (EMS) services are not available. OSHA defines “near proximity” as “within 3 to 4 minutes if an accident involving suffocation, severe bleeding, or other life threatening injuries can be expected, or within 15 minutes when a life threatening accident or illness is unlikely.” In a typical animal shelter, a life-threatening illness or injury is unlikely. Therefore, as long as a shelter is located within 15 minutes of accessible emergency medical treatment, a first-aid kit is not required by OSHA.

If your shelter is located in an area where there are no EMS services and there is no hospital or clinic nearby, then you are required to have a first-aid kit. In this case, OSHA requires that a physician familiar with the workplace determine the contents of the first-aid kit. Additionally, there must be at least one staff member certified in human first aid on the premises at all times during the shelter's hours of operation. Those staff members certified in first aid must also be fully trained on the requirements of OSHA's blood borne pathogens standard, since they will be at risk for contacting human blood and other bodily fluids.

Although first-aid kits are not required by OSHA for most animal shelters, it is strongly recommended that you have basic first-aid supplies, such as adhesive bandages, available to employees in the form of a self-aid kit. In order to avoid complying with OSHA's strict regulations on the administration of first aid, these supplies must only be used by employees to administer self aid. If the injured person is too injured to administer self aid, then the injury is serious enough to warrant treatment at a medical facility. It is essential that any first-aid items provided for staff use be maintained in a sanitary area, such as the employee break room. The first-aid supplies should also be checked monthly and replenished as needed by an assigned staff member. Expired items should be promptly discarded and replaced. It is also a good idea to maintain a self-aid kit in all vehicles.

Individual employees who have first-aid or CPR training independent of their job requirements are permitted to use these skills to assist a sick or injured person at their own discretion and risk without the presence of a written policy addressing those procedures.

## 39.0 Indoor Air Quality

OSHA proposed an indoor air quality standard in 1995, but it was withdrawn due to strong opposition. However, exposure to chemical and biological contaminants can pose a serious health hazard in an animal shelter, and many of these contaminants are regulated by OSHA, either directly or under the General Duty Clause.

Older buildings generally have lower insulating values and therefore allow a much greater amount of outside air to enter the building naturally. This natural ventilation can be beneficial in lowering the concentration of indoor pollutants. Newer buildings are typically constructed with very high insulating values that make natural ventilation virtually nonexistent.

Improved indoor air quality can be achieved by combining good housekeeping practices with an appropriate HVAC air-exchange rate. The most effective method of removing indoor air contaminants is to bring in outside air and circulate it so that the air in every area of the facility is completely exchanged

a specific number of times per hour. The minimum exchange rate is set by local and national building codes. The national code requires a minimum of 20 percent of the air to be exchanged with fresh air each time it is recirculated by an HVAC system. You must also check your local building codes to ensure that your facility meets those standards. An acceptable air exchange rate in most office buildings is five to six changes per hour; in other words 100 percent of the air is exchanged with fresh air five to six times per hour. Recommended air-exchange rates in animal housing areas are generally 10 to 12 times per hour. This higher rate is primarily intended to prevent the spread of diseases among the animals, but it is also beneficial in removing indoor air contaminants that may pose a health risk to employees. Most shelters built within the past five to 10 years meet or exceed these recommendations, but many older shelters do not.

Proper cleaning and maintenance of your HVAC system is also essential. Be sure air filters are changed frequently; monthly changes are recommended for most animal shelters. Vents throughout the facility should also be cleaned monthly to remove debris and pet hair. Be sure that the HVAC unit and air ducts are cleaned and maintained by a qualified technician as recommended by the manufacturer.

Local exhaust ventilation is strongly recommended in areas of the shelter where employees are likely to be exposed to contaminants, such as pesticides, waste anesthetic gases and chemical cleaning agents. This type of ventilation helps remove the contaminant at its source before it is dispersed into the general work environment. Exhaust fans should be installed in the following areas:

- Grooming area
- Darkroom
- Surgical recovery room
- Animal housing areas, if air-exchange rates are less than 10 times per hour

Humidity is another factor that can contribute significantly to indoor air quality. High humidity facilitates microbial growth in HVAC systems. OSHA's proposed standard for indoor air quality recommended that relative humidity in the workplace be maintained below 60 percent in buildings with mechanical cooling systems. This can be extremely difficult to achieve in animal shelters that are located in warm, humid areas of the country. However, reasonable attempts should be made to keep humidity levels as low as possible to prevent the growth and spread of bacteria, molds and viruses via your HVAC system. Evaporative coolers and room dehumidifiers can be helpful. Proper cleaning and maintenance of your HVAC system will also help prevent microbial growth due to humidity.

Tobacco smoke is also a significant factor that negatively affects indoor air quality. Many cities, counties and states have banned indoor smoking in businesses and public venues. Additionally, many jurisdictions have also set a minimum smoking-ban radius around the outside perimeter of these buildings (e.g., 5 feet from the building). In addition to enforcing these local ordinances, employers must also set their own policies to ensure that the indoor air is free from tobacco smoke. If there is no local indoor smoking ban in your area, OSHA regulations do permit designated indoor smoking areas, as long as these areas are completely separated from all work areas and the air is not recirculated to other parts of the building. Keep in mind that if you have a designated smoking break room, you must also provide a designated nonsmoking break room. Even if your local jurisdiction does not have an indoor smoking ban, it is perfectly acceptable to establish and enforce a nonsmoking policy within your facility. If smoking is not permitted in your facility, it is important to designate a smoking area in an appropriate place outside the building. Smoking should not be permitted near any entrance, exit or open window. Likewise, smoking should not be permitted near any HVAC units outside the building, as this could cause smoke to be circulated into the building.

## 40.0 Ergonomics

Ergonomics is the science of designing the job, equipment and workplace to fit the worker. OSHA's ergonomic standard was passed in 2000, but repealed a year later by the Bush administration. Since this repeal, OSHA has issued ergonomic guidelines. Although compliance with OSHA guidelines is voluntary for employers, it is strongly recommended that shelters establish ergonomic safety policies and procedures to reduce the risk of work-related injuries due to cumulative trauma and repetitive motion disorders (RMDs).

RMDs are conditions of the musculoskeletal and nervous systems attributed to continuous repeated movements, such as the bending of the arms, hands or wrists. RMDs develop gradually over a period of weeks, months or years. The severity of an RMD is usually directly proportional to the amount of force involved in the repetitive motion over time. The most common RMDs are tendinitis, carpal tunnel syndrome and back injuries.

While back injuries can sometimes occur from sudden trauma, they are most often the result of chronic, long-term trauma from repetitive lifting or straining. According to the Bureau of Labor Statistics, back injuries account for one out of every five work-related injuries. In animal shelters, back injuries occur more than any other type of injury except for animal bites and scratches. The primary cause of back injuries in shelters is the repetitive lifting of heavy objects, such as bags of pet food, boxes of supplies and large dogs. Whenever possible, ramps, wheeled carts and lift tables should be used to move heavy objects from one place to another. However, some amount of lifting will always be required in almost any position within an animal shelter. Training on proper lifting technique is essential for all shelter staff.

### *Procedures for proper lifting technique:*

- Minimize the distance you have to travel while carrying the load. Use carts to move heavy objects whenever possible.
- Make sure the load is not beyond your lifting capabilities. Always ask for assistance if the load is too heavy for one person.
- Always bend your knees and keep your back straight when lifting.
- Lift the load up slowly and steadily.
- Keep the load as close as possible to your body to maintain the center of gravity over your legs.
- Do not twist your waist when lifting or carrying a load.
- Set the load down slowly by bending your knees and keeping your back straight at all times.

Ergonomically friendly furniture and equipment should be provided to staff members who spend a significant amount of time at a computer workstation. Office furniture should have adjustable components that enable the user to modify the workstation to accommodate his or her physical dimensions and the requirements of the job.

### *Workstation Design*

- Correct workstation height depends upon the height of the user and upon the chair and other factors that interact with the user and desk. Ideally, the user should be able to sit at the workstation with the keyboard in place and be able to easily maintain a 90-degree elbow angle and straight wrists while typing.
- The height of an adjustable keyboard support should adjust between 23 inches and 28 inches to accommodate most users.

- Knee spaces should allow a worker to feel uncrowded and allow some changes of position, even with the keyboard support lowered to the correct level for use. The knee space should be at least 30 inches wide by 19 inches deep by 27 inches high to comply with the requirements of the Americans with Disabilities Act. For those using a footrest, clearance must be calculated with the legs in place on the footrest. Likewise, depth of the “clearance envelope” for both legs and toes should be evaluated while the workstation user is in a normal working position determined by the design of the seating system and the way the user sits. Drawers and support legs for furniture should not go where human legs need to fit.
- The workstation top should be big enough to allow space not only for all necessary equipment, but also for paperwork, books and other materials needed while working at the computer. Working with materials on chairs and at odd angles has the potential for neck and other body strain. Frequently used items should be kept close to avoid long reaches. A general recommendation is that the work area top should be at least 30 inches by 60 inches.

### *Chairs*

- Seat height should be pneumatically adjusted while seated. A range of 16 inches to 20.5 inches off the floor should accommodate most users. Thighs should be horizontal, lower legs vertical and feet flat on the floor or on a footrest. Seat height should also allow a 90-degree angle at the elbows for typing.
- A seat width of 17 inches to 20 inches is sufficient for most workers, and should be deep enough to permit the back to contact the lumbar backrest without cutting into the backs of the knees. The front edge should be rounded and padded. The seat slant should be adjustable, and the seat should swivel easily.
- The backrest should offer firm support (especially in the lumbar region), should be 12 inches to 19 inches wide and should be easily adjustable both in angle and height. The optimum angle between seat and back should permit a working posture of at least 90 degrees between the spine and thighs. Seat pan angle and backrest height and angle should be coordinated to allow for the most comfortable weight load on the spinal column.
- A chair seat and back should be padded enough to allow comfortable circulation. If a seat is too soft, the muscles must always adjust to maintain a steady posture, causing strain and fatigue. The seat fabric should breathe to allow air circulation through clothes to the skin.
- Armrests are optional, depending on user preference and task performed. They should not restrict movement or impede the worker's ability to get close enough to the work surface. The worker should not rest his or her forearms while typing.

### *Accessories*

- A footrest should be provided when a user is perfectly adjusted for keyboard use, but his or her feet do not rest flat on the floor.
- Use a document holder instead of resting copy on the table top. This helps to eliminate strain and discomfort by keeping the copy close to the monitor and at the same height and distance from the user's face as the screen.
- Wrist rests should only be used to support the wrist in pauses between typing if this is comfortable for the individual. Placing the wrists on a wrist rest while typing can create a bend in the wrists and pressure on the carpal tunnel.

## 41.0 Workplace Violence

OSHA does not have mandatory workplace violence standards. However, workplace violence is extremely prevalent. The development and implementation of a workplace violence prevention plan is recommended for all animal care and control agencies. According to the U.S. Department of Labor, more than 970,000 people were victims of workplace violence in 2008. Most incidents of workplace violence have one of the following causes:

- Robbery
- Customers or clients who lash out at an employee
- Employees who have a dispute with either a supervisor or a co-worker
- An employee's personal relationship situation (i.e., spouse, domestic partner or family member)

### ***Violent Customers***

Due to the very nature of the business, animal shelter employees are often required to interact with emotional customers. Euthanasia, pet relinquishment, owner reclaim fees and fines, adoption policies and animal cruelty cases are all issues that can cause emotions to run high and lead to unexpected violence in the workplace. Shelter staff can benefit greatly from good customer service training. Many confrontations with customers can be diffused simply by allowing them to vent their frustrations. However, staff members should not hesitate to call the police if they believe that the situation threatens their personal safety. Agencies that employ field staff who may be required to deal with violent suspects should strongly consider providing Kevlar® vests and requiring field staff to wear them while on duty.

### ***Violent Staff Members***

Violent confrontations with staff members can often be prevented by recognizing the potential warning signs. It is strongly recommended that shelters have a written policy in place clearly stating that any act or threatened act of violence in the workplace is grounds for immediate termination. Any reported threat of violence should be thoroughly investigated and documented by shelter management. It is also advisable to report any threatened violence to the police, even if no assault has occurred.

According to the Crisis Prevention Institute, Inc. (<http://www.crisisprevention.com/>), there are three precursors to any violent act committed by an employee in the workplace:

1. The employee has more than one of the following risk factors:
  - Easily frustrated
  - Changes jobs frequently
  - Marginal performer
  - Frequently angry
  - Impulsive
  - Doesn't accept responsibility and blames others for his or her mistakes
  - Defensive when criticized
  - Suspicious of others
  - Socially isolated
  - History of negative personal relationships
  - Low self-esteem
  - Fantasizes about retaliation
  - Has difficulty adapting to change
  - History of family violence or dysfunction

- Lacks empathy
  - Abuses drugs or alcohol
  - Has access to weapons
2. There is a stimulus to prompt the violent act, such as:
- Bad performance review
  - Disciplinary action
  - Demotion
  - Termination or layoff
  - Conflict with supervisor or co-worker
  - Submitted a grievance
  - Having financial problems
  - Having family or personal relationship problems
  - Experienced a significant change in his or her personal or professional life
3. He or she exhibits one or more of these early warning signs that an act of violence may be imminent:
- Frequent absenteeism
  - Low productivity
  - Angry outbursts
  - Withdrawn from co-workers
  - Threatens or intimidates co-workers
  - Serious financial problems
  - Extreme disorganization
  - Romantic stalking of co-workers
  - Obsessive involvement with their job with few or no outside interests
  - Discussion of weapons

If more than two or three of these warning signs are present, combined with risk factors and a stimulus, shelter management should take immediate action. While it may be tempting to just terminate the employee, this may not always be the appropriate course of action. An employee who is discharged based on accusations of violent behavior without adequate proof may be able to sue the employer for wrongful termination. Generally, the employer must have documentation of misconduct by the employee in order to justify termination. Often, the first course of action is to have a private discussion with the employee and issue a written warning, in conjunction with providing resources that can provide assistance to the employee, such as an employee assistance program (EAP). Many health care insurance plans offer EAPs at little or no additional charge. If your shelter does not employ a certified Senior Professional in Human Resources (SPHR), it is advisable to consult with one in situations that involve serious human resources issues, such as workplace violence.

#### ***Violent Friends and Family Members***

When an angry or distraught spouse, significant other, family member or friend confronts an employee at the workplace, the situation can quickly escalate and become violent. Disruptions in the form of excessive phone calls or visits to the workplace by friends or family members should not be tolerated. In situations that are not imminently threatening, the employer should ask the affected employee to act first to control the situation. If this approach is unsuccessful or if the situation escalates, the police should be called immediately and charges should be filed against the offender.

## 42.0 Building Security

Having adequate building security should be part of your workplace violence prevention plan. There are several factors that make animal shelters particularly enticing to robbers:

- Money is exchanged with the public.
- Controlled drugs are located on the premises.
- There is a high perceived value of animals on the premises (i.e., purebreds or potential fighting dogs).
- Employees often work alone or in small numbers at night and in the early morning.
- Employees frequently engage in high-risk behaviors, such as taking the trash outside to a dumpster after hours or field staff entering the building at night to drop off stray animals.

Fortunately, there are measures that shelters can take to greatly minimize the risk of assault and robbery:

- Conduct crime-prevention awareness training for all staff members. Many local police departments will provide such training at no charge to businesses in their community. Employees should always be instructed to cooperate with any robber or person that threatens them with physical harm.
- Whenever possible, do not schedule staff to work alone.
- Make sure the parking lot and all areas around the outside of the building are well-lit at night.
- Have one staff member serve as a monitor by standing at the building exit while another takes trash to the dumpster.
- Use a drop safe, and never have more than \$50 in the cash drawer at any given time.
- Install a video surveillance system. Although the initial installation may be costly, surveillance systems are an effective deterrent to robbers, and have also proven to be invaluable in the identification and eventual capture of many robbers.
- Control access to staff-only areas with automatically locking doors, and make sure the staff entrance door is locked at all times. Installing a keyless entry system is a worthwhile investment that promotes safety and eliminates the need to re-key the doors every time a staff member leaves employment.
- Install an alarm system with a panic-button feature. Panic buttons should be strategically located in areas where staff is likely to be working alone at night or in the early morning.

## 43.0 Animal Handling

Although animal bites and scratches are the number one cause of work-related injuries in animal shelters, OSHA does not have any specific standards for animal handling. Remember, OSHA was originally created to address safety issues in manufacturing jobs. Since relatively few jobs require contact with animals, it is unlikely that OSHA will ever develop standards for animal handling. Nevertheless, the need for safe animal-handling practices does fall under OSHA's General Duty Clause. This clause requires employers to address known safety issues for which there are not specific OSHA regulations.

The best protection against animal bites and scratches is adequate staff training. Employees must be trained to safely and humanely capture, restrain and handle all species of animals that they may encounter in their job. Shelters must also provide appropriate capture and restraint equipment, such as

muzzles, catch poles, Snappy Snares, cat grabbers, leather gloves, Freeman nets, etc. Employees must be trained in the appropriate use of each piece of equipment. Make sure that staff members are given the time needed to practice and become proficient in their handling techniques before they are expected to handle fractious or aggressive animals.



*Catch poles and Snappy Snare*



*Freeman net and cat grabber*



*Tru-Catch squeeze cage and leather gloves*

Every shelter should have written SOPs in place for animal handling. These SOPs should clearly state that employees are never expected to place themselves in unnecessary danger when capturing or handling animals. Make sure there is an established procedure for staff members to summon assistance in the event that they find themselves in a dangerous situation.

## 44.0 Zoonotic Diseases

Although there are no specific OSHA standards addressing zoonotic diseases, they do fall under the General Duty Clause. Shelter management must take steps to identify risks and prevent transmission of zoonotic diseases to staff. All staff members should be thoroughly trained on the types of zoonotic diseases, routes of transmission, clinical signs and prevention. Training should be documented in employees' personnel files. Shelters should have a written SOP addressing the handling and husbandry of animals infected with or potentially infected with zoonotic diseases. The SOP should specify isolation of the animal, required PPE and sanitation protocols.

### ***Preventing Transmission of Zoonotic Diseases***

1. Frequent hand washing is paramount. Since you do not always know or suspect when an animal is carrying a zoonotic disease, shelter staff should be in the practice of washing their hands:
  - After contact with any animal
  - After contacting contaminated surfaces
  - After handling lab specimens

- Before eating or smoking
  - Before and after using the restroom
2. Use a hand-sanitizing product, such as Purell®, when access to soap and running water is not readily available. Hand sanitizers are not an adequate substitute for regular hand washing, but they are reasonably effective for use in the field or in areas where hand washing is not possible.
  3. Always wear gloves and gowns when handling any sick animal.
  4. Wear masks and eye protection when there is the potential for bodily fluids to splash in the face.
  5. Dispose of contaminated waste properly according to your local health department's regulations.
  6. Clean and disinfect contaminated equipment and surfaces promptly.
  7. Contaminated bedding, towels and clothing should not be allowed to contact other laundry and should be washed separately using a regular detergent and hot water.
  8. Thoroughly wash all cuts, scratches and bite wounds immediately, and seek medical care as needed.
  9. In the case of bite wounds, always follow applicable rabies ordinances for reporting bites and required animal quarantine.

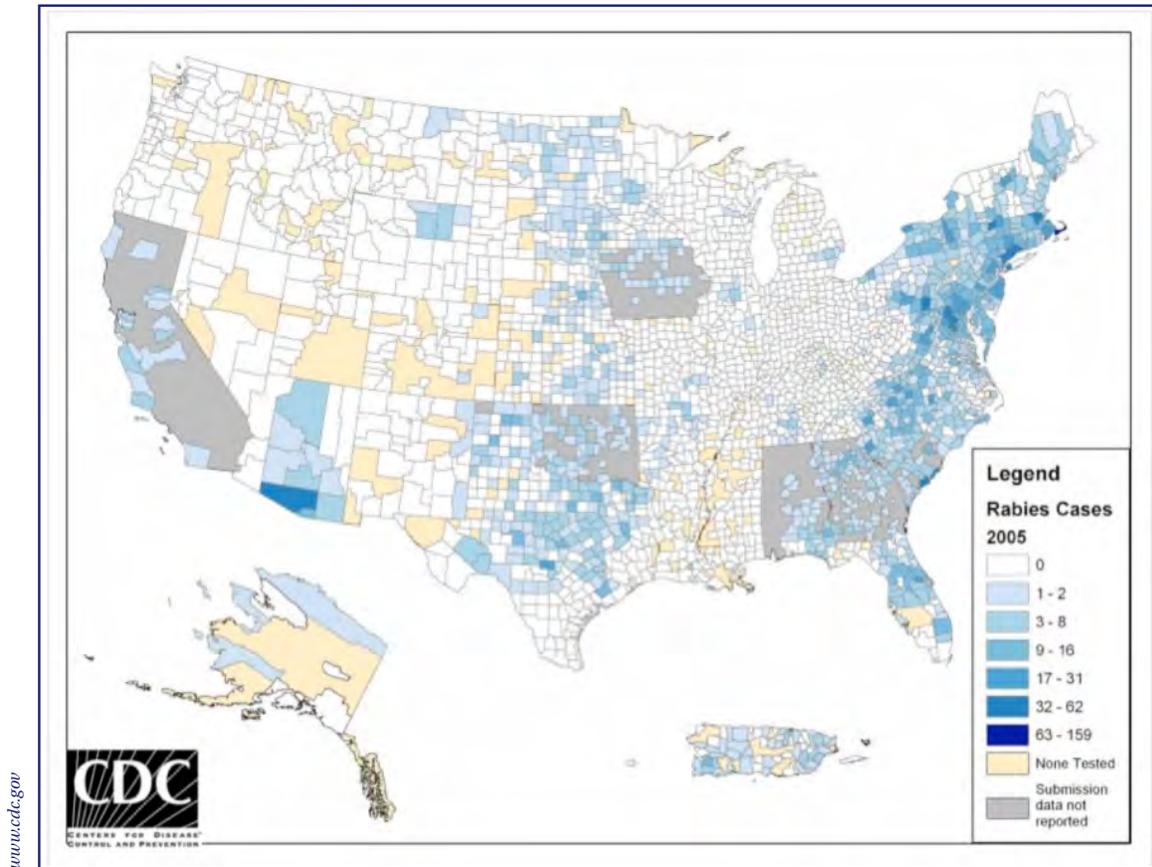
### ***Common Zoonotic Diseases***

#### **Rabies**

Rabies is a viral disease affecting the central nervous system that can infect any warm-blooded animal. Rabies in dogs and cats typically progresses through three phases. The first is called the prodromal phase, which usually lasts only one or two days. In the prodromal phase, the animal may become anxious and nervous or may exhibit a change in personality, becoming either more aggressive or more friendly than normal. The second phase is the furious phase, in which the animal becomes more irritable and exhibits hypersensitivity to light and sound. Some animals may become extremely vicious during this phase. The third phase is the paralytic, which usually develops within two to four days after the onset of initial symptoms. In the paralytic phase, the nerves that control the head and throat become paralyzed, and the animal will hypersalivate and lose the ability to swallow. As the paralysis progresses, the animal eventually goes into respiratory failure and dies. It should be noted that not all animals infected with rabies will experience all three phases. Some will go directly from the prodromal phase to the paralytic phase, while others may develop seizures during the furious phase and die before entering the paralytic phase. Rabies has been known to have an incubation period of up to six months. Therefore, not all animals infected with rabies will have evidence of a bite wound, as the wound may have already healed by the time the animal displays clinical signs of the disease.

There is no cure for rabies, and it is almost always fatal. The virus is spread by contact with the saliva of an infected animal. Transmission is usually through a bite wound, but the disease has also been known to spread through an open wound or the mucous membranes. The rabies virus is very susceptible to drying and does not survive long in the environment. It is easily killed by regular disinfectants.

Rabies is endemic throughout the U.S., except Hawaii, which is rabies-free. Rabies is most prevalent in the eastern and southern parts of the country, as can be seen in the Centers for Disease Control and Prevention (CDC) distribution map of rabies cases in 2005:



According to the CDC, there were 6,841 cases of rabies in animals and two human cases reported in the United States in 2008. Wild animals account for 93 percent of reported rabies cases, with raccoons being the primary carrier (34.9 percent), followed by bats (26.4 percent), skunks (23.2 percent), foxes (6.6 percent) and other mammals (1.9 percent). Domestic species accounted for 7 percent of all U.S. rabies cases reported in 2008. The number of cats testing positive for rabies in 2008 was 294, an increase of 12 percent from 2007. The number of dogs testing positive in 2008 was 75, which was a decrease of 19 percent from 2007. Pennsylvania had the greatest number of rabies cases in domestic animals with 60, followed by Virginia with 48 cases.

Obviously, rabies presents a very significant risk to animal shelter workers, who generally handle high numbers of feral cats and unvaccinated stray animals. Any animal that exhibits any of the clinical signs of rabies should be immediately quarantined and handled appropriately. Likewise, any animal that presents with a bite wound of unknown origin could be a potential rabies suspect and should be handled as such. In fact, many states and municipalities require that these animals be reported to the local department of health, and either undergo a mandatory six-month quarantine period or be euthanized and tested for rabies. Be sure to check with your local health department and obtain a copy of any applicable regulations. If at all possible, rabies suspects should not be handled by staff during the quarantine period. Dogs should be housed in double-sided runs so that they can be confined to one

side during cleaning and feeding without coming into direct contact with staff. Cats should be provided with a feral box so that they can be confined without being directly handled by staff. If handling of a rabies-quarantined animal becomes necessary, staff should wear appropriate PPE, such as gloves and gowns. Appropriate safe-capture equipment should be used for aggressive animals.

Whenever a staff member is bitten or scratched by any animal, the wound should be immediately washed with a disinfectant soap. Flushing the wound will help to rinse away infectants, including the rabies virus. Bites should be reported to the local health department where required, and the animal should be quarantined for 10 days. Although rabies can incubate up to six months, infected animals are not contagious until they begin to show clinical signs. Death usually occurs within five days once the clinical signs of rabies develop, which is why a quarantine period of 10 days is sufficient when an animal bites a person.

OSHA does not require animal shelters to provide pre-exposure rabies vaccinations to employees. However, the General Duty Clause does require employers to provide a workplace free from unnecessary dangers. In past instances in the human health care industry, when the risk for contracting hepatitis B was found to be greater than in the general population, OSHA has required the employer to provide hepatitis B vaccinations at no charge to the employee or obtain the employee's written waiver of the vaccine. Therefore, it is strongly recommended that shelters located in high-risk areas (see CDC map) provide pre-exposure rabies vaccinations to all employees who come in contact with animals on a regular basis, and require employees who decline the vaccine to sign a waiver. For positions with high turnover rates, employers may want to defer vaccination for a few months to ensure that new employees are likely to stay in the job. However, these new employees should then be restricted from handling any high-risk animals (e.g., feral cats, unvaccinated strays, animals with bite wounds and animals showing possible signs of rabies) until they have been vaccinated. Once vaccinated, employees should have their rabies titer tested on a yearly basis and be revaccinated as needed.

### **Leptospirosis**

There are many strains of *Leptospira* bacteria, but *Leptospira interrogans* is the only one that can infect both animals and humans. Leptospirosis is transmitted via contact with the urine of infected animals, either by ingestion or through open cuts or abrasions on the skin. In animal shelters, dogs, horses, livestock and wildlife are the most common sources of infection. Leptospirosis is most common in areas where there is standing water, which provides the perfect breeding ground for the bacteria.

The incubation period for leptospirosis ranges from two to 25 days. Symptoms include fever, lethargy, jaundice, vomiting, diarrhea, abdominal pain and liver or kidney failure. If left untreated, leptospirosis is often fatal.

Employees should always wear gloves when they come into contact with any animal urine. When handling animals with suspected or confirmed cases of leptospirosis, gowns, masks and goggles should also be worn to protect against urine splashes. *Leptospira* bacteria are easily killed by regular disinfectants.

### **Toxoplasmosis**

*Toxoplasma gondii* is a protozoan commonly carried by cats, especially those that have spent time outdoors. Most infected cats are asymptomatic, but they may shed the protozoa in their feces. Transmission occurs through ingestion or aerosolization. *Toxoplasma* usually does not cause disease in healthy humans, but it can pose a significant risk to pregnant women and immunocompromised people. These people should avoid cleaning cat litter boxes or, if that is not possible, they should wear gloves, masks, goggles and gowns during cleaning.

### Plague

Many states in the western U.S. have experienced a resurgence of plague in recent years. Caused by the bacteria *Yersinia pestis*, plague is transmitted by the bite of infected rat fleas (*Xenopsylla cheopis*). Outdoor cats are especially at risk for contracting plague because they hunt rodents that may be infested with rat fleas. Although rodents are the primary host for the rat flea, it will also feed on other animals, including cats, dogs and humans. Symptoms of plague include swollen lymph glands, red or black skin lesions, bloody vomiting, pneumonia and generalized severe pain. If left untreated, plague is usually fatal. The most effective means of preventing the spread of plague is an aggressive flea-control program.

### Cat Scratch Disease

Cat scratch disease (CSD), also known as cat scratch fever, is a bacterial infection caused by *Bartonella henselae*. *B. henselae* does not cause clinical disease in cats, but about 40 percent of cats serve as carriers at some point during their lives. Kittens are the most common carriers. Transmission to humans generally occurs through cat scratches or bites. Symptoms in humans include swollen lymph nodes, fever, headache, fatigue and loss of appetite. Children and immunocompromised people are at greatest risk for contracting CSD. To prevent CSD, all cat bites and scratches should be washed immediately with soap and water.

### Scabies

The mite that causes sarcoptic mange (also known as scabies) in dogs, *Sarcoptes scabiei*, can also infect people. Transmission occurs via direct contact with the skin of infected animals. Signs of sarcoptic mange in dogs include intense itching, hair loss and red, abraded skin. Diagnosis is made by doing a skin scraping and looking for the mites under a microscope. However, scabies mites can be difficult to find, so a negative skin scraping does not necessarily rule out sarcoptic mange, especially if the dog is exhibiting clinical signs of the disease. Appropriate PPE (gloves and gowns) should always be worn when handling dogs with suspected or confirmed cases of sarcoptic mange. Scabies mites cannot survive long in the environment, but contaminated surfaces and equipment should be promptly disinfected. Remember that there are two types of mange that can infect dogs. The other kind, demodectic mange, is not contagious to people or other dogs. Demodex generally does not cause the intense itching that scabies does, and it is much easier to detect on skin scrapings.

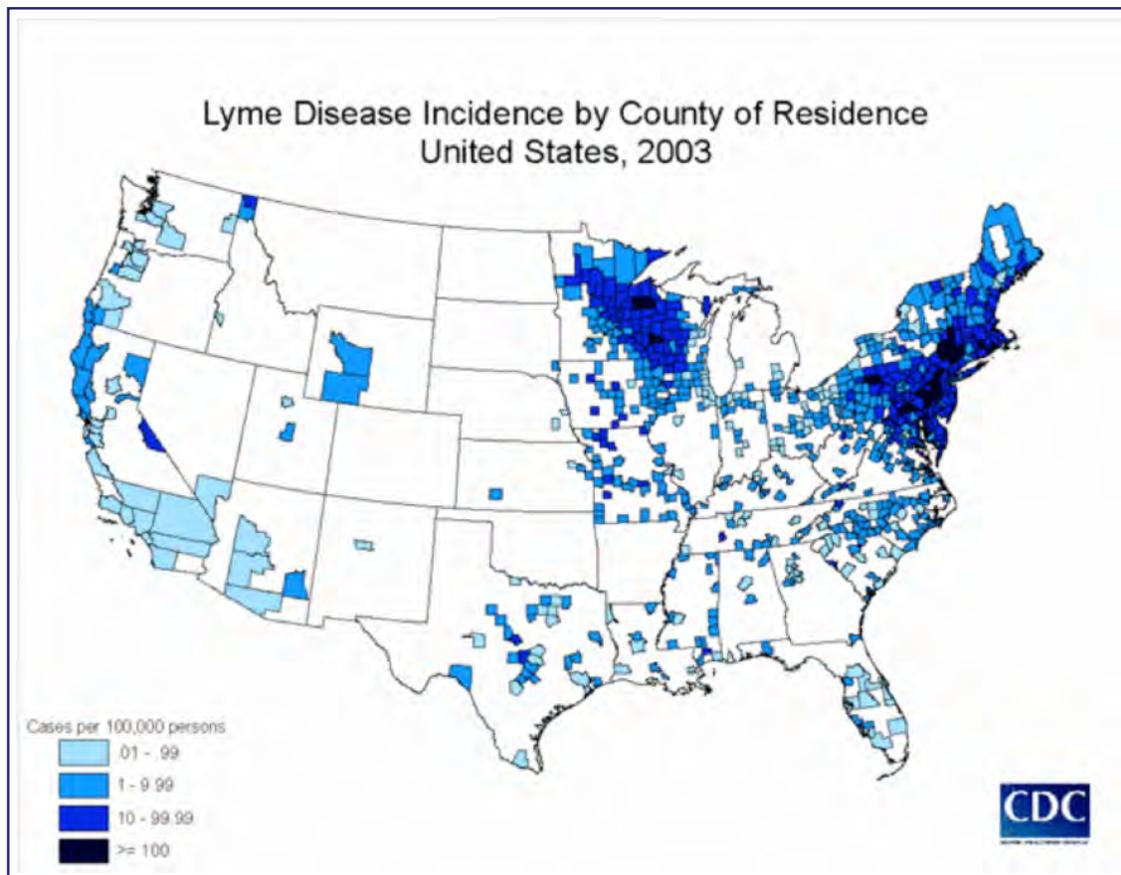
Courtesy of Breann Hollister, Heritage Humane Society, Williamsburg, VA



*Puppy infected with sarcoptic mange*

### Lyme Disease

Lyme disease is caused by the bacteria *Borrelia burgdorferi* and is transmitted via the bite of an infected tick. The deer tick (*Ixodes scapularis*) is the primary vector of Lyme disease in the eastern U.S., and the western black-legged tick (*Ixodes pacificus*) is the primary vector in the western U.S. Lyme disease is most prevalent in the northeastern states and Wisconsin (see map). Symptoms of Lyme disease in humans include a “bull’s-eye” rash at the site of the tick bite, fever, muscle aches, fatigue and headaches. If left untreated, Lyme disease can damage the nervous system, heart, eyes and joints. To prevent the spread of Lyme disease in the shelter environment, it is important to aggressively treat tick infestations on animals, and to have staff members perform daily body checks for ticks. Infected ticks must be attached for at least 24 hours in order for disease transmission to occur; however, the nymph stage of *Ixodes* ticks are only the size of a poppy seed and can be easily missed on routine body checks. Shelters located in high-risk areas for Lyme disease should require field staff to wear long pants and use insect repellents as needed.



### **Ringworm**

Ringworm is a fungal infection of the skin that can be caused by several different pathogens, including *Microsporum canis*, *Microsporum gypseum*, *Trichophyton mentagrophytes* and *Trichophyton equinum*. Ringworm is both extremely prevalent and extremely contagious in the shelter environment, with cats being the most commonly infected. Ringworm can also infect dogs, rabbits, horses, ferrets, small mammals and humans. Ringworm on animals usually appears as circular patches of hair loss, but it can also be generalized with extensive hair loss all over the animal's body. Ringworm in humans presents as a circular red ring on the skin, often accompanied by scaling and itching. Animals with suspected or confirmed cases of ringworm should be strictly isolated and handled with gloves, gowns, caps and foot coverings that are discarded after each use. Ringworm can only be definitely diagnosed by performing a dermatophyte (DTM) culture, which can take up to three weeks to grow. A Wood's lamp can be helpful in diagnosis, but only about 50 percent of ringworm cases will fluoresce, so it is possible to get a false negative.

Ringworm is spread through contact with the fungal spores, which may come directly from infected animals or from fomites. Ringworm spores are extremely hardy and can survive in the environment for up to two years. Ringworm-contaminated equipment and surfaces should be disinfected with a 1:10 dilution of bleach allowed to sit for 10 minutes. Note that this is higher than the normal recommended bleach dilution of 1:32 that is recommended for routine disinfection in shelters. Contaminated clothing and bedding should be washed promptly and separated from other laundry. Using hot water and regular detergent is sufficient to kill the ringworm spores.

### **Roundworms and Hookworms**

The roundworm and hookworm species found in dogs and cats do not mature into intestinal parasites in humans, but they can cause much more serious problems. Ingested roundworm larvae can migrate to almost any organ in the human body and develop into granulomatous masses called visceral larval migrans. These masses commonly invade the heart, central nervous system and eyes.

Hookworm larvae can penetrate the skin, usually the soles of the feet, and cause cutaneous larval migrans. Cutaneous larval migrans causes painful, intense itching that can lead to secondary bacterial skin infections.

These diseases can be prevented by good hygiene practices and wearing appropriate PPE. Always wear gloves when cleaning up fecal matter and wash hands frequently. Never walk barefoot in areas frequented by dogs. Regular cleaning and disinfection of kennel areas is effective in removing roundworm and hookworm eggs from the indoor shelter environment. However, it is extremely difficult to effectively eliminate worm eggs in outdoor grass or gravel dog-walking areas, so good hygiene practices are a must.

### **Giardiasis**

*Giardia* is a protozoan commonly found in lakes, ponds and streams. Dogs can contract the disease by drinking from these sources. The symptoms of giardiasis are diarrhea and weight loss, but some infected dogs may be asymptomatic carriers. Humans are also susceptible to *Giardia*, but transmission from infected dogs can easily be prevented by the use of good sanitation and hygiene practices.

## 45.0 Appendices

### **Appendix A – Required OSHA Forms and Posters**

*All About OSHA*

*Chemical Hazard Communication*

*OSHA: Employee Workplace Rights*

*Employer Rights and Responsibilities Following an OSHA Inspection*

*You Have a Right to a Safe and Healthful Workplace. IT'S THE LAW!*

*OSHA Forms for Recording Work-Related Injuries and Illnesses* (300, 300A, 301)

### **Appendix B – Other Helpful Forms**

*OSHA Compliance and Safety Hazard Quick Checklist*

*Work Hazard Assessment Form*

### **Appendix C – Template for Creating a Written Hazard Communication Plan**

*Template for Creating a Written Hazard Communication Plan*

# All About OSHA



**U.S. Department of Labor**  
Occupational Safety and Health Administration  
OSHA 2056  
2000 (Revised)

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All About OSHA  
U.S. Department of Labor  
Occupational Safety and Health Administration

OSHA 2056  
2000 (Revised)

This informational booklet provides a generic overview of OSHA requirements and does not itself alter or determine compliance responsibilities, which are set forth in the *Occupational Safety and Health Act* and in OSHA standards. Moreover, because interpretations and enforcement policy may change over time, the reader should consult current administrative interpretations and decisions by the Occupational Safety and Health Review Commission and the courts for additional guidance on OSHA compliance requirements.

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# All About OSHA

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**U.S. Department of Labor**  
Occupational Safety and Health Administration  
OSHA 2056  
2000 (Revised)

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# Introduction

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Determined to do something about the high numbers of job-related deaths and injuries to workers in the 1970s, President Richard M. Nixon signed the *Occupational Safety and Health Act* on December 29, 1970. The *OSH Act* created the Occupational Safety and Health Administration (OSHA), which formally came into being on April 28, 1971.

The *OSH Act* also established the National Institute for Occupational Safety and Health, or NIOSH. NIOSH is the research agency for occupational safety and health. It is not part of OSHA, but is considered a sister agency. NIOSH is part of the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention.

Since its inception, OSHA's job has been to protect American workers. OSHA's main goal is to send every worker home and whole and healthy every day. To do this, the agency focuses on three objectives:

- Improve workplace safety and health by reducing injuries, illnesses, and fatalities.
- Change workplace culture by increasing employer and employee commitment to improved safety and health.
- Secure public confidence through excellence in developing and delivering OSHA services.

To achieve these objectives, OSHA uses

- Strong enforcement to target workplaces with the highest injury and illness rates.
- Creative partnerships to develop new ways of working with employers, employees, and other stakeholders.
- Improved rulemaking to meet the challenges of the 21<sup>st</sup> century.
- Expanded outreach and training to create safe and healthful working environments.

Establishing a safe and healthful working environment requires every employer and every worker to make safety and health a top priority. The entire work force—from the CEO to the most recent hire—must recognize that worker safety and health are central to the mission and key to the profitability of the American company.

OSHA's job is to provide leadership and encouragement to workers and employers to take that responsibility seriously.

# What Is OSHA?

OSHA stands for the Occupational Safety and Health Administration, an agency of the U.S. Department of Labor. OSHA's sole responsibility is worker safety and health protection.

## *How and when was OSHA created?*

The U.S. Congress created OSHA under the *Occupational Safety and Health Act of 1970* (the *OSH Act*).<sup>1</sup>

## *Why did Congress pass the OSH Act?*

A bipartisan Congress passed the law and established OSHA "... to assure so far as possible every working man and woman in the nation safe and healthful working conditions and to preserve our human resources."

## *Why is OSHA necessary?*

OSHA began because, until 1970, no uniform and comprehensive provisions existed to protect against workplace safety and health hazards. More than 100 million Americans spend their days on the job and they have a right to a safe and healthful work environment. They are America's most valuable national resource.

In 1970, Congress considered annual figures such as these:

- Job-related accidents accounted for more than 14,000 worker deaths.

<sup>1</sup> Public Law 91-596, December 29, 1970; as amended by P.L. 101-552, § 3101, November 5, 1990; as amended by P.L. 105-198, July 16, 1998; as amended by P.L. 105-241, September 29, 1998.

## *What does OSHA do?*

OSHA's mission is to protect American workers. OSHA does the following:

- Encourages employers and employees to reduce workplace hazards and to implement new safety and health programs or improve existing programs;
- Develops mandatory job safety and health standards and enforces them through worksite inspections, employer assistance, and sometimes, by imposing citations or penalties or both;
- Establishes responsibilities and rights for employers and employees to achieve better safety and health conditions;
- Conducts research, either directly or through grants and contracts, to develop innovative ways of dealing with workplace hazards;
- Maintains a reporting and recordkeeping system to monitor job-related injuries and illnesses;
- Establishes training programs to increase the competence of occupational safety and health personnel; and
- Develops, analyzes, evaluates, and approves state occupational safety and health programs.
- Provides technical and compliance assistance, training and education, and cooperative programs and partnerships to help employers reduce worker accidents and injuries.

- Nearly 2.5 million workers disabled by workplace accidents and injuries.
- Ten times as many person-days lost from job-related disabilities as from strikes.
- Estimated new cases of occupational diseases totaled 300,000.

In terms of lost productivity and wages, medical expenses, and disability compensation, the burden on the nation's commerce was staggering. Human cost was beyond calculation.

### *Is there still a role for OSHA?*

Yes. Even with these important successes, significant hazards and unsafe conditions still exist in U.S. workplaces. The reality remains that each year:

- About 6,000 Americans die from workplace injuries,
- An estimated 50,000 workers die from illnesses caused by workplace exposures,
- Six million people suffer non-fatal workplace injuries, and
- Injuries alone cost U.S. businesses more than \$125 billion.

OSHA's role continues to be worker protection. In recent years, however, OSHA has continued to try new and different ways of working to achieve its objectives. There is still an emphasis on strong, but fair enforcement. Today, OSHA is targeting workplaces with the highest injury and illness rates to get the greatest impact. At the same time, the agency is increasing its partnership efforts along with expanded outreach and training to help create safe and healthful working environments. And the agency is trying to simplify its rules through improved rulemaking and regulations that make sense in plain language.

### *Has OSHA made a difference?*

Yes. Since OSHA's inception, the nation has made substantial progress in occupational safety and health. For example, since 1970 OSHA has:

- Cut the work-related fatality rate in half.
- Reduced overall injury and illness rates in industries where OSHA concentrated its attention.
- Virtually eliminated brown lung disease in the textile industry, and
- Reduced trenching and excavation fatalities by 35 percent.

# How Can I Find Out More About OSHA and What It Covers?

## *What does OSHA have available to help me?*

Clearly, OSHA cannot succeed in its mission without fully informed employers and employees. OSHA has a variety of products and programs to help employers comply with its regulations and improve workplace safety and health.

There are several ways you can learn more about OSHA and its programs.

### ***Electronic Products***

OSHA provides extensive information electronically in the following formats:

- **On the Internet**—OSHA's web site contains standards, interpretations, directives, technical advisors, compliance assistance, and additional information. The address is [www.osha.gov](http://www.osha.gov).
- **On CD-ROM**—OSHA's CD-ROM has a wide variety of materials, including standards, interpretations, directives, and more. You can purchase it from the U.S. Government Printing Office.

To order, write to the Superintendent of Documents, P.O. Box 371954, Pittsburgh, PA 15250-7954 or phone (202) 512-1800. Specify OSHA Regulations, Documents and Technical Information on CD-ROM (ORDT), GPO Order No. S/N 729-013-00000-5. The price is \$53 per year (\$66.25 foreign); \$17 per single copy (\$21.25 foreign).

## *What should an employer or employee do if there is a workplace emergency?*

You can call (800) 321-OSHA if there is a life-threatening situation. Complaints will go immediately to the nearest OSHA area or state office for help.

### ***Print Products***

The agency also publishes booklets and fact sheets on various aspects of OSHA policy and regulations. These include numerous publications on regulatory topics, such as hazard communication, asbestos, bloodborne pathogens, and on programs such as consultation, voluntary protection, grants, and training and education, to name a few.

You can obtain publications either as a single, free copy per request or for sale by the U.S. Government Printing Office, 710 N. Capitol Street, NW, Washington, DC 20401; (202) 512-0132 (phone); or (202) 512-1355 (fax).

Or, visit GPO's online bookstor at [www.access.gpo.gov/su\\_docs/sale/abkst024.html](http://www.access.gpo.gov/su_docs/sale/abkst024.html).

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For a list of available free OSHA publications, contact the OSHA Publications Office, P.O. Box 37535, Washington, DC 20013-7535; (202) 693-1888 (phone); or (202) 693-2498 (fax). A partial list appears at the end of this booklet. Also visit OSHA's website to access and download publications and other materials—[www.osha.gov](http://www.osha.gov).

### ***Video products***

OSHA has several videos available for loan. Contact OSHA's audiovisual production officer at (202) 693-1999 or visit OSHA's website at [www.osha.gov](http://www.osha.gov) for more information.

### ***Assistance***

In addition, OSHA offers a number of programs and initiatives to help employers comply with the agency's standards and guidelines. Please refer to the section on "OSHA Assistance."

For further information on any OSHA program, contact your nearest OSHA area or regional office listed at the end of this publication.

***We encourage you to learn all you can about OSHA, its goals, policies, programs, and practices, because they can help protect you.***

***The more you know about OSHA, the better you can protect yourself or your employees and contribute to safe and healthful working conditions for all Americans.***

# Who Needs to Know About OSHA?

Nearly everyone in America works or has someone in the immediate family who does. Whether you are an employer, employee, or have a family member who works, you should know about OSHA. The *OSH Act* covers:

- All employers and their employees in the 50 states and all territories and jurisdictions under federal authority.

Those jurisdictions include the District of Columbia, Puerto Rico, the Virgin Islands, American Samoa, Johnston Island, the Canal Zone, and the Outer Continental Shelf Lands as defined in the *Outer Continental Shelf Lands Act*.

OSHA coverage includes

- Employers and employees in such varied fields as manufacturing, construction, longshoring, shipbuilding, ship breaking, ship repair, agriculture, law and medicine, charity and disaster relief, organized labor, and private education.
- Religious groups to the extent they employ workers for secular purposes.

The *OSH Act* covers employers and employees either directly through federal OSHA or through an OSHA-approved state program (see section on **State Programs**, page 8).

## *Does the OSH Act exclude anyone from coverage?*

The *OSH Act* does not cover the following:

- The self-employed.
- Immediate members of farming families that do not employ outside workers.

- Employees whose working conditions are regulated by other federal agencies under other federal statutes. These include mine workers, certain truckers and rail workers, and atomic energy workers.
- Public employees in state and local governments. (See section on **State Programs** for exceptions, p. 8.)

In cases where another federal agency regulates safety and health working conditions in a particular industry, OSHA standards still apply if the other agency's regulations do not address specific working conditions.

*As defined by the OSH Act, an employer is any "person engaged in a business affecting commerce who has employees, but does not include the United States or any State or political subdivision of a State."*

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### *Does the OSH Act cover federal workers?*

Yes. Section 19 of the *OSH Act* makes federal agency heads responsible for providing safe and healthful working conditions for their employees. OSHA conducts federal workplace inspections in response to employee reports of hazards.

The *OSH Act* also requires agencies to comply with standards consistent with those OSHA issues for private sector employers. A 1998 amendment to Section 19 of the *OSH Act* now covers the Postal Service the same as any private sector employer, including issuing citations and monetary penalties.

### *What must federal agencies do to comply with the OSH Act?*

- Operate comprehensive safety and health programs,
- Record and analyze injury and illness data,
- Provide training to all levels of personnel, and
- Conduct inspections to ensure compliance with OSHA standards.

### *How does OSHA's authority in the federal sector differ from that in the private sector?*

In its federal sector authority,

- **OSHA cannot propose monetary penalties** against another federal agency for failure to comply with OSHA standards.
- **OSHA does not have authority to protect a federal employee “whistleblower.”** The *Whistleblower Protection Act of 1989* allows present and former federal employees (except for corporations and certain intelligence agencies) to file reports of reprisal with the Office of Special Counsel at the U.S. Merit Systems Protection Board.

### *Does the OSH Act cover state and local government workers?*

No. OSHA covers the private sector only. But a state can develop its own OSHA-approved occupational safety and health program for the private sector. A state plan, however, that covers private sector employees must also

- Cover its state and local government workers AND
- Be at least as effective as federal OSHA requirements.

States also may have OSHA-approved plans that cover only state and local government employees.

# How Do States Operate Their Own Safety and Health Programs?

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State plans are OSHA-approved job safety and health programs operated by individual states instead of by federal OSHA. The *OSH Act* encourages states to develop and operate their own job safety and health plans and precludes state enforcement of OSHA standards unless the state has an approved plan. OSHA approves and monitors all state plans.

Once a state plan is approved under Section 18(b) of the *OSH Act*, OSHA funds up to 50 percent of the program's operating costs. State plans must provide standards and enforcement programs, as well as voluntary compliance activities, that are 'at least as effective as' the federal OSHA program.

State plans covering the private sector also must cover state and local government employees. OSHA rules also permit states to develop plans that cover only public sector (state and local government) employees. In these cases, private sector employment remains under federal OSHA jurisdiction. Twenty-three states and two territories operate complete plans and two cover only the public sector (see page 41 for a list of states with approved plans).

## *How does a state get OSHA approval for its plan?*

To gain OSHA approval as a 'developmental plan,' the first step in the state plan approval process, a state must have adequate legislative authority and must demonstrate that within 3 years it will provide standards-setting, enforcement, and appeals procedures; public employee protection; a sufficient number of competent enforcement personnel; and training, education, and technical assistance programs.

In states with approved plans, OSHA generally limits its enforcement activity to areas not covered by the state and suspends all concurrent federal enforcement.

Once the state is operating at least as effectively as federal OSHA and other requirements are met, final approval of the plan may be granted and federal authority will cease in those areas over which the state has jurisdiction.

## *Must the state program cover all workers?*

States with approved plans cover most private sector employees as well as state and local government workers in the state. Federal OSHA continues to cover federal employees and certain other employees specifically excluded by a state plan—for example, maritime and military bases.

## *Do states conduct workplace inspections?*

States with approved state plans respond to accidents and workplace complaints and conduct random unannounced general schedule inspections just like federal OSHA. Citations and proposed penalties are issued under state law and contests are adjudicated by a state review board or other procedure.

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### *Does federal OSHA monitor state plans?*

Yes. Federal OSHA closely monitors state programs. Anyone finding inadequacies or other problems in the administration of a state's program may file a *complaint about state program administration* (CASPA) with the appropriate OSHA Regional Administrator. OSHA investigates all such complaints and, where complaints are found to be valid, requires appropriate corrective action on the part of the state.

### *Do employers and employees in state plans have the same rights and responsibilities as those under federal OSHA jurisdiction?*

State plans must guarantee the same employer and employee rights as does OSHA. Employer and employee responsibilities in states with their own occupational safety and health programs are generally the same as in federal OSHA states.

### *Are state safety and health standards the same as federal OSHA's?*

State safety and health standards under approved plans must either be identical to or *at least as effective as* federal OSHA standards and must keep pace with federal standards. State plans must adopt standards comparable to federal standards within 6 months of a federal standard's promulgation. Most state plan standards are very similar to federal standards, but states with approved plans may have different and independent standards.

To find out if your state operates an OSHA-approved state program, see the listing on page 52.

*For more information on state plans, contact the state plan in your state or visit OSHA's web site at <http://www.osha.gov/>.*

# What Are My Responsibilities Under the *OSH Act*?

If you are an **employer** the *OSH Act* covers, you must:

- Meet your general duty responsibility to provide a workplace free from recognized hazards;
- Keep workers informed about OSHA and safety and health matters with which they are involved.
- Comply in a responsible manner with standards, rules, and regulations issued under the *OSH Act*;
- Be familiar with mandatory OSHA standards;
- Make copies of standards available to employees for review upon request;
- Evaluate workplace conditions;
- Minimize or eliminate potential hazards;
- Make sure employees have and use safe, properly maintained tools and equipment (including appropriate personal protective equipment);
- Warn employees of potential hazards;
- Establish or update operating procedures and communicate them to employees;
- Provide medical examinations when required;
- Provide training required by OSHA standards;
- Report within 8 hours any accident that results in a fatality or the hospitalization of three or more employees;
- Keep OSHA-required records of work-related injuries and illnesses, unless otherwise specified (see page 19);
- Post a copy of the *OSHA 200—Log and Summary of Occupational Injuries and Illnesses* for the prior year each year during the entire month of February unless otherwise specified (see page 20). (See OSHA 200 form at the end of this publication.);
- Post, at a prominent location within the workplace, the OSHA poster (OSHA 2203) informing employees of their rights and responsibilities;

- Provide employees, former employees, and their representatives access to the OSHA 200 form at a reasonable time and in a reasonable manner;
- Provide access to employee medical records and exposure records;
- Cooperate with OSHA compliance officers;
- Not discriminate against employees who properly exercise their rights under the *OSH Act*;
- Post OSHA citations and abatement verification notices at or near the worksite involved; and
- Abate cited violations within the prescribed period.

If you are an **employee** the *OSH Act* covers, you should:

- Read the OSHA poster at the job site;
- Comply with all applicable OSHA standards;
- Follow all employer safety and health rules and regulations, and wear or use prescribed protective equipment while engaged in work;
- Report hazardous conditions to the supervisor;
- Report any job-related injury or illness to the employer, and seek treatment promptly;
- Cooperate with the OSHA compliance officer conducting an inspection; and
- Exercise your rights under the *OSH Act* in a responsible manner.

Although OSHA does not cite employees for violations of their responsibilities, each employee must follow all applicable standards, rules, regulations, and orders issued under the *OSH Act*. OSHA, however, does not expect employees to pay for guardrails, floor cleaning, equipment maintenance, respirators, training, or other safety and health measures.

# What Are My Rights Under the *OSH Act*?

If you are an employer the *OSH Act* covers, you have the right to:

- Seek free advice and off-site consultation;
- Be involved in job safety and health through your industry association;
- Request and receive proper identification from OSHA compliance officers;
- Be advised by the compliance officer of the reason for an inspection;
- Have an opening and closing conference with the compliance officer;
- Accompany the compliance officer on the inspection;
- File a Notice of Contest to dispute inspection results;
- Request an informal settlement agreement process after an inspection;
- Apply for a variance from a standard's requirements when you cannot fully comply with the effective date due to lack of technical expertise and materials, and when other proven effective means are in place to protect employees;
- Take an active role in developing safety and health;
- Be assured of the confidentiality of any trade secrets; and
- Submit a written request to the National NIOSH for information on whether any substance in your workplace has potentially toxic effects in the concentrations being used.
- Submit information or comments to OSHA on the issuance, modification, or revocation of OSHA standards and request a public hearing.

## *What is NIOSH?*

NIOSH, an agency separate from OSHA, is part of the U.S. Department of Health and Human Services. NIOSH, also established by the *OSH Act*, is the research agency for occupational safety and health. For more information call, 1-800-35-NIOSH or visit its website at [www.cdc.gov/niosh](http://www.cdc.gov/niosh).

If you are an **employee** the *OSH Act* covers, you have the right to:

- Review copies of appropriate OSHA standards, rules, regulations, and requirements that the employer should have available at the workplace;
- Request information from your employer on safety and health hazards, precautions, and emergency procedures;
- Receive adequate training and information;
- Request that the OSHA Area Director investigate if you believe hazardous conditions or violations of standards exist in your workplace;
- Have your name withheld from your employer if you file a complaint;
- Be advised of OSHA actions regarding your complaint and have an informal review of any decision not to inspect or to issue a citation;
- Have your authorized employee representative accompany the OSHA compliance officer;
- Respond to questions from the OSHA compliance officer;
- Observe any monitoring or measuring of hazardous materials and see any related monitoring or medical records;

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- Review the *Log and Summary of Occupational Injuries and Illnesses* (OSHA 200), if your employer is required to maintain it, at a reasonable time and in a reasonable manner;
  - Request a closing discussion following an inspection;
  - Submit a written request to the NIOSH for information on whether any substance in your workplace has potentially toxic effects in the concentrations being used and have your name withheld from your employer;
  - Object to the abatement period set in a citation issued to your employer;
  - Participate in hearings conducted by the Occupational Safety and Health Review Commission;
  - Be notified by your employer if he or she applies for a variance, and testify at a variance hearing and appeal the final decision; and
  - Submit information or comments to OSHA on the issuance, modification, or revocation of OSHA standards and request a public hearing.

# Do Employees Have Additional Legal Rights?

## *Do the OSH Act and other laws provide employees any additional legal rights?*

Yes. A number of different laws provide employees more rights in safety and health matters, including the following:

***The OSH Act, Section 11(c)***—gives employees the right to seek safe and healthful conditions on the job without fear of punishment.

### *Under Section 11(c), employees may exercise such rights as:*

- Voicing concerns to an employer, union, OSHA, any other government agency, or others about job safety or health hazards;
- Filing safety or health grievances;
- Participating in a workplace safety and health committee or in union activities concerning job safety and health;
- Participating in OSHA inspections, conferences, hearings, or other OSHA-related activities; and
- Refusing to work when a dangerous situation threatens death or serious injury where there is insufficient time to contact OSHA and where the employee has sought from his or her employer and been unable to obtain a correction of the dangerous conditions.

## *Can an employer retaliate against an employee who exercises this right?*

An employer may not retaliate if an employee exercises these or any other rights under the *OSH Act*. This means that an employer may not

- Fire,
- Demote,
- Take away seniority or other earned benefits,
- Transfer to an undesirable job or shift, or
- Threaten or harass

any worker who complains about safety and health conditions or participates in job safety-related activities.

***The Surface Transportation Assistance Act***—protects truckers and certain other employees in the trucking industry against reprisal when filing complaints or acting in response to safety hazards or unsafe equipment (*Title 29 of the Code of Federal Regulations (CFR)*, Part 1978; see also **Standards and Regulations** at [www.osha.gov](http://www.osha.gov)).

***The Asbestos Hazard Emergency Response Act (AHERA), Section 211***—protects employees of primary and secondary schools who complain of exposure to asbestos (see 40 *CFR* 763; or visit the Environmental Protection Agency's (EPA) website at [www.epa.gov](http://www.epa.gov)).

***The International Safe Container Act (ISCA), Section 7***—prevents reprisal or discrimination against any employee who reports an unsafe cargo container for land and sea carriers or has reported any other violation of *ISCA* (see 49 *CFR* 450; or visit the Department of Transportation's (DOT) website at [www.dot.gov](http://www.dot.gov)).

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## *Do provisions in other laws protect such whistleblowers?*

Yes. OSHA enforces similar whistleblower protection rights granted to employees covered under the following federal statutes:

- The *Toxic Substance Control Act*;
- The *Clean Air Act*;
- The *Federal Water Pollution Act*;
- The *Safe Drinking Water Act*;
- The *Solid Waste Disposal*; and
- The *Comprehensive Environmental Response, Compensation and Liability Act*; and
- The *Energy Reorganization Act*.

*For further information about any of these laws, contact your regional or area OSHA office or visit OSHA's website at <http://www.osha.gov/>.*

# What Does OSHA Require?

## *If the OSH Act covers me, what do I have to do to comply?*

You have to abide by OSHA standards and requirements.

Because OSHA develops effective safety and health standards of its own, *the OSH Act* supercedes any standards issued under the following laws administered by the Department of Labor: the *Walsh-Healey Act*, the *Services Contract Act*, the *Construction Safety Act*, the *Arts and Humanities Act*, and the *Longshoremen's and Harbor Workers' Compensation Act*.

## *What are OSHA standards and what do they require?*

OSHA standards establish requirements for maintaining safe and healthful workplaces.

In general, standards require that **employers:**

- Maintain conditions or adopt practices reasonably necessary and appropriate to protect workers on the job.
- Be familiar with and comply with standards applicable to their establishments.

## *What is the "general duty clause?"*

The general duty clause, or Section 5(a)(1) of the *OSH Act*, requires that each employer "furnish ... a place of employment which is free from recognized hazards that are causing or are likely to cause death or serious physical harm to employees."

- Ensure that employees have and use personal protective equipment when required for safety and health.
- Comply with the *OSH Act's* "general duty clause" where there are no specific OSHA standards.

OSHA standards also generally require that **employees:**

- Comply with all safety and health rules and regulations that apply to their own actions and conduct. Only employers receive OSHA citations and penalties.

## *What types of workplaces have to comply with OSHA standards?*

Agency standards address hazards in a number of industries:

- *General industry* (manufacturing, the service sector, health care, government agencies, and academia);
- *Construction*;
- *Agriculture*; and
- *Maritime*.

## *What kinds of hazards do OSHA standards address?*

OSHA issues standards for a wide variety of workplace hazards, including:

- Toxic substances;
- Harmful physical agents;
- Electrical hazards;
- Fall hazards;
- Hazardous waste;
- Infectious diseases;
- Fire and explosion hazards;
- Dangerous atmospheres; and
- Machine hazards.

## Where can I get a copy of an OSHA standard?

The standards are available in hard copy, on CD-ROM, or on the OSHA web page at [www.osha.gov](http://www.osha.gov). (See also section, “How Can OSHA Help Me?” on page 35 of this publication.)

## How does OSHA decide to develop a standard?

OSHA can begin standards-setting procedures on its own initiative or in response to petitions from other parties, including the following:

- The Secretary of Health and Human Services (HHS),
- NIOSH,
- State and local governments,
- Nationally recognized standards-producing organizations and employer or labor representatives, or
- Any other interested parties.

The Department of Labor publishes in the *Federal Register* each April and October a list of all regulations OSHA is considering.

## Do other groups help the agency develop standards?

Yes. OSHA calls on its various advisory committees to develop specific recommendations if the agency determines the need for a specific standard. There are two standing committees, and OSHA may appoint ad hoc committees to examine special areas of concern.

All advisory committees, standing or ad hoc, must have members representing management, labor, and state agencies as well as one or more designees of the Secretary of HHS. Members also may include representatives of occupational safety and health professions and the general public.

OSHA’s standing, or statutory, advisory committees are as follows:

- **The National Advisory Committee on Occupational Safety and Health (NACOSH)**, which advises, consults with, and makes recommendations to the Secretary of HHS and to the Secretary of Labor on matters regarding the administration of the *OSH Act*.
- **The Advisory Committee on Construction Safety and Health (ACCSH)**, which advises the Secretary of Labor on construction safety and health standards and other regulations.

Other continuing advisory committees include the following:

- **The Federal Safety and Health Advisory Committee (FACOSH)**, which advises the Secretary of Labor on all aspects of federal agency safety and health.
- **The Maritime Advisory Committee for Occupational Safety and Health (MACOSH)**, which advises the Secretary of Labor on workplace safety and health programs, policies, and standards in the maritime industry.

Over the years, OSHA also has formed short-term advisory committees to advise on various standards-related topics such as metalworking fluids and steel erection.

## *How does OSHA promulgate its standards?*

OSHA develops plans to propose, amend, or revoke a standard.

It then publishes its intentions in the *Federal Register* ...

... either as an “Advance Notice” or announcement of a meeting to solicit information to be used in drafting a proposal, or ... a “Notice of Proposed Rulemaking,” which sets out the new rule’s requirements and provides a specific time for the public to respond.

Interested parties submit written arguments and pertinent evidence. OSHA schedules a hearing, if requested.

Finally, after considering public comments, evidence, and testimony, OSHA publishes

- The full text of any standard amended or adopted and the date it becomes effective, along with an explanation of the standard and the reasons for implementing it; OR
- A determination that no standard or amended need to be issued.

In addition, OSHA must submit its final rules to the Congress for review. The Congress can disapprove a rule under an expedited procedure established by the 1996 *Small Business Regulatory Enforcement Act*, or *SBREFA*.

## *Can other government agencies recommend workplace standards?*

Yes. NIOSH, for example, can recommend standards to OSHA.

NIOSH conducts research on various safety and health problems, provides technical assistance to OSHA, and recommends standards for OSHA’s adoption.

## *Can OSHA issue a standard to address an emergency hazard or situation?*

Under certain limited conditions, OSHA can set emergency temporary standards that take effect immediately and remain in effect until superseded by a permanent standard. In these relatively rare instances, OSHA must determine that

- Workers are in grave danger due to exposure to toxic substances or agents determined to be toxic or physically harmful or to new hazards, AND
- An emergency standard is necessary to protect them.

OSHA then publishes the emergency temporary standard in the *Federal Register*, where it also serves as a proposed permanent standard. The usual procedures for adopting a permanent standard apply, except that a final ruling should be made within 6 months.

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### *What if I disagree with a new standard or can't comply with agency requirements?*

An employer who can't comply with new requirements or anyone who disagrees with a new standard can:

- Petition a court for judicial review;
  - Request a permanent, temporary, or experimental variance from a standard or regulation;
- OR
- Apply for an interim order.

### *Can employers and employees petition OSHA to modify or withdraw standards or requirements?*

Yes. Employers and employees may petition OSHA to modify or revoke standards just as they may petition the agency to develop standards. OSHA continually reviews its standards to keep pace with developing and changing industrial technology.

### *Who can file a petition for judicial review?*

Anyone who may be adversely affected by a final or emergency standard may file a petition for judicial review. The objecting party must file the petition within 60 days of the rule's publication with the U.S. Court of Appeals for the circuit in which the objector lives or has his or her principal place of business.

### *Does a petition for review delay enforcement of a standard?*

Filing an appeals petition will not delay enforcement of a standard, unless the Court of Appeals specifically orders it. OSHA promulgates permanent standards only after due consideration of the arguments and data received from the public in written submissions and at hearings.

### *What is a variance?*

A variance is a mechanism through which employers apply for formal permission to deviate from a standard's requirements or time frame.

### *When can an employer request a variance from an OSHA standard?*

Employers may ask OSHA for a variance from:

- A newly promulgated standard or regulation if they cannot fully comply by the effective date due to shortage of materials, equipment, or professional or technical personnel; OR
- Requirements of a standard or regulation if they can demonstrate that their alternative or alternatives provide employees with protection "as effective" as that provided by the standard or regulation.

### *Are there different types of variances?*

Yes. There are temporary, permanent, and experimental variances.

An employer applies for a **temporary variance** if he or she cannot comply with a standard or regulation by its effective date because professional or technical personnel, material or equipment are not available, or because the necessary construction or alteration of facilities cannot be completed in time.

An employer who can prove that working conditions, practices, means, methods, operations, or processes at his or her worksite are as safe and healthful as compliance with the standard may apply for a **permanent variance**.

An employer may apply for an **experimental variance** if he or she is participating in an effort to demonstrate or validate new job safety and health techniques, and either the Secretary of Labor or the Secretary of HHS has approved that experiment.

### *Can an employer continue to operate his or her worksite while waiting for a decision on a variance application?*

Employers may apply to OSHA for an interim order so they may continue to operate under existing conditions until OSHA determines whether to grant the variance.

### *How can I get more information about variances?*

For further information and assistance in applying for a variance, contact the nearest OSHA office listed at the end of this booklet. Information also is available on OSHA's web site at [www.osha.gov](http://www.osha.gov).

### *If an employer applies for a variance, will OSHA forgive any citations he or she has already received?*

Variances are not retroactive. An employer who has been cited for violating a standard may not seek relief from that citation by applying for a variance.

The fact that a citation is outstanding, however, does not prevent an employer from filing a variance application. OSHA may decline to accept a variance application under certain circumstances.

### *Does OSHA require employers to comply with anything else aside from its standards?*

Yes. OSHA has recordkeeping regulations<sup>1</sup> that require certain employers to maintain records of workplace

- Injuries,
- Illnesses, and
- Deaths.

# Are There Any Other Requirements I Should Know About?

All employers must report each work-related fatality and accident that hospitalize three or more employees to OSHA within 8 hours of the incident.

## *Why does OSHA require employers to keep records of injuries, illnesses, and fatalities?*

OSHA's recordkeeping requirements,<sup>1</sup> as set out in the *OSH Act*, establish an effective, centralized, nationwide system for monitoring occupational safety and health problems—a vital requirement for gauging problems and solving them. Prior to the *OSH Act*, some states and private organizations collected statistics on job injuries and illnesses but national figures were based on not-altogether-reliable projections.

Keeping records allows OSHA to compile survey material, helps identify high-hazard industries, and informs employees about their employers' workplace safety record.

## *Reporting and recordkeeping checklist*

- ✓ Maintain injury and illness records,
- ✓ Report each fatality,
- ✓ Report each accident that hospitalizes 3 or more employees,
- ✓ Make records accessible to employees,
- ✓ Allow OSHA access to records, and
- ✓ Post annual summary of injuries, and illnesses.

## *What does an employer have to do to comply with OSHA's reporting and recordkeeping requirements?*

OSHA's reporting and recordkeeping regulations set a number of requirements:

- Employers must maintain records in each establishment of occupational injuries and illnesses as they occur and make those records accessible to employees.
- All employers must report within 8 hours the death of any employee from a work-related incident or the in-patient hospitalization of three or more employees as a result of a work-related incident. Such reports may be made by telephone or in person to the nearest OSHA Area Office (see p. 43) or by calling OSHA's *emergency* toll-free number (1-800-321-OSHA).

<sup>1</sup>Note that OSHA is in the process of revising the entire injury and illness recordkeeping regulation, *Title 29 of the Code of Federal Regulations, Part 1904*, forms, and interpretive materials.

- All employers must post during the month of February an annual summary of occupational injuries and illnesses for each establishment.
- All employers must provide, upon request, pertinent recordkeeping records for inspection and copying by any representative of the Secretary of Labor, the Secretary of Health, Education, and Welfare, or the state during any investigation, research, or statistical compilation.

### *Do employers with fewer than 11 employees have to keep OSHA injury and illness records?*

Employers with 10 or fewer employees are exempt from maintaining the OSHA log of injuries and illnesses unless the Bureau of Labor Statistics (BLS) or OSHA notifies them that they have been selected to participate in a mandatory data collection.

*Employers in the following low-hazard industries are exempt from OSHA's recordkeeping and reporting requirements:*

- *Retail trade, except for SIC 52-54, building materials, general merchandise stores, and food stores,*
- *Finance,*
- *Insurance,*
- *Real estate, and*
- *Service industries, except hotels and other lodging places, repair services, amusement and recreation services, and health services.*

### *Do employers have to comply with recordkeeping and reporting requirements under other OSHA standards?*

Yes. Many specific OSHA standards have additional recordkeeping and reporting requirements.

### *Does OSHA exempt any employers from complying with certain recordkeeping requirements?*

OSHA exempts employers in the following industries: retail trade (except building materials, general merchandise stores, and food stores), finance, insurance, real estate, and service industries, except hotels and other lodging places, repair services, amusement and recreation services, and health services.

Exempt employers, like nonexempt employers, must comply with requirements to display an OSHA poster and report to OSHA within 8 hours any accident that results in one or more fatalities or the hospitalization of three or more employees.

A few exempt employers will have to maintain records if OSHA or BLS selects them to participate in a mandatory data collection. The agency will notify those employers in advance and mail them with the necessary forms and instructions.

## *What does the agency consider an occupational injury or illness?*

The agency defines occupational injuries and illnesses in the following way:

- An **occupational injury** is any injury such as a cut, fracture, sprain, or amputation that results from a work-related accident or from exposure involving a single incident in the work environment.
- 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. Included are acute and chronic illnesses or diseases that may be caused by inhalation, absorption, ingestion, or direct contact with toxic substances or harmful agents.

## *Must employers record all occupational injuries and illnesses?*

All **occupational illnesses** must be recorded regardless of severity.

All occupational injuries must be recorded if they result in

- Death;
- One or more lost workdays;
- Restriction of work or motion;
- Loss of consciousness;
- Transfer to another job; or
- Medical treatment (other than first aid).

## *Which fatalities must employers record?*

Any work-related fatality must be recorded regardless of the length of time between the injury and death.

## *Does an employer have any additional responsibilities following the death of a worker or the hospitalization of several workers after a workplace incident?*

If an on-the-job accident occurs that results in the death of an employee or the hospitalization of three or more employees, **all employers**, regardless of number of employees, must report the accident, in detail, to the nearest OSHA office **within 8 hours of learning about it**.

## *What do employers need to do to maintain recordkeeping forms?*

Employers must log injuries and illnesses on recordkeeping forms and keep the logs current and retained:

- For 5 years at **each establishment** and make them available for inspection by representatives of OSHA, the Department of Health and Human Services, the Bureau of Labor Statistics, or the designated state agency; and
- The logs must be updated to reflect any changes that occur.

### *Should I send the Summary of Injuries and Illnesses to OSHA?*

DO NOT send any recordkeeping forms to OSHA or any other agency. You maintain and post it in your workplace.

### *Do employers with multiple work sites have to keep recordkeeping forms at each site?*

Employers must keep injury and illness records for each establishment. An employer whose employees work in dispersed locations must keep records at the place where the employees report for work. In some situations, employees do not report to work at the same place each day. In that case, records must be kept at the place from which they are paid or at the base from which they operate.

### *What does OSHA consider an “establishment?”*

OSHA defines establishment as a “single physical location where business is conducted or where services are performed.”

### *What forms do employers need to maintain?*

Only two forms are needed for recordkeeping:

- **OSHA 200, Log and Summary of Occupational Injuries and Illnesses.** Employers must log each recordable occupational injury and illness on this form within 6 working days from the time the employer learns of it. A complete copy current to within 45 calendar days must be present at all times in the establishment if the employer prepares the log at a central location using automatic data processing equipment. A substitute for the OSHA 200 is acceptable if it is as detailed, readable, and understandable as the OSHA 200.
- **OSHA 101, Supplementary Record of Occupational Injuries and Illnesses.** Each employer must complete the OSHA 101 form within 6 working days from the time the employer learns of the work-related injury or illness. This form asks for more detailed information about each injury or illness. Employers may use a substitute for the OSHA 101 (such as insurance or workers’ compensation forms) if the substitute form contains all required information or is supplemented to do so.

OSHA is in the process of revising these two forms. The agency expects to publish a final rule implementing new forms in 2000.

### *When do employers have to post the injury and illness log?*

Employers must post copies of the Summary of Occupational Injuries and Illnesses portion of the OSHA 200 no later than February 1 and keep them in place until March 1 of the following year to which the records pertain.

### *What records must employers post at their workplaces?*

Employers must display at each establishment, wherever they normally post notices to employees, the following:

- A copy of the totals from the previous year's summary of occupational injuries and illnesses, as identified for posting on the last page of that year's OSHA 200.
- The Job Safety and Health Protection workplace poster, OSHA 2203 or state equivalent, informing employees of their rights and responsibilities under the *OSH Act*.
- Summaries of petitions for variances from standards or recordkeeping procedures.
- Copies of all OSHA citations for violations of standards. These must remain posted at or near the location of alleged violations for 3 days, or until the violations are corrected, whichever is longer.

### *What if an establishment has no injuries or illnesses during the year?*

If there were no injuries or illnesses during the year, employers must enter zero on the totals line of the form and post it.

### *What is OSHA's annual survey?*

Each year, OSHA collects information from employers about particular worksites to better direct agency resources and improve worker protection.

OSHA surveys each employer selected for participation to indicate the number of workers he or she employs and the number of hours those employees worked. The survey also asks those employers to send information they have already collected on the OSHA 200 log and summary form.

# How Does OSHA Enforce Its Standards?

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## *How does OSHA make sure that employers and employees are complying with its standards and regulations?*

The *OSH Act* authorizes OSHA to conduct workplace inspections to enforce its standards. Every establishment covered by the *OSH Act* is subject to inspection by OSHA compliance safety and health officers.

## *What does a compliance officer have the authority to do?*

The *OSH Act* authorizes OSHA compliance officers—at reasonable times, in a reasonable manner, and within reasonable time limits—to

- Enter any factory, plant, establishment, construction site, or other areas of the workplace or environment where work is being performed;
- Inspect and investigate during regular working hours any such place of employment and all pertinent conditions, structures, machines, apparatus, devices, equipment, and materials;
- Inspect and investigate at other times any such place of employment and all pertinent conditions, structures, machines, apparatus, devices, equipment, and materials; and
- Question privately any employer, owner, operator, agent or employee during an inspection or investigation.

## *What training and experience qualify the compliance officers to conduct inspections?*

OSHA compliance officers have specialized knowledge and experience in the occupational safety and health field, including industrial hygiene, safety engineering, toxicology, and occupational medicine. They receive vigorous training on OSHA standards and how to recognize safety and health hazards.

## *Does OSHA tell employers in advance that they will be inspected?*

No. OSHA conducts inspections without advance notice. In fact, anyone who alerts an employer in advance of an OSHA inspection can receive a criminal fine of up to \$1,000 or a 6-month jail term or both.

## *Are there any exceptions?*

There are special circumstances under which OSHA may give advance notice to the employer. Even then, such notice will be less than 24 hours. These special circumstances include:

- Imminent danger situations, which require correction as soon as possible;
- Inspections that must take place after regular business hours or that require special preparation;
- Cases where OSHA must provide advance notice to assure that the employer and employee representative or other personnel will be present; and/or
- Situations in which the OSHA Area Director determines that advance notice would produce a more thorough or effective inspection.

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Employers receiving advance notice of an inspection must inform their employees' representative or arrange for OSHA to do so.

### *Can an employer refuse to allow a compliance officer to enter without a warrant?*

Yes. An employer has the right to require the compliance officer to obtain an inspection warrant before entering the work site. OSHA may inspect after acquiring a judicially authorized search warrant based on administrative probable cause or evidence of a violation.

OSHA may take appropriate steps, including legal action, if an employer still refuses to admit a compliance officer, or if an employer attempts to interfere with an inspection.

### *What prompts an OSHA inspection?*

Obviously, not all 6.5 million workplaces covered by the *OSH Act* can be inspected each year. The most hazardous workplaces need primary attention. OSHA, therefore, has established a system of inspection priorities. The agency inspects under the following conditions:

1. **Imminent danger**, or any condition where there is reasonable certainty a danger exists that can be expected to cause death or serious physical harm immediately or before the danger can be eliminated through normal enforcement procedures. OSHA gives top priority to imminent danger situations.
2. **Catastrophes and fatal accidents** resulting in the death of any employee or the hospitalization of three or more employees,

3. **Employee complaints** involving imminent danger OR an employer violation that threatens death or serious physical harm,
4. **Referrals** from other agencies,
5. **Planned, or programmed, inspections in high-hazard industries**, and
6. **Follow-ups to previous inspections.**

### *Can an employee leave the workplace if there are unsafe conditions?*

Employees generally don't have the right to walk off the job because of potentially unsafe workplace conditions. Any employee who walks off the job for workplace safety reasons may face disciplinary action by the employer. An employee does have the right, however, to refuse (in good faith) to be exposed to an imminent danger.

### *How can an employee file a complaint?*

An employee may file a complaint by phone, mail, or fax to the nearest OSHA office and request an inspection if there are unsafe or unhealthful working conditions. You may request that OSHA not reveal your name.

# What Happens During an OSHA Inspection?

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## *What should I expect if OSHA inspects my workplace?*

There are four stages of a typical OSHA inspection:

- Presentation of Inspector Credentials
- Opening Conference
- Inspection Walkaround
- Closing Conference.

## *When does an inspection begin?*

An inspection begins when the OSHA compliance officer arrives at the establishment. He or she displays official credentials and asks to meet an appropriate employer representative. Employers should always insist on seeing the compliance officer's credentials.

An OSHA compliance officer carries U.S. Department of Labor credentials bearing his or her photograph and a serial number that an employer can verify by phoning the nearest OSHA office. Posing as a compliance officer is a violation of the law. Suspected imposters should be promptly reported to local law enforcement agencies.

## *What happens during the opening conference?*

In the opening conference, the compliance officer

- Explains why OSHA selected the establishment for inspection.
- Determines whether an OSHA-funded consultation program is in progress or whether the facility has received an inspection exemption. If so, the compliance officer usually terminates the inspection.
- Obtains information about the establishment.
- Explains the purpose of the visit, the scope of the inspection, walkaround procedures, employee representation, employee interviews, and the closing conference.

The compliance officer asks the employer to select an employer representative to accompany him or her during the inspection. OSHA welcomes, but does not require, that there be an employee representative for each inspection.

Under no circumstances may the employer select the employee representative for the walkaround. OSHA does, however, encourage employers and employees to meet together.

## What happens during an inspection walkaround?

After the opening conference, the compliance officer and accompanying representatives proceed through the establishment, inspecting work areas for potentially hazardous working conditions. The compliance officer will discuss possible corrective actions with the employer. OSHA may consult, at times privately, with employees during the inspection walkaround.

Trade secrets observed by the compliance officer are kept confidential. Federal employees who release confidential information without authorization are subject to a \$1,000 fine or 1 year in jail or both AND removal from office or employment.

*An inspection walkaround may cover part or all of an establishment, even if a specific complaint, fatality, or catastrophe prompted the inspection.*

Selecting Employee Representatives	
If...	Then...
<i>the employees are represented by a recognized bargaining representative,</i>	the union usually will designate the employee representative to accompany the compliance officer.
<i>there is a plant safety committee and no recognized bargaining representative,</i>	the employee members of that committee or the employees at large will designate the employee representative.
<i>there is neither a recognized bargaining representative nor a plant safety committee,</i>	the employees themselves may select the employee representative, or the compliance officer will determine if any other employees would suitably represent the interests of employees.
<i>there is no authorized employee representative,</i>	the compliance officer must consult with a reasonable number of employees concerning safety and health matters in the workplace. Such consultations may be held privately.

## What kinds of records does the compliance officer examine?

The compliance officer checks posting and recordkeeping practices, including whether the employer has

- Maintained records of deaths, injuries, and illnesses;
- Posted a copy of the totals from the last page of the previous year's *Log and Summary of Occupational Injuries and Illnesses* (OSHA 200) during the month of February; and
- Prominently displayed the OSHA workplace poster (OSHA 2203).

The compliance officer also examines records, where required, of employee exposure to toxic substances and harmful physical agents.

### *Can an employer immediately correct any violations spotted by the compliance officer and avoid a citation?*

Some apparent violations detected by the compliance officer can be corrected immediately. The compliance officer records such corrections to help evaluate the employer's good faith for compliance.

Apparent violations that have been corrected may still serve as the basis for a citation or notice of proposed penalty or both.

## What happens after the inspection walkaround?

After the inspection **walkaround**, the compliance officer holds a closing conference with the employer and the employee representatives, either jointly or separately.

### During the closing conference, **the compliance officer**

- Discusses with the employer all unsafe or unhealthful conditions observed on the inspection and indicates all apparent violations for which a citation may be recommended.
- Tells the employer of his or her appeal rights, anti-discrimination rights under 11(c) of the *OSH Act*, the informal conference, and procedures for contesting citations within 15 working days after receiving the citation.
- Informs the employer of his or her obligations with regard to any citations that may be issued.
- Will hold a separate closing conference with the employees or their representative, if requested, to discuss matters of direct interest to employees and to inform them of their rights after an inspection.

### *What is in an OSHA citation?*

Citations inform the employer and employees of:

- The regulations and standards the employer allegedly violated,
- Any hazardous working conditions covered by Section 5(a)(1), the general duty clause, of the *OSH Act*,
- The proposed length of time set for their abatement, and
- Any proposed penalties.

OSHA will hand deliver or send citations and notices of proposed penalties to the employer by certified mail. The employer must post a copy of each citation at or near the places where the violations occurred for 3 days or until the employer abates the violation, whichever is longer.

- Informs employers of their rights under the *Small Business Regulatory Enforcement Fairness Act of 1996* (SBREFA).
- Informs employers that Regional Small Business Regulatory Fairness Boards created under SBREFA exist to hear cases if employers are not satisfied with agency resolutions of enforcement matters.
- Explains that OSHA area offices offer assistance and can answer questions about programs and activities.

### *What does SBREFA require?*

SBREFA requires that all federal agencies have in place a policy to reduce or, under appropriate circumstances, waive penalties for violations of standards by small businesses.

### *Will the compliance officer tell an employer during the closing conference what penalties the agency will propose?*

During the closing conference, the compliance officer **does not** indicate any proposed penalties. Only the OSHA area director has that authority, and only after having received a full report.

# What Happens After an OSHA Inspection?

*Following an inspection, the OSHA Area Director can:*

- Issue citations without penalties,
- Issue citations with proposed penalties, or
- Determine that neither is warranted.

*What types of penalties can be proposed?*

Under the *OSH Act*, OSHA may cite the following violations and propose the following penalties:

- **Other-than-Serious:** A violation that has a direct relationship to job safety and health, but probably would not cause death or serious physical harm. OSHA may propose a penalty of **up to \$7,000** for each other-than-serious violation. The agency may adjust a penalty downward for an other-than-serious violation, depending on the employer's good faith (demonstrated efforts to comply with the *OSH Act*), history of previous violations, and size of business. When the adjusted penalty amounts to less than \$100, OSHA does not propose any penalty.

- **Serious:** A violation where there is substantial probability that death or serious physical harm could result AND that the employer knew, or should have known, of the hazard. OSHA may propose a mandatory penalty of **up to \$7,000** for each serious violation. The agency may adjust a penalty for a serious violation downward, based on the employer's good faith, history of previous violations, gravity of the alleged violation, and size of business.
- **Willful:** A violation that the employer intentionally and knowingly commits or a violation that the employer commits with plain indifference to the law. The employer either knows that what he or she is doing constitutes a violation, or is aware that a hazardous condition existed and made no reasonable effort to eliminate it.

OSHA may propose penalties of **up to \$70,000** for each willful violation, with a minimum penalty of \$5,000 for each willful violation. The agency may adjust a proposed penalty for a willful violation downward, depending on the size of the business and its history of previous violations. Usually, OSHA gives employers cited for willful violations no credit for good faith.

In addition to OSHA citations and penalties, the U.S. Department of Justice may bring a criminal action against an employer who willfully violates a standard that results in the death of an employee. If a court convicts such an employer, the offense is punishable by a court-imposed fine or by imprisonment for up to 6 months, or both. The court may impose a fine for a criminal conviction of up to \$250,000 for an individual or \$500,000 for a corporation.

- **Repeated:** A violation of any standard, regulation, rule, or order where OSHA finds a substantially similar violation during a reinspection. OSHA may propose penalties of **up to \$70,000** for each repeated violation. To be the basis of a repeat citation, the original citation must be final. A citation under contest may not serve as the basis for a subsequent repeat citation.
- **Failure to Abate:** OSHA may propose an additional penalty of **up to \$7,000 for each day** an employer fails to correct a previously

cited violation beyond the prescribed abatement date.

### *May penalties for other types of violations be levied on an employer?*

Employers may be assessed penalties for the following:

- Violations of posting requirements can bring a civil penalty of up to \$7,000. (OSHA does not fine for failing to post the job safety and health poster.)
- Falsifying records, reports, or applications, upon conviction in a court, can bring a **criminal fine** of \$10,000 or up to 6 months in jail, or both.
- Assaulting a compliance officer or otherwise resisting, opposing, intimidating, or interfering with a compliance officer in the performance of his or her duties is a criminal offense. Anyone convicted of such an action is subject to a **criminal fine** of not more than \$5,000 and imprisonment for not more than 3 years.

Violation Categories and Possible Penalties		
Type of Violation	Minimum Penalty per Violation	Maximum Penalty per Violation
Other-than-serious		\$7,000
Serious	\$100*	\$7,000
Posting		\$7,000
Willful	\$5,000	\$70,000
Willful with fatality, <b>first conviction</b>		<b>\$250,000/500,000 or 6 months in prison or both**</b>
Willful, with fatality, <b>second conviction</b>		<b>\$250,000/\$500,000 or 1 year in prison or both**</b>
Repeated	\$5,000	\$70,000
Failure to abate		\$7,000 per day

\* Set as OSHA policy in the *Field Inspection Reference Manual (FIRM)*.

\*\* The monetary criminal fine is set by Title 18 of the U.S. Code (Crimes and Criminal Procedure), § 3571, which states that individuals found guilty of an offense may not be fined more than \$250,000, and organizations not more than \$500,000.

# Can I Question Inspection Results?

## *Can employees question inspection results?*

Yes. If OSHA initiated an inspection due to an employee complaint, the employee or authorized employee representative may request an informal review of any decision not to issue a citation.

Employees, however, **may not contest:**

- Citations,
- Penalties, or
- Lack of penalties.

Employees **may contest:**

- The time specified in the citation for abatement of a hazardous condition.
- An employer's **Petition for Modification of Abatement (PMA)**, requesting an extension of the abatement period. Employees must contest the PMA within 10 working days of its posting or within 10 working days after an authorized employee representative has received a copy.

Employees may request an informal conference with OSHA to discuss any issues raised by an inspection, citation, notice of proposed penalty, or employer's notice of intent to contest. OSHA must conduct an informal conference within the 15 working day contest period.

## *Can employers appeal inspection results?*

When issued a citation or notice of a proposed penalty, an employer may request an informal conference with OSHA's Area Director to discuss the case. OSHA authorizes its area directors to reach settlement agreements with employers that adjust citations and penalties to avoid prolonged legal disputes. As with informal conferences requested by employees, OSHA

must conduct an informal conference requested by an employer within the 15 working day contest period.

## *What can employers do if they can't correct a cited hazard in time?*

If an employer who has been cited for violations cannot meet the abatement dates as issued or amended at the informal conference, the employer must submit a request for an extension of time, or a PMA. A PMA must be filed in writing with the OSHA Area Director who issued the citation no later than the close of the next working day following the date the director originally set for abatement.

## *What can an employer do if he or she disagrees with the citation, abatement time, or proposed penalty?*

If an employer decides to contest the citation, the time set for abatement, and/or the proposed penalty, he or she has 15 working days after receiving the Citation and Notice of Proposed Penalty to notify the OSHA Area Director in writing. An oral disagreement is not sufficient. This written notification is called a "Notice of Contest."

Any employer, employee, or employee representative also may request an informal conference within the 15 working day contest period to discuss inspection results. Based on information and evidence presented at the informal conference, OSHA may enter into an informal settlement agreement with the employer, which could involve changes to citations, penalties, or abatement dates.

### *Is there a specific format for the Notice of Contest?*

No. It must, however, clearly identify the employer's basis for filing a contest of the citation, notice of proposed penalty, abatement period, or notification of failure to correct the violation.

### *How is an employer's Notice of Contest reviewed?*

If the written **Notice of Contest** has been filed within the required 15 working days, the OSHA Area Director forwards the Notice of Contest to the Occupational Safety and Health Review Commission (OSHRC).

The Commission will assign an administrative law judge to hear the case.

The administrative law judge may:

- Find the contest legally invalid and disallow it, OR
- Set a hearing for a public place near the employer's workplace.

The employer and the employees have the right to participate in the hearing.

### *Can an employer appeal the administrative law judge's ruling?*

Once the administrative law judge has ruled, any party to the case may request a further review by the Commission. Any of the three OSHRC commissioners also may, at his or her own motion, bring a case before the Commission for

### *What is the Occupational Safety and Health Review Commission?*

The Commission is an independent federal agency created by the *OSH Act* to decide contested OSHA citations and penalties. It is not associated with OSHA or the Department of Labor.

review. Employers and OSHA may appeal Commission rulings to the appropriate U.S. Court of Appeals.

OSHA can provide extensive help through a variety of programs, including assistance on safety and health programs; workplace consultation, voluntary protection programs, strategic partnerships, and training and education.

### *How does safety and health program management assistance help employers and employees?*

Effective management of worker safety and health protection is a decisive factor in reducing the extent and severity of work-related injuries and illnesses and their related costs. In fact, an effective safety and health program forms the basis of good worker protection and can save time and money—about \$4 for every dollar spent—and increase productivity.

To assist employers and employees in developing effective safety and health programs, OSHA published recommended "Safety and Health Program Management Guidelines" (*Federal Register* 54(18):3908-3916, January 26, 1989). These voluntary guidelines apply to all work sites covered by OSHA.

# How Can OSHA Help Me?

The guidelines identify four general elements that are critical to the development of a successful safety and health management program:

- Management commitment and employee involvement;
- Worksite analysis;
- Hazard prevention and control; and
- Safety and health training.

The guidelines recommend specific actions under each of these general elements to achieve an effective safety and health program.

## *How can consultation assistance help an employer?*

Besides helping employers identify and correct specific hazards, OSHA's consultation service provides *free*, onsite assistance in developing and implementing effective workplace safety and health programs that emphasize preventing worker injuries and illnesses. In addition, OSHA has available in its regional offices individuals to provide assistance on issues related to compliance, ergonomics, bloodborne pathogens, and small business.

OSHA's comprehensive consultation assistance includes an appraisal of all:

- Mechanical systems, physical work practices, and environmental hazards of the workplace, and
- Aspects of the employer's present job safety and health program.

Employers also may receive training and education services, as well as limited assistance away from the worksite.

## *Who can get consultation assistance from OSHA?*

Consultation assistance is available to smaller employers (with fewer than 250 employees at a fixed site and no more than 500 nationwide) who want help in establishing and maintaining a safe and healthful workplace.

*A single, free copy of the safety and health program management guidelines can be obtained from the U.S. Department of Labor, OSHA Publications, P.O. Box 37535, Washington, DC 20013-7535. Send a self-addressed mailing label with your request.*

*Or, visit OSHA's website at [www.OSHA.gov](http://www.OSHA.gov) and search via the **Index** or **Federal Register**.*

## *Do employers have to pay for consultation assistance?*

No. Largely funded by OSHA, consultation programs are run by state agencies at no cost to the employer who requests it. OSHA does not propose penalties or issue citations for hazards identified by the consultant. The employer's only obligation is to correct all serious hazards and potential safety and health violations OSHA identifies.

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### *Can OSHA assure privacy to an employer who asks for consultation assistance?*

OSHA provides consultation assistance to the employer with the assurance that his or her name and firm and any information about the workplace will not be routinely reported to OSHA enforcement staff.

### *Can an employer be cited for violations after receiving consultation assistance?*

Not likely, since there are no citations issued or penalties proposed for hazards identified by the consultant. The purpose of the program is to help smaller employers identify and fix hazards in their workplaces.

### *Does OSHA provide any incentives for seeking consultation assistance?*

Yes. Certain exemplary employers may request participation in OSHA's Safety and Health Achievement Recognition Program (SHARP). Eligibility for participation in SHARP includes receiving a comprehensive consultation visit, demonstrating exemplary achievements in workplace safety and health by abating all identified hazards, and developing an excellent safety and health program.

Employers accepted into SHARP may receive an exemption from programmed inspections—not complaint or accident investigation inspections—for a period of 1 year.

### *What are Voluntary Protection Programs?*

Voluntary Protection Programs (VPP) represent one part of OSHA's effort to extend worker protection beyond the minimum required by OSHA standards. These programs—along with others such as expanded onsite consultation services and full service area offices, and OSHA's Strategic Partnership Program (OSPP)—are cooperative approaches which, when coupled with an effective enforcement program, expand worker protection to help meet the goals of the *OSH Act*.

### *What do the Voluntary Protection Programs do?*

There are three VPP levels: *Star*, *Merit*, and *Demonstration* designed to:

- Recognize outstanding achievement of employers who have successfully incorporated effective comprehensive safety and health programs into their total management system;
- Motivate other employers to achieve excellent safety and health results in the same outstanding way; and
- Establish a relationship between employers, employees, and OSHA that is based on cooperation rather than coercion.

*For further information about consultation assistance, contact your regional or area OSHA office or visit OSHA's website at [www.osha.gov](http://www.osha.gov).*

*You can get additional information concerning consultation assistance, including a directory of OSHA-funded consultation projects, by requesting OSHA publication No. 3047, *Consultation Services for the Employer*. (Also see the list of consultation projects at the end of this booklet.)*

### *How does VPP help employers? And employees?*

VPP participation can mean:

- Improved employee motivation to work safely, leading to a better quality of life at work, and enhanced productivity;
- Lost-workday case rates generally 50 percent below industry averages;
- Reduced workers' compensation and other injury- and illness-related costs;
- Positive community recognition and interaction;
- Further improvement and revitalization of already good safety and health programs; and
- Positive relationship with OSHA.

### *How does OSHA monitor VPP sites?*

OSHA reviews an employer's VPP application and conducts an onsite review to verify that the safety and health programs described are operating effectively at the site. OSHA conducts onsite evaluations on a regular basis, annually for participants at the *Demonstration* level, every 18 months for *Merit*, and every 3 to 5 years for *Star*. Each February, all participants must send a copy of their most recent annual site evaluation to their OSHA regional office. This evaluation must include their injuries and illnesses for the past year.

### *Can OSHA inspect an employer who is participating in the VPP?*

Sites participating in VPP are not scheduled for regular, programmed inspections. OSHA, however, handles any employee complaints, serious accidents, or significant chemical releases that may occur according to routine enforcement procedures.

## *How can a partnership with OSHA improve worker safety and health?*

OSHA has learned firsthand that voluntary, cooperative partnership with employers, employees, and unions can be a useful alternative to traditional enforcement and an effective way to reduce worker deaths, injuries, and illnesses. This is especially true when a partnership leads to the development and implementation of comprehensive workplace safety and health programs.

## *What are OSHA Strategic Partnerships Programs (OSPPs\*)?*

These strategic partnerships are alliances among labor, management, and government to foster improvements in workplace safety and health. These partnerships are voluntary, cooperative relationships between OSHA, employers, employee representatives, and possibly others—trade unions, trade and professional associations, universities, and other government agencies. OSPPs are the newest member of OSHA’s family of cooperative programs.

*Additional information on VPPs is available from OSHA national, regional, and area offices. See the list at the end of this booklet.*

*Also, see Outreach at OSHA’s website at [www.osha.gov](http://www.osha.gov).*

## *What do OSPPs do?*

These partnerships encourage, assist, and recognize the efforts of the partners to eliminate serious workplace hazards and achieve a high level of worker safety and health. Whereas OSHA’s Consultation Program and VPP entail one-on-one relationships between OSHA and individual worksites, most strategic partnerships seek to have a broader impact by building cooperative relationships with groups of employers and employees.

## *Are there different kinds of OSPPs?*

There are two major types:

- **Comprehensive**, which focus on establishing comprehensive safety and health programs at partnering worksites.
- **Limited**, which help identify and eliminate hazards associated with worker deaths, injuries, and illnesses, or have goals other than establishing comprehensive worksite safety and health programs.

OSHA is interested in creating new OSPPs at the national, regional, and local levels. OSHA also has found the more limited partnerships to be valuable. Limited partnerships might address the elimination or control of a specific industry hazard.

\* “Strategic Partnership for Worker Safety and Health,” *Federal Register* 64:22652, April 21, 1999.

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### *What are the benefits of participation in the OSHA Strategic Partnership Program?*

- Improved employee motivation to work safely, leading to a better quality of life at work, and enhanced productivity;
- Reduced workers' compensation and other injury- and illness-related costs due to declines in workplace injuries and illnesses;
- Positive community recognition and interaction;
- Development of or improvement in safety and health programs; and
- Positive interaction with OSHA.

### *Can OSHA provide occupational safety and health training for employers and employees?*

Yes. The OSHA Training Institute in Des Plaines, IL, provides basic and advanced training and education in safety and health for federal and state compliance officers, state consultants, other federal agency personnel, and private sector employers, employees, and their representatives.

Institute courses cover diverse safety and health topics, including electrical hazards, machine guarding, personal protective equipment, ventilation, and ergonomics.

*For more information about OSPPs, contact your nearest OSHA office or visit OSHA's web site at [www.osha.gov](http://www.osha.gov).*

The Institute facility includes classrooms, laboratories, a library, and an audiovisual unit. The laboratories contain various demonstrations and equipment, such as power presses, woodworking and welding shops, a complete industrial ventilation unit, and a sound demonstration laboratory.

More than 57 courses are available for personnel in the private sector dealing with subjects such as safety and health in the construction industry and methods of voluntary compliance with OSHA standards.

OSHA also offers safety and health training and assistance through the Institute's 12 education centers. The education centers provide an opportunity for other non-profit institutions, such as universities and technical and community colleges, to conduct OSHA courses for the private sector and federal agencies.

OSHA's 66 area offices are also full-service centers offering a variety of informational services such as availability of personnel for speaking engagements, publications, audiovisual aids on workplace hazards, and technical advice.

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### *Does OSHA give money to organizations for training and education?*

OSHA provides funds to nonprofit organizations to conduct workplace training and education in subjects where OSHA believes there is a current lack of workplace training.

Organizations awarded grants use funds to develop training and educational programs, reach out to workers and employers for whom their program is appropriate, and provide these programs to workers and employers.

### *How can I learn more about these and other OSHA assistance programs?*

You can contact your nearest OSHA regional or area office listed at the end of this booklet. All OSHA standards, programs, training, and other activities are available online at <http://www.osha.gov/>.

*For more information on grants, training, and education, contact the OSHA Training Institute, Office of Training and Education, 1555 Times Drive, Des Plaines, IL 60018, (847) 297-4810, or see Outreach on OSHA's website at [www.osha.gov](http://www.osha.gov).*

# Related OSHA Publications

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## *Does OSHA have published materials on safety and health regulations and related topics?*

Yes. OSHA has an extensive publications program. You can get single, free copies of the following publications from the U.S. Department of Labor, OSHA/OICA Publications, P.O. Box 37535, Washington, DC 20013-7535. Send a self-addressed mailing label with your request. These and other OSHA publications are available online at [www.osha.gov](http://www.osha.gov).

- *Access to Medical and Exposure Records* (OSHA 3110)
- *Consultation Services for the Employer* (OSHA 3047)
- *Employer Rights and Responsibilities Following an OSHA Inspection* (OSHA 3000)
- *Employee Workplace Rights* (OSHA 3021)
- *How to Prepare for Workplace Emergencies* (OSHA 3088)
- *Q's & A's for Small Business Employers* (OSHA 3163)
- *OSHA Inspections* (OSHA 2098)
- *Voluntary Protection Programs (VPP)—So You Want to Apply to VPP*
- *What to Expect During OSHA's Visit*
- *You've Been Selected to Be a VPP Onsite Team Member...What Now?*

You also can obtain the following publications from the U.S. Government Printing Office, Superintendent of Documents, Washington, DC 20402; phone: (202) 512-1800; fax: (202) 512-2250. A GPO Order Form is available online at [www.osha.gov](http://www.osha.gov), see **News Room**, *OSHA Publications*, "OSHA Publications Available from the Government Printing Office."

- *General Industry Digest* (OSHA 2201)—Order No. 029-016-00166-2; \$2.75.
- *Handbook for Small Business* (OSHA 2209)—Order No. 029-016-00176-0; \$7.00.
- *Job Hazard Analysis* (OSHA 3071)—Order No. 029-016-00142-5, \$1.00.
- *Construction Industry Digest* (OSHA 2202)—Order No. 29-016-00193-0; \$4.00.
- *Training Requirements in OSHA Standards and Training Guidelines* (OSHA 2254)—Order No. 029-016-00196-4; \$12.00.
- *Hazard Communication Guidelines for Compliance* (OSHA 3111)—Order No. 029-016-00195-6; \$2.75.
- *Principal Emergency Response and Preparedness Requirements* (OSHA 3122)—Order No. 029-016-00154-9; \$4.00.
- *Assessing the Need for Personal Protective Equipment: A Guide for Small Business Employers* (OSHA 3151)—Order No. 029-016-00179-4; \$4.25.

# OSHA Regional Offices

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## **Region I**

(CT,\* MA, ME, NH, RI, VT\*)  
JFK Federal Building  
Room E-340  
Boston, MA 02203  
Telephone: (617) 565-9860

## **Region II**

(NJ, NY,\* PR,\* VI\*)  
201 Varick Street  
Room 670  
New York, NY 10014  
Telephone: (212) 337-2378

## **Region III**

(DC, DE, MD,\* PA, VA,\* WV)  
The Curtis Center  
170 S. Independence Mall West  
Philadelphia, PA 19106-3309  
Telephone: (215) 861-4900

## **Region IV**

(AL, FL, GA, KY,\* MS, NC,\* SC,\* TN\*)  
Atlanta Federal Center  
61 Forsyth Street, SW, Room 6T50  
Atlanta, GA 30303  
Telephone: (404) 562-2300

## **Region V**

(IL, IN,\* MI,\* MN,\* OH, WI)  
230 South Dearborn Street  
Room 3244  
Chicago, IL 60604  
Telephone: (312) 353-2220

## **Region VI**

(AR, LA, NM,\* OK, TX)  
525 Griffin Street  
Room 602  
Dallas, TX 75202  
Telephone: (214) 767-4731

## **Region VII**

(IA,\* KS, MO, NE)  
City Center Square  
1100 Main Street, Suite 800  
Kansas City, MO 64105  
Telephone: (816) 426-5861

## **Region VIII**

(CO, MT, ND, SD, UT,\* WY\*)  
1999 Broadway, Suite 1690  
Denver, CO 80202-5716  
Telephone: (303) 844-1600

## **Region IX**

(American Samoa, AZ,\* CA,\* Guam,  
HI,\* NV,\* Trust Territories of the Pacific)  
71 Stevenson Street  
Suite 420  
San Francisco, CA 94105  
Telephone: (415) 975-4310

## **Region X**

(AK,\* ID, OR,\* WA\*)  
1111 Third Avenue  
Suite 715  
Seattle, WA 98101-3212  
Telephone: (206) 553-5930

\*These states and territories operate their own OSHA-approved job safety and health programs (Connecticut and New York plans cover public employees only). States with approved programs must have a standard that is identical to, or at least as effective as, the federal standard.

# OSHA Area Offices

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US Department of Labor - OSHA  
Todd Mall - 2047 Canyon Road  
Birmingham, AL 35216-1981  
(205) 731-1534

US Department of Labor - OSHA  
3737 Government Blvd., Suite 100  
Mobile, AL 36693-4309  
(334) 441-6131

US Department of Labor - OSHA  
301 W. Northern Lights Blvd.  
Suite 407  
Anchorage, AK 99503-7571  
(907) 271-5152

US Department of Labor - OSHA  
3221 North 16th Street, Suite 100  
Phoenix, AZ 85016  
(602) 640-2007

US Department of Labor - OSHA  
425 West Capitol Ave., Suite 450  
Little Rock, AR 72201  
(501) 324-6291(5818)

US Department of Labor - OSHA  
5675 Ruffin Road, Suite 330  
San Diego, CA 92123  
(619) 557-2909

US Department of Labor - OSHA  
1391 Speer Blvd., Suite 210  
Denver, CO 80204-2552  
(303) 844-5285

US Department of Labor - OSHA  
7935 E. Prentice Ave., Suite 209  
Englewood, CO 80011-2714  
(303) 843-4500

US Department of Labor - OSHA  
Clark Building  
1057 Broad Street  
Bridgeport, CT 06604  
(203) 579-5581

US Department of Labor - OSHA  
Federal Office Building  
450 Main Street, Room 613  
Hartford, CT 06103  
(860) 240-3152

US Department of Labor - OSHA  
1 Rodney Square  
920 King Street, Suite 402  
Wilmington, DE 19801-3319  
(302) 573-6115

US Department of Labor - OSHA  
Jacaranda Executive Court  
8040 Peters Road  
Building H-100  
Fort Lauderdale, FL 33324  
(954) 424-0242

US Department of Labor - OSHA  
Ribault Building  
1851 Executive Center Drive, Suite 227  
Jacksonville, FL 32207  
(904) 232-2895

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US Department of Labor - OSHA  
5807 Breckenridge Pkwy., Suite A  
Tampa, FL 33610-4249  
(813) 626-1177

US Department of Labor - OSHA  
344 Smoke Tree Business Park  
North Aurora, IL 60542  
(630) 896-8700

US Department of Labor - OSHA  
450 Mall Blvd., Suite J  
Savannah, GA 31406  
(912) 652-4393

US Department of Labor - OSHA  
2918 West Willow Knolls Road  
Peoria, IL 61614  
(309) 671-7033

US Department of Labor - OSHA  
2400 Herodian Way, Suite 250  
Smyrna, GA 30080-2968  
(770) 984-8700

US Department of Labor - OSHA  
46 East Ohio Street, Room 423  
Indianapolis, IN 46204  
(317) 226-7290

US Department of Labor - OSHA  
La Vista Perimeter Office Park  
2183 N.Lake Parkway, Bldg. 7, Suite 110  
Tucker, GA 30084-4154  
(770) 493-6644/6742/8419

US Department of Labor - OSHA  
210 Walnut Street, Room 815  
Des Moines, IA 50309  
(515) 284-4794

US Department of Labor - OSHA  
1150 North Curtis Road, Suite 201  
Boise, ID 83706  
(208) 321-2960

US Department of Labor - OSHA  
300 Epic Center  
301 N. Main  
Wichita, KS 67202  
(316) 269-6644

US Department of Labor - OSHA  
1600 167th Street, Suite 12  
Calumet City, IL 60409  
(708) 891-3800

US Department of Labor - OSHA  
John C. Watts Fed. Bldg.  
330 W. Broadway, Room 108  
Frankfort, KY 40601-1922  
(502) 227-7024

US Department of Labor - OSHA  
O'Hara Lake Plaza  
2360 E. Devon Avenue, Suite 1010  
Des Plaines, IL 60018  
(847) 803-4800

US Department of Labor - OSHA  
9100 Bluebonnet Center Blvd.  
Suite 201  
Baton Rouge, LA 70809  
(225) 389-0474

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US Department of Labor - OSHA  
202 Harlow Street, Room 211  
Bangor, ME 04401  
(207) 941-8177

US Department of Labor - OSHA  
1099 Winterson Road, Suite 140  
Linthicum, MD 21090-2218  
(410) 962-2840

US Department of Labor - OSHA  
639 Granite Street, 4th Floor  
Braintree, MA 02184  
(617) 565-6924

US Department of Labor - OSHA  
Valley Office Park  
13 Branch Street  
Methuen, MA 01844  
(617) 565-8110

US Department of Labor - OSHA  
1441 Main Street, Room 550  
Springfield, MA 01103-1493  
(413) 785-0123

US Department of Labor - OSHA  
801 South Waverly Rd., Suite 306  
Lansing, MI 48917-4200  
(517) 377-1892

US Department of Labor - OSHA  
3780 I-55 North, Suite 210  
Jackson, MS 39211-6323  
(601) 965-4606

US Department of Labor - OSHA  
6200 Connecticut Avenue, Suite 100  
Kansas City, MO 64120  
(816) 483-9531

US Department of Labor - OSHA  
911 Washington Avenue, Room 420  
St. Louis, MO 63101  
(314) 425-4249

US Department of Labor - OSHA  
2900 4th Avenue North, Suite 303  
Billings, MT 59101  
(406) 247-7494

US Department of Labor - OSHA  
Overland Wolf Bldg.  
6910 Pacific Street, Room 100  
Omaha, NE 68106  
(402) 221-3182

Department of Labor - OSHA  
279 Pleasant Street, Suite 201  
Concord, NH 03301  
(603) 225-1629

US Department of Labor - OSHA  
1030 St. Georges Ave.  
Plaza 35, Suite 205  
Avenel, NJ 07001  
(908) 750-3270

US Department of Labor - OSHA  
500 Route 17 South, 2nd Floor  
Hasbrouck Heights, NJ 07604  
(201) 288-1700

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US Department of Labor - OSHA  
Marlton Executive Park, Bldg. 2  
701 Route 73 South, Suite 120  
Marlton, NJ 08053  
(609) 757-5181

US Department of Labor - OSHA  
299 Cherry Hill Road, Suite 304  
Parsippany, NJ 07054  
(203) 263-1003

US Department of Labor - OSHA  
505 Marquette Avenue, NW  
Suite 820  
Albuquerque, NM 87102  
(505) 248-5302

US Department of Labor - OSHA  
401 New Karner Road, Suite 300  
Albany, NY 12205-3809  
(518) 464-4338

US Department of Labor - OSHA  
5360 Genesee Street  
Bowmansville, NY 14026  
(716) 684-3891

US Department of Labor - OSHA  
6 World Trade Center, Room 881  
New York, NY 10048  
(212) 466-2482

US Department of Labor - OSHA  
3300 Vikery Road  
Syracuse, NY 13212  
(315) 451-0808

US Department of Labor - OSHA  
660 White Plains Road, 4th Floor  
Tarrytown, NY 10591-5107  
(914) 524-7510

US Department of Labor - OSHA  
1400 Old Country Road, Suite 208  
Westbury, NY 11590  
(516) 334-3344

US Department of Labor - OSHA  
Century Station Federal Building  
300 Fayetteville Street Mall  
Room 438  
Raleigh, NC 27601-9998  
(919) 856-4770

US Department of Labor - OSHA  
1640 East Capitol Avenue  
Bismarck, ND 58502  
(701) 250-4521

US Department of Labor - OSHA  
36 Triangle Park Drive  
Cincinnati, OH 45246  
(513) 841-4132

US Department of Labor - OSHA  
Federal Office Building  
1240 East 9th Street, Room 899  
Cleveland, OH 44199  
(216) 522-3818

US Department of Labor - OSHA  
Federal Office Bldg.  
200 N. High Street, Room 620  
Columbus, OH 43215  
(614) 469-5582

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US Department of Labor - OSHA  
Ohio Building  
420 Madison Avenue, 600  
Toledo, OH 43604  
(419) 259-7542

US Department of Labor - OSHA  
420 West Main, Suite 300  
Oklahoma City, OK 73102  
(405) 231-5351

US Department of Labor - OSHA  
1220 S.W. 3rd Avenue, Room 640  
Portland, OR 97204  
(503) 326-2251

US Department of Labor - OSHA  
850 North 5th Street  
Allentown, PA 18102  
(610) 776-0592

US Department of Labor - OSHA  
3939 West Ridge Road, Suite B-12  
Erie, PA 16506-1887  
(814) 833-5758

US Department of Labor - OSHA  
Progress Plaza  
49 North Progress Avenue  
Harrisburg, PA 17109  
(717) 782-3902

US Department of Labor - OSHA  
U.S. Custom House, Room 242  
Second and Chestnut Street  
Philadelphia, PA 19106-2902  
(215) 597-4955

US Department of Labor - OSHA  
Federal Building  
1000 Liberty Avenue, Room 1428  
Pittsburgh, PA 15222-4101  
(412) 395-4903

US Department of Labor - OSHA  
Penn Place  
20 North Pennsylvania Ave. Room 2005  
Wilkes-Barre, PA 18701-3590  
(717) 826-6538

US Department of Labor - OSHA  
BBV Plaza Building  
1510 F.D. Roosevelt Avenue  
Guaynabo, PR 00968  
(787) 277-1560

US Department of Labor - OSHA  
380 Westminster Mall, Room 243  
Providence, RI 02903  
(401) 528-4669

US Department of Labor - OSHA  
Strom Thurman, Federal Building  
1835 Assembly Street, Room 1468  
Columbia, SC 29201-2453  
(803) 765-5904

US Department of Labor - OSHA  
Green Hills Office Park  
2002 Richard Jones Road  
Suite C-205  
Nashville, TN 37215-2809  
(615) 781-5423

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US Department of Labor - OSHA  
903 San Jacinto Blvd., Suite 319  
Austin, TX 78701  
(512) 916-5783

US Department of Labor - OSHA  
Wilson Plaza  
606 North Carancahua, Suite 700  
Corpus Christi, TX 78476  
(512) 888-3420

US Department of Labor - OSHA  
8344 East R.L. Thornton Freeway  
Suite 420  
Dallas, TX 75228  
(214) 320-2400/2558

US Department of Labor - OSHA  
North Star 2 Building  
8713 Airport Freeway, Suite 302  
Fort Worth, TX 76180-7601  
(817) 428-2470

US Department of Labor - OSHA  
17625 El Camino Real, Suite 400  
Houston, TX 77058  
(281) 286-0583

US Department of Labor - OSHA  
350 North Sam Houston Parkway  
Suite 120  
Houston, TX 77060  
(281)591-2438

US Department of Labor - OSHA  
Federal Building, Room 806  
1205 Texas Avenue  
Lubbock, TX 79401  
(806) 472-7681

US Department of Labor - OSHA  
1781 South 300 West  
Salt Lake City, UT 84115-1802  
(801) 487-0680

US Department of Labor - OSHA  
Federal Office Building, Room 835  
200 Granby Mall  
Norfolk, VA 23510  
(757) 441-3820

US Department of Labor - OSHA  
505 106th Avenue, N.E., Suite 302  
Bellevue, WA 98004  
(206) 553-7520

US Department of Labor - OSHA  
405 Capitol Street, Room 407  
Charleston, WV 25301  
(304) 347-5937

US Department of Labor - OSHA  
1648 Tri Parkway  
Appleton, WI 54914  
(920) 734-4521

US Department of Labor - OSHA  
Federal Building U.S. Courthouse  
500 Barstow Street, Room B-9  
Eau Claire, WI 54701  
(715) 832-9019

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US Department of Labor - OSHA  
4802 E. Broadway  
Madison, WI 53716  
(608) 441-5388

US Department of Labor - OSHA  
Henry S. Reuss Bldg.  
310 West Wisconsin Ave.  
Suite 1180  
Milwaukee, WI 53202  
(414) 297-3315

# States with Approved Plans

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Commissioner  
Alaska Department of Labor  
1111 West 8th Street  
Room 306  
P.O. Box 21149  
Juneau, AK 99802-1149  
(907) 465-2700

Director  
Industrial Commission  
of Arizona  
800 W. Washington  
Phoenix, AZ 85007  
(602) 542-5795

Director  
California Department  
of Industrial Relations  
455 Golden Gate Avenue  
10th Floor  
San Francisco, CA 94102  
(415) 703-5050

Commissioner  
Connecticut Department of Labor  
200 Folly Brook Boulevard  
Wethersfield, CT 06109  
(860) 566-2211

Director  
Connecticut Department of Labor  
38 Wolcott Hill Road  
Wethersfield, CT 06109  
(860) 566-4550

Director  
Hawaii Department of Labor  
and Industrial Relations  
830 Punchbowl Street  
Honolulu, HI 96831  
(808) 586-8844

Commissioner  
Indiana Department of Labor  
State Office Building  
402 West Washington Street  
Room W195  
Indianapolis, IN 46204  
(317) 232-2378

Commissioner  
Iowa Division of Labor Services  
1000 E. Grand Avenue  
Des Moines, IA 50319  
(515) 281-3447

Secretary  
Kentucky Labor Cabinet  
1047 U.S. Highway, 127 South, Suite 2  
Frankfort, KY 40601  
(502) 564-3070

Commissioner  
Maryland Division of Labor  
and Industry  
Department of Labor Licensing  
and Regulation  
1100 N. Eutaw Street, Room 613  
Baltimore, MD 21201-2206  
(410) 767-2215

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Director  
Michigan Department of Consumer  
and Industry Services  
4th Floor, Law Building  
P.O. Box 30004  
Lansing, MI 48909  
(517) 373-7230

Commissioner  
Minnesota Department of Labor  
and Industry  
443 Lafayette Road  
St. Paul, MN 55155  
(651) 296-2342

Adminstrator  
Nevada Division of Industrial  
Relations  
400 West King Street  
Carson City, NV 89703  
(702) 687-3032

Secretary  
New Mexico Environment Department  
1190 St. Francis Drive  
P.O. Box 26110  
Santa Fe, NM 87502  
(505) 827-2850

Commissioner  
New York Department of Labor  
W. Averell Harriman State Office  
Building - 12, Room 500  
Albany, NY 12240  
(518) 457-2741

Commissioner  
North Carolina Department of Labor  
4 West Edenton Street  
Raleigh, NC 27601-1092  
(919) 807-2900

Adminstrator  
Oregon Department of Consumer  
& Business Services  
Occupational Safety and Health  
Division (OR-OSHA)  
350 Winter Street, NE, Room 430  
Salem, OR 97310-0220  
(503) 378-3272

Secretary  
Puerto Rico Secretary of Labor  
and Human Resources  
Department of Labor and Human  
Resources  
Prudencio Rivera Martinez Building  
505 Munoz Rivera Avenue  
Hato Rey, PR 00918  
(787) 754-2119

Director  
South Carolina Department of Labor  
Licensing and Regulation  
Koger Office Park, Kingstree Building  
110 Centerview Drive  
P.O. Box 11329  
Columbia, SC 29210  
(803) 896-4300

Commissioner  
Tennessee Department of Labor  
710 James Robertson Parkway  
Nashville, TN 37243-0659  
(615) 741-2582

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Commissioner  
Labor Commission of Utah  
160 East 300 South, 3rd Floor  
P.O. Box 146650  
Salt Lake City, UT 84114-6650  
(801) 530-6880

Commissioner  
Vermont Department of Labor  
and Industry  
National Life Building - Drawer 20  
120 State Street  
Montpelier, VT 05620-3401  
(802) 828-2288

Commissioner  
Virginia Department of Labor  
and Industry  
Powers-Taylor Building  
13 South 13th Street  
Richmond, VA 23219  
(804) 786-2377

Commissioner  
Virgin Islands Department of Labor  
2203 Church Street  
Christiansted  
St. Croix, VI 00820-4660  
(340) 773-1990

Director  
Washington Department of Labor  
and Industries  
P.O. Box 44001  
Olympia, WA 98504-4001  
(360) 902-4200

Administrator  
Worker's Safety and Compensation  
Division (WSC)  
Wyoming Department of Employment  
Herschler Building, 2nd Floor East  
122 West 25th Street  
Cheyenne, WY 82002  
(307) 777-7786

# OSHA Consultation Projects

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Safety State Program University of Alabama  
425 Martha Parham West  
P.O. Box 870388  
Tuscaloosa, AL 35487  
(205) 348-3033

Consultation Section  
ADOL/AKOSH  
3301 Eagle Street, Suite 305  
P.O. Box 107022  
Anchorage, AK 99510  
(907) 269-4957

Consultation and Training  
Division of Occupational Safety and Health  
Industrial Commission of Arizona  
800 West Washington  
Phoenix, AZ 85007-9070  
(602) 542-5795

OSHA Consultation  
Arkansas Department of Labor  
10421 West Markham  
Little Rock, AR 72205  
(501) 682-4522

CAL/OSHA Consultation Service  
Department of Industrial Relations  
455 Golden Gate Avenue  
10th Floor  
San Francisco, CA 94102  
(415) 703-5270

Occupational Safety and Health Section  
Colorado State University  
115 Environmental Health Building  
Fort Collins, CO 80523  
(970) 491-6151

Division of Occupational Safety and Health  
Connecticut Department of Labor  
38 Wolcott Hill Road  
Wethersfield, CT 06109  
(860) 566-4550

Occupational Safety and Health  
Division of Industrial Affairs  
Delaware Department of Labor  
4425 Market Street  
Wilmington, DE 19802  
(302) 761-8219

Office of Occupational Safety and Health  
D.C. Department of Employment Services  
950 Upshur Street, N.W.  
Washington, DC 20011  
(202) 576-6339

7(c)(1) Onsite Consultation Program,  
Division of Safety  
Florida Department of Labor  
and Employment Security  
2002 St. Augustine Road  
Building E, Suite 45  
Tallahassee, FL 32399-0663  
(850) 922-8955

7(c)(1) Onsite Consultation Program  
Georgia Institute of Technology  
O'Keefe Building - Room 22  
Atlanta, GA 30332  
(404) 894-2643

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OSHA Onsite Consultation  
Department of Labor, Government  
of Guam  
P.O. Box 9970  
Tamuning, GU 96931  
011-(671) 475-0136

7(c)(1) Consultation Program  
Iowa Bureau of Labor  
2016 DMACC Boulevard  
Building 17, Room 10  
Ankeny, IA 50021  
(515) 965-7162

Consultation and Training Branch  
Dept of Labor and Industrial Relations  
830 Punchbowl Street  
Honolulu, HI 96831  
(808) 586-9100

Kansas 7(c)(1) Consultation Program  
Kansas Department of Human Resources  
512 South West 6th Street  
Topeka, KS 66603-3150  
(785) 296-7476

Safety and Health Consultation Program  
Boise State University  
Department of Health Studies  
1910 University Drive  
Boise, ID 83725  
(208) 426-3283

Division of Education & Training  
Kentucky Labor Cabinet  
1047 U.S. Highway 127, South  
Frankfort, KY 40601  
(502) 564-6895

Illinois Onsite Consultation  
Industrial Service Division  
Department of Commerce & Community Affairs  
State of Illinois Center  
100 West Randolph St.  
Suite 3-400  
Chicago, IL 60601  
(312) 814-2337

7(c)(1) Consultation Program  
Louisiana Dept. of Labor  
1001 N. 23rd Street, Room 230  
P.O. Box 94094  
Baton Rouge, LA 70804-9094  
(225) 342-9601

Division of Labor  
Bureau of Safety, Education  
and Training  
402 West Washington  
Room W195  
Indianapolis, IN 46204-2287  
(317) 232-2688

Division of Industrial Safety  
Maine Bureau of Labor Stds.  
Workplace Safety & Health Division  
State House Station #45  
Augusta, ME 04333-0045  
(207) 624-6460

MOSH Consultation Services  
312 Marshall Avenue, Room 600  
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Texas Workers' Compensation Commission  
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Workplace Safety and Health  
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(*S*) — *Safety*

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# Chemical Hazard Communication



U.S. Department of Labor  
Occupational Safety and Health Administration

OSHA 3084  
1998 (Revised)

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This informational booklet is intended to provide a generic, non-exhaustive overview of a particular standards-related topic. This publication does not itself alter or determine compliance responsibilities, which are set forth in OSHA standards themselves and the *Occupational Safety and Health Act*. Moreover, because interpretations and enforcement policy may change over time, for additional guidance on OSHA compliance requirements, the reader should consult current administrative interpretations and decisions by the Occupational Safety and Health Review Commission and the courts.

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1-800-326-2577.

# Chemical Hazard Communication

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U.S. Department of Labor  
Alexis M. Herman, Secretary

Occupational Safety and Health Administration  
Charles N. Jeffress, Assistant Secretary

OSHA 3084  
1998 (Revised)

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Under the provisions of the Hazard Communication Standard, employers are responsible for informing employees of the hazards and the identities of workplace chemicals to which they are exposed.

About 32 million workers work with and are potentially exposed to one or more chemical hazards. There are an estimated 650,000 existing chemical products, and hundreds of new ones being introduced annually. This poses a serious problem for exposed workers and their employers.

Chemical exposure may cause or contribute to many serious health effects such as heart ailments, central nervous system, kidney and lung damage, sterility, cancer, burns, and rashes. Some chemicals may also be safety hazards and have the potential to cause fires and explosions and other serious accidents.

Because of the seriousness of these safety and health problems, and because many employers and employees know little or nothing about them, the Occupational Safety and Health Administration (OSHA) issued the Hazard Communication Standard. The basic goal of the standard is to be sure employers and employees know about work hazards and how to protect themselves; this should help to reduce the incidence of chemical source illness and injuries.

The Hazard Communication Standard establishes uniform requirements to make sure that the hazards of all chemicals imported into, produced, or used in U.S. workplaces are evaluated, and that this hazard information is transmitted to affected employers and exposed employees.

Employers and employees covered by an OSHA-approved state safety and health plan should check with their state agency, which may be enforcing standards and other procedures “at least as effective as,” but not always identical to, federal requirements. See also pages 13 and 18 of this publication for more information on state plans.

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Basically, the hazard communication standard is different from other OSHA health rules because it covers all hazardous chemicals. The rule also incorporates a “downstream flow of information,” which means that producers of chemicals have the primary responsibility for generating and disseminating information, whereas users of chemicals must obtain the information and transmit it to their own employees. In general, it works like this:

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**Chemical  
Manufacturers/  
Importers**

- Determine the hazards of each product.

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**Chemical  
Manufacturers/  
Importers/  
Distributors**

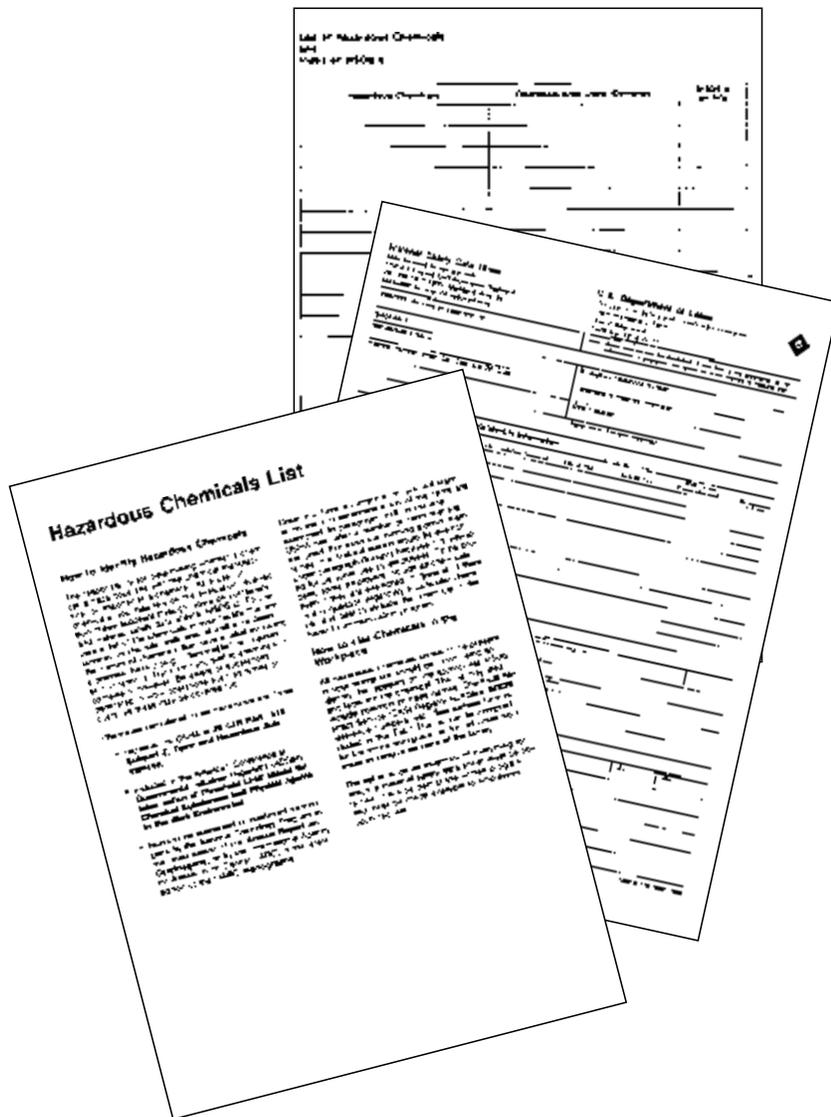
- Communicate the hazard information and associated protective measures downstream to customers through labels and MSDSs.

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**Employers**

- Identify and list hazardous chemicals in their workplaces.
- Obtain MSDSs and labels for each hazardous chemical, if not provided by the manufacturer, importer, or distributor.
- Develop and implement a written hazard communication program, including labels, MSDSs, and employee training, on the list of chemicals, MSDSs and label information.
- Communicate hazard information to their employees through labels, MSDSs, and formal training programs.

OSHA's standard (*Title 29, Code of Federal Regulations, Part 1910.1200, 1915.99, 1917.28, 1918.90, and 1926.59*) applies to general industry, shipyard, marine terminals, longshoring, and construction employment and covers chemical manufacturers, importers, employers, and employees exposed to chemical hazards.



---

The quality of the hazard communication program depends on the adequacy and accuracy of the assessment of hazards in the workplace. Chemical manufacturers and importers are required to review available scientific evidence concerning the hazards of the chemicals they produce or import, and to report the information they find to their employees and to employers who distribute or use their products. Downstream employers can rely on the evaluations performed by the chemical manufacturers or importers to establish the hazards of the chemicals they use.

The chemical manufacturers, importers, and any employers who choose to evaluate hazards are responsible for the quality of the hazard determinations they perform. Each chemical must be evaluated for its potential to cause adverse health effects and its potential to pose physical hazards such as flammability. (Definitions of hazards covered are included in the standard, see 1910.1200(c).) Chemicals that are listed in one of the following sources are to be considered hazardous in all cases:

- *29 CFR 1910, Subpart Z, Toxic and Hazardous Substances*, Occupational Safety and Health Administration (OSHA), and
- *Threshold Limit Values for Chemical Substances and Physical Agents in the Work Environment*, American Conference of Governmental Industrial Hygienists (ACGIH).

In addition, chemicals that have been evaluated and found to be a suspect or confirmed carcinogen in the following sources must be reported as such:

- National Toxicology Program (NTP), *Annual Report on Carcinogens*,
- International Agency for Research on Cancer (IARC), *Monographs*, and
- Regulated by OSHA as a carcinogen.

---

A written hazard communication program ensures that all employers receive the information they need to inform and train their employees properly and to design and put in place employee protection programs. It also provides necessary hazard information to employees, so they can participate in, and support, the protective measures in place at their workplaces.

Employers therefore must develop, implement, and maintain at the workplace a written, comprehensive hazard communication program that includes provisions for container labeling, collection and availability of material safety data sheets, and an employee training program. It also must contain a list of the hazardous chemicals, the means the employer will use to inform employees of the hazards of non-routine tasks (for example, the cleaning of reactor vessels), and the hazards associated with chemicals in unlabeled pipes. If the workplace has multiple employers onsite (for example, a construction site), the rule requires these employers to ensure that information regarding hazards and protective measures be made available to the other employers onsite, where appropriate. In addition, all covered employers must have a written hazard communication program to get hazard information to their employees through labels on containers, MSDSs, and training.

The written program does not have to be lengthy or complicated, and some employers may be able to rely on existing hazard communication programs to comply with the above requirements. The written program must be available to employees, their designated representatives, the Assistant Secretary of Labor for Occupational Safety and Health, and the Director of the National Institute for Occupational Safety and Health (NIOSH).

(Sample programs are available in the Compliance Directive CPL 2-2.38 D, Appendix E. Also, see *Hazard Communication—A Compliance Kit* (OSHA 3104) (a reference guide to step-by-step requirements for compliance with the OSHA standard.) The kit can be obtained from the Government Printing Office. (See **OSHA Related Publications** for ordering information.)

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Chemical manufacturers and importers must convey the hazard information they learn from their evaluations to downstream employers by means of labels on containers and material safety data sheets (MSDSs).

Also, chemical manufacturers, importers, and distributors must be sure that containers of hazardous chemicals leaving the workplace are labeled, tagged, or marked with the identity of the chemical, appropriate hazard warnings, and the name and address of the manufacturer or other responsible party.

In the workplace, each container must be labeled, tagged, or marked with the identity of hazardous chemicals contained therein, and must show hazard warnings appropriate for employee protection. The hazard warning can be any type of message, words, pictures, or symbols that provide at least general information regarding the hazards of the chemical(s) in the container and the targeted organs affected, if applicable. Labels must be legible, in English (plus other languages, if desired), and prominently displayed.

Exemptions to the requirement for in-plant individual container labels are as follows:

- Employers can post signs or placards that convey the hazard information if there are a number of stationary containers within a work area that have similar contents and hazards.
- Employers can substitute various types of standard operating procedures, process sheets, batch tickets, blend tickets, and similar written materials for container labels on stationary process equipment if they contain the same information and the written materials are readily accessible to employees in the work area.
- Employers are not required to label portable containers into which hazardous chemicals are transferred from labeled containers and that are intended only for the immediate use of the employee who makes the transfer.
- Employers are not required to label pipes or piping systems.

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The MSDS is a detailed information bulletin prepared by the manufacturer or importer of a chemical that describes the physical and chemical properties, physical and health hazards, routes of exposure, precautions for safe handling and use, emergency and first-aid procedures, and control measures.

Chemical manufacturers and importers must develop an MSDS for each hazardous chemical they produce or import, and must provide the MSDS automatically at the time of the initial shipment of a hazardous chemical to a downstream distributor or user. Distributors also must ensure that downstream employers are similarly provided an MSDS.

Each MSDS must be in English and include information regarding the specific chemical identity of the hazardous chemical(s) involved and the common names. In addition, information must be provided on the physical and chemical characteristics of the hazardous chemical; known acute and chronic health effects and related health information; exposure limits; whether the chemical is considered to be a carcinogen by NTP, IARC, or OSHA; precautionary measures; emergency and first-aid procedures; and the identification (name, address, and telephone number) of the organization responsible for preparing the sheet.

Copies of the MSDS for hazardous chemicals in a given worksite are to be readily accessible to employees in that area. As a source of detailed information on hazards, they must be readily available to workers during each workshift. MSDSs have no prescribed format. ANSI standard no. Z400.1—*Material Safety Data Sheet Preparation*—may be used. The non-mandatory MSDS form (OSHA 174) also may be used as a guide and a copy can be obtained from OSHA field offices.

Employers must prepare a list of all hazardous chemicals in the workplace. When the list is complete, it should be checked against the collected MSDSs that the employer has been sent.

If there are hazardous chemicals used for which no MSDS has been received, the employer must contact the supplier, manufacturer, or importer to obtain the missing MSDS. A record of the contact must be maintained.

Employers must establish a training and information program for employees who are exposed to hazardous chemicals in their work area at the time of initial assignment and whenever a new hazard is introduced into their work area.

At a minimum, the discussion topics must include the following:

- The hazard communication standard and its requirements.
- The components of the hazard communication program in the employees' workplaces.
- Operations in work areas where hazardous chemicals are present.
- Where the employer will keep the written hazard evaluation procedures, communications program, lists of hazardous chemicals, and the required MSDS forms.

The employee training plan must consist of the following elements:

- How the hazard communication program is implemented in that workplace, how to read and interpret information on labels and the MSDS, and how employees can obtain and use the available hazard information.
- The hazards of the chemicals in the work area. (The hazards may be discussed by individual chemical or by hazard categories such as flammability.)
- Measures employees can take to protect themselves from the hazards.
- Specific procedures put into effect by the employer to provide protection such as engineering controls, work practices, and the use of personal protective equipment (PPE).
- Methods and observations—such as visual appearance or smell—workers can use to detect the presence of a hazardous chemical to which they may be exposed.

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A “trade secret” is something that gives an employer an opportunity to obtain an advantage over competitors who do not know about the trade secret or who do not use it. For example, a trade secret may be a confidential device, pattern, information, or chemical make-up. Chemical industry trade secrets are generally formulas, process data, or a “specific chemical identity.” The latter is the type of trade secret information referred to in the Hazard Communication Standard. The term includes the chemical name, the Chemical Abstracts Services (CAS) Registry Number, or any other specific information that reveals the precise designation. It does not extend to PELs or TLVs. If the hazardous chemical or a component thereof has a PEL or TLV, this must be reflected on the MSDS.

The standard strikes a balance between the need to protect exposed employees and the employer’s need to maintain the confidentiality of a bona fide trade secret. This is achieved by providing for limited disclosure to health professionals who are furnishing medical or other occupational health services to exposed employees, employees and their designated representatives, under specified conditions of need and confidentiality.

## 10 What About Disclosure in a Medical Emergency?

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The chemical manufacturer, importer, or employer must immediately disclose the specific chemical identity of a hazardous chemical to a treating physician or nurse when the information is needed for proper emergency or first-aid treatment. As soon as circumstances permit, the chemical manufacturer, importer, or employer may obtain a written statement of need and a confidentiality agreement.

Under the contingency described here, the treating physician or nurse has the ultimate responsibility for determining that a medical emergency exists. At the time of the emergency, the professional judgment of the physician or nurse regarding the situation must form the basis for triggering the immediate disclosure requirement. Because the chemical manufacturer, importer, or employer can demand a written statement of need and a confidentiality agreement to be completed after the emergency is abated, further disclosure of the trade secret can be effectively controlled.

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In non-emergency situations, chemical manufacturers, importers, or employers must disclose the withheld specific chemical identity to health professionals providing medical or other occupational health services to exposed employees, and to employees and their designated representatives, if certain conditions are met. In this context, “health professionals” include physicians, occupational health nurses, industrial hygienists, toxicologists, or epidemiologists.

The request for information must be in writing and must describe with reasonable detail the medical or occupational health need for the information. The request will be considered if the information will be used for one or more of the following activities:

- To assess the hazards of the chemicals to which employees will be exposed.
- To conduct or assess sampling of the workplace atmosphere to determine employee exposure levels.
- To conduct pre-assignment or periodic medical surveillance of exposed employees.
- To provide medical treatment to exposed employees.
- To select or assess appropriate personal protective equipment for exposed employees.
- To design or assess engineering controls or other protective measures for exposed employees.
- To conduct studies to determine the health effects of exposure.

The health professional, employee, or designated representative must also specify why alternative information is insufficient. The request for information must explain in detail why disclosure of the specific chemical identity is essential, and include the procedures to be used to protect the confidentiality of the information. It must include an agreement not to use the information for any purpose other than the health need stated or to release it under any circumstances, except to OSHA.

The standard further describes in detail the steps that will be followed in the event that an employer decides not to disclose the specific chemical identity requested by the health professional, employee, or designated representative. (See 1910.1200( i)(7).)

## 12 How Can OSHA Help Employers Comply?

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OSHA offers a variety of programs and initiatives to help employers comply with the agency's standards or guidelines. The following is a brief summary of some of these efforts.

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### **Safety and Health Program Management Guidelines**

Effective management of worker safety and health protection is a decisive factor in reducing the extent and severity of work-related injuries and illnesses and their related costs. To assist employers and employees in developing effective safety and health programs, OSHA published recommended *Safety and Health Program Management Guidelines (Federal Register 54 (18): 3908-3916, January 26, 1989)*. These voluntary guidelines apply to all places of employment covered by OSHA.

The guidelines identify four general elements that are critical to the development of a successful safety and health management program:

- Management commitment and employee involvement,
- Worksite analysis,
- Hazard prevention and control, and
- Safety and health training.

The guidelines recommend specific action, under each of these general elements to achieve an effective safety and health program. A single free copy of the guidelines can be obtained from the U.S. Department of Labor, OSHA Publications, P.O. Box 37535, Washington, DC 20013-7535, by sending a self-addressed mail label with your request.

(Available on the World Wide Web under Federal Register, <http://www.osha.gov/>).

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## State Programs

The *Occupational Safety and Health Act of 1970* encourages states to develop and operate their own job safety and health plans. States with plans approved under section 18(b) of the Act must adopt standards and enforce requirements that are at least as effective as federal requirements. There are currently 25 state plan states and territories: 23 of these states administer plans covering both private and public (state and local government) employees; the other 2 states, Connecticut and New York, cover public employees only.

Plan states must adopt standards comparable to federal requirements within 6 months of a federal standard's promulgation. Until a state standard is promulgated, OSHA will provide interim enforcement assistance, as appropriate, in these states. A listing of approved state plans appears at the end of this publication.

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## Consultation Services

Consultation assistance is available on request to employers who want help in establishing and maintaining a safe and healthful workplace. Largely funded by OSHA, the service is provided at no cost to the employer. Primarily developed for smaller employers with more hazardous operations, the consultation service is delivered by state government agencies or universities employing professional safety and health consultants. Comprehensive assistance includes an appraisal of all mechanical systems, physical work practices and occupational safety and health hazards of the workplace, and all aspects of the employer's present job safety and health program.

In addition, the service offers assistance to employers in developing and implementing an effective safety and health program. No penalties are proposed or citations issued for any safety or health problems identified by the consultant. The service is confidential.

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For more information concerning consultation assistance, see the list of consultation projects at the end of this publication.

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### **Voluntary Protection Programs (VPPs)**

Voluntary Protection Programs and onsite consultation services, when coupled with an effective enforcement program, expand worker protection to help meet the goals of the OSH Act. The three VPPs—Star, Merit, and Demonstration—are designed to recognize outstanding achievement by companies that have successfully incorporated comprehensive safety and health programs into their total management system. The VPPs motivate others to achieve excellent safety and health results in the same outstanding way as they establish a cooperative relationship among employers, employees, and OSHA.

For additional information on VPPs and how to apply, contact the OSHA area or regional offices listed at the end of this publication.

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### **Training and Education**

OSHA's area offices offer a variety of information services, such as publications, audiovisual aids, technical advice, and speakers for special engagements. OSHA's Training Institute in Des Plaines, IL, provides basic and advanced courses in safety and health for federal and state compliance officers, state consultants, federal agency personnel, and private sector employers, employees, and their representatives.

The OSHA Training Institute also has established OSHA Training Institute Education Centers to address the increased demand for its courses from the private sector and from other federal agencies. These centers are nonprofit colleges, universities, and other organizations that have been selected after a competition for participation in the program. They are located in various parts of the U.S.

OSHA also provides funds to nonprofit organizations, through grants, to conduct workplace training and education in subjects

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where OSHA believes there is a lack of workplace training. Grants are awarded annually and grant recipients are expected to contribute 20 percent of the total grant cost.

For more information on grants, training and education, contact the OSHA Training Institute, Office of Training and Education, 1555 Times Drive, Des Plaines, IL 60018, (847) 297-4810.

For further information on any OSHA program, contact your nearest OSHA area or regional office listed at the end of this publication.

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### **Electronic Information**

Internet—OSHA standards, interpretations, directives, and additional information are now on the World Wide Web at <http://www.osha.gov>.

CD-ROM—A wide variety of OSHA materials—including standards, interpretations, directives, and more—can be purchased on CD-ROM from the U.S. Government Printing Office, Superintendent of Documents.

To order, write to the Superintendent of Documents, P.O. Box 371954, Pittsburgh, PA 15250-7954. Specify *OSHA Regulations, Documents and Technical Information on CD ROM, (ORDT)*, S/N 729-1300000-5. The price is \$38 per year (\$47.50 foreign); a single copy is \$15.00 (\$18.75 foreign). The phone number is (202) 512-1800.

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### **Emergencies**

For life-threatening situations, call (800) 321-OSHA. Complaints will go immediately to the nearest OSHA area or state office for help.

For further information on any OSHA program, contact your nearest OSHA area or regional office listed at the end of this publication.

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Yes. OSHA has developed a variety of materials and publications to help employers and employees develop and implement effective hazard communication programs. Lists of products, services, and other resources are as follows:

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### **OSHA Related Publications**

A single free copy of the following publications can be obtained from the U.S. Department of Labor, OSHA Publications Office, P.O. Box 37535, Washington, DC 20013-7535, (202) 219-4677, (202) 219-9266 (fax), or from the nearest OSHA regional or area office listed at the end of this publication. Send a self-addressed mailing label with your request.

These and other products can be ordered or downloaded from OSHA's Web Site at <http://www.osha.gov>.

*All About OSHA*—OSHA 2056

*Consultation Services for the Employer*—OSHA 3047

*Employee Workplace Rights*—OSHA 3021

*How to Prepare for Workplace Emergencies*—OSHA 3088

*OSHA Inspections*—OSHA 2098

*Personal Protective Equipment*—OSHA 3077

*Respiratory Protection*—OSHA 3079

*Hazard Communication; Final Rule. Federal Register* 59(27): 6126-6184, February 9, 1994.

The following publications are available from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402, phone (202) 512-1800, fax (202) 512-2250. Include GPO Order No. and make checks payable to Superintendent of Documents.

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***Hazard Communication—A Compliance Kit—***

OSHA 3104 (A reference guide to step-by-step requirements for compliance with the OSHA standard.)

Order No. 029-016-00147-6; cost \$18.00 domestic; \$22.50 foreign.

***Hazard Communication Guidelines for Compliance—***

OSHA 3111

Order No. 029-016-00163-8; cost \$1.50.

***Job Hazard Analysis—OSHA 3071***

Order No. 029-016-00142-5; cost \$1.00.

***Training Requirements in OSHA Standards and Training Guidelines—OSHA 2254***

Order No. 029-016-00160-3; cost \$6.00.

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**National Technical Information Services Related Materials**

The following materials are available from the National Technical Information Services, 5285 Port Royal Road, Springfield, VA 22161, phone (703) 605-6000. Web site is <http://www.ntis.gov>.

***Eye Injuries and Eye Protection Equipment—***

AVA 14624, SSOO, \$99.

***Safety and Health Factors for Working with Formaldehyde -*** AVA 17500, SSOO, \$99.

***Safety and Health Factors with Temperature Stress—*** AVA 14626, SSOO, \$99.

***Safety and Health Factors for Working with Silica—*** AVA 20000, SSOO, \$90.

***Safety and Health Requirements for Working with Carbon Monoxide—*** AVA 19005, SSOO, \$139.

***Safety and Health Factors in Welding and Cutting—*** AVA 18463, VNB1, \$99.

**Commissioner**

Alaska Department of Labor  
1111 West 8th Street  
Room 306  
Juneau, AK 99801  
(907) 465-2700

**Director**

Industrial Commission  
of Arizona  
800 W. Washington  
Phoenix, AZ 85007  
(602) 542-5795

**Director**

California Department  
of Industrial Relations  
45 Fremont Street  
San Francisco, CA 94105  
(415) 972-8835

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Connecticut Department  
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Wethersfield, CT 06109  
(860) 566-5123

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Honolulu, HI 96813  
(808) 586-8844

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Indiana Department of Labor  
State Office Building  
402 West Washington Street  
Room W195  
Indianapolis, IN 46204  
(317) 232-2378

**Commissioner**

Iowa Division of Labor  
Services  
1000 E. Grand Avenue  
Des Moines, IA 50319  
(515) 281-3447

**Secretary**

Kentucky Labor Cabinet  
1047 U.S. Highway, 127  
South, STE 2  
Frankfort, KY 40601  
(502) 564-3070

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Maryland Division of Labor  
and Industry  
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Licensing and Regulation  
1100 N. Eutaw Street,  
Room 613  
Baltimore, MD 21201-2206  
(410) 767-2215

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Michigan Department  
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and Industry Services  
4th Floor, Law Building  
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Lansing, MI 48909  
(517) 373-7230

**Commissioner**

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443 Lafayette Road  
St. Paul, MN 55155  
(612) 296-2342

**Administrator**

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(702) 687-3032

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New Mexico Environment  
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P.O. Box 26110  
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(505) 827-2850

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W. Averell Harriman State  
Office  
Building - 12, Room 500  
Albany, NY 12240  
(518) 457-2741

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North Carolina Department  
of Labor  
319 Chapanoke Road  
Raleigh, NC 27603  
(919) 662-4585

**Administrator**

Department of Consumer  
& Business Services  
Occupational Safety  
and Health Division  
(OR-OSHA)  
350 Winter Street, NE,  
Room 430  
Salem, OR 97310-0220  
(503) 378-3272

**Secretary**

Puerto Rico Department  
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Resources  
Prudencio Rivera Martinez  
Building  
505 Munoz Rivera Avenue  
Hato Rey, PR 00918  
(809) 754-2119

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South Carolina Department  
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Licensing and Regulation  
Koger Office Park, Kingstree  
Building  
110 Centerview Drive  
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Columbia, SC 29210  
(803) 896-4300

**Commissioner**

Tennessee Department  
of Labor  
710 James Robertson  
Parkway  
Nashville, TN 37243-0659  
(615) 741-2582

**Commissioner**

Industrial Commission  
of Utah  
160 East 300 South, 3rd Floor  
P.O. Box 146650  
Salt Lake City, UT 84114-  
6650  
(801) 530-6898

**Commissioner**

Vermont Department  
of Labor and Industry  
National Life Building -  
Drawer 20  
120 State Street  
Montpelier, VT 05620-3401  
(802) 828-2288

**Commissioner**

Virginia Department of Labor  
and Industry  
Powers-Taylor Building  
13 South 13th Street  
Richmond, VA 23219  
(804) 786-2377

**Commissioner**

Virgin Islands Department  
of Labor  
2131 Hospital Street, Box 890  
Christiansted  
St. Croix, VI 00820-4666  
(809) 773-1994

**Director**

Washington Department  
of Labor and Industries  
General Administrative  
Building  
P.O. Box 44001  
Olympia, WA 98504-4001  
(360) 902-4200

**Administrator**

Worker's Safety and  
Compensation Division (WSC)  
Wyoming Department  
of Employment  
Herschler Building,  
2nd Floor East  
122 West 25th Street  
Cheyenne, WY 82002  
(307) 777-7786

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<b>State</b>	<b>Telephone</b>
Alabama .....	(205) 348-7136
Alaska .....	(907) 269-4957
Arizona .....	(602) 542-5795
Arkansas .....	(501) 682-4522
California .....	(415) 972-8515
Colorado .....	(970) 491-6151
Connecticut .....	(860) 566-4550
Delaware .....	(302) 761-8219
District of Columbia .....	(202) 576-6339
Florida .....	(904) 488-3044
Georgia .....	(404) 894-2643
Guam .....	011 (671) 475-0136
Hawaii .....	(808) 586-9100
Idaho .....	(208) 385-3283
Illinois .....	(312) 814-2337
Indiana .....	(317) 232-2688
Iowa .....	(515) 965-7162
Kansas .....	(913) 296-7476
Kentucky .....	(502) 564-6895
Louisiana .....	(504) 342-9601
Maine .....	(207) 624-6460
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Massachusetts .....	(617) 727-3982
Michigan .....	(517) 322-1817 (H)
.....	(517) 322-1809 (S)
Minnesota .....	(612) 297-2393
Mississippi .....	(601) 987-3981
Missouri .....	(573) 751-3403
Montana .....	(406) 444-6418
Nebraska .....	(402) 471-4717
Nevada .....	(702) 486-5016
New Hampshire .....	(603) 271-2024
New Jersey .....	(609) 292-2424
New Mexico .....	(505) 827-4230
New York .....	(518) 457-2481
North Carolina .....	(919) 662-4644

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Ohio .....	(614) 644-2246
Oklahoma .....	(405) 528-1500
Oregon .....	(503) 378-3272
Pennsylvania .....	(412) 357-2561
Puerto Rico .....	(787) 754-2188
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Texas .....	(512) 440-3809
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Virginia .....	(804) 786-6359
Virgin Islands .....	(809) 772-1315
Washington .....	(360) 902-5638
West Virginia .....	(304) 558-7890
Wisconsin .....	(608) 266-8579 (H)
.....	(414) 521-5063 (S)
Wyoming .....	(307) 777-7786

(H) - Health

(S) - Safety

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<b>Area</b>	<b>Telephone</b>
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Albuquerque, NM .....	(505) 248-5302
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Anchorage, AK .....	(907) 271-5152
Appleton, WI .....	(414) 734-4521
Austin, TX .....	(512) 916-5783
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Baltimore, MD .....	(410) 962-2840
Bangor, ME .....	(207) 941-8177
Baton Rouge, LA .....	(504) 389-0474
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Bellevue, WA .....	(206) 553-7520
Billings, MT .....	(406) 247-7494
Birmingham, AL .....	(205) 731-1534
Bismarck, ND .....	(701) 250-4521
Boise, ID .....	(208) 334-1867
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Bridgeport, CT .....	(203) 579-5581
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Charleston, WV .....	(304) 347-5937
Cincinnati, OH .....	(513) 841-4132
Cleveland, OH .....	(216) 522-3818
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Columbus, OH .....	(614) 469-5582
Concord, NH .....	(603) 225-1629
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Dallas, TX .....	(214) 320-2400
Denver, CO .....	(303) 844-5285
Des Plaines, IL .....	(847) 803-4800
Des Moines, IA .....	(515) 284-4794
Englewood, CO .....	(303) 843-4500
Erie, PA .....	(814) 833-5758
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Peoria, IL .....	(309) 671-7033
Philadelphia, PA .....	(215) 597-4955
Phoenix, AZ .....	(602) 640-2007
Pittsburgh, PA .....	(412) 395-4903
Portland, OR .....	(503) 326-2251
Providence, RI .....	(401) 528-4669
Raleigh, NC .....	(919) 856-4770
Salt Lake City, UT .....	(801) 487-0073
Sacramento, CA .....	(916) 566-7470
San Diego, CA .....	(619) 557-2909
Savannah, GA .....	(912) 652-4393
Smyrna, GA .....	(770) 984-8700
Springfield, MA .....	(413) 785-0123
St. Louis, MO .....	(314) 425-4249
Tampa, FL .....	(813) 626-1177
Tarrytown, NY .....	(914) 524-7510
Toledo, OH .....	(419) 259-7542
Tucker, GA .....	(770) 493-6644
Westbury, NY .....	(516) 334-3344
Wichita, KS .....	(316) 269-6644
Wilkes-Barre, PA .....	(717) 826-6538
Wilmington, DE .....	(302) 573-6115

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**Region I**

(CT,\* MA, ME, NH, RI, VT\*)  
JKF Federal Building  
Room E-340  
Boston, MA 02203  
Telephone: (617) 565-9860

**Region II**

(NJ, NY,\* PR,\* VI\*)  
201 Varick Street  
Room 670  
New York, NY 10014  
Telephone: (212) 337-2378

**Region III**

(DC, DE, MD,\* PA, VA,\* WV)  
Gateway Building, Suite 2100  
3535 Market Street  
Philadelphia, PA 19104  
Telephone: (215) 596-1201

**Region IV**

(AL, FL, GA, KY,\* MS, NC,  
SC,\* TN\*)  
Atlanta Federal Center  
61 Forsyth Street, SW, Room  
6T50  
Atlanta, GA 30303  
Telephone: (404) 562-2300

**Region V**

(IL, IN,\* MI,\* MN,\* OH, WI)  
230 South Dearborn Street  
Room 3244  
Chicago, IL 60604  
Telephone: (312) 353-2220

**Region VI**

(AR, LA, NM,\* OK, TX)  
525 Griffin Street  
Room 602  
Dallas, TX 75202  
Telephone: (214) 767-4731

**Region VII**

(IA,\* KS, MO, NE)  
City Center Square  
1100 Main Street, Suite 800  
Kansas City, MO 64105  
Telephone: (816) 426-5861

**Region VIII**

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1999 Broadway, Suite 1690  
Denver, CO 80202-5716  
Telephone: (303) 844-1600

**Region IX**

(American Samoa, AZ,\* CA,\*  
Guam, HI,\* NV,\*  
Trust Territories of the Pacific)  
71 Stevenson Street  
Room 420  
San Francisco, CA 94105  
Telephone: (415) 975-4310

**Region X**

(AK,\* ID, OR,\* WA\*)  
1111 Third Avenue  
Suite 715  
Seattle, WA 98101-3212  
Telephone: (206) 553-5930

\*These states and territories operate their own OSHA-approved job safety and health programs (Connecticut and New York plans cover public employees only). States with approved programs must have a standard that is identical to, or at least as effective as, the federal standard.

ESIVES  
STICS CLEANING AGENTS  
ETERGENTS DUSTS ETCHING  
RESINS FUELS FUNGICIDES  
S INSECTICIDES HERBICIDES  
S LEAD LYE OXALIC ACID PAI  
S SOLDERS SOLVENTS STE  
GREASING VARNISHES WATER  
ACIDS ADHESIVES AEROS  
CATALYSTS CAUSTICS CLEAN  
ASING AGENTS DETERGENTS  
MABLES FOAMING RESINS FUE  
STRIL OILS INKS INSECTICI  
SENE LACQUERS LEAD LYE  
CESS CHEMICALS RESINS  
PPERS PLASTICS PROCESS CH  
BESTOS BATTERY FLUID  
DITCH C

# OSHA: Employee Workplace Rights



U.S. Department of Labor  
Occupational Safety and Health Administration

OSHA 3021  
2000 (Reprinted)



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This informational booklet is intended to provide a generic, non-exhaustive overview of a particular standards-related topic. This publication does not itself alter or determine compliance responsibilities, which are set forth in OSHA standards themselves and the *Occupational Safety and Health Act*. Moreover, because interpretations and enforcement policy may change over time, for additional guidance on OSHA compliance requirements, the reader should consult current administrative interpretations and decisions by the Occupational Safety and Health Review Commission and the courts.

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This information will be made available to sensory impaired individuals upon request.

Voice phone: (202) 693-1999.

# OSHA: Employee Workplace Rights

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U.S. Department of Labor  
Alexis M. Herman, Secretary

Occupational Safety and Health Administration  
Charles N. Jeffress, Assistant Secretary

OSHA 3021  
2000 (Reprinted)

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The *Occupational Safety and Health (OSH) Act of 1970* created the Occupational Safety and Health Administration (OSHA) within the Department of Labor and encouraged employers and employees to reduce workplace hazards and to implement safety and health programs.

In so doing, this gave employees many new rights and responsibilities, including the right to do the following:

- Review copies of appropriate standards, rules, regulations, and requirements that the employer should have available at the workplace.
- Request information from the employer on safety and health hazards in the workplace, precautions that may be taken, and procedures to be followed if the employee is involved in an accident or is exposed to toxic substances.
- Have access to relevant employee exposure and medical records.
- Request the OSHA area director to conduct an inspection if they believe hazardous conditions or violations of standards exist in the workplace.
- Have an authorized employee representative accompany the OSHA compliance officer during the inspection tour.
- Respond to questions from the OSHA compliance officer, particularly if there is no authorized employee representative accompanying the compliance officer on the inspection “walkaround.”
- Observe any monitoring or measuring of hazardous materials and see the resulting records, as specified under the OSH Act, and as required by OSHA standards.
- Have an authorized representative, or themselves, review the Log and Summary of Occupational Injuries (OSHA No. 200) at a reasonable time and in a reasonable manner.
- Object to the abatement period set by OSHA for correcting any violation in the citation issued to the employer by

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writing to the OSHA area director within 15 working days from the date the employer receives the citation.

- Submit a written request to the National Institute for Occupational Safety and Health (NIOSH) for information on whether any substance in the workplace has potentially toxic effects in the concentration being used, and have their names withheld from the employer, if so requested.
- Be notified by the employer if the employer applies for a variance from an OSHA standard, and testify at a variance hearing, and appeal the final decision.
- Have their names withheld from their employer, upon request to OSHA, if they sign and file a written complaint.
- Be advised of OSHA actions regarding a complaint and request an informal review of any decision not to inspect or to issue a citation.
- File a Section 11(c) discrimination complaint if punished for exercising the above rights or for refusing to work when faced with imminent danger of death or serious injury and there is insufficient time for OSHA to inspect; or file a Section 31105 reprisal complaint (under the *Surface Transportation Assistance Act (STAA)*).

Pursuant to Section 18 of the Act, states can develop and operate their own occupational safety and health programs under state plans approved and monitored by Federal OSHA. States that assume responsibility for their own occupational safety and health programs must have provisions at least as effective as those of Federal OSHA, including the protection of employee rights. There are currently 25 state plans. Twenty-one states and two territories administer plans covering both private and state and local government employment; and two states cover only the public sector. All the rights and responsibilities described in this booklet are similarly provided by state programs. (See list of those states at the end of this booklet.)

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Any interested person or groups of persons, including employees, who have a complaint concerning the operation or administration of a state plan may submit a Complaint About State Program Administration (CASPA) to the appropriate OSHA regional administrator (see lists at the end of this booklet). Under CASPA procedures, the OSHA regional administrator investigates these complaints and informs the state and the complainant of these findings. Corrective action is recommended when required.



Before OSHA issues, amends or deletes regulations, the agency publishes them in the *Federal Register* so that interested persons or groups may comment.

The employer has a legal obligation to inform employees of OSHA safety and health standards that apply to their workplace. Upon request, the employer must make available copies of those standards and the OSHA law itself. If more information is needed about workplace hazards than the employer can supply, it can be obtained from the nearest OSHA area office.

Under the OSH Act, employers have a general duty to provide work and a workplace free from recognized hazards. Citations may be issued by OSHA when violations of standards are found and for violations of the general duty clause, even if no OSHA standard applies to the particular hazard.

The employer also must display in a prominent place the official OSHA poster that describes rights and responsibilities under the OSH Act.

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### **Right to Know**

Employers must establish a written, comprehensive hazard communication program that includes provisions for container labeling, material safety data sheets, and an employee training program. The program must include a list of the hazardous chemicals in each work area, the means the employer uses to inform employees of the hazards of non-routine tasks (for example, the cleaning of reactor vessels), hazards associated with chemicals in unlabeled pipes, and the way the employer will inform other employers of the hazards to which their employees may be exposed.

---

## **Access to Exposure and Medical Records**

Employers must inform employees of the existence, location, and availability of their medical and exposure records when employees first begin employment and at least annually thereafter. Employers also must provide these records to employees or their designated representatives, upon request. Whenever an employer plans to stop doing business and there is no successor employer to receive and maintain these records, the employer must notify employees of their right of access to records at least 3 months before the employer ceases to do business. OSHA standards require the employer to measure exposure to harmful substances, the employee (or representative) has the right to observe the testing and to examine the records of the results. If the exposure levels are above the limit set by the standard, the employer must tell employees what will be done to reduce the exposure.

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## **Cooperative Efforts to Reduce Hazards**

OSHA encourages employers and employees to work together to reduce hazards. Employees should discuss safety and health problems with the employer, other workers, and union representatives (if there is a union). Information on OSHA requirements can be obtained from the OSHA area office. If there is a state occupational safety and health program, similar information can be obtained from the state. OSHA provides special recognition through its Voluntary Protection Programs (VPPs) to worksites where employers and employees work together to achieve safety and health excellence (see page 16).

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If a hazard is not being corrected, an employee should contact the OSHA area office (or state program office) having jurisdiction. If the employee submits a written complaint and the OSHA area or state office determines that there are reasonable grounds for believing that a violation or danger exists, the office conducts an inspection.

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### **Employee Representative**

Under Section 8(e) of the Act, the workers' representative has a right to accompany an OSHA compliance officer (also referred to as a compliance safety and health officer, CSHO, or inspector) during an inspection. The representative must be chosen by the union (if there is one) or by the employees. Under no circumstances may the employer choose the workers' representative.

If employees are represented by more than one union, each union may choose a representative. Normally, the representative of each union will not accompany the inspector for the entire inspection, but will join the inspection only when it reaches the area where those union members work.

An OSHA inspector may conduct a comprehensive inspection of the entire workplace or a partial inspection limited to certain areas or aspects of the operation.

---

### **Helping the Compliance Officer**

Workers have a right to talk privately to the compliance officer on a confidential basis whether or not a workers' representative has been chosen.

Workers are encouraged to point out hazards, describe accidents or illnesses that resulted from those hazards, describe past worker complaints about hazards, and inform the inspector if working conditions are not normal during the inspection.

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## **Observing Monitoring**

If health hazards are present in the workplace, a special OSHA health inspection may be conducted by an industrial hygienist. This OSHA inspector may take samples to measure levels of dust, noise, fumes, or other hazardous materials.

OSHA will inform the employee representative as to whether the employer is in compliance. The inspector also will gather detailed information about the employer's efforts to control health hazards, including results of tests the employer may have conducted.

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## **Reviewing OSHA Form 200**

If the employer has more than 10 employees, the employer must maintain records of all work-related injuries and illnesses, and the employees or their representative have the right to review those records. Some industries with very low injury rates (e.g., insurance and real estate offices) are exempt from recordkeeping.

Work-related minor injuries must be recorded if they resulted in restriction of work or motion, loss of consciousness, transfer to another job, termination of employment, or medical treatment (other than first-aid). All recognized work-related illnesses and non-minor injuries also must be recorded.

## 8 After an Inspection

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At the end of the inspection, the OSHA inspector will meet with the employer and the employee representatives in a **closing conference** to discuss the abatement of any hazards that may have been found.

If it is not practical to hold a joint conference, separate conferences will be held, and OSHA will provide written summaries, on request.

During the closing conference, the employee representative may describe, if not reported already, what hazards exist, what should be done to correct them, and how long it should take. Other facts about the history of health and safety conditions at the workplace may also be provided.

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### **Challenging Abatement Period**

Whether or not the employer accepts OSHA's actions, the employee (or representative) has the right to contest the time OSHA allows for correcting a hazard.

This contest must be filed in writing with the OSHA area director within 15 working days after the citation is issued. The contest will be decided by the Occupational Safety and Health Review Commission. The Review Commission is an independent agency and is not part of the Department of Labor.

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### **Variances**

Some employers may not be able to comply fully with a new safety and health standard in the time provided due to shortages of personnel, materials, or equipment. In situations like these, employers may apply to OSHA for a temporary variance from the standard. In other cases, employers may be using methods or equipment that differ from those prescribed by OSHA, but which the employer believes are equal to or better than OSHA's requirements, and would qualify for consideration as a perma-

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nent variance. Applications for a permanent variance must basically contain the same information as those for temporary variances.

The employer must certify that workers have been informed of the variance application, that a copy has been given to the employee's representative, and that a summary of the application has been posted wherever notices are normally posted in the workplace. Employees also must be informed that they have the right to request a hearing on the application.

Employees, employers, and other interested groups are encouraged to participate in the variance process. Notices of variance application are published in the *Federal Register* inviting all interested parties to comment on the action.

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### **Confidentiality**

OSHA will not tell the employer who requested the inspection unless the complainant indicates that he or she has no objection.

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### **Review If No Inspection Is Made**

The OSHA **area director** evaluates the complaint from the employee or representative and decides whether it is valid. If the area director decides not to inspect the workplace, he or she will send a certified letter to the complainant explaining the decision and the reasons for it. Complainants must be informed that they have the right to request further clarification of the decision from the area director; if still dissatisfied, they can appeal to the OSHA regional administrator for an informal review. Similarly, a decision by an area director not to issue a citation after an inspection is subject to further clarification from the area director and to an informal review by the regional administrator.

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## **Discrimination for Using Rights**

Employees have a right to seek safety and health on the job without fear of punishment. That right is spelled out in Section 11(c) of the Act. The law says the employer “shall not” punish or discriminate against employees for exercising such rights as complaining to the employer, union, OSHA, or any other government agency about job safety and health hazards; or for participating in OSHA inspections, conferences, hearings, or other OSHA-related activities.

Although there is nothing in the OSHA law that specifically gives an employee the right to refuse to perform an unsafe or unhealthful job assignment, OSHA’s regulations, which have been upheld by the U.S. Supreme Court, provide that an employee may refuse to work when faced with an imminent danger of death or serious injury. The conditions necessary to justify a work refusal are very stringent, however, and a work refusal should be an action taken only as a last resort. If time permits, the unhealthful or unsafe condition must be reported to OSHA or other appropriate regulatory agency.

A state that is administering its own occupational safety and health enforcement program pursuant to Section 18 of the Act must have provisions as effective as those of Section 11(c) to protect employees from discharge or discrimination. OSHA, however, retains its Section 11(c) authority in all states regardless of the existence of an OSHA-approved state occupational safety and health program.

Workers believing they have been punished for exercising safety and health rights must contact the nearest OSHA office within 30 days of the time they learn of the alleged discrimination. A representative of the employee’s choosing can file the 11(c) complaint for the worker. Following a complaint, OSHA will contact the complainant and conduct an in-depth interview to determine whether an investigation is necessary.

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If evidence supports the conclusion that the employee has been punished for exercising safety and health rights, OSHA will ask the employer to restore that worker's job, earnings, and benefits. If the employer declines to enter into a voluntary settlement, OSHA may take the employer to court. In such cases, an attorney of the Department of Labor will conduct litigation on behalf of the employee to obtain this relief.

Section 31105 of the *Surface Transportation Assistance Act* was enacted on January 6, 1983, and provides protection from reprisal by employers for truckers and certain other employees in the trucking industry involved in activity related to commercial motor vehicle safety and health. Secretary of Labor's Order No. 9-83 (48 *Federal Register* 35736, August 5, 1983) delegated to the Assistant Secretary of OSHA the authority to investigate and to issue findings and preliminary orders under Section 31105.

Employees who believe they have been discriminated against for exercising their rights under Section 31105 may file a complaint with OSHA within 180 days of the discrimination. OSHA will then investigate the complaint, and within 60 days after it was filed, issue findings as to whether there is a reason to believe Section 31105 has been violated.

If OSHA finds that a complaint has merit, the agency also will issue an order requiring, where appropriate, abatement of the violation, reinstatement with back pay and related compensation, payment of compensatory damages, and the payment of the employee's expenses in bringing the complaint. Either the employee or employer may object to the findings. If no objection is filed within 30 days, the finding and order are final. If a timely filed objection is made, however, the objecting party is entitled to a hearing on the objection before an Administrative Law Judge of the Department of Labor.

Within 120 days of the hearing, the Secretary will issue a final order. A party aggrieved by the final order may seek

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judicial review in a court of appeals within 60 days of the final order.

The following activities of truckers and certain employees involved in commercial motor vehicle operation are protected under Section 31105:

- Filing of safety or health complaints with OSHA or other regulatory agency relating to a violation of a commercial motor vehicle safety rule, regulation, standard, or order.
- Instituting or causing to be instituted any proceedings relating to a violation of a commercial motor vehicle safety rule, regulation, standard, or order.
- Testifying in any such proceedings relating to the above items.
- Refusing to operate a vehicle when such operation constitutes a violation of any Federal rules, regulations, standards, or orders applicable to commercial motor vehicle safety or health; or because of the employee's reasonable apprehension of serious injury to himself or the public due to the unsafe condition of the equipment.
- Complaining directly to management, co-workers, or others about job safety or health conditions relating to commercial motor vehicle operation.

Complaints under Section 31105 are filed in the same manner as complaints under 11(c). The filing period for Section 31105 is 180 days from the alleged discrimination, rather than 30 days as under Section 11(c).

In addition, Section 211 of the *Asbestos Hazard Emergency Response Act* provides employee protection from discrimination by school officials in retaliation for complaints about asbestos hazards in primary and secondary schools.

The protection and procedures are similar to those used under Section 11(c) of the OSH Act. Section 211 complaints must be filed within 90 days of the alleged discrimination.

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Finally, Section 7 of the *International Safe Container Act* also provides employee protection from discrimination in retaliation for safety or health complaints about intermodal cargo containers designed to be transported interchangeably by sea and land carriers. The protection and procedures are similar to those used under Section 11(c) of the OSH Act. Section 7 complaints must be filed within 60 days of the alleged discrimination.

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Although OSHA does not cite employees for violations of their responsibilities, each employee “shall comply with all occupational safety and health standards and all rules, regulations, and orders issued under the Act” that are applicable. Employee responsibilities and rights in states with their own occupational safety and health programs are generally the same as for workers in states covered by Federal OSHA. An employee should do the following:

- Read the OSHA Poster at the jobsite.
- Comply with all applicable OSHA standards.
- Follow all lawful employer safety and health rules and regulations, and wear or use prescribed protective equipment while working.
- Report hazardous conditions to the supervisor.
- Report any job-related injury or illness to the employer, and seek treatment promptly.
- Cooperate with the OSHA compliance officer conducting an inspection if he or she inquires about safety and health conditions in the workplace.
- Exercise rights under the Act in a responsible manner.

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NIOSH can provide free information on the potential dangers of substances in the workplace. In some cases, NIOSH may visit a jobsite to evaluate possible health hazards. The address is as follows:

National Institute for Occupational Safety and Health  
Centers for Disease Control  
1600 Clifton Road  
Atlanta, Georgia 30333  
Telephone: 404-639-3061

NIOSH will keep confidential the name of the person who asked for help if requested to do so.



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### **Safety and Health Program Management Guidelines**

Effective management of worker safety and health protection is a decisive factor in reducing the extent and severity of work-related injuries and illnesses and their related costs. To assist employers and employees in developing effective safety and health programs, OSHA published recommended *Safety and Health Program Management Guidelines* (*Federal Register* 54(16): 3904-3916, January 26, 1989). These voluntary guidelines apply to all places of employment covered by OSHA.

The guidelines identify four general elements that are critical to the development of a successful safety and health management program:

- Management commitment and employee involvement,
- Worksite analysis,
- Hazard prevention and control, and
- Safety and health training.

The guidelines recommend specific actions, under each of these general elements, to achieve an effective safety and health program. A single free copy of the guidelines can be obtained from the OSHA Publications Office, U.S. Department of Labor, OSHA/OSHA Publications, P.O. Box 37535, Washington, DC 20013-7535, by sending a self-addressed mail label with your request.

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### **State Programs**

The *Occupational Safety and Health Act of 1970* encourages states to develop and operate their own job safety and health plans. OSHA approves and monitors these plans. There are currently 25 state plan states; 23 of these states administer plans covering both private and public (state and local government) employment; the other 2 states, Connecticut and New York, cover the public sector only.

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The 25 states and territories with their own OSHA-approved occupational safety and health plans must adopt standards identical to, or at least as effective as, the federal standards. Until a state standard is promulgated, OSHA will provide interim enforcement assistance, as appropriate, in these states. A listing of states with approved plans appears at the end of this booklet.

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### **Consultation Services**

Consultation assistance is available on request to employers who want help in establishing and maintaining a safe and healthful workplace. Largely funded by OSHA, the service is provided at no cost to the employer. Primarily developed for smaller employers with more hazardous operations, the consultation service is delivered by state governments employing professional safety and health consultants. Comprehensive assistance includes an appraisal of all mechanical systems, physical work practices, and occupational safety and health hazards of the workplace and all aspects of the employer's present job safety and health program. In addition, the service offers assistance to employers in developing and implementing an effective safety and health program. No penalties are proposed or citations issued for hazards identified by the consultant.

For more information concerning consultation assistance, see the list of consultation projects listed at the end of this publication.

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### **Voluntary Protection Programs (VPPs)**

Voluntary Protection Programs and onsite consultation services, when coupled with an effective enforcement program, expand worker protection to help meet the goals of the OSH Act. The three VPPs—Star, Merit, and Demonstration—are

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designed to recognize outstanding achievements by companies that have successfully incorporated comprehensive safety and health programs into their total management system. The VPPs motivate others to achieve excellent safety and health results in the same outstanding way as they establish a cooperative relationship between employers, employees, and OSHA.

For additional information on VPPs and how to apply, contact the OSHA regional offices listed at the end of this publication.

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### **Training and Education**

OSHA's area offices offer a variety of information services, such as publications, audiovisual aids, technical advice, and speakers for special engagements. OSHA's Training Institute in Des Plaines, IL, provides basic and advanced courses in safety and health for federal and state compliance officers, state consultants, federal agency personnel, and private sector employers, employees, and their representatives.

The OSHA Training Institute also has established OSHA Training Institute Education Centers to address the increased demand for its courses from the private sector and from other federal agencies. These centers are nonprofit colleges, universities, and other organizations that have been selected after a competition for participation in the program. They are located in various parts of the U.S.

OSHA also provides funds to nonprofit organizations, through grants, to conduct workplace training and education in subjects where OSHA believes there is a lack of workplace training. Grants are awarded annually. Grant recipients are expected to contribute 20 percent of the total grant cost.

For more information on grants, training, and education, contact the OSHA Training Institute, Office of Training and

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Education, 1555 Times Drive, Des Plaines, IL 60018, (847) 297-4810.

For further information on any OSHA program, contact your nearest OSHA area or regional office listed at the end of this publication.

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### **Electronic Information**

Internet—OSHA standards, interpretations, directives, and additional information are now on the World Wide Web at <http://www.osha.gov>.

CD-ROM—A wide variety of OSHA materials, including standards, interpretations, directives, and more, can be purchased on CD-ROM from the U.S. Government Printing Office. To order, write to the Superintendent of Documents, P.O. Box 371954, Pittsburgh, PA 15250-7954 or phone (202) 512-1800. Specify OSHA Regulations, Documents and Technical Information on CD-ROM (ORDT), GPO Order No. S/N 729-013-00000-5. The price is \$46 per year (\$57.50 foreign); \$17 per single copy (\$21.25 foreign).

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### **Emergencies**

For life-threatening situations, call (800) 321-OSHA. Complaints will go immediately to the nearest OSHA area or state office for help.

For further information on any OSHA program, contact your nearest OSHA area or regional office listed at the end of this publication.

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Single copies of the following booklets can be obtained from the nearest OSHA area or regional office or the U.S. Department of Labor, OSHA/OSHA Publications, P.O. Box 37535, Washington, DC 20013-7535. Telephone (202) 693-1888 or fax to (202) 693-2498. Please send a self-addressed mailing label with your request.

*All About OSHA* – OSHA 2056

*Chemical Hazard Communication* – OSHA 3084

*Hearing Conservation* – OSHA 3074

*Personal Protective Equipment* – OSHA 3077

*Respiratory Protection* – OSHA 3079

The following items are available from the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402, (202) 783-3238; or fax to 202-512-2250.

*Hazard Communication – A Compliance Kit* (OSHA 3104)  
(A reference guide to step-by-step requirements for compliance with the OSHA standard.) Order No. 029-016-00200-6; Cost \$18.00 domestic; \$22.50 foreign.)

*Hand and Power Tools* – OSHA 3080  
Order No.029-016-00197-2 Cost \$2.00

**Commissioner**

Alaska Department of Labor  
1111 West 8th Street  
Room 304  
Juneau, AK 99801-1149  
(907) 465-2700

**Director**

Industrial Commission  
of Arizona  
800 W. Washington  
Phoenix, AZ 85007-2922  
(602) 542-5795

**Director**

California Department  
of Industrial Relations  
455 Golder Gate Avenue  
10th Floor  
San Francisco, CA 94102  
(415) 703-5050

**Commissioner**

Connecticut Department  
of Labor  
200 Folly Brook Boulevard  
Wethersfield, CT 06109  
(860) 566-5123

**Director**

Hawaii Department of Labor  
and Industrial Relations  
830 Punchbowl Street  
Honolulu, HI 96813  
(808) 586-8844

**Commissioner**

Indiana Department of Labor  
State Office Building  
402 West Washington Street  
Room W195  
Indianapolis, IN 46204-2751  
(317) 232-2378

**Commissioner**

Iowa Division of Labor Services  
1000 E. Grand Avenue  
Des Moines, IA 50319-0209  
(515) 281-3447

**Secretary**

Kentucky Labor Cabinet  
1047 U.S. Highway, 127 South,  
Suite 4  
Frankfort, KY 40601  
(502) 564-3070

**Commissioner**

Maryland Division of Labor  
and Industry  
Department of Labor Licensing  
and Regulation  
1100 N. Eutaw Street, Room 613  
Baltimore, MD 21202-2206  
(410) 767-2215

**Director**

Michigan Department  
of Consumer and Industry Services  
P.O. Box 30643  
Lansing, MI 48909-8143  
(517) 322-1814

**Commissioner**

Minnesota Department of Labor  
and Industry  
443 Lafayette Road  
St. Paul, MN 55155-4307  
(651) 296-2342

**Administrator**

Nevada Division of Industrial  
Relations  
400 West King Street  
Carson City, NV 89710  
(775) 687-3032

**Secretary**

New Mexico Environment  
Department  
1190 St. Francis Drive  
P.O. Box 26110  
Santa Fe, NM 87502  
(505) 827-2850

**Commissioner**

New York Department of Labor  
W. Averell Harriman State Office  
Building -12  
Room 500  
Albany, NY 12240  
(518) 457-2741

**Commissioner**

North Carolina Department  
of Labor  
4 West Edenton Street  
Raleigh, NC 27601-1092  
(919) 807-7166

**Administrator**

Department of Consumer  
and Business Services  
Occupational Safety and Health  
Division (OR-OSHA)  
350 Winter Street, NE  
Room 430  
Salem, OR 97310  
(503) 378-3272

**Secretary**

Puerto Rico Department  
of Labor and Human Resources  
Prudencio Rivera Martinez  
Building  
505 Munoz Rivera Avenue  
Hato Rey, PR 00918  
(787) 754-2119

**Director**

South Carolina Department  
of Labor, Licensing, and  
Regulation  
110 Centerview Drive  
P.O. Box 11329  
Columbia, SC 29210  
(803) 896-4300

**Commissioner**

Tennessee Department of Labor  
Attention: Robert Taylor  
710 James Robertson Parkway  
Nashville, TN 37243-0659  
(615) 741-2582

**Commissioner**

Labor Commission of Utah  
160 East 300 South, 3rd Floor  
P.O. Box 146650  
Salt Lake City, UT 84114-6650  
(801) 530-6898

**Commissioner**

Vermont Department of Labor  
and Industry  
National Life Building -  
Drawer 20  
National Life Drive  
Montpelier, VT 05620  
(802) 828-5098

**Commissioner**

Virgin Islands Department  
of Labor  
2203 Church Street  
Christiansted St. Croix,  
VI 00820-4660  
(340) 773-1994

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**Commissioner**

Virginia Department of Labor  
and Industry  
Powers-Taylor Building  
13 South 13th Street  
Richmond, VA 23219  
(804) 786-2377

**Director**

Washington Department  
of Labor and Industries  
P.O. Box 44001  
Olympia, WA 98504-4001  
(360) 902-4200

**Administrator**

Workers' Safety and Compensation  
Division (WSC)  
Wyoming Department  
of Employment  
Herschler Building  
2nd Floor East  
122 West 25th Street  
Cheyenne, WY 82002  
(307) 777-7786

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State	Telephone
Alabama .....	(205) 348-3033
Alaska .....	(907) 269-4957
Arizona .....	(602) 542-1695
Arkansas .....	(501) 682-4522
California .....	(415) 703-5270
Colorado .....	(970) 491-6151
Connecticut .....	(860) 566-4550
Delaware .....	(302) 761-8219
District of Columbia .....	(202) 576-6339
Florida .....	(850) 922-8955
Georgia .....	(404) 894-2643
Guam .....	011(671) 475-0136
Hawaii .....	(808) 586-9100
Idaho .....	(208) 426-3283
Illinois .....	(312) 814-2337
Indiana .....	(317) 232-2688
Iowa .....	(515) 965-7162
Kansas .....	(785) 296-7476
Kentucky .....	(502) 564-6895
Louisiana .....	(504) 342-9601
Maine .....	(207) 624-6460
Maryland .....	(410) 880-4970
Massachusetts .....	(617) 727-3982
Michigan .....	(517) 332-6823(H)
.....	(517) 322-1809(S)
Minnesota .....	(612) 297-2393
Mississippi .....	(601) 987-3981
Missouri .....	(573) 751-3403
Montana .....	(406) 444-6418
Nebraska .....	(402) 471-4717
Nevada .....	(702) 486-9140
New Hampshire .....	(603) 271-2024
New Jersey .....	(609) 292-3923
New Mexico .....	(505) 827-4230
New York .....	(518) 457-2238
North Carolina .....	(919) 807-2905
North Dakota .....	(701) 328-5188
Ohio .....	(614) 644-2246
Oklahoma .....	(405) 528-1500
Oregon .....	(503) 378-3272
Pennsylvania .....	(724) 357-2396

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Puerto Rico .....	(787) 754-2171
Rhode Island .....	(401) 222-2438
South Carolina .....	(803) 734-9614
South Dakota .....	(605) 688-4101
Tennessee .....	(615) 741-7036
Texas .....	(512) 804-4640
Utah .....	(801) 530-6901
Vermont .....	(802) 828-2765
Virginia .....	(804) 786-6359
Virgin Islands .....	(340) 772-1315
Washington .....	(360) 902-5638
West Virginia .....	(304) 558-7890
Wisconsin .....	(608) 266-8579(H)
.....	(262) 523-3040(S)
Wyoming .....	(307) 777-7786

(H) - Health

(S) - Safety

Area	Telephone
Albany, NY .....	(518) 464-4338
Albuquerque, NM .....	(505) 248-5302
Allentown, PA .....	(610) 776-0592
Anchorage, AK .....	(907) 271-5152
Appleton, WI .....	(920) 734-4521
Austin, TX .....	(512) 916-5783
Avenel, NJ .....	(908) 750-3270
Bangor, ME .....	(207) 941-8179
Baton Rouge, LA .....	(225) 389-0474
Bayside, NY .....	(718) 279-9060
Bellevue, WA .....	(206) 553-7520
Billings, MT .....	(406) 247-7494
Birmingham, AL .....	(205) 731-1534
Bismarck, ND .....	(701) 250-4521
Boise, ID .....	(208) 321-2960
Bowmansville, NY .....	(716) 684-3891
Braintree, MA .....	(617) 565-6924
Bridgeport, CT .....	(203) 579-5516
Calumet City, IL .....	(708) 891-3800
Carson City, NV .....	(702) 885-6963
Charleston, WV .....	(304) 347-5937
Cincinnati, OH .....	(513) 841-4132
Cleveland, OH .....	(216) 522-3818
Columbia, SC .....	(803) 765-5904
Columbus, OH .....	(614) 469-5582
Concord, NH .....	(603) 225-1629
Corpus Christi, TX .....	(512) 888-3420
Dallas, TX .....	(214) 320-2400
Denver, CO .....	(303) 844-5285
Des Plaines, IL .....	(847) 803-4800
Des Moines, IA .....	(515) 284-4794
Eau Claire, WI .....	(715) 832-9019
El Paso, TX .....	(915) 534-6251
Englewood, CO .....	(303) 843-4500
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Fairview Heights, IL .....	(618) 632-8612
Fort Lauderdale, FL .....	(954) 424-0242
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Frankfort, KY .....	(502) 227-7024
Guaynabo, PR .....	(787) 277-1560
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Hasbrouck Heights, NJ .....	(201) 288-1700
Honolulu, HI .....	(808) 541-2685

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Houston, TX .....	(281) 286-0583
Houston, TX .....	(281) 591-2438
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Jacksonville, FL .....	(904) 232-2895
Kansas City, MO .....	(816) 483-9531
Linthicum, MD .....	(410) 865-2055
Little Rock, AR .....	(501) 324-6291
Lubbock, TX .....	(806) 472-7681
Madison, WI .....	(608) 441-5388
Marlton, NJ .....	(609) 757-5181
Methuen, MA .....	(617) 565-8110
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New York, NY .....	(212) 466-2482
Norfolk, VA .....	(757) 441-3820
North Aurora, IL .....	(630) 896-8700
Oklahoma City, OK .....	(405) 231-5351
Omaha, NE .....	(402) 221-3182
Parsippany, NJ .....	(201) 263-1003
Peoria, IL .....	(309) 671-7033
Philadelphia, PA .....	(215) 597-4955
Phoenix, AZ .....	(602) 640-2007
Pittsburgh, PA .....	(412) 644-4903
Portland, ME .....	(207) 780-3178
Portland, OR .....	(503) 326-2251
Providence, RI .....	(401) 528-4663
Raleigh, NC .....	(919) 856-4770
Sacramento, CA .....	(916) 566-7470
Salt Lake City, UT .....	(801) 487-0680
San Diego, CA .....	(619) 557-2909
Savannah, GA .....	(912) 652-4393
Smyrna, GA .....	(770) 984-8700
Springfield, MA .....	(413) 785-0123
St. Louis, MO .....	(314) 425-4249
Syracuse, NY .....	(315) 451-0808
Tampa, FL .....	(813) 626-1177
Tarrytown, NY .....	(914) 524-7510
Toledo, OH .....	(419) 259-7542
Tucker, GA .....	(770) 493-6644
Westbury, NY .....	(516) 334-3344
Wichita, KS .....	(316) 269-6644
Wilkes-Barre, PA .....	(717) 826-6538
Wilmington, DE .....	(302) 573-6115

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**Region I**  
(CT,\* MA, ME, NH, RI, VT\*)  
JFK Federal Building  
Room E-340  
Boston, MA 02203  
Telephone: (617) 565-9860

**Region II**  
(NJ, NY,\* PR,\* VI\*)  
201 Varick Street  
Room 670  
New York, NY 10014  
Telephone: (212) 337-2378

**Region III**  
(DC, DE, MD,\* PA, VA,\* WV)  
The Curtis Center  
Suite 740 West  
170 S. Independence Mall West  
Philadelphia, PA 19106-3309  
Telephone: (215) 861-4900

**Region IV**  
(AL, FL, GA, KY,\* MS, NC,  
SC,\* TN\*)  
Atlanta Federal Center  
61 Forsyth Street, S.W., Room  
6T50  
Atlanta, GA 30303  
Telephone: (404) 562-2300

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230 South Dearborn Street  
Room 3244  
Chicago, IL 60604  
Telephone: (312) 353-2220

**Region VI**  
(AR, LA, NM,\* OK, TX)  
525 Griffin Street  
Room 602  
Dallas, TX 75202  
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\*These states and territories operate their own OSHA-approved job safety and health programs (Connecticut and New York plans cover public employees only). States with approved programs must have a standard that is identical to, or at least as effective as, the federal standard.

# Employer Rights and Responsibilities Following an OSHA Inspection

U.S. Department of Labor  
Elaine L. Chao, Secretary

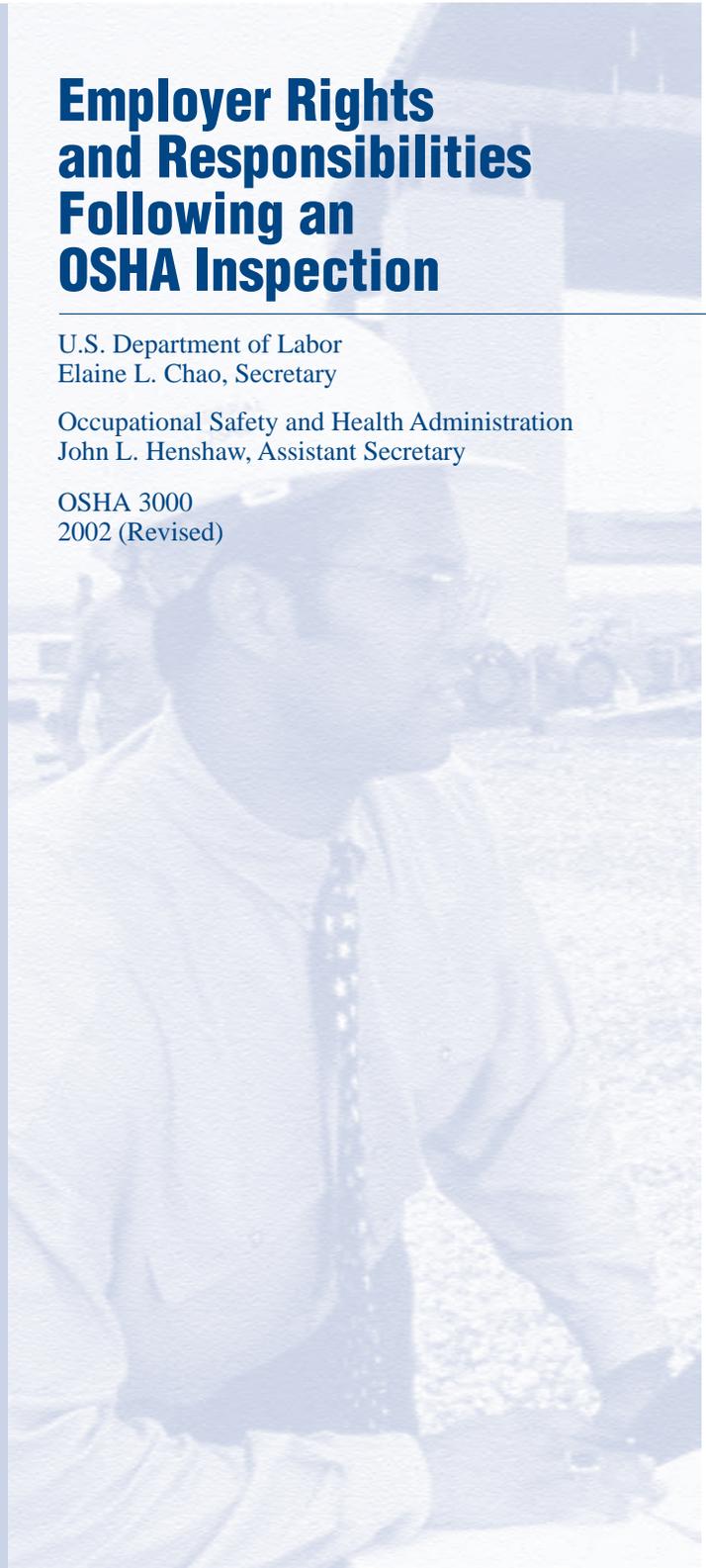
Occupational Safety and Health Administration  
John L. Henshaw, Assistant Secretary

OSHA 3000  
2002 (Revised)



**Occupational Safety  
and Health Administration**

U.S. Department of Labor  
200 Constitution Ave., NW  
Washington, D.C. 20210



This informational booklet is intended to provide a generic, non-exhaustive overview of a particular standards-related topic. This publication does not itself alter or determine compliance responsibilities, which are set forth in OSHA standards themselves, and the *Occupational Safety and Health Act*. Moreover, because interpretations and enforcement policy may change over time, for additional guidance on OSHA compliance requirements, the reader should consult current administrative interpretations and decisions by the Occupational Safety and Health Review Commission and the courts.

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This pamphlet contains important information regarding your rights and responsibilities under the *Occupational Safety and Health Act of 1970* (*OSH Act*, Public Law 91-596, as amended by P.L. 101-552, November 5, 1990).

An OSHA compliance safety and health officer (CSHO) conducts an inspection of your workplace, in accordance with the *OSH Act*. After the inspection, the CSHO reports the findings to the Area Director, who evaluates them. If a violation exists, OSHA will issue you a **Citation and Notification of Penalty** detailing the exact nature of the violation(s) and any associated penalties (see also OSHA 2098, *OSHA Inspections*). A citation informs you of the alleged violation, sets a proposed time period for you to correct the violation, and proposes the appropriate dollar penalties.

The information in this booklet can and should be used as a discussion guide during your closing conference with the OSHA compliance officer. For each apparent violation found during the inspection, the compliance officer has discussed or will discuss the following with you:

- Nature of the violation,
- Possible abatement measures you may take to correct the violative condition,
- Possible abatement dates you may be required to meet, and
- Any penalties that the Area Director may issue.

The CSHO is a highly trained professional who can help you recognize and evaluate hazards as well as suggest appropriate methods of correcting violations. To minimize employee exposure to possible hazardous conditions, abatement efforts should always begin as soon as possible.

**Important Note:** There are currently 26 states or territories administering OSHA-approved safety and health plans: 23 of these plans cover the private and public (state and local government) sectors and 3 cover the public sector only. For more information, employers and employees in these 26 states and territories should check with their state agencies, listed at the end of this publication. State plans may include standards, regulations, and procedures that, while at least as effective as their federal equivalents, are not always identical to them. For example:

- Some states have different options and procedures for the employer who believes changes, modifications, or deletions of the penalty, citation, or abatement dates are needed;
- Although Federal OSHA recommends that employers in general industry, shipbuilding and repair, and marine terminal and longshoring operations establish comprehensive workplace safety and health programs, some states require such programs; and
- In states with OSHA-approved safety and health plans, an employee who believes he/she has been discriminated against pursuant to Section 11(c) of the *OSH Act* is entitled to file a complaint alleging discrimination under both state and federal procedures.

The following general information defines the types of violations and explains the actions you may take if you receive a citation as the result of an inspection.

**Willful:** A willful violation is defined as a violation in which the employer knew that a hazardous condition existed but made no reasonable effort to eliminate it and in which the hazardous condition violated a standard, regulation, or the *OSH Act*. Penalties range from \$5,000 to \$70,000 per willful violation.

**Serious:** A serious violation exists when the workplace hazard could cause injury or illness that would most likely result in death or serious physical harm, unless the employer did not know or could not have known of the violation. OSHA may propose a penalty of up to \$7,000 for each violation.

**Other-Than-Serious:** An other-than-serious violation is defined as a situation in which the most serious injury or illness that would be likely to result from a hazardous condition cannot reasonably be predicted to cause death or serious physical harm to exposed employees but does have a direct and immediate relationship to their safety and health. OSHA may impose a penalty of up to \$7,000 for each violation.

**De Minimis:** De minimis violations are violations that have no direct or immediate relationship to safety or health and do not result in citations.

**Other:** A violation that has a direct relationship to job safety and health, but is not serious in nature, is classified as “other.”

**Failure to Abate:** A failure to abate violation exists when the employer has not corrected a violation for which OSHA has issued a citation and the abatement date has passed or is covered under a settlement agreement. A failure to abate also exists when the employer has not complied with interim measures involved in a long-term

abatement within the time given. OSHA may impose a penalty of up to \$7,000 per day for each violation.

**Repeated:** An employer may be cited for a repeated violation if that employer has been cited previously for a **substantially similar condition** and the citation has become a final order of the Occupational Safety and Health Review Commission. A citation is currently viewed as a repeated violation if it occurs within 3 years either from the date that the earlier citation becomes a final order or from the final abatement date, whichever is later. Repeated violations can bring a civil penalty of up to \$70,000 for each violation.

For purposes of determining whether a violation is repeated, the following criteria generally apply:

1. **Fixed Establishments:** Citations issued to employers having fixed establishments (such as factories, terminals, and stores) are not normally limited to the cited establishment. A multifacility employer, for example, can be cited for a repeated violation if the violation recurred at any plant nationwide, and if a citation is obtained and reveals a repeated violation.
2. **Nonfixed Establishments:** For employers engaged in businesses having no fixed establishments (such as construction sites and oil and gas drilling sites), repeated violations are alleged based on prior violations occurring anywhere, and at any of the employer's identified establishments nationwide, based on employer history.

3. **Longshoring Establishments:** A longshoring establishment covers all longshoring activities of a single stevedore within any single port area. Longshoring employers are subject to repeated violation citations based on prior violations occurring anywhere in the nation.
4. **Other Maritime Establishments:** Other maritime establishments covered by OSHA standards (such as shipbuilding and ship repairing) are generally defined as fixed establishments. (See 1 above.)

A VIOLATION CAN BE CITED AS REPEATED IF THE EMPLOYER HAS BEEN CITED FOR THE SAME OR A SUBSTANTIALLY SIMILAR VIOLATION ANYWHERE IN THE NATION WITHIN THE PAST 3 YEARS.

When you receive a citation and notification of penalty, you must post the citation (or a copy of it) at or near the place where each violation occurred to make employees aware of the hazards to which they may be exposed. The citation must remain posted for 3 working days or until the violation is corrected, whichever is longer. (Saturdays, Sundays, and federal holidays do not count as working days.) **You must comply with these posting requirements even if you contest the citation.**

The abatement certification documents—such as abatement certifications, abatement plans, and progress reports—also must be posted at or near the place where the violation occurred. For moveable equipment found to be in violation and where the posting of violations would be difficult or impractical, the employer has an option to identify the equipment with a “Warning” tag specified in the abatement verification regulation *Title 29 Code of Federal Regulations (CFR) 1903.19(i)*.

As an employer who has been cited, you may take either of the following courses of action:

- If you agree to the Citation and Notification of Penalty, you must correct the condition by the date set in the citation and pay the penalty, if one is proposed;
- If you do not agree, you have 15 working days from the date you receive the citation to contest in writing any or all of the following:
  - Citation,
  - Proposed penalty, and/or
  - Abatement date.

OSHA will inform the affected employee representatives of the informal conference or contest.

Before deciding on either of these options, you may request an informal conference with the OSHA Area Director to discuss any issues related to the citation and notification of penalty. (See **Informal Conference and Settlement**.)

For violations you do not contest, you must:

(1) promptly notify the OSHA Area Director by letter signed by a member of management that you have taken the appropriate corrective action within the time set forth in the citation, and (2) pay any penalties itemized.

The notification you send the Area Director is referred to as **Abatement Certification**. For Other-Than-Serious violations, this may be a signed letter identifying the inspection number and the citation item number and noting that you corrected the violation by the date specified on the citation. For more serious violations (such as Serious, Willful, Repeat, or Failure-to-Abate), abatement certification requires more detailed proof.

If the employer has abatement questions after the inspection, the Area Director must ensure that additional information, if available, is provided to the employer as soon as possible.

Employers also can find guidance on abatement verification on OSHA's website at [www.osha.gov/Publications/Abate/abate.html](http://www.osha.gov/Publications/Abate/abate.html).

When the citation permits an extended time for abatement, you must ensure that employees are adequately protected during this time. For example, the citation may require the immediate use of personal protective equipment by employees while engineering controls are being installed. When such is the case and where indicated on the citation, you must also provide OSHA with an abatement plan (steps you will take to protect employees and correct the hazards) and periodic progress reports on your actions.

The penalties itemized on the citation and notification of penalty are payable within 15 working days of receipt of the penalty notice.

If, however, you contest the citation or penalty in good faith, OSHA will suspend abatement and payment of penalties for those items contested until the Occupational Safety and Health Review Commission or a higher court issues a final order or rule. The Review Commission is an independent agency and is **not** a part of the U.S. Department of Labor. The final order of the Commission will either uphold, modify, or eliminate the citations and/or penalties. Penalties for items not contested, however, are still due within 15 working days. (For further details, see the section on **How to Contest**.)

Payment should be made by check or money order payable to DOL-OSHA. Please indicate on your payment the OSHA number from the upper right-hand corner of your citation and **send it to the OSHA Area Office listed on the citation and notification of penalty**.

Before deciding whether to file a **Notice of Intent to Contest**, you may request an informal conference with the OSHA Area Director to discuss the citation and notification of penalty.

You may use this opportunity to do any of the following:

- Get a better explanation of the violations cited;
- Get a more complete understanding of the specific standards that apply;
- Negotiate and enter into an informal settlement agreement;
- Discuss ways to correct violations;
- Discuss problems concerning the abatement dates;
- Discuss problems concerning employee safety practices;
- Resolve disputed citations and penalties, (eliminating the need for the more formal procedures associated with litigation before the Review Commission); and
- Get answers to any other questions you may have.

OSHA encourages you to take advantage of the opportunity to have an informal conference if you foresee any difficulties in complying with any part of the citation. **Please note, however, that an informal conference must be held within the 15 working day Notice of Intent to Contest period and will neither extend the 15 working day contest period nor take the place of the filing of a written notice if you desire to contest.** Employee representative(s) have the right to participate in any informal

conference or negotiations between the Regional Administrator or Area Director and the employer.

If you agree that the cited violations exist, but you have a valid reason for wishing to extend the abatement date(s), you may discuss this with the Area Director in an informal conference. He or she may issue an amended citation that changes the abatement date prior to the expiration of the 15-working-day period without your filing a Notice of Intent to Contest.

If you do not contest within 15 working days, your citation will become a final order not subject to review by any court or agency. After this occurs, the OSHA Area Director may continue to provide you with information and assistance on how to abate the hazards cited in your citation, but may not amend or change any citation or penalty which has become a final order. The Area Director may only advise you on abatement methods or extend the time you need to abate the violation. (See **Petition for Modification of Abatement.**)

Whenever the employer, an affected employee, or employee representative requests an informal conference, the parties shall be afforded the opportunity to participate fully. If either party chooses not to participate in the informal conference, that party forfeits the right to be consulted before decisions are made that affect the citations. If the requesting party objects to the attendance of the other party, OSHA may hold separate informal conferences. During a joint informal conference, separate or private discussions will be permitted if either party requests them. Informal conferences may be held by any means practical.

## 12 How do you contest citations?

If you wish to contest any portion of your citation, you must submit a Notice of Intent to Contest in writing within 15 working days after receipt of the citation and notification of penalty. This applies even if you have stated your disagreement with a citation, penalty, or abatement date during a telephone conversation or an informal conference.

The Notice of Intent to Contest must clearly state what is being contested—the citation, the penalty, the abatement date, or any combination of these factors. In addition, the notice must state whether all the violations on the citation, or just specific violations, are being contested. (For example, “I wish to contest the citation and penalty proposed for items 3 and 4 of the citation issued June 27, 1990.”)

Your contest must be made in good faith. OSHA will not consider a contest filed solely to avoid your responsibilities for abatement or payment of penalties a good-faith contest.

A proper contest of any item suspends your legal obligation to abate and pay until the item contested has been resolved. If you contest only the penalty, you must still correct all violations by the dates indicated on the citation. If you contest only some items on the citation, you must correct the other items by the abatement date and pay the corresponding penalties within 15 days of notification.

After you file a Notice of Intent to Contest, your case is officially in litigation. If you wish to settle the case, you may contact the OSHA Area Director who will give you the name of the attorney handling your case for OSHA. All settlements of contested cases are negotiated between you and the attorney according to the rules of procedure of the Occupational Safety and Health Review Commission.

## What is the contest process?

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If you file the written Notice of Intent to Contest within the required 15 working days, the OSHA Area Director forwards your case to the Occupational Safety and Health Review Commission. The Commission assigns the case to an administrative law judge who usually will schedule a hearing in a public place close to your workplace. Both employers and employees have the right to participate in this hearing, which contains all the elements of a trial, including examination and cross-examination of witnesses. You may choose to represent yourself or have an attorney represent you. The administrative law judge may affirm, modify, or eliminate any contested items of the citation or penalty.

As with any other legal procedure, there is an appeals process. Once the administrative law judge has ruled, any party to the case may request a further review by the full Review Commission. In addition, any of the three commissioners may, on his or her own motion, bring the case before the entire Commission for review. The Commission’s ruling, in turn, may be appealed to the U.S. Court of Appeals for the circuit in which the case arose or for the circuit where the employer has his or her principal office.

## 14 What other steps can you take?

OSHA assigns abatement dates on the basis of the best information available when issuing the citation. If you are unable to meet an abatement date because of uncontrollable events or other circumstances, and the 15 working day contest period has expired, you may file a **Petition for Modification of Abatement** (PMA) with the OSHA Area Director.

The petition must be in writing and must be submitted as soon as possible, but no later than 1 working day after the abatement date. To show clearly that you have made a good-faith effort to comply, the PMA must include all of the following information before OSHA considers it:

- Steps you have taken to achieve compliance, and dates they were taken;
- Additional time you need to comply;
- Why you need additional time;
- Interim steps you are taking to safeguard your employees against the cited hazard(s) until the abatement;
- A certification that the petition has been posted, the date of posting and, when appropriate, a statement that the petition has been furnished to an authorized representative of the affected employees. The petition must remain posted for 10 working days, during which employees may file an objection.

The OSHA Area Director may grant or oppose a PMA. If it is opposed, it automatically becomes a contested case before the Review Commission. If a PMA is granted, OSHA may conduct a monitoring inspection to ensure that conditions are as they have been described and that adequate progress has been made toward abatement. The OSHA Area Office may provide additional information on PMAs.

## What can employees do?

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Employees or their authorized representatives may contest any or all of the abatement dates set for violations if they believe them to be unreasonable. In these cases, employers must file a written Notice of Intent to Contest with the OSHA Area Director within 15 working days after receiving the citation.

**The filing of an employee contest does not suspend the employer's obligation to abate.**

Employees also have the right to object to a PMA. Such objections must be in writing and must be sent to the Area Office within 10 days of service or posting. OSHA will not make a decision regarding the PMA until the Review Commission resolves the issue.

## What about followup inspections and failure to abate?

If you receive a citation, OSHA may conduct a followup inspection to verify that you have done the following:

- Posted the citation as required,
- Corrected the violations as required in the citation, and/or
- Protected employees adequately and made appropriate progress in correcting hazards during multistep or lengthy abatement periods.

In addition to providing for penalties for Failure-to-Post citations and Failure-to-Abate violations, the *OSH Act* clearly states that you have a **continuing responsibility** to comply with the *OSH Act* and assure your employees safe and healthful working conditions. OSHA will cite any new violations discovered during a followup inspection.

## What if there appears to be employer discrimination?

To achieve abatement by the date set forth in the citation, employers must initiate abatement efforts promptly.

The *OSH Act* prohibits employers from discharging or otherwise discriminating against an employee who has exercised any right under this law, including the right to make safety and health complaints or to request an OSHA inspection. OSHA will investigate complaints from employees who believe they have been discriminated against. If the investigation discloses probable violations of employee rights, court action may follow.

Employees who believe they have been discriminated against must file their complaints within **30 days** of the alleged act of discrimination. For more information, contact OSHA and inquire about Section 11(c) procedures.

All information that employers and employees report to OSHA must be accurate and truthful. Providing false information on efforts to abate cited conditions or in required records is punishable under the *OSH Act*.

OSHA can provide extensive help through a variety of programs, including assistance about safety and health programs, state plans, workplace consultations, voluntary protection programs, strategic partnerships, training and education, and more.

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**How does safety and health program management assistance help employers and employees?**

Effective management of worker safety and health protection is a decisive factor in reducing the extent and severity of work-related injuries and illnesses and their related costs. In fact, an effective safety and health program forms the basis of good worker protection and can save time and money—about \$4 for every dollar spent—and increase productivity.

To assist employers and employees in developing effective safety and health programs, OSHA published recommended *Safety and Health Program Management Guidelines* (*Federal Register* 54(18):3908-3916, January 26, 1989). These voluntary guidelines can be applied to all worksites covered by OSHA.

The guidelines identify four general elements critical to the development of a successful safety and health management program:

- Management leadership and employee involvement;
- Worksite analysis;
- Hazard prevention and control; and
- Safety and health training.

The guidelines recommend specific actions under each of these general elements to achieve an effective safety and health program. The *Federal Register* notice is available online at [www.osha.gov](http://www.osha.gov).

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### **What are state plans?**

State plans are OSHA-approved job safety and health programs operated by individual states or territories instead of Federal OSHA. The *Occupational Safety and Health Act of 1970 (OSH Act)* encourages states to develop and operate their own job safety and health plans and permits state enforcement of OSHA standards if the state has an approved plan. Once OSHA approves a state plan, it funds 50 percent of the program's operating costs. State plans must provide standards and enforcement programs, as well as voluntary compliance activities that are at least as effective as those of Federal OSHA.

There are 26 state plans: 23 cover both private and public (state and local government) employment, and 3 (Connecticut, New Jersey, and New York) cover only the public sector. For more information on state plans, see the listing at the end of this publication, or visit OSHA's website at [www.osha.gov](http://www.osha.gov).

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### **How can consultation assistance help employers?**

In addition to helping employers identify and correct specific hazards, OSHA's consultation service provides free, onsite assistance in developing and implementing effective workplace safety and health management systems that emphasize the prevention of worker injuries and illnesses.

Comprehensive consultation assistance provided by OSHA includes a hazard survey of the worksite and an appraisal of all aspects of the employer's existing safety and health management system. In addition, the service offers assistance to employers in developing and implementing an effective safety and health management system. Employers also may receive training and education services, as well as limited assistance away from the worksite.

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### **Who can get consultation assistance and what does it cost?**

Consultation assistance is available to small employers (with fewer than 250 employees at a fixed site and no more than 500 corporatewide) who want help in establishing and maintaining a safe and healthful workplace.

Funded largely by OSHA, the service is provided at no cost to the employer. Primarily developed for smaller employers with more hazardous operations, the consultation service is delivered by state governments employing professional safety and health consultants. No penalties are proposed or citations issued for hazards identified by the consultant. The employer's only obligation is to correct all identified serious hazards within the agreed-upon correction time frame. OSHA provides consultation assistance to the employer with the assurance that his or her name and firm and any information about the workplace will not be routinely reported to OSHA enforcement staff.

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### **Can OSHA assure privacy to an employer who asks for consultation assistance?**

OSHA provides consultation assistance to the employer with the assurance that his or her

name and firm and any information about the workplace will not be routinely reported to OSHA enforcement staff.

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### **Can an employer be cited for violations after receiving consultation assistance?**

If an employer fails to eliminate or control a serious hazard within the agreed-upon timeframe, the consultation project manager must refer the situation to the OSHA enforcement office for appropriate action. This is a rare occurrence, however, since employers request the service for the expressed purpose of identifying and fixing hazards in their workplaces.

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### **What incentives does OSHA provide for seeking consultation assistance?**

Under the consultation program, certain exemplary employers may request participation in OSHA's Safety and Health Achievement Recognition Program (SHARP). Eligibility for participation in SHARP includes, but is not limited to, receiving a full-service, comprehensive consultation visit, correcting all identified hazards, and developing an effective safety and health management system.

Employers accepted into SHARP may receive an exemption from programmed inspections (not complaint or accident investigation inspections) for a period of 1 year initially, or 2 years upon renewal.

For more information concerning consultation assistance, see the list of consultation directory at the end of this publication, contact your regional or area OSHA office, or visit OSHA's website at [www.osha.gov](http://www.osha.gov).

### **What are the Voluntary Protection Programs?**

Voluntary Protection Programs (VPPs) represent one part of OSHA's effort to extend worker protection beyond the minimum required by OSHA standards. VPP—along with onsite consultation services, full-service area offices, and OSHA's Strategic Partnership Program (OSPP)—represents a cooperative approach which, when coupled with an effective enforcement program, expands worker protection to help meet the goals of the *OSH Act*.

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### **How do the Voluntary Protection Programs Work?**

There are three levels of VPPs: Star, Merit, and Demonstration. All are designed to do the following:

- Recognize employers who have successfully developed and implemented effective and comprehensive safety and health management systems;
- Encourage these employers to continuously improve their safety and health management systems;
- Motivate other employers to achieve excellent safety and health results in the same outstanding way; and
- Establish a relationship between employers, employees, and OSHA that is based on cooperation.

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### **How does VPP help employers and employees?**

VPP participation can mean the following:

- Fewer worker fatalities, injuries, and illnesses;

- Lost-workday case rates generally 50 percent below industry averages;
- Lower workers' compensation and other injury- and illness-related costs;
- Improved employee motivation to work safely, leading to a better quality of life at work;
- Positive community recognition and interaction;
- Further improvement and revitalization of already-good safety and health programs; and
- A positive relationship with OSHA.

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#### **How does OSHA monitor VPP sites?**

OSHA reviews an employer's VPP application and conducts a VPP Onsite Evaluation to verify that the safety and health management systems described are operating effectively at the site. OSHA conducts onsite evaluations on a regular basis, annually for participants at the Demonstration level, every 18 months for Merit, and every 3 to 5 years for Star. Each February, all participants must send a copy of their most recent annual evaluation to their OSHA regional office. This evaluation must include the worksite's record of injuries and illnesses for the past year.

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#### **Can OSHA inspect an employer who is participating in the VPP?**

Sites participating in VPP are not scheduled for regular, programmed inspections. OSHA handles any employee complaints, serious accidents, or significant chemical releases that may occur at VPP sites according to routine enforcement procedures.

Additional information on VPP is available from OSHA national, regional, and area offices, listed at the end of this booklet. Also, see Outreach at OSHA's website at [www.osha.gov](http://www.osha.gov).

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#### **How can a partnership with OSHA improve worker safety and health?**

OSHA has learned firsthand that voluntary, cooperative partnerships with employers, employees, and unions can be a useful alternative to traditional enforcement and an effective way to reduce worker deaths, injuries, and illnesses. This is especially true when a partnership leads to the development and implementation of comprehensive workplace safety and health management system.

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#### **What is OSHA's Strategic Partnership Program (OSPP)?**

OSHA Strategic Partnerships are alliances among labor, management, and government to foster improvements in workplace safety and health. These partnerships are voluntary, cooperative relationships between OSHA, employers, employee representatives, and others such as trade unions, trade and professional associations, universities, and other government agencies. OSPPs are the newest of OSHA's cooperative programs.

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#### **What do OSPPs do?**

These partnerships encourage, assist, and recognize the efforts of the partners to eliminate serious workplace hazards and achieve a high level of worker safety and health. Whereas OSHA's Consultation Program and VPP entail

one-on-one relationships between OSHA and individual worksites, most strategic partnerships seek to have a broader impact by building cooperative relationships with groups of employers and employees.

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### **Are there different kinds of OSPPs?**

There are two major types:

- Comprehensive, which focus on establishing comprehensive safety and health management systems at partnering worksites; and
- Limited, which help identify and eliminate hazards associated with worker deaths, injuries, and illnesses, or have goals other than establishing comprehensive worksite safety and health programs.

OSHA is interested in creating new OSPPs at the national, regional, and local levels. OSHA also has found limited partnerships to be valuable. Limited partnerships might address the elimination or control of a specific industry hazard.

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### **What are the benefits of participation in the OSPP?**

Like VPP, OSPP can mean the following:

- Fewer worker fatalities, injuries, and illnesses;
- Lower workers' compensation and other injury- and illness-related costs;
- Improved employee motivation to work safely, leading to a better quality of life at work and enhanced productivity;
- Positive community recognition and interaction;

- Development of or improvement in safety and health management systems; and
- Positive interaction with OSHA.

For more information about this program, contact your nearest OSHA office or go to the agency website at [www.osha.gov](http://www.osha.gov).

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### **Does OSHA have occupational safety and health training for employers and employees?**

The OSHA Training Institute in Des Plaines, IL, provides basic and advanced training and education in safety and health for federal and state compliance officers, state consultants, other federal agency personnel, and private-sector employers, employees, and their representatives.

Institute courses cover diverse safety and health topics including electrical hazards, machine guarding, personal protective equipment, ventilation, and ergonomics. The facility includes classrooms, laboratories, a library, and an audiovisual unit. The laboratories contain various demonstrations and equipment, such as power presses, woodworking and welding shops, a complete industrial ventilation unit, and a sound demonstration laboratory. More than 57 courses dealing with subjects such as safety and health in the construction industry and methods of compliance with OSHA standards are available for personnel in the private sector.

In addition, OSHA's 73 area offices are full-service centers offering a variety of informational services such as personnel for speaking engagements, publications, audiovisual aids on workplace hazards, and technical advice.

### **Does OSHA give money to organizations for training and education?**

OSHA awards grants through its Susan Harwood Training Grant Program to nonprofit organizations to provide safety and health training and education to employers and workers in the workplace. The grants focus on programs that will educate workers and employers in small business (fewer than 250 employees), training workers and employers about new OSHA standards or about high-risk activities or hazards. Grants are awarded for 1 year and may be renewed for an additional 12 months depending on whether the grantee has performed satisfactorily.

OSHA expects each organization awarded a grant to develop a training and/or education program that addresses a safety and health topic named by OSHA, recruit workers and employers for the training, and conduct the training. Grantees are also expected to follow up with people who have been trained to find out what changes were made to reduce the hazards in their workplaces as a result of the training.

Each year OSHA has a national competition that is announced in the *Federal Register* and on the Internet at [www.osha-slc.gov/Training/sharwood/sharwood.html](http://www.osha-slc.gov/Training/sharwood/sharwood.html). If you do not have access to the Internet, you can contact the OSHA Office of Training and Education, 1555 Times Drive, Des Plaines, IL 60018, (847) 297-4810, for more information.

### **Does OSHA have other assistance materials available?**

OSHA has a variety of materials and tools available on its website at [www.osha.gov](http://www.osha.gov). These include eTools, Expert Advisors, Electronic Compliance Assistance Tools (eCATS), Technical Links, regulations, directives, publications, videos, and other information for employers and employees. OSHA's software programs and compliance assistance tools walk you through challenging safety and health issues and common problems to find the best solutions for your workplace. OSHA's comprehensive publications program includes more than 100 titles to help you understand OSHA requirements and programs.

OSHA's CD-ROM includes standards, interpretations, directives, and more and can be purchased on CD-ROM from the U.S. Government Printing Office. To order, write to the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402, or phone (202) 512-1800. Specify OSHA Regulations, Documents and Technical Information on CD-ROM (ORDT), GPO Order No. S/N 729-013-00000-5.

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### **What do I do in case of an emergency or if I need to file a complaint?**

To report an emergency, file a complaint, or seek OSHA advice, assistance, or products, call (800) 321-OSHA or contact your nearest OSHA regional or area office listed at the end of this publication. The teletypewriter (TTY) number is (877) 889-5627.

You can also file a complaint online and obtain more information on OSHA federal and state programs by visiting OSHA's website at [www.osha.gov](http://www.osha.gov).

For more information on grants, training, and education, write: OSHA Training Institute, Office of Training and Education, 1555 Times Drive, Des Plaines, IL 60018; call (847) 297-4810; or see Outreach on OSHA's website at [www.osha.gov](http://www.osha.gov).

## OSHA Regional Offices

### Region I

(CT,\* ME, MA, NH, RI, VT\*)  
JFK Federal Building, Room E340  
Boston, MA 02203  
(617) 565-9860

### Region II

(NJ,\* PR,\* VI\*)  
201 Varick Street, Room 670  
New York, NY 10014  
(212) 337-2378

### Region III

(DE, DC, MD,\* PA,\* VA,\* WV)  
The Curtis Center  
170 S. Independence Mall West  
Suite 740 West  
Philadelphia, PA 19106-3309  
(215) 861-4900

### Region IV

(AL, FL, GA, KY,\* MS, NC,\* SC,\* TN\*)  
Atlanta Federal Center  
61 Forsyth Street, SW, Room 6T50  
Atlanta, GA 30303  
(404) 562-2300

### Region V

(IL, IN,\* MI,\* MN,\* OH, WI)  
230 South Dearborn Street, Room 3244  
Chicago, IL 60604  
(312) 353-2220

**Region VI**

(AR, LA, NM,\* OK, TX)  
 525 Griffin Street, Room 602  
 Dallas, TX 75202  
 (214) 767-4731 or 4736 x224

**Region VII**

(IA,\* KS, MO, NE)  
 City Center Square  
 1100 Main Street, Suite 800  
 Kansas City, MO 64105  
 (816) 426-5861

**Region VIII**

(CO, MT, ND, SD, UT,\* WY\*)  
 1999 Broadway, Suite 1690  
 Denver, CO 80202-5716  
 (303) 844-1600

**Region IX**

(American Samoa, AZ,\* CA,\* HI,  
 NV,\* Northern Mariana Islands)  
 71 Stevenson Street, Room 420  
 San Francisco, CA 94105  
 (415) 975-4310

**Region X**

(AK,\* ID, OR,\* WA\*)  
 1111 Third Avenue, Suite 715  
 Seattle, WA 98101-3212  
 (206) 553-5930

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\* These states and territories operate their own OSHA-approved job safety and health programs (Connecticut, New Jersey, and New York plans cover public employees only). States with approved programs must have a standard that is identical to, or at least as effective as, the federal standard.

**OSHA Area Offices**

Anchorage, AK ..... (907) 271-5152  
 Birmingham, AL ..... (205) 731-1534  
 Mobile, AL ..... (334) 441-6131  
 Little Rock, AR ..... (501) 324-6291(5818)  
 Phoenix, AZ ..... (602) 640-2348  
 Sacramento, CA ..... (916) 566-7471  
 San Diego, CA ..... (619) 557-5909  
 Denver, CO ..... (303) 844-5285  
 Englewood, CO ..... (303) 843-4500  
 Bridgeport, CT ..... (203) 579-5581  
 Hartford, CT ..... (860) 240-3152  
 Wilmington, DE ..... (302) 573-6518  
 Fort Lauderdale, FL ..... (954) 424-0242  
 Jacksonville, FL ..... (904) 232-2895  
 Tampa, FL ..... (813) 626-1177  
 Savannah, GA ..... (912) 652-4393  
 Smyrna, GA ..... (770) 984-8700  
 Tucker, GA ..... (770) 493-6644/6742/8419  
 Des Moines, IA ..... (515) 284-4794  
 Boise, ID ..... (208) 321-2960  
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 Peoria, IL ..... (309) 671-7033  
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 Wichita, KS ..... (316) 269-6644  
 Frankfort, KY ..... (502) 227-7024  
 Baton Rouge, LA ..... (225) 389-0474 (0431)

Braintree, MA ..... (617) 565–6924  
 Methuen, MA ..... (617) 565–8110  
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 Linthicum, MD ..... (410) 865–2055/2056  
 August, ME ..... (207) 622–8417  
 Bangor, ME ..... (207) 941–8177  
 Portland, ME ..... (207) 780–3178  
 Lansing, MI ..... (517) 327–0904  
 Minneapolis, MN ..... (612) 664– 5460  
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 Concord, NH ..... (603) 225–1629  
 Avenel, NJ ..... (732) 750–3270  
 Hasbrouck Heights, NJ ..... (201) 288–1700  
 Marlton, NJ ..... (609) 757–5181  
 Parsippany, NJ ..... (973) 263–1003  
 Albuquerque, NM ..... (505) 248–5302  
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 Bayside, NY ..... (718) 279–9060  
 Bowmansville, NY ..... (716) 684–3891  
 New York, NY ..... (212) 466–2482  
 North Syracuse, NY ..... (315) 451–0808  
 Tarrytown, NY ..... (914) 524–7510  
 Westbury, NY ..... (516) 334–3344  
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Cleveland, OH ..... (216) 522–3818  
 Columbus, OH ..... (614) 469–5582  
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 Pittsburgh, PA ..... (412) 395–4903  
 Wilkes–Barre, PA ..... (570) 826–6538  
 Guaynabo, PR ..... (787) 277–1560  
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 Nashville, TN ..... (615) 781–5423  
 Austin, TX ..... (512) 916–5783 (5788)  
 Corpus Christi, TX ..... (512) 888–3420  
 Dallas, TX ..... (214) 320–2400 (2558)  
 El Paso, TX ..... (915) 534–6251  
 Fort Worth, TX ..... (817) 428–2470 (485–7647)  
 Houston, TX ..... (281) 591–2438 (2787)  
 Houston, TX ..... (281) 286–0583/0584 (5922)  
 Lubbock, TX ..... (806) 472–7681 (7685)  
 Salt Lake City, UT ..... (801) 530–6901  
 Norfolk, VA ..... (757) 441–3820  
 Bellevue, WA ..... (206) 553–7520  
 Appleton, WI ..... (920) 734–4521  
 Eau Claire, WI ..... (715) 832–9019  
 Madison, WI ..... (608) 264–5388  
 Milwaukee, WI ..... (414) 297–3315  
 Charleston, WV ..... (304) 347–5937

Juneau, AK .....	(907) 465–2700
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Wethersfield, CT .....	(860) 263–6505
Honolulu, HI .....	(808) 586–8844
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Indianapolis, ID .....	(317) 232–2378
Indianapolis, IN .....	(317) 232–3325
Frankfort, KY .....	(502) 564–3070
Baltimore, MD .....	(410) 767–2215
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Raleigh, NC .....	(919) 807–2900
Trenton, NJ .....	(609) 292–2975
Santa Fe, NM .....	(505) 827–2850
Carson City, NV .....	(775) 684–7260
Salem, OR .....	(503) 378–3272
Hato Rey, PR .....	(787) 754–2119
Columbia, SC .....	(803) 896–4300
Nashville, TN .....	(615) 741–2582
Salt Lake City, UT .....	(801) 530–6901
Richmond, VA .....	(804) 786–2377
Christiansted, St. Croix, VI.....	(340) 773–1990
Montpelier VT .....	(802) 828–2288
Olympia, WA .....	(360) 902–4200 (360) 902–5430
Cheyenne, WY .....	(307) 777–7786

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Little Rock, AR .....	(501) 682–4522
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Trenton, NJ .....	(609) 292-3923
Santa Fe, NM .....	(505) 827-4230
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Brookings, SD .....	(605) 688-4101
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Austin, TX .....	(512) 804-4640
Salt Lake City, UT .....	(801) 530-6901
Montpelier, VT .....	(802) 828-2765
Richmond, VA .....	(804) 786-6359
Christiansted, St. Croix, VI.....	(809) 772-1315
Olympia, WA .....	(360) 902-5638
Madison, WI .....	(608) 266-9383
Waukesha, WI.....	(262) 523-3044
Charleston, WV .....	(304) 558-7890
Cheyenne, WY .....	(307) 777-7786



# You Have a Right to a Safe and Healthful Workplace.

# IT'S THE LAW!

- You have the right to notify your employer or OSHA about workplace hazards. You may ask OSHA to keep your name confidential.
- You have the right to request an OSHA inspection if you believe that there are unsafe and unhealthful conditions in your workplace. You or your representative may participate in the inspection.
- You can file a complaint with OSHA within 30 days of discrimination by your employer for making safety and health complaints or for exercising your rights under the *OSH Act*.
- You have a right to see OSHA citations issued to your employer. Your employer must post the citations at or near the place of the alleged violation.
- Your employer must correct workplace hazards by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.
- You have the right to copies of your medical records or records of your exposure to toxic and harmful substances or conditions.
- Your employer must post this notice in your workplace.



The *Occupational Safety and Health Act of 1970 (OSH Act)*, P.L. 91-596, assures safe and healthful working conditions for working men and women throughout the Nation. The Occupational Safety and Health Administration, in the U.S. Department of Labor, has the primary responsibility for administering the *OSH Act*. The rights listed here may vary depending on the particular circumstances. To file a complaint, report an emergency, or seek OSHA advice, assistance, or products, call 1-800-321-OSHA or your nearest OSHA office: • Atlanta (404) 562-2300 • Boston (617) 565-9860 • Chicago (312) 353-2220 • Dallas (214) 767-4731 • Denver (303) 844-1600 • Kansas City (816) 426-5861 • New York (212) 337-2378 • Philadelphia (215) 861-4900 • San Francisco (415) 975-4310 • Seattle (206) 553-5930. Teletypewriter (TTY) number is 1-877-889-5627. To file a complaint online or obtain more information on OSHA federal and state programs, visit OSHA's website at [www.osha.gov](http://www.osha.gov). If your workplace is in a state operating under an OSHA-approved plan, your employer must post the required state equivalent of this poster.

## 1-800-321-OSHA

## [www.osha.gov](http://www.osha.gov)

U.S. Department of Labor  • Occupational Safety and Health Administration • OSHA 3165

# OSHA Forms for Recording Work-Related Injuries and Illnesses

## Dear Employer:

This booklet includes the forms needed for maintaining occupational injury and illness records for 2004. These new forms have changed in several important ways from the 2003 recordkeeping forms.

In the December 17, 2002 Federal Register (67 FR 77165-77170), OSHA announced its decision to add an occupational hearing loss column to OSHA's Form 300, Log of Work-Related Injuries and Illnesses. This forms package contains modified Forms 300 and 300A which incorporate the additional column M(5) Hearing Loss. Employers required to complete the injury and illness forms must begin to use these forms on January 1, 2004.

In response to public suggestions, OSHA also has made several changes to the forms package to make the recordkeeping materials clearer and easier to use:

- On Form 300, we've switched the positions of the day count columns. The days "away from work" column now comes before the days "on job transfer or restriction."
- We've clarified the formulas for calculating incidence rates.
- We've added new recording criteria for occupational hearing loss to the "Overview" section.
- On Form 300, we've made the column heading "Classify the Case" more prominent to make it clear that employers should mark only one selection among the four columns offered.

The Occupational Safety and Health Administration shares with you the goal of preventing injuries and illnesses in our nation's workplaces. Accurate injury and illness records will help us achieve that goal.

Occupational Safety and Health Administration  
U.S. Department of Labor

## What's Inside...

In this package, you'll find everything you need to complete OSHA's *Log* and the *Summary of Work-Related Injuries and Illnesses* for the next several years. On the following pages, you'll find:

- ▼ **An Overview: Recording Work-Related Injuries and Illnesses** — General instructions for filling out the forms in this package and definitions of terms you should use when you classify your cases as injuries or illnesses.
- ▼ **How to Fill Out the Log** — An example to guide you in filling out the *Log* properly.
- ▼ **Log of Work-Related Injuries and Illnesses** — Several pages of the *Log* (but you may make as many copies of the *Log* as you need.) Notice that the *Log* is separate from the *Summary*. 
- ▼ **Summary of Work-Related Injuries and Illnesses** — Removable *Summary* pages for easy posting at the end of the year. Note that you post the *Summary* only, not the *Log*. 
- ▼ **Worksheet to Help You Fill Out the Summary** — A worksheet for figuring the average number of employees who worked for your establishment and the total number of hours worked.
- ▼ **OSHA's 301: Injury and Illness Incident Report** — A copy of the OSHA 301 to provide details about the incident. You may make as many copies as you need or use an equivalent form. 

Take a few minutes to review this package. If you have any questions, **visit us online at [www.osha.gov](http://www.osha.gov)** **OR call your local OSHA office.** We'll be happy to help you.



# An Overview: Recording Work-Related Injuries and Illnesses

The Occupational Safety and Health (OSH) Act of 1970 requires certain employers to prepare and maintain records of work-related injuries and illnesses. Use these definitions when you classify cases on the Log. OSHA's recordkeeping regulation (see 29 CFR Part 1904) provides more information about the definitions below.

The *Log of Work-Related Injuries and Illnesses* (Form 300) is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the *Log* to record specific details about what happened and how it happened. The *Summary* — a separate form (Form 300A) — shows the totals for the year in each category. At the end of the year, post the *Summary* in a visible location so that your employees are aware of the injuries and illnesses occurring in their workplace.

Employers must keep a *Log* for each establishment or site. If you have more than one establishment, you must keep a separate *Log* and *Summary* for each physical location that is expected to be in operation for one year or longer.

Note that your employees have the right to review your injury and illness records. For more information, see 29 Code of Federal Regulations Part 1904.35, *Employee Involvement*.

Cases listed on the *Log of Work-Related Injuries and Illnesses* are not necessarily eligible for workers' compensation or other insurance benefits. Listing a case on the *Log* does not mean that the employer or worker was at fault or that an OSHA standard was violated.

## When is an injury or illness considered work-related?

An injury or illness is considered work-related if an event or exposure in the work environment caused or contributed to the condition or significantly aggravated a preexisting condition. Work-relatedness is

presumed for injuries and illnesses resulting from events or exposures occurring in the workplace, unless an exception specifically applies. See 29 CFR Part 1904.5(b)(2) for the exceptions. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment. See 29 CFR Part 1904.5(b)(1).

## Which work-related injuries and illnesses should you record?

Record those work-related injuries and illnesses that result in:

- ▼ death,
- ▼ loss of consciousness,
- ▼ days away from work,
- ▼ restricted work activity or job transfer, or
- ▼ medical treatment beyond first aid.

You must also record work-related injuries and illnesses that are significant (as defined below) or meet any of the additional criteria listed below.

You must record any significant work-related injury or illness that is diagnosed by a physician or other licensed health care professional. You must record any work-related case involving cancer, chronic irreversible disease, a fractured or cracked bone, or a punctured eardrum. See 29 CFR 1904.7.

## What are the additional criteria?

You must record the following conditions when they are work-related:

- ▼ any needlestick injury or cut from a sharp object that is contaminated with another person's blood or other potentially infectious material;
- ▼ any case requiring an employee to be medically removed under the requirements of an OSHA health standard;
- ▼ tuberculosis infection as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional after exposure to a known case of active tuberculosis.
- ▼ an employee's hearing test (audiogram) reveals 1) that the employee has experienced a Standard Threshold Shift (STS) in hearing in one or both ears (averaged at 2000, 3000, and 4000 Hz) and 2) the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 Hz) in the same ear(s) as the STS.

## What is medical treatment?

Medical treatment includes managing and caring for a patient for the purpose of combating disease or disorder. The following are not considered medical treatments and are NOT recordable:

- ▼ visits to a doctor or health care professional solely for observation or counseling;

## What do you need to do?

1. Within 7 calendar days after you receive information about a case, decide if the case is recordable under the OSHA recordkeeping requirements.
2. Determine whether the incident is a new case or a recurrence of an existing one.
3. Establish whether the case was work-related.
4. If the case is recordable, decide which form you will fill out as the injury and illness incident report.  
You may use *OSHA's 301: Injury and Illness Incident Report* or an equivalent form. Some state workers compensation, insurance, or other reports may be acceptable substitutes, as long as they provide the same information as the OSHA 301.

## How to work with the Log

1. Identify the employee involved unless it is a privacy concern case as described below.
2. Identify when and where the case occurred.
3. Describe the case, as specifically as you can.
4. Classify the seriousness of the case by recording the **most serious outcome** associated with the case, with column G (Death) being the most serious and column J (Other recordable cases) being the least serious.
5. Identify whether the case is an injury or illness. If the case is an injury, check the injury category. If the case is an illness, check the appropriate illness category.



- ▼ diagnostic procedures, including administering prescription medications that are used solely for diagnostic purposes; and
- ▼ any procedure that can be labeled first aid.  
(See below for more information about first aid.)

#### **What is first aid?**

If the incident required only the following types of treatment, consider it first aid. Do NOT record the case if it involves only:

- ▼ using non-prescription medications at non-prescription strength;
- ▼ administering tetanus immunizations;
- ▼ cleaning, flushing, or soaking wounds on the skin surface;
- ▼ using wound coverings, such as bandages, BandAids™, gauze pads, etc., or using SteriStrips™ or butterfly bandages.
- ▼ using hot or cold therapy;
- ▼ using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.;
- ▼ using temporary immobilization devices while transporting an accident victim (splints, slings, neck collars, or back boards).
- ▼ drilling a fingernail or toenail to relieve pressure, or draining fluids from blisters;
- ▼ using eye patches;
- ▼ using simple irrigation or a cotton swab to remove foreign bodies not embedded in or adhered to the eye;
- ▼ using irrigation, tweezers, cotton swab or other simple means to remove splinters or foreign material from areas other than the eye;

- ▼ using finger guards;
- ▼ using massages;
- ▼ drinking fluids to relieve heat stress

#### **How do you decide if the case involved restricted work?**

Restricted work activity occurs when, as the result of a work-related injury or illness, an employer or health care professional keeps, or recommends keeping, an employee from doing the routine functions of his or her job or from working the full workday that the employee would have been scheduled to work before the injury or illness occurred.

#### **How do you count the number of days of restricted work activity or the number of days away from work?**

Count the number of calendar days the employee was on restricted work activity or was away from work as a result of the recordable injury or illness. Do not count the day on which the injury or illness occurred in this number. Begin counting days from the day after the incident occurs. If a single injury or illness involved both days away from work and days of restricted work activity, enter the total number of days for each. You may stop counting days of restricted work activity or days away from work once the total of either or the combination of both reaches 180 days.

#### **Under what circumstances should you NOT enter the employee's name on the OSHA Form 300?**

You must consider the following types of injuries or illnesses to be privacy concern cases:

- ▼ an injury or illness to an intimate body part or to the reproductive system,
- ▼ an injury or illness resulting from a sexual assault,
- ▼ a mental illness,
- ▼ a case of HIV infection, hepatitis, or tuberculosis,
- ▼ a needlestick injury or cut from a sharp object that is contaminated with blood or other potentially infectious material (see 29 CFR Part 1904.8 for definition), and
- ▼ other illnesses, if the employee independently and voluntarily requests that his or her name not be entered on the log.

You must not enter the employee's name on the OSHA 300 Log for these cases. Instead, enter "privacy case" in the space normally used for the employee's name. You must keep a separate, confidential list of the case numbers and employee names for the establishment's privacy concern cases so that you can update the cases and provide information to the government if asked to do so.

If you have a reasonable basis to believe that information describing the privacy concern case may be personally identifiable even though the employee's name has been omitted, you may use discretion in describing the injury or illness on both the OSHA 300 and 301 forms. You must enter enough information to identify the cause of the incident and the general severity of

the injury or illness, but you do not need to include details of an intimate or private nature.

#### **What if the outcome changes after you record the case?**

If the outcome or extent of an injury or illness changes after you have recorded the case, simply draw a line through the original entry or, if you wish, delete or white-out the original entry. Then write the new entry where it belongs. Remember, you need to record the most serious outcome for each case.

#### **Classifying injuries**

An injury is any wound or damage to the body resulting from an event in the work environment.

*Examples:* Cut, puncture, laceration, abrasion, fracture, bruise, contusion, chipped tooth, amputation, insect bite, electrocution, or a thermal, chemical, electrical, or radiation burn. Sprain and strain injuries to muscles, joints, and connective tissues are classified as injuries when they result from a slip, trip, fall or other similar accidents.

## Classifying illnesses

### Skin diseases or disorders

Skin diseases or disorders are illnesses involving the worker's skin that are caused by work exposure to chemicals, plants, or other substances.

*Examples:* Contact dermatitis, eczema, or rash caused by primary irritants and sensitizers or poisonous plants; oil acne; friction blisters, chrome ulcers; inflammation of the skin.

### Respiratory conditions

Respiratory conditions are illnesses associated with breathing hazardous biological agents, chemicals, dust, gases, vapors, or fumes at work.

*Examples:* Silicosis, asbestosis, pneumonitis, pharyngitis, rhinitis or acute congestion; farmer's lung, beryllium disease, tuberculosis, occupational asthma, reactive airways dysfunction syndrome (RADS), chronic obstructive pulmonary disease (COPD), hypersensitivity pneumonitis, toxic inhalation injury, such as metal fume fever, chronic obstructive bronchitis, and other pneumoconioses.

### Poisoning

Poisoning includes disorders evidenced by abnormal concentrations of toxic substances in blood, other tissues, other bodily fluids, or the breath that are caused by the ingestion or absorption of toxic substances into the body.

*Examples:* Poisoning by lead, mercury,

cadmium, arsenic, or other metals; poisoning by carbon monoxide, hydrogen sulfide, or other gases; poisoning by benzene, benzol, carbon tetrachloride, or other organic solvents; poisoning by insecticide sprays, such as parathion or lead arsenate; poisoning by other chemicals, such as formaldehyde.

### Hearing Loss

Noise-induced hearing loss is defined for recordkeeping purposes as a change in hearing threshold relative to the baseline audiogram of an average of 10 dB or more in either ear at 2000, 3000 and 4000 hertz, and the employee's total hearing level is 25 decibels (dB) or more above audiometric zero (also averaged at 2000, 3000, and 4000 hertz) in the same ear(s).

### All other illnesses

All other occupational illnesses.

*Examples:* Heatstroke, sunstroke, heat exhaustion, heat stress and other effects of environmental heat; freezing, frostbite, and other effects of exposure to low temperatures; decompression sickness; effects of ionizing radiation (isotopes, x-rays, radium); effects of nonionizing radiation (welding flash, ultra-violet rays, lasers); anthrax; bloodborne pathogenic diseases, such as AIDS, HIV, hepatitis B or hepatitis C; brucellosis; malignant or benign tumors; histoplasmosis; coccidioidomycosis.

## When must you post the Summary?

You must post the *Summary* only — not the *Log* — by February 1 of the year following the year covered by the form and keep it posted until April 30 of that year.

## How long must you keep the Log and Summary on file?

You must keep the *Log* and *Summary* for 5 years following the year to which they pertain.

## Do you have to send these forms to OSHA at the end of the year?

No. You do not have to send the completed forms to OSHA unless specifically asked to do so.

## How can we help you?

If you have a question about how to fill out the *Log*,

- visit us online at [www.osha.gov](http://www.osha.gov) or
- call your local OSHA office.

## Optional

# Calculating Injury and Illness Incidence Rates

### What is an incidence rate?

An incidence rate is the number of recordable injuries and illnesses occurring among a given number of full-time workers (usually 100 full-time workers) over a given period of time (usually one year). To evaluate your firm's injury and illness experience over time or to compare your firm's experience with that of your industry as a whole, you need to compute your incidence rate. Because a specific number of workers and a specific period of time are involved, these rates can help you identify problems in your workplace and/or progress you may have made in preventing work-related injuries and illnesses.

### How do you calculate an incidence rate?

You can compute an occupational injury and illness incidence rate for all recordable cases or for cases that involved days away from work for your firm quickly and easily. The formula requires that you follow instructions in paragraph (a) below for the total recordable cases or those in paragraph (b) for cases that involved days away from work, and for both rates the instructions in paragraph (c).

(a) To find out the total number of recordable injuries and illnesses that occurred during the year, count the number of line entries on your OSHA Form 300, or refer to the OSHA Form 300A and sum the entries for columns (G), (H), (I), and (J).

(b) To find out the number of injuries and illnesses that involved days away from work, count the number of line entries on your OSHA Form 300 that received a check mark in column (H), or refer to the entry for column

(H) on the OSHA Form 300A.

(c) The number of hours all employees actually worked during the year. Refer to OSHA Form 300A and optional worksheet to calculate this number.

You can compute the incidence rate for all recordable cases of injuries and illnesses using the following formula:

$$\frac{\text{Total number of injuries and illnesses} \times 200,000}{\text{Number of hours worked by all employees}} = \text{Total recordable case rate}$$

(The 200,000 figure in the formula represents the number of hours 100 employees working 40 hours per week, 50 weeks per year would work, and provides the standard base for calculating incidence rates.)

You can compute the incidence rate for recordable cases involving days away from work, days of restricted work activity or job transfer (DART) using the following formula:

$$\frac{(\text{Number of entries in column H} + \text{Number of entries in column I}) \times 200,000}{\text{Number of hours worked by all employees}} = \text{DART incidence rate}$$

You can use the same formula to calculate incidence rates for other variables such as cases involving restricted work activity (column (I) on Form 300A), cases involving skin disorders (column (M-2) on Form 300A), etc. Just substitute the appropriate total for these cases, from Form 300A, into the formula in place of the total number of injuries and illnesses.

### What can I compare my incidence rate to?

The Bureau of Labor Statistics (BLS) conducts a survey of occupational injuries and illnesses each year and publishes incidence rate data by

various classifications (e.g., by industry, by employer size, etc.). You can obtain these published data at [www.bls.gov/iif](http://www.bls.gov/iif) or by calling a BLS Regional Office.

### Worksheet

Total number of injuries and illnesses		Number of hours worked by all employees		Total recordable case rate
<input type="text"/>	X 200,000	÷	<input type="text"/>	= <input type="text"/>

Number of entries in Column H + Column I		Number of hours worked by all employees		DART incidence rate
<input type="text"/>	X 200,000	÷	<input type="text"/>	= <input type="text"/>



# How to Fill Out the Log

The *Log of Work-Related Injuries and Illnesses* is used to classify work-related injuries and illnesses and to note the extent and severity of each case. When an incident occurs, use the *Log* to record specific details about what happened and how it happened.

If your company has more than one establishment or site, you must keep separate records for each physical location that is expected to remain in operation for one year or longer.

We have given you several copies of the *Log* in this package. If you need more than we provided, you may photocopy and use as many as you need.

The *Summary* — a separate form — shows the work-related injury and illness totals for the year in each category. At the end of the year, count the number of incidents in each category and transfer the totals from the *Log* to the *Summary*. Then post the *Summary* in a visible location so that your employees are aware of injuries and illnesses occurring in their workplace.

**You don't post the Log. You post only the Summary at the end of the year.**

OSHA's Form 300 (Rev. 01/2004)  
**Log of Work-Related Injuries and Illnesses**

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year 20       
 U.S. Department of Labor  
 Occupational Safety and Health Administration

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.6 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name XYZ Company State MA  
 County Amherst

Identify the person		Describe the case				Classify the case CHECK ONLY ONE box for each case based on the most serious outcome for that case				Enter the number of days the injured or ill worker was		Check the "Injury" column or choose one type of illness																
(A) Case no.	(B) Employee's name	(C) Job title (e.g. Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g. Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g. Second degree burns on right forearm from acetylene torch)	Remained at Work				Away from work	On job transfer or restriction	(M) Injury or illness type																
						(G) Days away from work	(H) Job transfer or restriction	(I) Other recordable cases	(J) Other recordable cases	(K) Days	(L) Days	(1) Skin	(2) Blow, bruise, or laceration	(3) Burn	(4) Fracture (broken bone)	(5) Injury to eye	(6) Injury to hand/wrist/finger	(7) Injury to back	(8) Injury to foot/ankle	(9) Injury to head/face	(10) Injury to ear	(11) Injury to nose	(12) Injury to mouth	(13) Injury to chest	(14) Injury to internal organs	(15) Injury to reproductive system	(16) Injury to other	
1	Mark Bogin	Welder	5 / 25 morning	basement	fracture, left arm and left leg, fell from ladder	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12	15	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Shana Alexander	Foundry man	7 / 2 morning	pouring deck	poisoning from lead fumes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	30	30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Sam Sander	Electrician	8 / 15 morning	2nd floor storeroom	broken left foot, fell over box	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7	30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Ralph Borella	Laborer	9 / 17 morning	packaging dept	Back strain lifting boxes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3	days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Jared Daniels	Machine op.	10 / 23 morning	production floor	dust in eye	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	days	days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Be as specific as possible. You can use two lines if you need more room.

Revise the log if the injury or illness progresses and the outcome is more serious than you originally recorded for the case. Cross out, erase, or white-out the original entry.

Choose ONLY ONE of these categories. Classify the case by recording the most serious outcome of the case, with column G (Death) being the most serious and column J (Other recordable cases) being the least serious.

Note whether the case involves an injury or an illness.

# Log of Work-Related Injuries and Illnesses

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Form approved OMB no. 1218-0176

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_

Identify the person			Describe the case			Classify the case CHECK ONLY ONE box for each case based on the most serious outcome for that case:				Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness:					
(A) Case no.	(B) Employee's name	(C) Job title (e.g., Welder)	(D) Date of injury or onset of illness	(E) Where the event occurred (e.g., Loading dock north end)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)	Remained at Work				Away from work	On job transfer or restriction	Injury					
						Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other recordable cases (J)	(K)	(L)	(1)	(2)	(3)	(4)	(5)	(6)
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	month/day	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ days	_____ days	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Page totals ►

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

Page \_\_\_ of \_\_\_

Injury	Skin disorder	Respiratory condition	Poisoning	Hearing loss	All other illnesses
(1)	(2)	(3)	(4)	(5)	(6)

# Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

### Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
(G)	(H)	(I)	(J)

### Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
(K)	(L)

### Injury and Illness Types

Total number of . . . (M)

(1) Injuries	_____	(4) Poisonings	_____
(2) Skin disorders	_____	(5) Hearing loss	_____
(3) Respiratory conditions	_____	(6) All other illnesses	_____

**Post this Summary page from February 1 to April 30 of the year following the year covered by the form.**

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

### Establishment information

Your establishment name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Industry description (e.g., *Manufacture of motor truck trailers*) \_\_\_\_\_

Standard Industrial Classification (SIC), if known (e.g., 3715) \_\_\_\_\_

OR

North American Industrial Classification (NAICS), if known (e.g., 336212) \_\_\_\_\_

**Employment information** (If you don't have these figures, see the Worksheet on the back of this page to estimate.)

Annual average number of employees \_\_\_\_\_

Total hours worked by all employees last year \_\_\_\_\_

### Sign here

**Knowingly falsifying this document may result in a fine.**

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive \_\_\_\_\_ Title \_\_\_\_\_

(\_\_\_\_\_) - \_\_\_\_\_ / /  
Phone \_\_\_\_\_ Date \_\_\_\_\_

## Optional

# Worksheet to Help You Fill Out the Summary

At the end of the year, OSHA requires you to enter the average number of employees and the total hours worked by your employees on the summary. If you don't have these figures, you can use the information on this page to estimate the numbers you will need to enter on the Summary page at the end of the year.

### How to figure the average number of employees who worked for your establishment during the year:

- 1 **Add** the total number of employees your establishment paid in all pay periods during the year. Include all employees: full-time, part-time, temporary, seasonal, salaried, and hourly.
 

The number of employees paid in all pay periods = ① \_\_\_\_\_
- 2 **Count** the number of pay periods your establishment had during the year. Be sure to include any pay periods when you had no employees.
 

The number of pay periods during the year = ② \_\_\_\_\_
- 3 **Divide** the number of employees by the number of pay periods.
 

$\frac{\textcircled{1}}{\textcircled{2}} = \textcircled{3}$  \_\_\_\_\_
- 4 **Round the answer** to the next highest whole number. Write the rounded number in the blank marked *Annual average number of employees*.
 

The number rounded = ④ \_\_\_\_\_

For example, Acme Construction figured its average employment this way:

For pay period...	Acme paid this number of employees...		
1	10	Number of employees paid = 830	①
2	0		
3	15	Number of pay periods = 26	②
4	30		
5	40	$\frac{830}{26} = 31.92$	③
▼	▼	26	
24	20	31.92 rounds to 32	④
25	15		
26	+10	32 is the annual average number of employees	
	830		

### How to figure the total hours worked by all employees:

Include hours worked by salaried, hourly, part-time and seasonal workers, as well as hours worked by other workers subject to day to day supervision by your establishment (e.g., temporary help services workers).

Do not include vacation, sick leave, holidays, or any other non-work time, even if employees were paid for it. If your establishment keeps records of only the hours paid or if you have employees who are not paid by the hour, please estimate the hours that the employees actually worked.

If this number isn't available, you can use this optional worksheet to estimate it.

### Optional Worksheet

- \_\_\_\_\_ **Find** the number of full-time employees in your establishment for the year.
- X \_\_\_\_\_ **Multiply** by the number of work hours for a full-time employee in a year.
- \_\_\_\_\_ This is the number of full-time hours worked.
- + \_\_\_\_\_ **Add** the number of any overtime hours as well as the hours worked by other employees (part-time, temporary, seasonal)
- \_\_\_\_\_ **Round** the answer to the next highest whole number. Write the rounded number in the blank marked *Total hours worked by all employees last year*.

# OSHA's Form 301 Injury and Illness Incident Report

**Attention:** This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.



**U.S. Department of Labor**  
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

### Information about the employee

- 1) Full name \_\_\_\_\_
- 2) Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_
- 3) Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_
- 4) Date hired \_\_\_\_/\_\_\_\_/\_\_\_\_
- 5)  Male  
 Female

### Information about the physician or other health care professional

- 6) Name of physician or other health care professional \_\_\_\_\_  
\_\_\_\_\_
- 7) If treatment was given away from the worksite, where was it given?  
Facility \_\_\_\_\_  
Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_
- 8) Was employee treated in an emergency room?  
 Yes  
 No
- 9) Was employee hospitalized overnight as an in-patient?  
 Yes  
 No

### Information about the case

- 10) Case number from the Log \_\_\_\_\_ (Transfer the case number from the Log after you record the case.)
- 11) Date of injury or illness \_\_\_\_/\_\_\_\_/\_\_\_\_
- 12) Time employee began work \_\_\_\_\_ AM / PM
- 13) Time of event \_\_\_\_\_ AM / PM  Check if time cannot be determined
- 14) **What was the employee doing just before the incident occurred?** Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. *Examples:* "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."
- 15) **What happened?** Tell us how the injury occurred. *Examples:* "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."
- 16) **What was the injury or illness?** Tell us the part of the body that was affected and how it was affected; be more specific than "hurt," "pain," or "sore." *Examples:* "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."
- 17) **What object or substance directly harmed the employee?** *Examples:* "concrete floor"; "chlorine"; "radial arm saw." *If this question does not apply to the incident, leave it blank.*
- 18) **If the employee died, when did death occur?** Date of death \_\_\_\_/\_\_\_\_/\_\_\_\_

Completed by \_\_\_\_\_

Title \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_-\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## If You Need Help...

If you need help deciding whether a case is recordable, or if you have questions about the information in this package, feel free to contact us. We'll gladly answer any questions you have.

▼ Visit us online at [www.osha.gov](http://www.osha.gov)

▼ Call your OSHA Regional office and ask for the recordkeeping coordinator

or

▼ Call your State Plan office

### Federal Jurisdiction

Region 1 - 617 / 565-9860  
**Connecticut; Massachusetts; Maine; New Hampshire; Rhode Island**

Region 2 - 212 / 337-2378  
**New York; New Jersey**

Region 3 - 215 / 861-4900  
**DC; Delaware; Pennsylvania; West Virginia**

Region 4 - 404 / 562-2300  
**Alabama; Florida; Georgia; Mississippi**

Region 5 - 312 / 353-2220  
**Illinois; Ohio; Wisconsin**

Region 6 - 214 / 767-4731  
**Arkansas; Louisiana; Oklahoma; Texas**

Region 7 - 816 / 426-5861  
**Kansas; Missouri; Nebraska**

Region 8 - 303 / 844-1600  
**Colorado; Montana; North Dakota; South Dakota**

Region 9 - 415 / 975-4310

Region 10 - 206 / 553-5930  
**Idaho**

### State Plan States

Alaska - 907 / 269-4957

Arizona - 602 / 542-5795

California - 415 / 703-5100

\*Connecticut - 860 / 566-4380

Hawaii - 808 / 586-9100

Indiana - 317 / 232-2688

Iowa - 515 / 281-3661

Kentucky - 502 / 564-3070

Maryland - 410 / 767-2371

Michigan - 517 / 322-1848

Minnesota - 651 / 284-5050

Nevada - 702 / 486-9020

\*New Jersey - 609 / 984-1389

New Mexico - 505 / 827-4230

\*New York - 518 / 457-2574

North Carolina - 919 / 807-2875

Oregon - 503 / 378-3272

Puerto Rico - 787 / 754-2172

South Carolina - 803 / 734-9669

Tennessee - 615 / 741-2793

Utah - 801 / 530-6901

Vermont - 802 / 828-2765

Virginia - 804 / 786-6613

Virgin Islands - 340 / 772-1315

Washington - 360 / 902-5601

Wyoming - 307 / 777-7786

\*Public Sector only



### ***Have questions?***

If you need help in filling out the *Log* or *Summary*, or if you have questions about whether a case is recordable, contact us. We'll be happy to help you. You can:

- ▼ Visit us online at: [www.osha.gov](http://www.osha.gov)
- ▼ Call your regional or state plan office. You'll find the phone number listed inside this cover.

# OSHA COMPLIANCE AND SAFETY HAZARD QUICK CHECKLIST\*



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	Yes	No	N/A
Is the "It's the Law" poster (OSHA 3165 or state equivalent) appropriately displayed?			
Is OSHA Form 300 (log of work-related injuries and illnesses) appropriately maintained?			
Is OSHA Form 300A (summary of work-related injuries and illnesses) appropriately displayed between February 1 and April 30?			
Are there copies of all applicable OSHA and state/local regulations available?			
Are there appropriate warning signs posted for noise hazards?			
Is there a written safety training program?			
Are all staff members trained before they are exposed to hazards?			
Are staff members aware of the requirements for reporting work-related injuries and illnesses?			
Is there a medical treatment facility designated to receive injured or ill staff members both during and after regular business hours?			
Are Accident Reports completed for all incidents that: <ul style="list-style-type: none"> <li>• require treatment other than self-aid</li> <li>• result in lost work time</li> <li>• result in restriction of work or movement</li> <li>• involve an animal bite or scratch that breaks the skin</li> <li>• involve a loss of consciousness</li> <li>• result in death</li> </ul>			
Are all accident/injury incidents investigated?			
Is there a written Hazard Communication Plan? Is it posted appropriately?			
Is there a complete and up-to-date Hazardous Materials list?			
Is the MSDS binder kept up-to-date and accessible to staff at all times?			
Are all secondary containers labeled appropriately?			
Is the required PPE for all tasks available and maintained in good condition?			
Is there a chemical spill kit available that is suitable for the chemicals used?			
Is there a written policy in place requiring staff to wear specified PPE for tasks that require it?			
Is there an appropriate faucet-mounted eyewash station located in or close to any area where chemicals are used?			
Are there at least two exit routes from the facility?			
Are there exit diagrams posted where indicated?			
Are there illuminated exit signs posted above all exits and emergency exits?			
Is there adequate emergency lighting?			
Is there a written Fire Prevention and Emergency Response Plan? Is it posted appropriately?			

	Yes	No	N/A
Is there a fire extinguisher located within 75 ft of any given location within the facility?			
Is the electrical wiring in the facility adequate and free from damage?			
Are areas around heaters and dryers kept free of clutter and debris?			
Is there a written policy prohibiting food and beverages in all areas where animals, biological hazards, or chemical hazards may be present?			
Are compressed-gas cylinders properly stored and secured?			
Is there a written Anesthetic Gas Safety Plan? Is it posted appropriately?			
Are staff members properly trained on the hazards of waste anesthetic gases (WAG)?			
Is there an appropriate scavenging system in place for WAG and is it adequately maintained?			
Is staff provided with and required to wear a personal dosimetry badge to measure WAG levels when working in areas where anesthetic gases are used?			
Are all anesthesia machines checked for leaks daily and professionally serviced regularly?			
Are there appropriate hazard warning signs posted for ionizing radiation?			
Is there a written SOP in place addressing the safe operation of the x-ray machine? Is it posted appropriately?			
Is the state-mandated Notice to Employees posted in the x-ray room if applicable?			
Is staff provided with and required to wear a personal dosimetry badge to measure ionizing radiation levels when taking x-rays?			
Is there an exhaust fan located in the x-ray darkroom?			
Is there adequate and appropriate handling and restraint equipment available for all species? Is equipment maintained in good repair?			
Have all staff members been adequately trained in safe animal handling techniques and the proper use of animal handling and restraint equipment?			
Is staff adequately trained on zoonotic diseases?			
Is there a written Workplace Violence Prevention Plan?			
Is staff adequately trained on violence and robbery prevention and response?			
Is there adequate lighting in the parking lot and around the exterior of the building?			
Are "Staff Only" entrances/exits kept locked at all times?			
Is there a drop safe where deposits are made at the end of each shift/day?			
Are there other security measures in place (e.g., alarm system, video cameras, panic buttons)?			

\*Note that this checklist is not intended to be comprehensive for all OSHA standards. It is intended to serve as a quick reference guide for the most critical OSHA compliance issues and safety hazards encountered in animal shelters.

## WORK HAZARD ASSESSMENT FORM



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Please make a copy of this form for each room in your shelter, and use it to assess work and safety hazards throughout your facility.

Name of Room/Area:	Yes	No	N/A
Is the lighting in the room adequate for the specific tasks performed?			
Are the floor surfaces even and free from tripping hazards?			
Are there at least two means of egress from the area?			
Are exits obvious and/or properly marked?			
Are the routes of egress free from obstructions and hindrances?			
Is emergency lighting available if indicated?			
Is the air free from excessive levels of chemical fumes or odors?			
Is there an exhaust fan installed in the area if indicated?			
Is there a working smoke detector in the area?			
Is there a fire extinguisher within 75 feet of the area?			
Are all electrical services and equipment in good repair and suitable for the area and load?			
Is the area maintained in a sanitary manner?			
Are all materials and equipment stored safely and appropriately?			
Are all containers of hazardous chemicals appropriately labeled?			
Is there an appropriate eyewash station in close proximity?			
Are sharps and medical waste materials disposed of properly?			
Are noise levels above 85 dB for an 8-hour TWA? If yes, are appropriate noise hazard warning signs posted? Is staff required to wear hearing protection in the area if indicated?			
Is the consumption of food and beverages prohibited in the area if applicable?			
Is the required PPE available for all tasks performed in the area? Is the PPE stored in close proximity and easily accessible at all times?			



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**Template for Creating a  
Written Hazard  
Communication Plan**

## STEP 1

### DESIGNATE THE STAFF MEMBER RESPONSIBLE FOR IMPLEMENTING THIS STANDARD IN YOUR SHELTER

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

### ADDITIONAL TEAM MEMBERS

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_

Name \_\_\_\_\_ Title \_\_\_\_\_



## STEP 2

### MAKE A LIST OF ALL HAZARDOUS CHEMICALS IN YOUR SHELTER

You **do not** need to list chemicals that meet **all** of the following requirements:

1. They are consumer products.
2. They are used only for the purpose intended by the manufacturer.
3. They are not used more frequently or in larger quantities than a consumer uses them.

(See **Section 18.0, Hazardous Materials List**, in *American Humane's Complete OSHA and Safety Guide for Animal Shelters*.)

## STEP 3

### **OBTAIN A MATERIAL SAFETY DATA SHEET (MSDS) FOR EACH CHEMICAL ON THE LIST**

(See **Section 19.0, Material Safety Data Sheets**, in *American Humane's Complete OSHA and Safety Guide for Animal Shelters*.)

## STEP 4

### ENSURE THAT ALL CONTAINERS ARE PROPERLY LABELED

**Proper labels should indicate:**

- Name of hazardous chemical as indicated on the MSDS
- Specific organ(s) affected (e.g., damages lungs, irritates skin, causes dizziness)
- Name and address of the chemical manufacturer, importer or other responsible party (only for shipped containers)

When chemicals are transferred to a secondary container, they must also be properly labeled with the chemical name and appropriate hazard warnings (See **Section 20.0, Secondary Container Labels**, in *American Humane's Complete OSHA and Safety Guide for Animal Shelters*.)

## STEP 5

### CREATE A WRITTEN HAZARD COMMUNICATION PLAN

*Example:*

\_\_\_\_\_ is responsible for the communication and implementation of the program.  
(designated person/job title)

#### **Hazardous Materials List**

The Hazardous Materials List is sorted alphabetically and can be found in the front of the MSDS binder.

#### **Material Safety Data Sheets (MSDSs)**

An MSDS for each hazardous chemical to which employees are or may be exposed will be obtained and made readily available according to the requirements of Section (g) of the standard. For new chemicals, MSDSs will be made available prior to use. For hazardous chemicals produced internally (such as carbon monoxide and welding fumes), an MSDS may be used or developed to satisfy the physical and health hazard communication requirements.

#### **Labels**

Labels for each hazardous chemical will be inspected for compliance with the OSHA standard to ensure that proper forms of warning are posted.

1. The type of secondary container labeling system we will use is \_\_\_\_\_.
2. \_\_\_\_\_ is responsible for ensuring that all containers are properly labeled.
3. Employees are responsible for reporting unlabeled containers to \_\_\_\_\_.

#### **Employee Training**

1. Training on hazardous chemicals as required by OSHA will be provided to all employees at the time of initial hiring (for existing hazards), whenever a new hazard is introduced into the workplace, and when new information about the hazards of a chemical is found.
2. Required information will be obtained from the MSDSs.



3. Employees will be trained to be able to verbally recall fundamental health and physical hazards associated with the specific chemicals to which they are exposed.
4. The designated trainers are (names and job titles) \_\_\_\_\_.
5. The training methods include the following \_\_\_\_\_.

### **Multi-Employer Activity**

Other employers whose employees work in our facility will be provided access to the written Hazard Communication Plan. They will be shown the MSDSs for the chemicals to which they may be exposed and will be informed of any precautionary measures, such as signs and procedures, necessary to protect them during normal operating conditions or in the event of foreseeable emergencies. The labeling system we use will be explained to them. Our employees who work in other employer worksites must be afforded the same conditions before beginning work.

### **Non-Routine Tasks**

Periodically, employees are required to perform non-routine tasks which are hazardous. Some examples of non-routine tasks are: \_\_\_\_\_.

Prior to starting work on such projects, each affected employee will be given information by the safety manager about the hazardous chemicals he or she may encounter during such activity. This information will include specific chemical hazards, protective and safety measures the employee can use, and steps the organization is taking to reduce the hazards, including ventilation, respirators, the presence of another employee, and emergency procedures.

## STEP 6

### **TRAIN THE EMPLOYEES ABOUT THE HAZARDOUS CHEMICALS THEY WORK WITH OR MAY BE EXPOSED TO IN A FORSEEABLE EMERGENCY**

After training has been completed, employees should be able to answer the following questions:

1. Where is this chemical present?
2. What are the short- and long-term effects of the chemical on the body?
3. How can you detect if you are overexposed to the chemical?
4. How can you protect yourself from overexposure?
5. Where are the MSDS binder, hazardous chemical list, and written hazard communication plan located?

Be sure to document all training in each employee's personnel file.

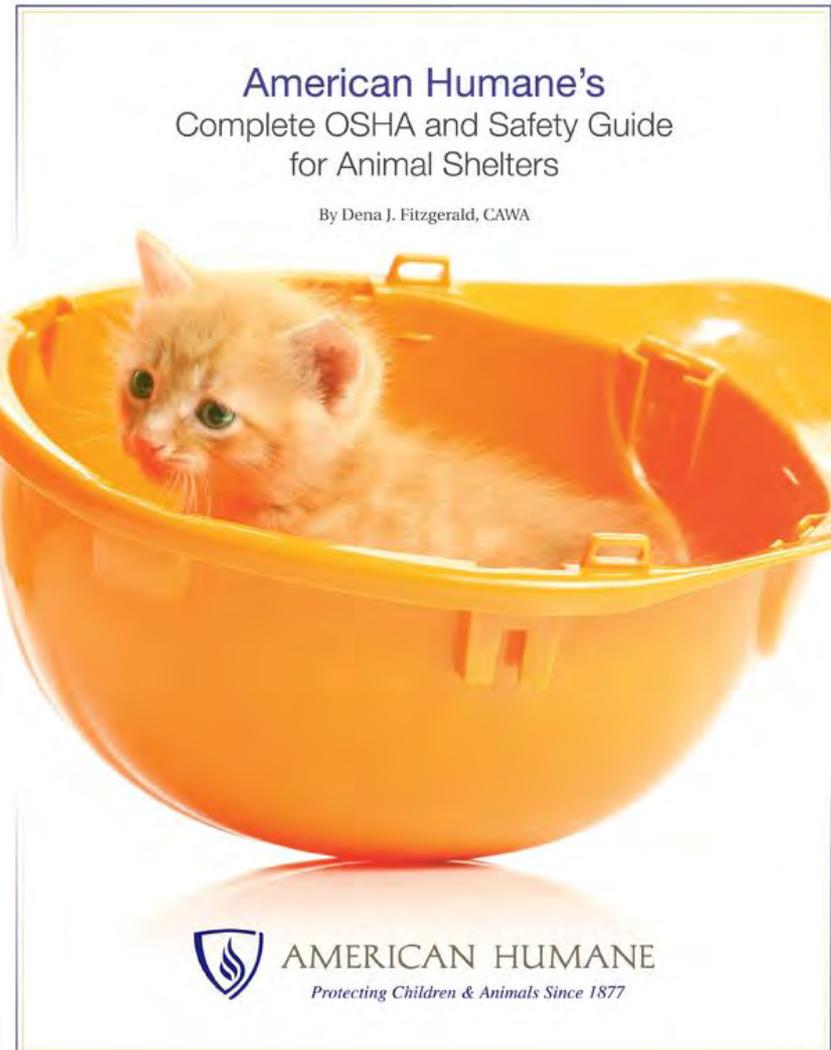
Welcome to today's presentation. We are delighted to have your participation. While you are waiting for the presentation to begin below are a few helpful tips:

- **TO JOIN THE AUDIO PORTION OF THE PRESENTATION, PLEASE CALL (800)832-0736 AND ENTER CODE 9283443.**
- **PLEASE DO NOT PUT YOUR PHONE ON HOLD**
- **PLEASE MUTE YOUR PHONE BY USING YOUR MUTE BUTTON OR BY PRESSING \*45# ON YOUR TELEPHONE KEYPAD**
- **IF YOU HAVE ANY DIFFICULTIES, PLEASE EMAIL [paulac@americanhumane.org](mailto:paulac@americanhumane.org)**

**AMERICAN HUMANE ASSOCIATION**

*The nation's voice for the protection of children & animals*

# OSHA Compliance For Animal Shelters



# CAUTION

IF YOU THINK  
OSHA IS A  
SMALL TOWN  
IN WISCONSIN  
YOU'RE IN  
TROUBLE

BRADY® MS1134



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# What is OSHA?

The Occupational Safety and Health Administration is an agency of the U.S. Department of Labor created under the Occupational Safety and Health Act of 1970. OSHA's mission is to prevent work-related injuries, illnesses and deaths by issuing and enforcing federal standards for workplace safety. All OSHA standards and guidelines can be found at [www.osha.gov](http://www.osha.gov)



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# Why should I worry about OSHA?

- Keep employees safe on the job
- It's the law
- Reduce absenteeism due to work-related injuries or illnesses
- Reduce worker's comp claims and insurance costs
- Decrease the likelihood of OSHA inspections, citations and fines



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# State OSHA's

## States with approved plans covering both public and private sectors:

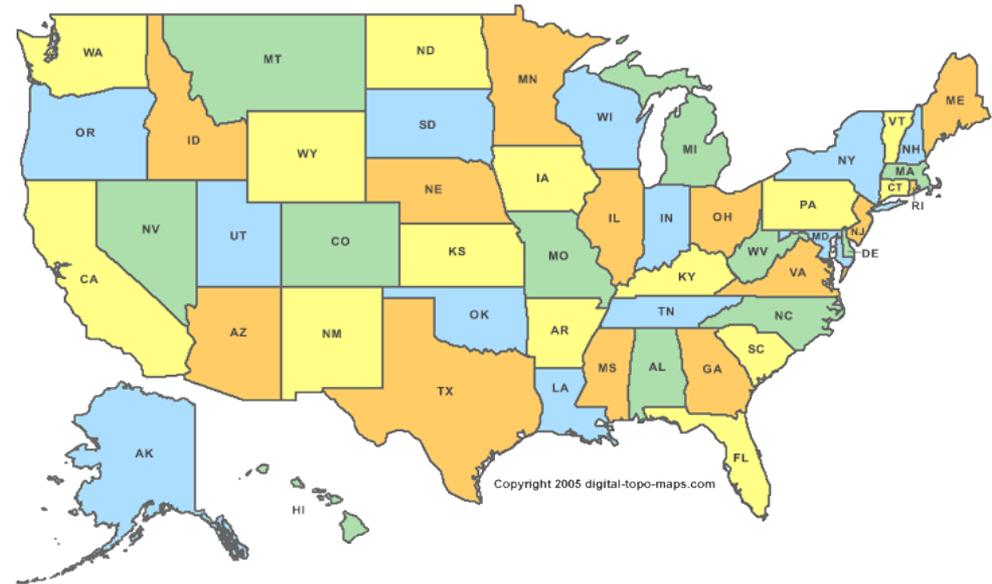
- Alaska
- Arizona
- California
- Hawaii
- Indiana
- Iowa
- Kentucky
- Maryland
- Michigan
- Minnesota
- Nevada
- New Mexico
- North Carolina
- Oregon
- Puerto Rico
- South Carolina
- Tennessee
- Utah
- Vermont
- Virginia
- Washington
- Wyoming

## States with approved plans covering the public sector only:

- Connecticut
- New Jersey
- New York
- Virgin Islands

## States with unapproved plans:

- Ohio



# New Mexico Occupational Health & Safety Bureau

Your state plan can be found here:

[http://www.nmenv.state.nm.us/Ohsb\\_Website/  
StatePlan/](http://www.nmenv.state.nm.us/Ohsb_Website/StatePlan/)



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# OSHA's General Duty Clause

- Some of the most critical safety issues in shelters are not specifically addressed by any OSHA standard, but they do fall under the “General Duty Clause”
- The General Duty Clause requires an employer to *“furnish to each of his employees employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees”*



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# Create a Safety Manual



HERE ARE THE SAFETY MANUALS YOU WANTED



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# Create a Safety Manual

- Not required by OSHA
- Best means of organizing all safety related information in one place
- Separate from your general policies and procedures manual
- Primary means of communicating and enforcing your shelter's safety policies and procedures
- Every employee should receive a copy upon hire
- Maintain a copy in an easily accessible location, such as the staff break room



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# Create a Safety Manual

- Develop an outline
- Address one topic at a time
- Begin with the most serious safety issues
- Involve your staff
- Create a written policy
- Staff training
- Implementation
- Enforcement



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# Perform a Hazard Assessment

- Fill out a Work Hazard Assessment Form for each area and task
- Interview and observe staff
- Consult MSDS's for tasks that involve use of chemicals
- Make changes or adjustments to improve workplace safety
- Engineering controls
- Procedural Controls
- Use of PPE only when engineering or procedural controls are not possible



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# Know Your Employer Rights

- Implement and enforce safety rules in the workplace
- Be present or designate a representative be present during any inspection or investigation by OSHA
- Require that an OSHA compliance officer obtain a search warrant before entering or inspecting the business
- Request that an inspection be postponed to a more convenient time
- Maintain confidentiality of trade secrets



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# Know Your Employer Rights

- Consult an attorney before, during or after an inspection and before responding to any inquiry
- View any complaint that has been alleged against the business
- Require that employees be interviewed at a time that does not unreasonably impact their job duties
- Appeal findings or citations issued by OSHA



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# Know Your Employer Responsibilities

- Provide a workplace free from recognized or unnecessary hazards
- Implement and enforce safety rules and communicate them to employees in a clear manner
- Provide all required PPE and adequate training for its use
- Provide safety training to all employees on the potential hazards associated with their jobs and the steps necessary to perform their jobs safely



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# Know Your Employees' Rights

- Workplace free from recognized hazards
- Be informed of their rights under the OSH Act
- Be informed of known hazards
- Be trained to safely perform their job
- Be provided with and instructed on the use of all required PPE
- View and receive copies of all applicable OSHA standards



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# Know Your Employees' Rights

- Have access to all illness, injury and exposure records maintained as part of the business
- Be present in the workplace when safety monitoring is performed
- File a complaint with their employer and/or OSHA when a hazard requires correction
- Speak to an OSHA compliance officer privately during an inspection



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# Know Your Employees' Responsibilities

- Read the OSHA poster
- Comply with all applicable OSHA Standards
- Follow all employer safety and health rules
- Use required PPE
- Report any hazardous conditions to their employer
- Report any job-related injury or illness to their employer promptly
- Cooperate with an OSHA compliance officer during an inspection



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# Required Postings



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# OSHA Poster 3165

## You Have a Right to a Safe and Healthful Workplace. **IT'S THE LAW!**

- You have the right to notify your employer or OSHA about workplace hazards. You may ask OSHA to keep your name confidential.
- You have the right to request an OSHA inspection if you believe that there are unsafe and unhealthful conditions in your workplace. You or your representative may participate in the inspection.
- You can file a complaint with OSHA within 30 days of discrimination by your employer for making safety and health complaints or for exercising your rights under the OSH Act.
- You have a right to see OSHA citations issued to your employer. Your employer must post the citations at or near the place of the alleged violation.
- Your employer must correct workplace hazards by the date indicated on the citation and must certify that these hazards have been reduced or eliminated.
- You have the right to copies of your medical records or records of your exposure to toxic and harmful substances or conditions.
- Your employer must post this notice in your workplace.



The Occupational Safety and Health Act of 1970 (OSH Act), PL. 91-596, ensures safe and healthful working conditions for working men and women throughout the Nation. The Occupational Safety and Health Administration, in the U.S. Department of Labor, has the primary responsibility for administering the OSH Act. The rights listed here may vary depending on the particular circumstances. To file a complaint, report an emergency, or seek OSHA advice, assistance, or products, call 1-800-321-OSHA or your nearest OSHA office • Adams (604) 660-3300 • Boston (617) 565-6960 • Chicago (312) 353-2220 • Dallas (214) 767-4731 • Denver (303) 844-1600 • Kansas City (316) 426-5861 • New York (212) 337-2378 • Philadelphia (215) 861-4600 • San Francisco (415) 973-4310 • Seattle (206) 533-5939. Teleprinter (TTY) number is 1-877-480-5627. To file a complaint online or obtain more information on OSHA safety and health programs, visit OSHA's website at [www.osha.gov](http://www.osha.gov). If your workplace is in a state operating under an OSHA-approved plan, your employer must post the required state equivalent of this poster.

**1-800-321-OSHA**  
**[www.osha.gov](http://www.osha.gov)**

U.S. Department of Labor • Occupational Safety and Health Administration • OSHA 3165



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## NEW MEXICO JOB HEALTH AND SAFETY POSTER

You Have a Right in a Safe and Healthful Workplace

### IT'S THE LAW!



**Site Address / La Dirección a la Agencia**  
525 Camino de los Marquez,  
Site 3  
Santa Fe, NM 87505

**Mailing Address / Dirección de Envío:**  
PO Box 26110  
Santa Fe, NM 87502

**Telephone No./Número de Teléfono:**  
605-476-8700 or 1-877-610-6742

**Fax Number/Número de Facsimil:**  
605-476-8734



## SALUD DE TRABAJO Y CARTEL DE SEGURIDAD

Usted Tiene el Derecho a un Lugar de Trabajo Seguro y Saludable.

### ¡LO ESTABLECE LA LEY!

#### Empleados:

- Usted tiene el derecho de notificar a su empleador o a la OSHA sobre peligros en el lugar de trabajo.
- Usted también puede pedir que la OSHA no revele su nombre.
- Usted tiene el derecho de pedir a la OSHA de Nuevo México que realice una inspección si usted piensa que en su trabajo existen condiciones peligrosas o poco saludables. Usted o su representante pueden participar en esa inspección.
- Usted tiene 30 días para presentar una queja ante la OSHA de Nuevo México si su empleador llega a tomar represalias o discriminar en su contra por haber denunciado la condición de seguridad o salud o por ejercer los derechos consagrados bajo la Ley OSH de Nuevo México.
- Usted tiene el derecho de ver las citaciones emitidas por la OSHA a su empleador. Su empleador debe colocar las citaciones en el lugar donde se encontraron las supuestas infracciones o cerca de mismo.
- Su empleador debe corregir los peligros en el lugar de trabajo para la fecha indicada en la citación y debe certificar que dichos peligros se hayan reducido o desaparecido.
- Usted tiene derecho de recibir copias de su historial o registro médico y el registro de su exposición a sustancias o condiciones tóxicas o dañinas.
- Su empleador debe colocar este aviso en su lugar de trabajo.
- Usted debe cumplir con todas las normas de seguridad y salud ocupacionales expedidas conforme a la Ley OSH que sean aplicables a sus propias acciones y conducta en el trabajo.

#### Empleadores:

- Usted debe proporcionar a sus empleados un lugar de empleo libre de peligros conocidos.
- Usted debe cumplir con las normas de seguridad y salud ocupacionales expedidas conforme a la Ley OSH.

La Ley de Seguridad y Salud Ocupacional de 1970 (la Ley), P.L. 91-596, garantiza condiciones ocupacionales seguras y saludables para los hombres y las mujeres que desempeñan algún trabajo en todo el Estado de Nuevo México. La Administración de Seguridad y Salud Ocupacional (OSHA) es el responsable principal de supervisar la Ley. Los derechos que se indican en este documento pueden variar según las circunstancias particulares. Para presentar un reclamo, informar sobre una emergencia o pedir consejos y asistencia gratis de la OSHA, llame 1-877-610-6742 or (505) 476-8700. Número de facsimil: (505) 476-8734.

La Administración de Salud y Seguridad Ocupacional Federal supervisa la operación del programa estatal para asegurar su efectiva operación. Algunas quejas pueden registrarse en contacto con la administración de OSHA por parte del Estado, puede hacer así por ponerse en contacto con New Mexico Environment Department, Occupational Safety and Health Administration, 525 Griffin Street, Room 602, Dallas, Texas 75202, número de teléfono (972) 850-4145.

**NM OSHA - The Best Resource for Health and Safety!**  
**El Mejor Recurso para la Salud y Seguridad!**



R022607 MMP



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# Hazard Warning Signs



# Exit Signs



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# Other Required Postings

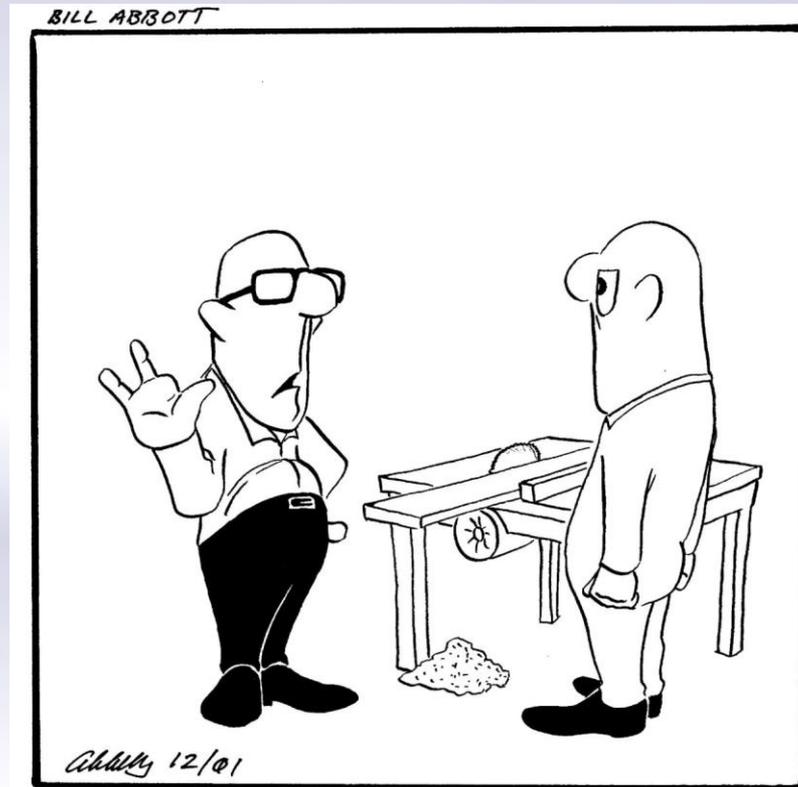
- Notices of OSHA inspections
- OSHA citations
- Written Hazard Communication Plan
- Written Fire Prevention and Emergency Response Plan



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# Staff Training



"Don't tell me how to work safely!  
I've been at this job for over five  
years!"



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# Staff Training

- Employees must be trained before they are exposed to a hazard
- Safety training must be documented
- Read shelter safety manual before starting
- Interactive training with manager



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# Required Training

- General Duty Clause
- Employee's rights and responsibilities
- Fire prevention and emergency response plan
- Noise exposure
- Ionizing radiation
- PPE
- Signs
- Medical services and first aid
- Portable fire extinguishers
- Hazard communication plan



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# Multi-Employer Workplaces



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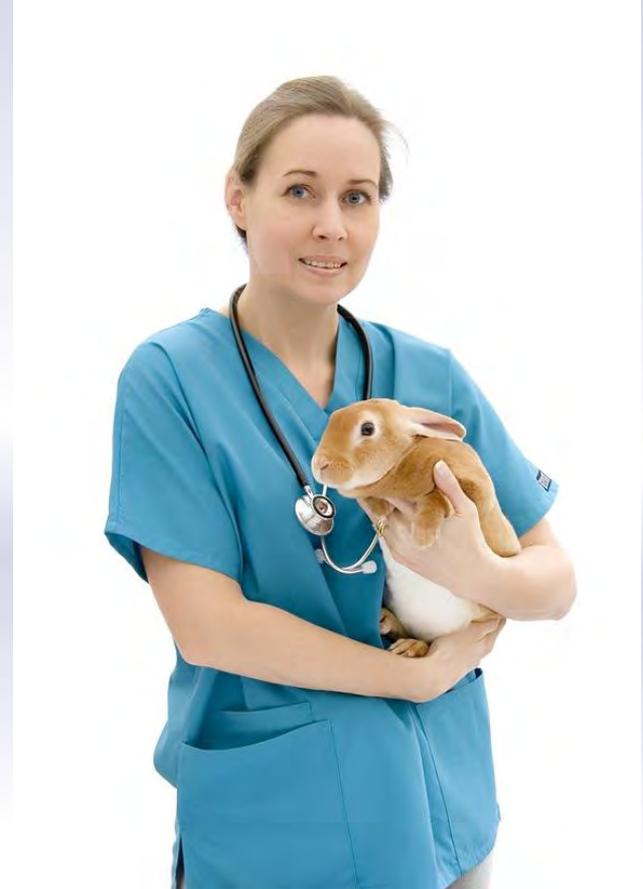
# Multi-Site Workplaces



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# Independent Contractors

- OSHA requires that you assume the role of employer
- Must undergo the same safety training and follow the same rules as you regular employees



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# Volunteers

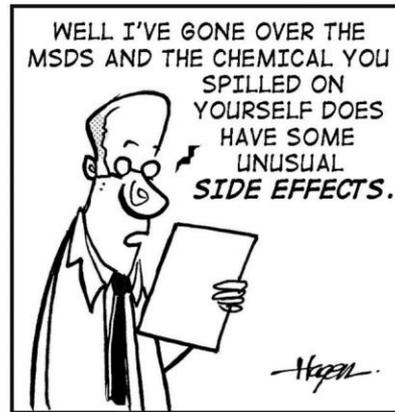
- NOT covered by OSHA
- Not required to report injuries, require PPE or provide safety training
- Volunteers that are adequately trained in safe animal handling and use of chemicals are more likely to have a positive experience



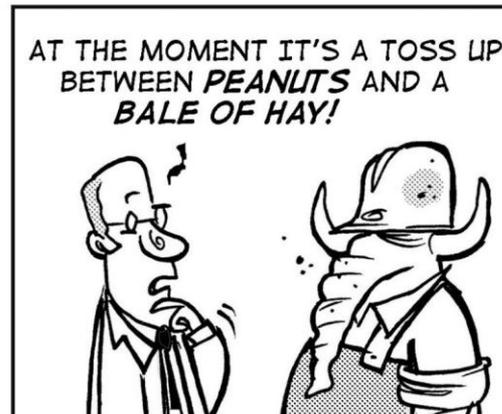
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# Work-Related Injuries and Illnesses



THE TROUBLE I'M HAVING IS WHAT TO PRESCRIBE.



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# Reporting of Work-Related Injuries and Illnesses

- Death
- Loss of consciousness
- Fractured bone
- Punctured eardrum
- Chronic or irreversible disease
- At least one day of missed work
- Restriction of abilities or duties
- Needle stick contaminated with human blood
- Removed from the job for medical reasons listed under the OSHA health standard
- Medical treatment other than first aid



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# What is considered first aid?

- Non-prescription medications
- Cleaning, flushing, soaking a superficial wound
- Wound coverings
- Hot or cold therapy
- Non-rigid means of support
- Eye patches
- Irrigation to remove foreign bodies in the eye
- Irrigation, tweezers to remove foreign bodies from other areas
- Finger guards
- Massage
- Tetanus vaccines
- Drinking fluids to relieve heat stress



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# Record Maintenance

- Shelters are NOT required to report work-related injuries or illnesses to OSHA unless they involve a death, work-place violence or hospitalization of five or more employees
- Records must be maintained for 5 years
- Records must be readily available for inspection by authorized state or federal OSHA officials
- Employees and former employees are permitted to access the Log (Form 300) and Summary (Form 300A) only



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# Personal Protective Equipment



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# Personal Protective Equipment

- PPE is NOT optional!!!!!!!!!!!!!!
- Maintain adequate quantities and appropriate sizes
- Allow staff to choose PPE
- Maintain in useable and sanitary condition



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# Noise Hazards

- OSHA requires a hearing conservation program when employees are exposed to noise levels above 85 dB based on an 8 hour time-weighted average (TWA)
- Most animal shelters have unacceptable noise levels in dog kennel areas
- Hearing protection required!!!



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# Noise Hazards



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# Hazard Communication Standard

- Also known as the “Right to Know Law”
- When employees are required to be exposed to a hazardous chemical, they have a right to be informed of the hazard, to be able to identify the hazard and know how to take protective measures to minimize their exposure
- Requires every business that handles, stores or uses potentially hazardous chemicals to have a written plan for informing workers of the safety information
- Applies to all chemicals on the premises



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# Hazard Communication Standard

Has five specific requirements:

1. The plan must be in writing
2. A complete list of all hazardous chemicals must be maintained at all times
3. A Material Safety Data Sheet (MSDS) must be maintained for each chemical on the list
4. All containers of hazardous chemicals must be properly labeled
5. All employees must be trained on the hazards and safety aspects of each chemical



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# Written Hazard Communication Plan

Must include the following:

1. Introduction stating the purpose of the plan
2. Name and contact information for the person(s) designated to handle safety issues
3. Description of the identification system used to label hazardous chemicals along with a sample label
4. Location of the MSDS binder and the method by which the sheets are filed
5. Detailed staff training information, including scheduling, materials used, objectives and person(s) responsible for conducting the training



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# Hazardous Materials List

- With very few exceptions, the list must include all products that are in liquid or powdered form
- Products with the same formulation, but of different brand names, must be listed as separate products
- Products of the same brand, but with different formulations, must be listed as separate products
- Create the list by going room by room
- Throw out old or donated products that are not used
- Maintain list in a spreadsheet and sort alphabetically
- A copy of the list should be placed in the front of your MSDS binder



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# Hazardous Materials List

Exceptions include the following:

- Medications in solid form, not including capsules, gels, powders or crushed tablets
- Food and nutritional products, including KMR, IV fluids and liquid vitamins
- Drugs or cosmetics intended for personal consumption by employees
- Articles that contain hazardous materials, such as thermometers, pens and autoclave tape
- Any common consumer product when it is used in the same manner as a normal consumer would use it



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# Material Safety Data Sheets



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# Material Safety Data Sheets

- You must have an MSDS for every product on your Hazardous Materials List
- Obtain online from manufacturer's website or call and request by phone – you must have hard copies
- Must be filed in a uniform way, such as alphabetically by product name
- Must be readily accessible to all staff at all times
- Review every MSDS for PPE requirements and ensure that staff is informed and trained via your Hazard Communication Plan



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# Secondary Container Labels



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# Secondary Container Labels

- All secondary containers must be labeled, regardless of their size
- May be commercially produced or handmade
- Name of the chemical consistent with your MSDS filing system
- Strength of the chemical, if indicated
- Appropriate hazard warnings from the MSDS, which must include health, flammability and reactivity hazards AND required PPE



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# Secondary Container Labels



## HAZARDOUS MATERIALS IDENTIFICATION SYSTEM

### HAZARD INDEX

**4 = SEVERE HAZARD**  
**3 = SERIOUS HAZARD**  
**2 = MODERATE HAZARD**  
**1 = SLIGHT HAZARD**  
**0 = MINIMAL HAZARD**

\* An asterisk (\*) or other designation corresponds to additional information on data sheet or separate chronic effects notification.

### PERSONAL PROTECTION INDEX

<b>A</b>		<b>G</b>	
<b>B</b>		<b>H</b>	
<b>C</b>		<b>I</b>	
<b>D</b>		<b>J</b>	
<b>E</b>		<b>K</b>	
<b>F</b>		<b>X</b>	Consult your supervisor or S.O.P. for "SPECIAL" handling directions

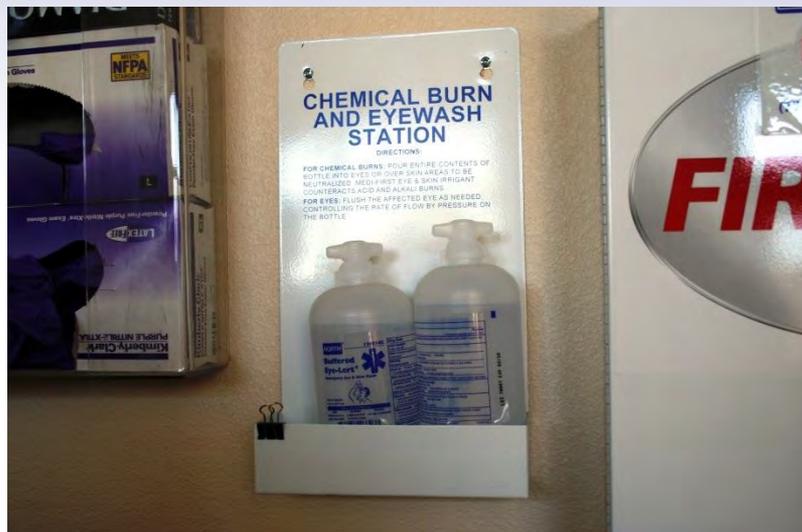
<b>A</b> Safety Glasses	<b>n</b> Splash Goggles	<b>o</b> Face Shield & Eye Protection	<b>p</b> Gloves	<b>q</b> Boots	<b>r</b> Synthetic Apron	<b>s</b> Full Suit
<b>t</b> Dust Respirator	<b>u</b> Vapor Respirator	<b>w</b> Dust & Vapor Respirator	<b>y</b> Full Face Respirator	<b>z</b> Airlink Hood or Mask	Additional Information	



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# Eyewash Stations



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# Eyewash Stations



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# Waste Disposal

Falls under OSHA's General Duty Clause

Five types of waste generated in animal shelters:

1. Animal waste
2. Biological hazardous waste
3. Sharps
4. Chemical Hazardous Waste
5. General Waste



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# Animal Waste

- Urine , feces, vomitus and blood are not considered to be hazardous to humans
- Dispose of in regular trash
- Use good sanitation practices
- Suspected zoonotic diseases are the exception



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# Biological Hazardous Waste

- Biomedical waste and sharps disposal is regulated by individual states
- Blood tubes, syringes, vaccine vials, IV lines, sponges, bandages and animal tissues are considered to be biomedical waste only when they contain human pathogens or when used on an animal infected with a zoonotic disease



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# Sharps

- Defined as any device capable of puncturing, lacerating or penetrating the skin
- Some states also classify syringes as sharps
- Disposal must be in a rigid, puncture-proof, leak-proof container that inhibits rapid microbial growth
- Pick up by biohazardous waste service



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# Recapping Needles

- Don't do it! Needle-stick injuries are common!
- If absolutely necessary use a recapping device



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# Chemical Hazardous Waste

- Contact your city or county for regulations
- Most detergents and disinfectants can go down the drain
- Some pesticides, drugs and X-ray solutions should not go down the drain – read labels for proper disposal



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# Electricity

- All components of a building's electrical system must be free from damage and adequate to meet the needs of the business
- OSHA specifically prohibits the use of power strips, extension cords and outlet-multiplying devices as substitutes for permanent wiring.



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# Fire Prevention & Response Plan

# Emergency

- OSHA requires a written plan
- Plan must be accessible to staff at all times
- Staff training must be provided
- Shelters are also subject to local fire codes



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# Fire Prevention & Response Plan

# Emergency

The written plan must include:

- Escape routes
- Procedures for staff members who will remain behind to perform critical operations before they evacuate (NOT applicable to animal shelters)
- Procedures to account for all staff after emergency evacuation



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# Fire Prevention & Emergency Response Plan

- Rescue and medical duties for staff (NOT applicable to animal shelters)
- Methods for reporting fires and emergencies
- Name of the person responsible for developing and updating the written plan



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# Fire Extinguishers

- NOT required by OSHA for most businesses
- BUT they are required by most local fire codes
- Extremely valuable in preventing small fires from becoming major ones
- Sprinkler systems are not required by OSHA, but required by some local fire codes



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# Fire Extinguishers

- Must be placed so that any employee is never more than 75 feet from accessing one
- Located near exits whenever possible
- Must be easily visible
- Wall mounted 32 to 48 inches from the floor
- Must be inspected yearly by a service company and display an inspection tag
- Must be checked monthly by a designated staff member



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# Routes of Egress & Emergency Exits



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# Routes of Egress & Emergency Exits

- OSHA requires at least two exit routes from each building
- Exit doorways must be at least 28” wide and 6’ 8” high
- Hallways leading to or from an exit must be at least 28” wide and 7’ 6” high
- All exit doorways must be marked with an “EXIT” sign with letters at least 6” high and  $\frac{3}{4}$ ” wide



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# Routes of Egress & Emergency Exits

- OSHA does not require illuminated “EXIT” signs, but most local fire codes do
- If an exit route is not obvious, the route must be marked by signs reading “EXIT” with arrows indicating the direction
- Exit doors cannot be locked in any way that would prevent escape
- Any doors that do not allow escape, but could be mistaken for an exit must be marked with a sign that reads “NOT AN EXIT”

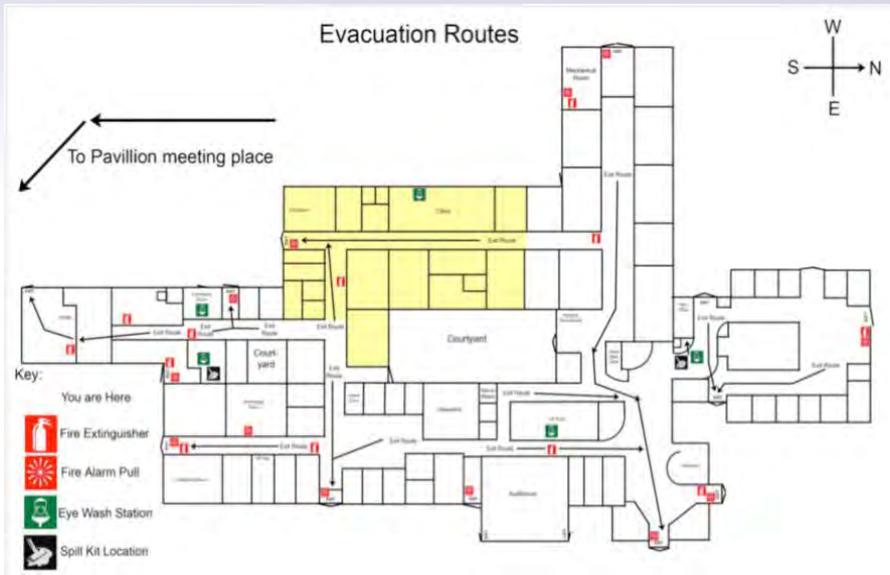


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# Routes of Egress & Emergency Exits

- OSHA does not specifically require posting of exit route diagrams
- BUT they are the most effective way of fulfilling OSHA's requirement of written escape routes



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# Emergency Lighting

- Required to illuminate routes of egress during a power outage
- Also required in areas where employees may be involved in a hazardous situation when a power outage occurs
- Must come on automatically when a power outage occurs
- Flashlights are NOT an acceptable form of emergency lighting



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# Driver and Vehicle Safety

- Motor vehicle accidents are the #1 cause of work-related deaths in the U.S.
- If an employee operates a motor vehicle as part of his/her job, even if the vehicle is not owned by the employer, the employer is responsible for ensuring that the vehicle is maintained in safe operating condition and that the employee has a valid driver's license



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# Driver and Vehicle Safety

- Employees should NOT be permitted to drive their own vehicles to perform work duties! (if at all possible!)
- Maintain current copies of employees' driver's licenses in personnel files
- Written policy requiring employees to notify employer if their license is suspended or revoked
- Maintain maintenance and repair records for all vehicles



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# Restrooms



- OSHA requires at least one working toilet & one hand-washing station per 15 employees present in the facility at any given time
- The need for public restrooms is not addressed by OSHA



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# General Housekeeping & Maintenance

- OSHA requires the workplace to be maintained in such a way that prevents unnecessary physical and health hazards
- Tripping and slipping hazards
- Vermin infestations
- Cover drains and gutters
- Remove trash promptly



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# Food & Beverages in the Workplace

- If the employer allows staff to store, prepare or consume food and beverages on the premises, then the employer must provide a space that is free from biological and chemical hazards = staff break room
- Food and beverages must NEVER be permitted in animal areas, regardless of whether animals are present at the time



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# Compressed Gases

- OSHA regulations apply to all gas cylinders, regardless of size or whether they are empty or full



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# Compressed Gases

- Must be stored in a cool, dry place away from heat sources and direct sunlight
- Must be secured in an upright position via a bracket, chain or strap attached to either a floor or wall mount or transport cart
- Cylinders equipped with protective caps must have them in place whenever the cylinder is not in use



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# Compressed Gases

- Never roll or drag cylinders – use a cart
- Impact-resistant safety goggles must be worn when connecting and disconnecting cylinders
- Gas valves must be shut off when not in use
- Central-supply gas systems must be inspected at least yearly by a qualified technician



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# Waste Anesthetic Gases (WAG)

- OSHA does not have exposure limits for isoflurane, but does enforce the NIOSH recommendation of 2 ppm for halogenated agents
- Your anesthetic gas safety program must include both engineering controls and specific work practices
- OSHA requires a written Anesthetic Safety Plan



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# Anesthetic Safety Plan

- Policy statement
- Scavenging system
- Written procedures
- Equipment maintenance
- Emergency procedures
- Monitoring of WAG levels
- Staff training



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# First Aid Kits

- NOT required by OSHA as long as your shelter is located within 15 minutes of accessible emergency medical treatment
- BUT highly recommended that you have one
- Must only be used by staff for “self-aid” in order to avoid OSHA’s strict regulations for the administration of first-aid



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# Animal Handling

- Animal bites and scratches are the #1 cause of work-related injuries in animal shelters
- Not specifically addressed by OSHA – covered by the General Duty Clause
- Best protection against bites and scratches is adequate staff training



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# Animal Handling

- Appropriate handling and restraint equipment must be provided
- Written animal handling SOP's should be in place
- Staff should never be expected to place themselves in unnecessary danger



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# Zoonotic Diseases

- Not specifically addressed by OSHA – covered by the General Duty Clause
- Staff must be thoroughly trained on the types of zoonotic diseases, routes of transmission, clinical signs and prevention
- Written SOP addressing the handling of infected or potentially infected animals – isolation, PPE, sanitation

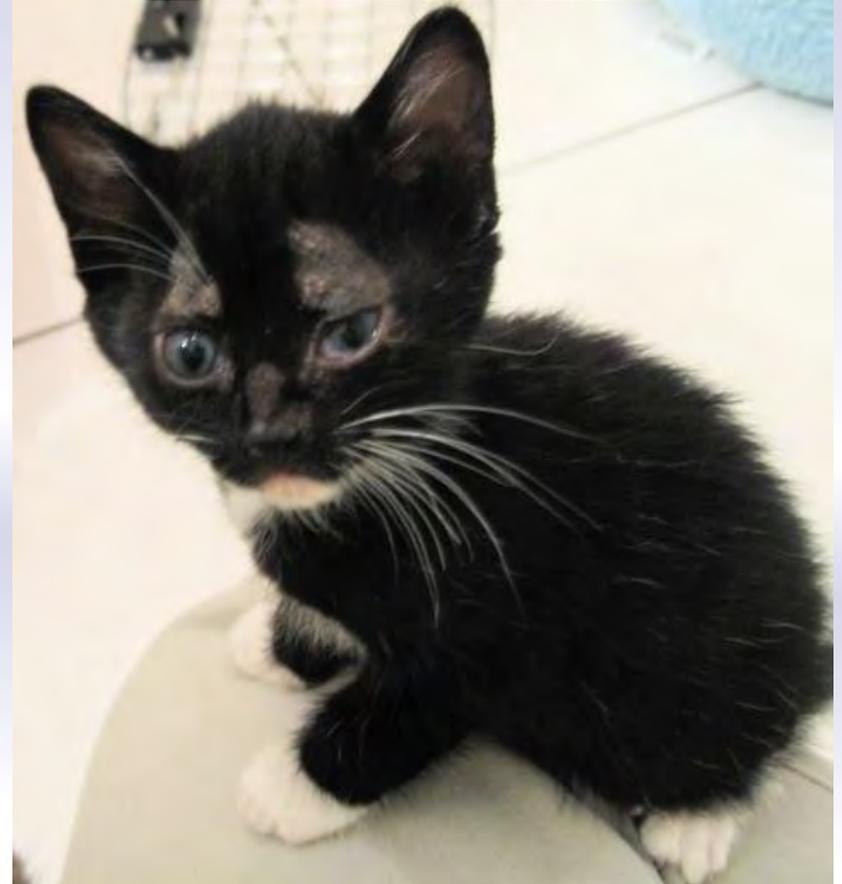


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# Zoonotic Diseases

- Rabies
- Ringworm
- Leptospirosis
- Toxoplasmosis
- Cat scratch disease
- Plague
- Scabies
- Lyme disease
- Roundworms
- Hookworms
- Giardia



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# Other Topics in the Guide

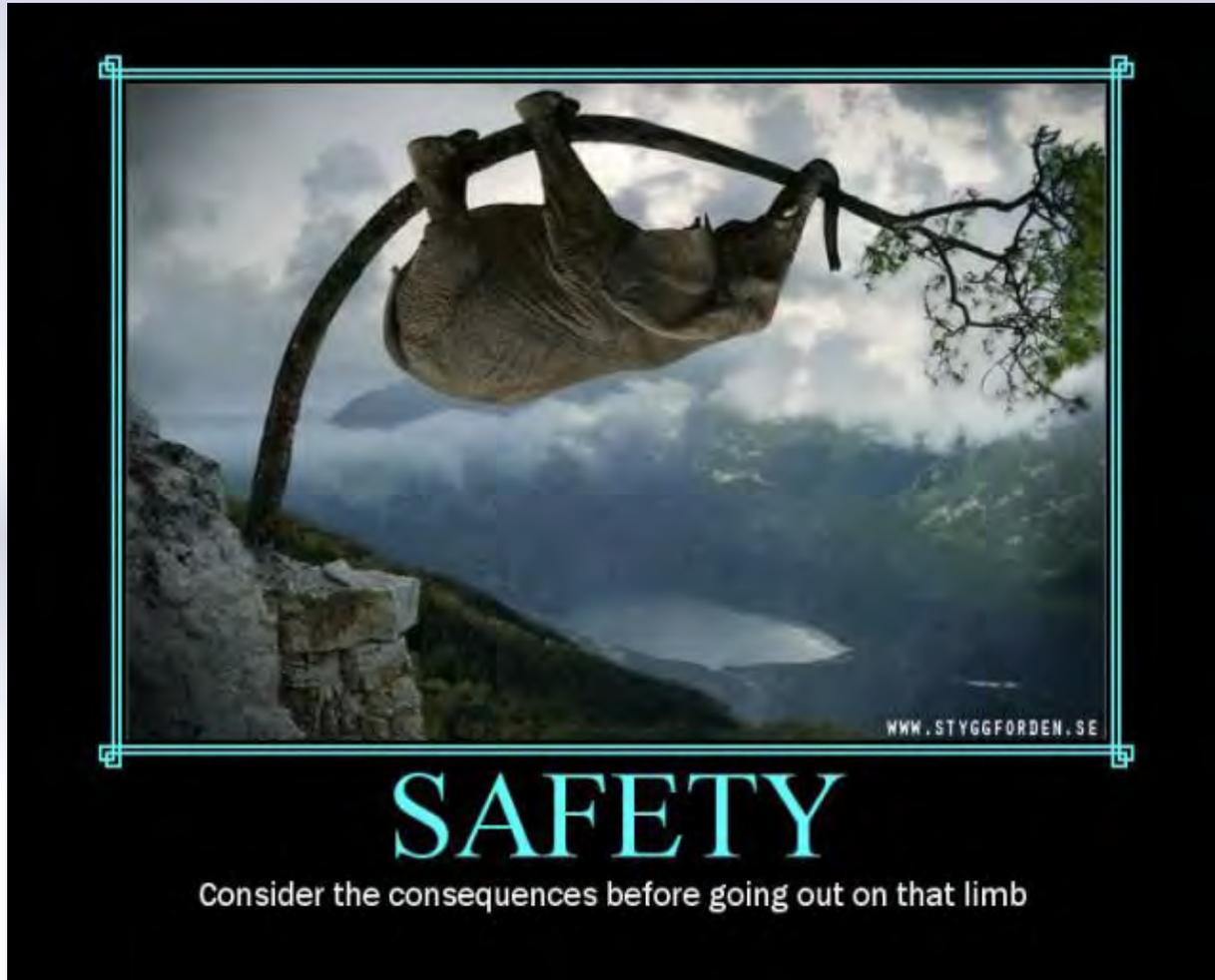
- Chemical spills
- Radiology
- Ladder safety
- Stairs
- Indoor air quality
- Ergonomics
- Workplace violence
- Building security



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# Questions?



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