



**NOT MEASUREMENT  
SENSITIVE**

**DOE-STD-1232-2019/4**

# **DOE STANDARD**

## **U.S. DEPARTMENT OF ENERGY VOLUNTARY PROTECTION PROGRAM-ONSITE REVIEW Volume 4 of 4**



**U.S. Department of Energy  
Washington, DC 20585**

**AREA SAFT**

DISTRIBUTION STATEMENT A. Approved for public release; distribution is unlimited.

## **FOREWORD**

This Department of Energy (DOE) Standard is approved for use by all DOE Components and their DOE-regulated contractors. Originating on January 26, 1994, DOE Voluntary Protection Program (VPP) encourages and recognizes excellence in occupational safety and health protection. This program parallels the Occupational Safety and Health Administration (OSHA) VPP. DOE designed DOE VPP to apply to all DOE-regulated contractors in the DOE complex, including production facilities, laboratories, subcontractors, and support organizations. DOE contractors are not required to participate in DOE VPP. In keeping with OSHA and DOE VPP philosophy, participation is strictly voluntary. Additionally, participants may withdraw from the program at any time.

This Standard uses the word “shall” to denote a requirement of this Standard; the word “should” denotes a recommendation of this Standard; and, the word “may” denotes permission, but not a requirement or a recommendation of this Standard. To satisfy this Standard, program participants need to meet all applicable “shall” statements. Alternate approaches that demonstrate an equivalent level of safety are also acceptable, if approved by the DOE field element. “Should” statements represent DOE technical expectations. Alternative approaches to “should” statements are permitted and do not require approval by DOE.

Beneficial comments (recommendations, additions, and deletions), as well as any pertinent data that may be of use in improving this document, should be e-mailed to: [brad.davy@hq.doe.gov](mailto:brad.davy@hq.doe.gov) or sent to:

Office of Worker Safety and Health Assistance (AU-12)  
Office of Environment, Health, Safety and Security  
U.S. Department of Energy  
19901 Germantown Road  
Germantown, MD 20874

INTENTIONALLY BLANK

**TABLE OF CONTENTS OF VOLUME 4**

<b>INTRODUCTION.....</b>	<b>1</b>
<b>APPENDIX A. DOE-VPP ONSITE REVIEW CRITERIA PROGRAM ELEMENTS LIST</b>	
<b>.....</b>	<b>A-1</b>
I. GENERAL.....	A-1
II. MANAGEMENT LEADERSHIP .....	A-4
III. EMPLOYEE INVOLVEMENT .....	A-10
IV. WORKSITE ANALYSIS .....	A-13
V. HAZARD PREVENTION AND CONTROL .....	A-19
VI. SAFETY AND HEALTH TRAINING .....	A-24
VII. GENERAL ASSESSMENT OF SITE SAFETY AND HEALTH CONDITIONS .....	A-26
<b>APPENDIX B. TRC RATE AND DART CASE RATE VERIFICATION AND</b>	
<b>CALCULATIONS .....</b>	<b>B-1</b>
<b>APPENDIX C. SAMPLE INTEVIEW QUESTIONS .....</b>	<b>C-1</b>
INTERVIEW QUESTIONS FOR EMPLOYEES.....	C-2
INTERVIEW QUESTIONS FOR SUPERVISORS.....	C-6
INTERVIEW QUESTIONS FOR SAFETY AND HEALTH COMMITTEE MEMBERS.....	C-8
INFORMAL EMPLOYEE INTERVIEW TOPICS .....	C-12
QUESTIONS FOR RECORDKEEPERS.....	C-13
QUESTIONS FOR MAINTENANCE PERSONNEL .....	C-14
<b>APPENDIX D. ONSITE REVIEW REPORT FORMAT .....</b>	<b>D-1</b>
I. PURPOSE OF THE REPORT.....	D-1
II. GUIDELINES.....	D-1
III. SAMPLE DOE-VPP ONSITE REVIEW REPORT .....	D-2
FOREWORD .....	D-2
ABBREVIATIONS AND ACRONYMS.....	D-4
EXECUTIVE SUMMARY .....	D-5
I. INTRODUCTION .....	D-7
II. INJURY INCIDENCE CASE RATE .....	D-8
III. MANAGEMENT LEADERSHIP .....	D-10
IV. EMPLOYEE INVOLVEMENT .....	D-13
V. WORKSITE ANALYSIS .....	D-14
VI. HAZARD PREVENTION AND CONTROLS .....	D-17
VII. SAFETY AND HEALTH TRAINING .....	D-20
VIII. CONCLUSIONS .....	D-21
APPENDIX A .....	D-22

## INTRODUCTION

Volume 4, Onsite Review contains criteria to be used in evaluating the systems, processes, and culture required for initial or continued participation in the Department of Energy (DOE) Voluntary Protection Program (VPP), verifying and calculating rates of injury and illness experience, the Onsite Review report format, and sample questions to be used during onsite interviews. Team members and DOE contractors should use this document in conjunction with the first three volumes of the DOE-VPP technical standard. This document shall assist onsite review team (Team) members and DOE contractors in evaluating safety and health programs, and to serve as guidance for DOE-VPP participants in performing their required annual evaluation. Address questions or requests for additional information to a DOE-VPP Coordinator in the Office of Worker Safety and Health Assistance (AU-12).

The term *contractor* used throughout this document refers to an applicant to, or a participant in, DOE-VPP. The term *subcontractor* refers to any organization contracted by the applicant or participant to do work at the site under review.

The DOE-VPP Onsite Review Criteria contained in Appendix A provide guidance for evaluating a site's implementation of the program requirements given in Volume 1: *Elements*. The program requirements are in bold italicized type, followed by guidance for ensuring implementation. Volume 1 completely describes the program elements. Team members should use these criteria whenever possible, but the criteria are not all inclusive.

DOE bases the review criteria on performance. During the review, observing work activities provides the Team with an indicator of the safety culture. The term “work activities” encompasses various types of projects including restoration, maintenance, operations, research and development (R&D), and other work activities that could expose the workers, public, or environment to hazards. Observing work activities may help the reviewer determine if management systems, safety programs, and work practices result in adequate controls to protect against the associated hazards. Determining adequate implementation of the DOE-VPP requirements is at the Team members' discretion.

Appendix B contains guidance for calculating Total Recordable Case (TRC) rates, and Days Away, Restricted or Transferred (DART) case rates. The Team members should review the Department of Labor's Occupational Safety and Health Administration's (OSHA) injury/illness records, and the associated calculations, as early as possibly during the onsite review, or during the pre-assessment planning period.

Team members may use the Sample Interview Questions contained in Appendix C for formal and informal interviews with employees, supervisors, committee members, recordkeepers, and maintenance personnel. This list of questions is not all-inclusive, and reviewers should consider these a starting point in the interview process. Reviewers should formulate additional questions based on information provided by interviewees.

The Onsite Review Report Format in Appendix D contains guidelines for writing reports for both pre- and post-approval evaluations. The report format is not fixed. The Team can include additional information deemed appropriate.

**APPENDIX A. DOE-VPP ONSITE REVIEW CRITERIA  
PROGRAM ELEMENTS LIST**

**I. GENERAL**

**A. *Assurances - The DOE-VPP applicant assures that:***

1. It meet and maintain all expectations for DOE-VPP participation, which includes an Integrated Safety Management System (ISMS) verification and validation if required by the contracting officer.
2. It shall explain employee rights under DOE-VPP to all employees, including new hires.
3. It shall correct or abate hazards and provide interim protection, if necessary.
4. Hazard abatement follows the hierarchy of control.
5. It shall protect employees with health and safety duties from discriminatory actions.
6. Employees have access to the results of self-audits, appraisals, assessments, and accident investigations upon request.
7. Listed documents are available for DOE's review. (See Volume 1, I.E.2.g)
8. Documents to verify accomplishment of Merit or Demonstration goals are available for DOE's review.
9. Sites approved for participation provide required statistics and a program evaluation annually to the Headquarters (HQ) DOE-VPP.
  - a. The applicant shall submit all required assurances with the application.
  - b. Interviewed employees, including new hires, are aware of participation in DOE-VPP, of their right to express safety and health concerns to DOE, and of their right to see results of accident investigations and self-inspections performed by the participant contractor.

**FOR POST APPROVAL ONSITE EVALUATIONS ONLY**

- c. Participant continues to meet all assurances provided with the original application.

**B. Union Concurrence - Any authorized collective bargaining agent for any employees in applicant operations covered by the application shall concur in the application.**

1. All authorized collective bargaining agents for employees involved in operations covered by the application provided signed written statements of concurrence with the application.

**FOR POST APPROVAL ONSITE EVALUATIONS ONLY**

2. All authorized collective bargaining agents continue concurrence with participation in the DOE-VPP program.

**C. *Title 10, Code of Federal Regulations, Part 851 and Part 835 (10 CFR 851 and 10 CFR 835) Non-compliance Corrections***

DOE shall not approve a contractor application for DOE-VPP unless the contractor has corrected all hazards designated as non-compliant with applicable worker safety and health regulations, and DOE or the DOE-VPP Onsite Team determines that the contractor took appropriate action or interim protective measures. Where budget considerations delayed the action desired, the contractor shall have taken all steps within available resources to reduce or prevent worker exposure to the hazard.

1. A random sample (selected by DOE-VPP Team members) of Non-compliance Corrections indicates that the contractor documented corrections, and where the desired action has not yet been achieved and cleared with DOE, the following has occurred:
  - a. All required actions have been taken and only formal clearance from DOE is missing; or
  - b. Where the contractor has not taken or completed all required actions, the contractor appropriately assessed the situation, provided appropriate interim protective measures, and took all steps within available resources to prevent or reduce worker exposure to the hazard.

**D. *Injury/Illness Rates***

The contractor shall have an average of both DART case rates and TRC rates for the most recent 3-year period at or below the most recent industry-specific average for the nation.

1. North American Industry Classification System (NAICS) code selection by the contractor is appropriate to the predominant activity. If the contractor is using an alternative method of comparison, review that method and ensure that it adequately represents the site's performance. Multiple NAICS codes may be combined into a composite NAICS code using weighting factors. Information showing how the composite rate was calculated shall be provided.
2. The contractor is correctly keeping injury and illness records, and comparison with first reports of injury/illness, first aid logs and injured worker interviews demonstrate only minor discrepancies.
3. Temporary workers supervised by contractor personnel are counted in the calculations for both hours worked and injuries, if any.
4. Calculated rates per 200,000 hours over the last three full calendar years indicate that the contractor operations have a 3-year average that is at or below the industry average for the correct NAICS code designation. If the rate is above the average, the contractor has a program that the Team agrees may bring the average down to the industry average in 5 years or less. The Computer Accident and Incident Reporting System (CAIRS) organization codes used to calculate the TRC and DART shall also be provided.
5. Sites with less than 200,000 employee work hours per year may opt to use data for the best 3 of the previous 4 years to minimize the negative impact of normalizing injury and illness statistics. TRC and DART rate averages shall use the same 3 years data.

6. Compiled together, the TRC and DART case rates for all subcontractor operations for the last complete calendar year are at or below the latest published Bureau of Labor Statistics (BLS) rates for the NAICS code that best matches the predominant activity of subcontractor operations.



## II. MANAGEMENT LEADERSHIP

A. **General Requirement** - *The contractor shall demonstrate top-level managers' commitment to occupational safety and health in general, and to meeting the requirements of DOE-VPP. Management systems for comprehensive planning shall address health and safety. As with any other management system, the contractor shall integrate authority and responsibility for employee health and safety with the management system of the organization, and shall involve employees.*

1. Contractor operations and conditions observed at the site demonstrate a high level of managers' commitment to safety and health.
2. Contractor employees at all levels perceive managers' high level of commitment to employee safety and health.

B. **Commitment/Policy** - *Includes a clearly stated policy on safe and healthy working conditions that the contractor communicates to employees at all levels so that they can understand the priority of safety and health protection in relation to other organizational values.*

1. A written version of the safety and health policy is easily accessible to all employees.
2. Production managers, supervisors and hourly employees interviewed by the Team could explain, in at least general terms, what the safety and health policy is.
3. From interviews with site employees at all levels, it is clear that they understand that safety and health have priority at least equal to other organizational values such as "production" and "quality".

C. **Commitment/Goal and Objectives** - *Includes established and communicated goals for the safety and health program and objectives for meeting the goals so that the desired results and the planned measurements to achieve them are clearly understood.*

1. Written versions of the safety and health program goals and the objectives to achieve them are easily accessible to all employees.
2. Production managers, supervisors and hourly employees interviewed by the Team can explain in at least general terms what the current goals and objectives are.
3. Employees at all levels have a clear idea of how the goals and objectives relate to them in their ongoing activities.
4. Established goals and objectives do not discourage or appear to discourage reporting of accidents, injuries, or illnesses by workers.

D. **Commitment/Planning** - *Planning for safety and health shall be part of the overall, long term management planning.*

1. Documented planning for contractor operations over the long term clearly includes occupational safety and health considerations.

2. Occupational health, industrial hygiene and safety professional staff interviewed by the Team provide credible evidence that they are included in long term planning for contractor operations at the site.

***E. Written Safety and Health Program - All critical elements of DOE-VPP, including Management Leadership, Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training, shall be a part of the written safety and health program.***

The worker safety and health program is written, approved, and accessible to all employees.

***F. Adequacy - All aspects of the safety and health program shall be appropriate to the size of the worksite, the complexity of the hazards, and the nature of the industry.***

1. Contractor safety and health program is appropriate for the size of the worksite and scope of operations.
2. Contractor safety and health program is appropriate for the complexity of the hazards at the site.
3. Contractor safety and health program is appropriate to the nature of the operations at the site and addresses all programs required for compliance.

***G. Responsibility – The contractor shall assign and communicate responsibility for all aspects of the safety and health program so that all managers, supervisors and line employees know what performance the contractor expects from them.***

1. The contractor clearly assigns responsibilities for safety and health. Documents are accessible to employees.
2. Employees at all levels clearly understand their safety and health responsibilities.
3. A review of documents, conditions and interviews indicates that there are no gaps or overlaps in responsibilities and that coordination between various groups of health and safety professionals allows the best use of all of these professionals.
  - a. The contractor adequately delegates safety and health responsibilities to line employees at all levels rather than concentrating those responsibilities on health and safety professionals.
  - b. Employees at all levels clearly understand that safety and health is a line responsibility.
4. Adequate, clearly assigned safety and health responsibility has been in place for at least 12 months.

**H. *Authority and Resources - Responsible personnel shall have adequate authority and resources to perform the desired tasks. Documented commitment of necessary resources for workplace safety and health shall exist and include staffing, space, equipment, training, promotion, budget, and capital expenditures.***

1. Any personnel assigned responsibility for safe and healthful operations for any given equipment or process has full authority to shut down operations or equipment and order maintenance.
2. There is no evidence that unsafe conditions or practices in the contractor's operations at the site are occurring because of inadequate or misplaced designation of authority.
3. Safety and health resource staff is adequate in numbers of personnel, training and ability to achieve promotions and financial reward for their efforts equal to those of other staff specialties in the contractor's operations at the site.
4. Safety and health resource staff has adequate equipment and space to carry out its responsibilities.
5. Capital expenditures for safe and healthy working conditions and equipment are adequate given the constraints of the contract budget.
6. Where capital expenditures are not adequate due to contract budget restraints, there is documented evidence that the contractor makes bona fide attempts to improve the capital expenditure budget for improvement of safety, health, and equipment condition.
7. There are no serious preventive maintenance or hazard correction backlogs due to a lack of resources.
8. Adequate assignment of authority and resources has been in place for at least 12 months.
9. There is evidence that the contractor recognizes the benefit of investing in safety excellence, and is willing to invest its resources, in addition to allowable costs under the contract (e.g., assistance with DOE-VPP evaluations at other sites, employee promotions and awards, OSHA Special Government Employee training).

**I. *Line Accountability - The contractor shall hold managers, supervisors, and employees accountable for meeting their assigned responsibilities. Evaluation of employees at all levels shall demonstrate that accountability, and the contractor shall have a functional and operational system for rewarding good performance and correcting deficient performance.***

1. Performance evaluations randomly sampled by the Team show specific safety and health protection criteria for all line managers, supervisors and hourly employees.
2. Employees interviewed by the Team indicate that safety and health performance affects decisions made about their pay or promotions, and that the contractor rewards good performance and corrects deficiencies.
3. The contractor bases performance criteria in performance appraisals more on positive action than on the number of injuries or illnesses.

4. Based on the evidence in documents, site conditions, and employee interviews, lack of accountability is not a contributor to accidents/incidents.
5. Managers hold supervisors accountable for making sure employees follow rules and safe work procedures.
6. Performance awards do not discourage or appear to discourage reporting of accidents, injuries, or illnesses by workers.
7. Adequate accountability for employees at all levels has been in place for at least 12 months.

***J. Visible Managers' Involvement - Top managers' involvement in safety and health activities shall be apparent to all employees. This involvement should include clear lines of communication with employees; setting an example of safe and healthy behavior; ensuring contractor- controlled spaces provide a safe and healthy workplace; and top managers are accessible to employees for health and safety concerns.***

1. Interviewed employees indicate their opinion or experience that top managers are accessible to them for safety and health concerns and can provide examples of such accessibility.
2. There is a documented system for top managers, including the most senior manager at the site, to be actively involved in worker safety and health.
3. There is evidence, through both written documents and employee interviews, that communication concerning safety and health flows both ways in the organization.
4. Managers are involved in the safety and health of sub-contract workers, vendors, and visitors.
5. There is conclusive evidence that adequate, visible managers' involvement in the worker safety and health program has existed for at least 12 months.

***K. Site Orientation and General Accountability - Documented programs for orienting and holding accountable all persons operating in contractor-controlled spaces, including but not limited to subcontractor employees, vendors, consultants, students and visiting scientists.***

1. Sampling of records indicates that all persons operating in contractor-controlled spaces at the site have received appropriate site orientation.
2. Interviews with a random sample of persons, other than contractor employees, who are operating in contractor-controlled spaces, indicate that they have received adequate orientation and believe themselves accountable for safe and healthy behavior while in those areas.
3. Documents and interviews provide acceptable evidence that contractors adequately control personnel entry and exit from contractor-controlled spaces at the site.
4. Documents and interviews demonstrate that an adequate program of orienting and holding accountable all persons, other than contractor employees, who operate in contractor-controlled spaces at the site has been in place for at least 12 months.

***L. Subcontract Worker Coverage - The contractor shall be able to demonstrate that they have considered the health and safety performance of all subcontractors during the evaluation and selection process, especially in such operations as construction.***

1. There is documented evidence that the safety and health performance of all subcontractors selected at least during the last 12 months was a major consideration in the selection process.
2. Interviewed subcontractor employees at all levels believe that their safety and health performance was important in their selection for the sub-contract.

***M. Subcontract Worker Rates and Records- The contractor shall keep records of subcontractors' hours worked and subcontractors' injuries and illnesses while working in the contractor controlled spaces. Rates calculated for such work should be at or below the most appropriate industry average as reported by the most recent BLS publication.***

1. The contractor keeps records of hours worked and injury and illness occurrence for all subcontractor work in the contractor-controlled spaces at this DOE site.
2. A review of the records against first reports of injury/illness, first aid logs and at least a few interviews with injured employees indicates that the contractor keeps records correctly with only minor discrepancies.
3. Compiled together, the TRC and DART case rates for all subcontractor operations for the last complete calendar year are at or below the latest published BLS rates for the NAICS code that best matches the predominant activity of subcontractor operations.

***N. Sub-contract Safety and Health Provisions - Provisions in subcontracts shall: (1) specify authority for the oversight, coordination, and enforcement of safety and health programs by the contractor and there shall be documented evidence of this authority; (2) provide for the prompt correction and control of hazards by the contractor in the event that subcontractors or individuals fail to correct or control such hazards; and (3) specify penalties, including dismissal from the worksite, for willful or repeated non-compliance by subcontractors or individuals. The contractor shall be able to demonstrate that it has carried out the above contract provisions.***

1. The contractor documents the required contract provisions in every subcontract reviewed in a random sample selected by Team members.
2. Documents and interviews provide evidence that the contractor or subcontractor promptly corrects hazards occurring in subcontractor operations in contractor-controlled spaces.
3. Interviewed subcontractor personnel in contractor-controlled spaces understand the requirements and either know or believe that monetary penalties or dismissal from the site shall occur (and can cite some evidence) if they are involved with willful or repeated non-compliance.
4. There is documented evidence of contractor inspections or other oversight of subcontractor operations to determine compliance and completion of hazard corrections.
5. There is evidence that an adequate program of subcontractor control for worker safety and health has been in place for at least 12 months.

***O. Safety and Health Program Evaluation - The contractor shall have a system for evaluating the safety and health program to judge the success in meeting the goal and objectives so that those responsible can determine and implement changes needed to improve worker safety and health protection.***

1. The system shall provide for an annual, written, narrative report with written recommendations for improvements and documented timely follow up.
2. The evaluation shall assess the effectiveness of each element and sub-element described in Section II.E of "Volume 1: *Program Elements*."
3. The evaluation may be conducted by any competent corporate or site personnel or a private sector third party.
4. A documented system producing an annual evaluation meeting the requirements above has been in place for at least 12 months, and has produced at least one written report meeting all the requirements.
5. All areas described in Volume 1, Section II, are included in the evaluation.
6. Personnel other than government personnel performed the evaluation, and the evaluation covers the contractor's operation at this site only.
7. The report contains an analysis of program effectiveness in meeting the overall goal as well as the objectives set annually, and avoids merely describing activities.
8. The report contains written recommendations for program improvements, including, where indicated, improving ineffective activities or starting new programs to achieve the overall goal(s).
9. The report avoids mere findings of hazards more appropriate to inspections or compliance assessments.
10. Documents demonstrate timely and appropriate follow-up to the written recommendations for program improvements. These are included in new annual objectives as appropriate.
11. An adequate program for safety and health program evaluation has been in effect for at least 12 months.

### III. EMPLOYEE INVOLVEMENT

- A. General Requirement - Employees at all levels shall be involved in the structure and operation of the safety and health program and in decisions that affect employee health and safety. Employee participation is in addition to the individual right to notify appropriate managers of hazardous conditions and practices.**

A combination of interviews, document reviews and tours of the site show that management has involved employees at all levels in the structure and operation of the safety and health program and in decisions that affect employee health and safety.

- B. All Contractors except Construction - In non-construction activities, contractor may meet the requirement for employee participation in a variety of ways, as long as the employees have an active and meaningful way to participate in health and safety problem identification and resolution. Acceptable means of providing for employee impact on decision making include, but are not limited to, any combination of the following: (1) safety committees; (2) safety observers; (3) ad hoc health and safety problem-solving group; (4) health and safety training of other employees; (5) analysis of job hazards; and (6) committees which plan and conduct health and safety awareness programs.**

**Note:** If the contractor utilizes safety and health committees as a major form of employee involvement, also use criteria III.C.1 in evaluating the committees' effectiveness.

1. There is a documented system to involve employees in the designing and implementing the safety and health program, in both safety and health problem identification and resolution.
2. Interviewed hourly employees demonstrate a sense of "ownership" of the safety and health program, speaking more of "we" than "them."
3. Documents show evidence of employee activities having a substantial impact on the design and operation of the contractor's safety and health program.
4. Interviewed employees at all levels (including top line managers, line supervisors and hourly workers) understand and feel part of the safety and health program.
5. There is evidence that the contractor values worker ownership of safety, and that the contractor considers stopping activities and correcting deficiencies as a positive action.
6. There is evidence from document reviews and interviews that there are multiple avenues of employee participation.
7. Managers are helpful in providing requested employees for both informal and formal interviews.
8. Interviewed employees at all levels understand their rights under 10 CFR Part 851, Worker Safety and Health Programs and are comfortable exercising those rights without fear of retribution or retaliation..
9. Interviewed employees know about and can describe methods for involving employees at all levels and indicate that these methods are effective.

10. There is conclusive evidence from documents and interviews that systematic employee involvement which meets requirements has been in place and operating effectively for at least 12 months.
11. Interviewed employees clearly understand their rights under 10 CFR Part 851, *Worker Safety and Health Programs*, and are comfortable exercising those rights without fear of retribution or retaliation.

**C. For Construction Contractors - Construction contractors shall use the labor management safety committee approach to involve employees in identifying and correcting hazardous activities and conditions. This is required because of the seriousness of the hazards, the changing worksite conditions, the expanding and contracting workforce, and the high turnover at a construction site. The contractor shall be able to demonstrate that the site has a joint committee for safety and health that fulfills the requirements listed in Volume 1: Section II.E.2.b.**

1. Documents provide evidence that the joint committee has had a minimum of at least 1 year of experience providing safety and health advice and making periodic site assessments.
2. There is evidence through documents and employee interviews that at least half of the committee consists of either:
  - a. bona fide worker representatives who work at the site and if unionized, are selected, elected or approved by a duly authorized collective bargaining organization; or
  - b. hourly craft workers who rotate through membership frequently enough that all contractor hourly craft personnel receive experience on the committee over a reasonable period of time, but with terms long enough for development of adequate expertise to be of assistance.
3. Minutes of committee meetings and member interviews provide evidence that minutes are always kept and distributed, and that the committee meets monthly at a minimum.
4. Committee documents and member interviews demonstrate that the committee observes the following quorum requirements:
  - a. at least half of the committee shall be present; and
  - b. representatives of both labor and management shall attend.
5. Committee inspection records and member interviews provide evidence that the committee makes regular workplace inspections at least monthly, accompanied by at least one worker representative, and that the committee assessment covers the whole site at least monthly.
6. Documents and member interviews provide evidence that the contractor allows committee members to observe or assist in accident investigations, have access to all relevant safety and health data, and have adequate training in hazard recognition.
7. Inspection records indicate that the committee has adequate hazard recognition ability to identify at least common hazards for the type of work the contractor performs.



**DOE-STD-1232-2019/4**

8. There is conclusive evidence from documents and interviews that a joint labor-management committee meeting the requirements has been operating effectively for at least the last 12 months.
9. Interviewed employees clearly understand their rights under 10 CFR 851, *Worker Safety and Health Programs*, and are comfortable exercising those rights without fear of retribution or retaliation.

#### IV. WORKSITE ANALYSIS

- A. General Requirement - Management of health and safety programs shall begin with a thorough understanding of all hazardous situations and the ability to recognize and correct hazards.**

A combination of interviews, document reviews, tour of the site and work observations show that management has a system in place to identify and correct hazards and has a thorough understanding of all hazardous conditions and practices.

- B. Baseline Surveys - Qualified medical personnel, industrial hygienists, safety specialists, etc. conduct comprehensive baseline health and safety surveys and analyses to identify hazards, analyze those hazards to determine risks, and ensure awareness and minimize those risks.**

1. The contractor identifies and analyzes hazards and assesses risks associated with individual jobs, processes, or operations and includes the results in training and hazard control programs. This includes, but is not limited to, job safety analyses and process hazard reviews, where appropriate. Use of Energy Facility Contractors Group's (EFCOG) Guidance for work planning and control is encouraged.
2. Risk assessments for identified hazards result in appropriate measures to reduce risks to an acceptable level.
3. Analysis of control sets ensures they do not conflict or introduce additional hazards.
4. All sampling, testing, analysis, and assessments follow nationally recognized procedures, with written records provided and maintained.
5. Documents provide evidence that comprehensive surveys (as opposed to routine inspections) covering all contractor-controlled spaces has been done within a time frame appropriate for the risk level of the workplace operations.
6. Documents and interviews provide evidence that these surveys involved experts in safety, industrial hygiene and occupational health (doctors or nurses).
7. There is evidence that the experts used for comprehensive surveys have broad knowledge of their fields of expertise and used proper equipment and nationally recognized procedures to provide an accurate survey.
8. Interviews with occupational health professionals at the site provide evidence that at least some doctors or nurses have surveyed most areas of contractor-controlled spaces for hazards due to conditions or work practices.
9. Evidence through documents or interviews indicates that an adequate system of comprehensive surveys, meeting all the requirements, has been in place for at least 12 months.
10. A written system of job hazard analysis provides for the analysis of all jobs over a given period, and sets priorities for the most hazardous jobs.

11. Most jobs performed as part of contractor operations have been subject to job hazard analyses within the last three years.
12. Documents provide evidence of analyses or reanalyses of the most hazardous jobs within in the last 12 months.
13. Team's review of sampled analyses indicates that the analyses are detailed (breaking the job into steps, with hazards listed for each step and, for each hazard listed, one or more prevention or control measure is provided), thorough and provide the data needed to change, where needed, job procedures.
14. There is evidence from documents, interviews and work observations that line employees who perform the jobs analyzed were, at a minimum, interviewed during the analysis or actually involved in the analysis.
15. There is evidence from documents, interviews and work observations that the analyses resulted in revised job procedures or employee retraining.
16. Workers use the job hazard analysis process to identify hazards and methods to control these hazards. This information is then used to develop or revise procedures, rather than using the job hazard analysis as a procedure.
17. Work documents define work at the task level to identify hazards readily.
18. When workscopes or tasks are changed, are hazards controls reviewed for impacts?
19. Documents, interviews and work observations indicate that analyses includes hazards associated with tools, equipment, and other hardware used in the work.
20. Documents demonstrate that the contractor conducts process hazard analyses where required.
21. Documents indicate that the process hazard analyses took all of the following into consideration:
  - a. materials movement;
  - b. mechanical forces used to change (shape, cut, join, etc.) materials;
  - c. energy (heat, radiation, ionization, magnetic, electrical, laser, etc.) applied to materials;
  - d. mixing and combining effects;
  - e. holding together and containing materials (especially liquids and gases) under ambient or special conditions; and
  - f. monitoring and instrumentation, covering both personal and environmental factors, whether for batch or continuous process operations.
22. Documents demonstrate process flow chart development and use for each process safety analysis sampled.

23. Documents provide evidence the contractor accomplished any needed changes to the process, equipment, materials, jobs, or training for each sampled process hazard analysis.
24. There is evidence that, where process safety analysis is required, an adequate system has been in place and implemented for at least the last 12 months.
25. Where contractor operations include work settings with continuous change or overlapping operations, such as experimental laboratories, chemical process "turn-arounds", or construction, there is a written system of phase hazard analysis.
26. Documents identify process phases that received detailed attention and analysis where phase hazard analysis applies.
27. Phase hazard analysis documents sampled by the Team demonstrates that the contractor paid appropriate attention to the proximity of operations occurring simultaneously, whether all operations were under the contractor's control or whether some operations were under a different contractor's control.
28. There is evidence from documents, interviews and work observations that information derived from any phase hazard analysis was used for improving protection for workers through training, revised work procedures, revised schedules, or emergency planning and preparation.
29. There is evidence that, where needed, a written system for phase hazard analysis has existed and been effectively used for at least the last 12 months.

**C. Pre-use, Pre-start-up Analysis - Analysis of all planned, new, or newly acquired facilities, equipment, materials, and processes before use to identify hazards, assess risks, and plan for prevention and control. This includes:**

- Pre-job planning and preparation for different phases of activities, such as experiments.
  - Identification of hazards and assessment of risks associated with individual new jobs, processes, and operations with the results included in training and hazard control programs. This includes, but is not limited to, job safety analysis and process hazard review.
  - For construction, a comprehensive safety and health project design evaluation is required which emphasizes special health and safety hazards of each craft and possible overlapping activity hazards for each phase of construction.
1. A random sample of applicable documents selected by the Team members provides evidence of a thorough analysis of new activities and facilities, including new chemicals brought onsite for hazards and risks.
  2. Interviewed personnel, including hourly employees where applicable, involved in analyses can describe the analysis performed (at least generally) and the measures taken to control or eliminate the hazards identified.
  3. Interviews and document review do not find a pattern of employee allegations of uncontrolled hazards in new facilities, equipment, materials or processes.

4. Documents and interviews demonstrate that the contractor has effectively used an adequate system for pre-use, pre-start-up analysis for at least 12 months.

**D. Routine Hazard Control/Compliance Verifications - A system shall be in place for conducting routine, general hazard control and compliance verifications that follow written procedures or guidance, and result in written reports of findings and tracking of hazard control or compliance correction. The system shall look for ineffective or missing controls, introduced hazards, or non-compliance items at intervals appropriate for the risks of the workplace operations.**

1. For continuous activities, the verifications shall occur no less frequently than monthly and cover the whole worksite at least quarterly.
2. During construction, management verifications shall cover the entire worksite at least weekly.
3. Also in construction, verifications by members of the health and safety committee that cover the entire worksite as appropriate, but no less frequently than once per month, are required.
4. A written system for conducting routine inspections meeting the requirements above is readily accessible to all those who conduct such inspections.
5. Where necessary, the contractor has designed a written program of routine industrial hygiene (IH) monitoring and sampling that is adequate for the health hazards of the operation, and complies with applicable requirements.
6. The system provides written guidance in adequate detail to those who conduct self-inspections or routine industrial hygiene monitoring.
7. Inspection and monitoring documents provide evidence that the company follows the written guidance, including frequency requirements.
8. Inspection reports provide written findings, and the contractor tracks hazard correction to completion, not just to the assignment of responsibility for correction.
9. A random sample of monitoring records indicates that the contractor uses sample results to correct problems.
10. A sample of inspection or monitoring reports over a period does not show patterns of recurring hazards or noncompliance.
11. The Team's site tour and work observations do not reveal a pattern of hazards or non-compliance missed or left uncorrected by self-inspections or routine monitoring.
12. Interviewed employees indicate that they have seen or taken part in inspections and that they believe them to be effective in correcting ineffective or missing controls and identifying introduced hazards or areas of non-compliance.
13. Where line hourly employees or supervisors are conducting the routine general inspections or routine sampling, there is evidence that they have received adequate training in hazard recognition and inspection techniques.

14. Evidence through documents or interviews demonstrates that a system for routine self-inspections, meeting all requirements, has been effective for at least the past 12 months.

**E. Employee Reports of Hazards - A reliable system for employees, without fear of reprisal, to notify appropriate management personnel in writing about conditions that appear hazardous, and to receive timely and appropriate responses. The system shall include tracking of responses and hazard correction.**

1. Interviewed employees can explain how they get apparent hazards corrected, including the system for them to report hazards in writing.
2. Interviewed employees provide examples of reported hazards that are corrected in a timely manner.
3. Written reports of hazards sampled by the Team provide evidence of timely and appropriate management response.
4. Interviewed employees indicate no fear of reprisal for reporting hazards.
5. If the contractor uses maintenance requests or orders as the written system, the contractor uses some means, such as a high visibility code, to identify that it is safety related.
6. If the contractor uses maintenance orders or requests, a supplementary written system ensures abatement of hazards that the contractor cannot correct through maintenance.
7. There is evidence through documents or interviews that managers encourage line employees to report apparent hazards.
8. There is evidence through documents, interviews and the site tour that an effective system for receiving and responding to employee reports of hazards has been in place for at least the last 12 months.

**F. Accident Investigations - An accident/incident investigation system that includes written procedures or guidance, written reports of findings and hazard correction tracking, identification of causes, and provisions for preventive or corrective actions. The system shall also include provisions for a narrative report suitable for dissemination to all employees containing root causes, analysis, and lessons learned.**

1. Comparison of first reports of injuries, first aid logs, and interviews and the sample of accident/incident reports provides evidence that the contractor investigates both accidents and incidents, resulting in narrative reports.
2. The written system for incident (no injury involved) investigation produces adequate investigations and reports which include recommendations for preventing recurrence.
3. A sample of accident/incident investigation reports demonstrates that root cause analyses are conducted, where warranted, finding causes rather than fixing blame on the injured worker or the worker most closely involved with the incident.
4. Documents and employee interviews demonstrate that the company disseminates accident/incident reports and lessons learned meeting the above requirement to all employees.

5. Employees interviewed can give examples of accident and incident investigation reports they have seen and read, and the lessons learned from them.
6. Document reviews, site conditions, and work observations demonstrate the contractor tracks corrective actions for hazards identified by the accident/incident investigations.
7. There is no evidence that accident/incident investigations may be suffering from the assignment of investigation responsibilities to untrained personnel.
8. There is evidence from documents, interviews or the site tour that an effective accident/incident investigation system has been operating for at least the last 12 months.

**G. Trend Analysis - Trend analysis for all data accumulated under the health and safety program (including injury and illness experience, inspections and employee reports of hazards) to identify patterns which may lead to the identification of systematic problems not perceived when looking at isolated incidents.**

1. Documents provide evidence of accurate records concerning injuries, illnesses, and hazards.
2. The contractor keeps records of employee visits to health care providers for analysis, even though the care given may not involve an OSHA recordable injury or illness.
3. Documents provide evidence of trend analysis on safety and health statistics and this analysis results in identifying potential programmatic weaknesses.
4. Trend analysis includes, at a minimum, injury and illness data, reported incidents, inspection or self-assessment reports, and employee reports of hazards.
5. There is evidence from documents that the trend analyses in all categories use enough data to establish meaningful trends.
6. There is evidence from documents and employee interviews that the results obtained from the trend analysis of health and safety data contribute directly to the development of health and safety goals and objectives.
7. There is evidence from documents and employee interviews that the results of trend analysis of health and safety data are available to all employees.
8. There is evidence from documents that an effective system for trend analysis for all the hazard and injury/illness data collected under the safety and health program has been in operation for at least the last 12 months.

V. HAZARD PREVENTION AND CONTROL

- A. ***General Requirement - Based on the results of worksite analysis, the contractor eliminates or mitigates identified hazards by the implementing effective controls. The contractor uses equipment maintenance, personal protective equipment (PPE), disciplinary action when needed, and emergency preparedness where necessary. The contractor develops and communicates safety rules and work procedures and that everyone in the workplace understands and follows to prevent mishaps or control their frequency or severity.***

***Access to Certified Professionals - Certified Industrial Hygienists, Certified Safety Professionals, Safety Engineers, Fire Protection Engineers, Certified Occupational Physicians and Certified Occupational Nurses shall be available, as needed, based on potential risks on the site.***

1. There is evidence from documents, interviews and work observations that all the certified professionals are accessible for use as needed at the site (they do not have to be located at the site).
2. There is evidence that the contractor uses the certified professionals in a manner and frequency consistent with the size of the contractor's operations at the site and the nature of the risks of the work.
3. Lines of communication and cooperation between the various disciplines involved are open and adequately used.
4. There is evidence that the responsibilities of environment, safety and health (ES&H) subject matter experts are established and understood.
5. Documents, interviews, and work observations demonstrate that effective access to the required certified professionals has been in place for at least the last 12 months.

- B. ***Methods of Hazard Prevention and Control – the contractor implements means for eliminating or controlling hazards in the following order:***

- Process or material substitution;
  - Engineered controls;
  - Administrative controls, such as work rules or operating procedures are revised when changes occur in processes or at least annually, are fully implemented and used by employees, and appropriate to the risks of the process; and
  - PPE.
1. There is evidence of a policy to eliminate or substitute hazardous materials or processes.
  2. The Team's site tours and work observations provide evidence that the design of work facilities and spaces isolates or removes sources of physical hazards, such as temperature, noise or pressure.
  3. The design of most tools and equipment used by workers minimizes risk of injury.



4. The design of most workstations relieves body stress and removes ergonomic hazards.
5. Ventilation is adequate for both general building ventilation, and removal of toxic contaminants.
6. The site tour and work observations provide evidence that hazards are adequately controlled.
7. Adequately designed administrative controls, such as work rules, operating procedures or PPE, address any hazards not addressed by substitution or engineering controls.
8. The contractor updates operating procedures when processes change, or on a designated schedule appropriate for the type of work performed.
9. Standardized hazard controls are developed and used in an appropriately graded approach based on project/work complexity, performance frequency, and hazard analysis results. Use of EFCOG Guidance for work planning and control is encouraged.
10. The control selection considers the knowledge, skills, and abilities of the workforce.
11. There is evidence that hazard controls balance production efficiency while ensuring acceptable hazard mitigation or elimination.
12. The Team's site tours, interviews and work observations provide evidence that employees fully implement and use operating procedures and work rules.
13. From documents, interviews, the site tours, and work observations there is evidence that workers properly use PPE.
14. There is no evidence from interviews, documents, the site tour or work observations that PPE, work practices, or physical hazard controls make workers' jobs less safe or too difficult to perform.
15. If respirators are used, an adequate respirator program is in place and is implemented.
16. There is evidence from the work observations tour, documents and interviews that an effective program of implementing the best feasible prevention or control for the hazards of the site has been in place for at least the last 12 months.

**C. Positive Reinforcement and Discipline - Procedures for positive reinforcement exist. Consistent and fair disciplinary actions exist for employees and managers who break or disregard safety rules, safe work practices, materials handling, or emergency plans. The contractor communicates written procedures to employees who use the procedures.**

1. Interviewed employees can give examples of positive reinforcement received from supervisors or higher levels of management for good work practices.
2. Interviewed employees indicate that they know and understand the disciplinary system.
3. Interviewed employees indicate that discipline is both fair and consistent.
4. Documents provide evidence of fair and consistent disciplinary actions, when taken, for all levels of employees.

5. There is evidence that an effective system of positive reinforcement for following site rules and procedures has been in place for at least the last 12 months.
6. There is evidence that a fair and consistent disciplinary system for employees at all levels has been in place for at least the last 12 months.

***D. Preventive/Predictive Maintenance - Ongoing monitoring and preventive/predictive maintenance of workplace equipment keeps it in a safe operating condition.***

1. The schedule for maintenance of equipment uses the manufacturers' recommendations, reflects actual experience with equipment, and helps avoid any equipment breakdown.
2. Routine analysis of maintenance requests and repair records determines breakdown timing and the contractor revises schedules as needed.
3. The contractor routinely adds new equipment to the maintenance schedule.
4. There are written or computerized records of maintenance performed which demonstrate that the schedule is followed appropriately, and if there are maintenance backlogs, the information is tracked and relayed to the responsible line organization.
5. Equipment viewed by the Team during the site tours has documented maintenance following an appropriate schedule.
6. Interviews with maintenance workers indicate that maintenance schedules are important and that managers hold responsible personnel accountable for completing appropriate work.
7. Interviews with employees do not provide evidence of poor maintenance, and do not indicate that production is a priority over preventive maintenance.
8. There is evidence from documents, interviews, the site tour and work observations that an effective program of preventive/predictive maintenance has been in place for at least the last 12 months.

***E. Tracking Systems - A system for initiating and tracking hazard correction in a timely manner.***

1. A sample review of documents from self-assessments or inspections, employee reports of hazards, accident/ incident investigations, and any other system for identifying hazards provides evidence that hazard correction tracking is clear and easy to follow from discovery to complete correction.
2. A sample review of documents, interviews, the site tour and work observations provide evidence that the contractor tracks hazard correction to completion.
3. Documents and interviews provide evidence that the contractor informs affected employees on hazard status and control during tracking process.
4. There is evidence from documents and interviews that effective tracking systems have been in place for all reported hazard correction for at least the last 12 months.

**F. Emergency Preparedness - *Emergency response procedures list requirements for PPE, first aid, medical care, or emergency egress and are written and communicated to all employees. Procedures should include provisions for emergency telephone numbers, exit routes, and training drills, including at least annual evacuation drills.***

1. Procedures are in place for natural disasters that could occur at the site.
2. Adequate procedures are in place for man-made disasters, including any hazards of the workplace with emergency potential; proximity to air, rail or shipping operations; or possible terrorist activities.
3. Comparison of the written procedures with conditions seen and heard during the site tour, employee interviews, and work observations, it is clear to the Team that the emergency procedures provide for all likely types of emergencies given the nature of the worksite and its geographical location.
4. Documents and employee interviews provide evidence that written procedures meeting the above requirements are accessible to all employees.
5. Employees interviewed know precisely what to do (and not do) and where to go in various cases of emergency.
6. Sub-contractor personnel, consultants, and any visitors in contractor-controlled spaces know precisely what to do in an emergency.
7. Documents and interviews demonstrate that the contractor practices a site evacuation drill at least annually.
8. Documents and interviews demonstrate that the contractor reviews annual evacuation drills, identifying and implementing improvements.
9. The Team observed clearly marked evacuation routes on its site tour and work observations.
10. There is evidence from documents or interviews that site emergency planning and practice includes coordination with and use of employee first responders, onsite or contract occupational health professionals, and community emergency organizations.
11. There is evidence that emergency preparedness has been operating effectively for at least the last 12 months.

**G. Medical Program - *A medical program that includes timely access to the services of licensed physicians. In addition to services required by any applicable Federal or State regulations, physicians and nurses shall assist in such hazard analysis activities as job hazard analyses and comprehensive surveys, in early recognition and treatment of illness and injury and in limiting the severity of harm. Personnel trained in Cardio Pulmonary Resuscitation (CPR) and first aid should be available to all persons working in contractor-controlled spaces during all shifts.***

1. Medical records of onsite or contract medical service sampled by the Team are clear and complete, and case management accounts for patient status from time of initial visit, through corrective referral, until the individual returns to full duty on the job or separates from the organization.

2. There is evidence from documents and interviews that contract or onsite medical services follow standardized protocols.
3. Interviewed employees who have received physicals or medical testing, report that knowledgeable individuals explain tests and results to them.
4. There is evidence from documents and interviews that employees trained in first aid and CPR are available on all work shifts.
5. There is evidence from documents, interviews, the site tour and work observations that ergonomic surveys involving occupational health professionals have been done and that, where needed, workstations, equipment, or procedures are ergonomically improved.
6. There is evidence from documents and interviews that at least one physician or nurse has been involved in a comprehensive survey in the contractor-controlled operations within the last 2 years.
7. There is evidence from documents and interviews that medical personnel have been involved in job safety analysis, process safety analysis, and accident/incident investigations as needed, during at least the last 12 months.
8. There is evidence from documents and interviews that the onsite or contract medical services perform trend analysis on the reasons for medical visits over a period of time that allows enough data to establish patterns or trends.
9. There is evidence from the site tour and interviews that the medical program has adequate equipment and personnel, including employees trained in first aid and CPR, and access to licensed physicians and nurses.
10. There is evidence from documents and interviews that cooperation and coordination between the onsite or contract medical services and other safety and health professional resources is adequate.
11. There is evidence from the site tour, documents and interviews that there has been an effective medical program, meeting all the requirements above for at least the last 12 months.

VI. SAFETY AND HEALTH TRAINING

A. **General Requirement - Training is necessary to implement managers' commitment to prevent exposure to hazards.** *Managers, supervisors, and employees shall know and understand the policies, rules and procedures established to prevent exposure to hazards.*

B. **Safety and Health Training for Managers - Managers understand their safety and health responsibilities as described under Volume 1. Program Elements, Section II.E.1 "Management Leadership" and know how to effectively carry them out.**

1. Documents and interviews show that all managers at the site receive training annually about their safety and health responsibilities that is appropriate for their position and background.
2. Managers interviewed are able to describe their safety and health responsibilities.
3. Employees interviewed report that top line managers understand their safety and health program responsibilities.
4. Evidence from documents and interviews demonstrates that an effective program of training managers in their safety and health responsibilities has been in place for at least the last 12 months.

C. **Safety and Health Training for Supervisors - Supervisors understand their responsibilities and how to carry them out effectively. Their responsibilities include: (1) understanding the hazards associated with the job and the potential effects on employees; (2) understanding how to ensure through teaching and enforcement that employees follow the rules, procedures and work practices for avoiding or controlling exposure to the hazards; and (3) knowing how to make sure everyone understands what to do in emergencies.**

1. Documents and interviews show that supervisors receive training on their responsibilities for worker safety and health as required above.
2. Supervisors interviewed are able to describe the hazards associated with jobs under their supervision and the potential adverse effects on employees.
3. Supervisors interviewed can explain how they use teaching and enforcement to ensure that employees follow rules, practices, and procedures aimed at preventing or controlling hazard exposures.
4. Supervisors interviewed can explain how they ensure that all of the employees they supervise understand what to do in emergencies.
5. Employees interviewed indicate that supervisors know and understand their safety and health duties.
6. Evidence from document review and interviews indicates that an effective safety and health training program for supervisors has been in place for at least the last 12 months.

**D. *Employee Safety and Health Training – Training and enforcement makes employees aware of hazards and the safe work procedures to follow in order to protect themselves. Training includes use of PPE where required, why it is required, its limitations, how to maintain it, and what to do in emergencies.***

1. A sample of training documents and interviews provides evidence that all required training is carried out systematically and thoroughly.
2. Training documents and interviews provide evidence that the contractor systematically plans and effectively presents useful safety and health training beyond that required by standards or DOE Orders.
3. Employee interviews demonstrate the contractor teaches employees how to protect themselves and others from the hazards of their job during job qualification training.
4. Employees interviewed report that regular, effective follow up safety and health training is given.
5. Employees can explain the hazards of their job, including how they protect themselves and others.
6. There is evidence from the work observation, site tours, documents and interviews that where PPE is required, employees understand the need for it, and demonstrate that they know how to use and maintain it.
7. Employees interviewed can explain precisely what they shall do in several different types of emergencies.
8. Employees interviewed report that safety and health training seems adequate to help them understand how to protect themselves and others.
9. There is evidence from documents, interviews, work observations and the site tour that an effective program of safety and health training for employees has been in effect for at least the last 12 months.
10. There is evidence from a review of training curriculum that contractors have developed and implemented a safety and health training program that ensures that all workers exposed or potentially exposed to hazards are provided with the training and information to perform their duties in a safe and healthful manner, and that training is provided at the following times: (1) Before or at the time of initial assignment to a job involving exposure to a hazard; (2) Periodic training as often as necessary to ensure that workers are adequately trained and informed; and (3) Additional training when safety and health information or a change in workplace conditions indicates that a new or increased hazard exists. [10 CFR Part 851.25(b)(1) - (3)]

**VII. GENERAL ASSESSMENT OF SITE SAFETY AND HEALTH CONDITIONS**

- A. The site tour and work observations reveal that the contractor has implemented an effective safety and health program, appropriate to the size of the site and the nature of the hazards.*
- B. A review of documents, interviews, the site tour and work observation does identify any major patterns of problems unaddressed by the program.*

**APPENDIX B.**  
**TRC RATE AND DART CASE RATE**  
**VERIFICATION AND CALCULATIONS**

The Team shall carefully review the OSHA 300 Log because injury/illness experience is a qualification for approval into the DOE-VPP. DOE shall use that performance metric when evaluating a site's DOE-VPP effectiveness. The Team shall review the injury and illness data from the most recent three calendar years. For new operations with less than 3 years of data, the Team shall use the actual period of operation (with a minimum of 12 months) for the calculations.

1. Review the OSHA 300 Logs for the most recent complete 3-year period (or the life of the worksite if less than 3 years but at least 12 months) to see that the logs have been properly maintained for the entire period.
  - a. The dates of entry should be reasonably continuous. The Team should discuss major gaps, if they appear, with the record keeper.
  - b. The classification of injuries should be consistent with the BLS' definition of recordable injuries. The Team can determine this by reviewing the description provided on the form and discussing the criteria used for determining recordability with the record keeper.

**NOTE:** It is essential that, for construction operations, the applicant's record review and rate calculations include all construction employees involved in the operations including all construction subcontractor employees.

2. Verify that the record keeper properly records DART case rate entries by reviewing the applicants' OSHA 301 forms or their substitute (workers' compensation or insurance reports of injury/illness). Compare these injury/illness report forms with OSHA 300 Log entries to assess the accuracy of classification (DART case rate versus TRC rate) and the thoroughness of log maintenance. Another verification source is the infirmary or first aid station log.
3. If the reviewer finds possible errors or omissions, discuss them with the recordkeeper to determine whether the OSHA 300 Log entries need revision. Once the reviewer and the record keeper reach agreement, the record keeper can make any necessary changes. Experience to date indicates that employers may over-record as often as they may under-record. If there is any indication of deliberate under-recording of injuries/illnesses, the Team should conduct additional employee interviews to determine employee's views of how the contractor handles injuries and illnesses and if there is any hesitancy to report injuries and illnesses. Determination that deliberate under-recording of accident/injury or illness data is presently taking place is evidence of bad faith on the part of the applicant or participant.
4. Calculate TRC rates based on the verified OSHA 300 Log, including any changes.
  - a. Calculate the TRC rate for each of the 3 most recent complete years of data using the following formula:

$$\text{TRC Rate} = \frac{\# \text{ TRC's [Col (H) + Col (I) + Col (J)]} \times 200,000}{\# \text{ of employee hours worked}}$$



**DOE-STD-1232-2019/4**

- b. Calculate the DART case rate for each of the 3 most recent complete years of data using the following formula:

$$\text{DART Case Rate} = \frac{\text{\#DART cases [Col (H) + Col (I)]} \times 200,000}{\text{\# of employee hours worked}}$$

**NOTE:** Employee hours should include full and part time workers, including seasonal, temporary (including temporary contract workers if supervised by company personnel), administrative, supervisory, and clerical personnel.

5. Also, calculate the rates for the current year to ensure they are in line with the previous years.
6. To calculate the 3-year average rates, sum the TRC's (or the DART cases) for the 3-year period and use the same formula, dividing by the sum of the hours worked over the 3-year period. Compare the 3-year average rate to the most current published BLS injury/illness rates for that industry. The NAICS code used for comparison in the construction industry should be the NAICS code that describes the type of construction at that site.
7. For sites with less than 200,000 employee hours per year, use the best 3 of the previous 4-year data. Both TRC and DART rate calculations should use the same year's data. Note: DOE shall not use the best three of four approach for annual award determinations (Superior Star, Star of Excellence, or Legacy of Stars).

## APPENDIX C. SAMPLE INTERVIEW QUESTIONS

This guide provides these questions for the Team's use in employee interviews. Before you begin, state that the Team shall keep employee responses confidential. Explain your purpose in being at the site and state that responses shall not be the sole determinant of a company's approval or disapproval for participation in DOE-VPP. The length of each interview should be 20 to 30 minutes. Interview some first line supervisors to document the results of training. Please note that in some categories there are alternate questions depending upon whether the interview is part of a pre-approval review or post-approval re-evaluation.

- I. Use of Interview Questions.** The reviewers shall assure each interviewee that the Team shall treat responses confidentially and that individual answers shall not determine approval or denial of participation in the program.
  - A. Record Responses.** The interviewer may use the list of questions to guide the interview. The interviewer may also use the list to note responses.
  - B. Suitability.** The interviewer need not ask every question listed, and may ask other questions based on the Onsite Review Criteria and professional judgment. The list of questions is only a guide and the interviewer should to pursue any additional matters necessary to adequately assess the contractor.
  - C. Other Relevant Information.** The interviewer should record his or her perception of the discussion, and of any relevant matters not indicated on the list of questions.
- II. Evaluating Responses.** Professional judgment is essential in assessing the successful implementation of a safety and health program. In evaluating employee perceptions of worksite conditions and the safety and health program, it is important to be mindful that the small number of interviews that time permits only enables the reviewer to obtain general impressions rather than draw conclusions that carry the weight of a valid statistical sample.
  - A. Factors Impacting Responses.** Many factors may enter into the response that an individual employee may give, for example:
    - 1. Individual employees may have personal agendas to follow in responding to questions.
    - 2. Contract talks or a labor organizing campaign may be causing temporary antagonism between the employer and employees.
    - 3. Employees fearful of layoffs or plant shutdowns may not want to say anything perceived as having an adverse effect on the contractor.
  - B. Pattern.** The reviewer should look for patterns in employee responses. Patterns supported by information obtained in other employee interviews, documents, or other observations should carry the most weight. The Team should not make any determinations based on a single employee interview.

**I. INTERVIEW QUESTIONS FOR EMPLOYEES**

**A. Background.**

1. How long have you worked here?
2. What is your job here? How long have you had this job?
3. Where did you work before? How did it compare with here in terms of safety?
4. Are you a union member?
5. How do you perceive the relationship between the union(s) and company managers? Does it affect safety on your job? Can you give examples?
6. What happens if an employee disobeys a company safety rule? Do you know if this has happened to anyone?
7. Are top managers involved with worker safety and health? How do you see this? Can you give examples?

**B. Orientation and Training.**

**For pre-approvals:**

1. Did you receive safety and health training when you began to work here?
  - a. How soon after you began to work did you receive the training?
  - b. How long did it last and what did it cover?
2. If you did not get training when you were first hired (or transferred to a new job), have you received any basic safety and health training since that time? If so, please describe.
3. Do you receive regular safety and health training?
  - a. If so, how often?
  - b. How long does it last?
  - c. Who is responsible for this?
4. Do you have pre-job briefings before starting work?
  - a. Do you find pre-job briefings useful?
  - b. Do you actively participate or contribute in these briefings?
  - c. Does your supervisor encourage participation and accept input that would make the job safer?

4. What protective equipment have you used?
  - a. Have you been trained in the use of this equipment?
  - b. If so, in your opinion, was the training adequate?

**For post-approvals:**

1. Have you received safety and health training since date of last DOE-VPP onsite visit?
2. If so:
  - a. How frequently?
  - b. How long did it last?
  - c. Was it helpful? Describe how?

C. Employee Involvement.

1. What do you know about the committee (or other employee participation method) for safety and health?
  - a. When did you become aware of it?
  - b. Do you know any hourly workers involved in this activity? If yes, please name the members you know.
  - c. Do you know how the employees were selected? If yes, describe.
  - d. (For second or third shift workers) Is your shift represented in this committee? Do you know who your representative is?
  - e. Do employees make inspections? If so, do they appear to be thorough in their approach?
  - f. What other things do they do?
  - g. Would you say this activity is very effective, somewhat effective, or not effective? Why?

D. Hazard Protection.

1. What kinds of safety and health hazards are you potentially exposed to?
2. What protection is provided to you? How do you help protect yourself?
3. Do you think that managers have a good understanding of the hazards? Have they provided an adequate program of protection for you?
4. Have you ever seen any industrial hygiene surveying or monitoring where you work? (Interviewer may have to describe what the worker would have seen.)
  - a. If so, was it just once or are they routine?

- b. If just once, was it a response to a specific problem? If a specific problem, what was it?
- c. If routine, how often?
- 5. Has the company had you examined by a physician? If so, was it just at the start of work here or is it done periodically?
  - a. If routine, how often?
  - b. If not routine and not for start of employment, what was the reason?
  - c. Did the examination seem thorough?
  - d. Did anyone explain what was being done and why? If so, who?
  - e. Were the results of the examination provided to you? Did anyone explain them? If so, who?
- 6. What kind of personal protective equipment do you use? If any, is it readily available when needed?
- 7. If respirators are used, who is responsible for cleaning and repair? How is it done? Have you been trained in its use? If so, was the training adequate in your opinion? If not, explain.
- 8. If you see a condition or situation that seems hazardous to you, what do you do?
  - a. If you cannot correct it yourself, what do you do?
  - b. Is the response timely, appropriate?
  - c. If managers feel that you are mistaken about the severity of the hazard, do they explain this to your satisfaction?
  - d. If not, please give examples.
- 9. What kinds of emergency situations are possible here? What is your responsibility in times of emergency? How often do you practice it?

E. VPP Participation.

- 1. What have managers told you about DOE-VPP?
- 2. Have you been told what your rights are under the DOE-VPP? If so, can you tell me what they are?
- 3. Have you been told what your rights are under DOE? If so, can you tell me what they are?
- 4. Would you feel comfortable making a safety or health complaint to managers? To DOE?
- 5. Have you noticed any change in safety and health conditions here since the site's approval into the DOE-VPP or since the last evaluation? If so, describe.

6. Do you support the company's participation in DOE-VPP?

F. General.

1. Have you ever seen the log of Injuries and Illnesses or a summary of the log? If so, did it seem to agree with your knowledge of accidents and illnesses here?
2. How does this workplace compare to others where you have worked in terms of safety and health? Worse? About the same? Better? Much better?
3. Is employee turnover high?
  - a. If so, why?
  - b. If so, how long does it take a new employee to learn to work safely alone?
4. Is there anything else you think we should know about the safety and health program here?

## II. INTERVIEW QUESTIONS FOR SUPERVISORS

Explain your purpose in being at the site. Please note that there are additional questions at the end that are only applicable in post-approval interviews.

### A. General.

1. How long have you worked here?
2. Where else have you worked? How did the safety and health program(s) compare to this one?
3. When did you become a supervisor?

### B. Hazards.

1. What kinds of hazards are you or your employees exposed to?
2. How have managers provided protection from those hazards?
3. What do you do when you discover a hazard in your area?
4. What do you do when an employee reports a hazard in your area?
5. What do you do when an employee reports a hazard in an area not under your control?
6. Do you conduct pre-job briefings with your employees?
7. Do you discuss hazards with your employees and how they can protect themselves from these hazards?

### C. Training.

1. What kind of safety and health training have you received since becoming a supervisor?
2. What is your role in ensuring that your employees understand and follow the safety and health rules?
3. Do you provide employee training in safe work procedures? (If so, please describe.)
4. What kind of emergency drills do you run for employees? How often? What is your role in the drill?

### D. Accountability and Enforcement.

1. What methods do you use to provide positive reinforcement of rules and safe work practices?
2. How often do you use at least the first step of your disciplinary system? What is the most frequent offense?
3. How are you held accountable for ensuring safe and healthy working conditions in your area?

E. General.

1. In your opinion, are night and weekend operations adequately supervised?
2. Is maintenance satisfactory, particularly on equipment that prevents toxic or hazardous releases?
3. Do you have contract employees working in your area? If yes, how do you address any safety or health problems relating to or created by them? Examples?

**For post-approvals:**

1. What changes have you seen since the last DOE-VPP approval? Are those changes connected in any way to the DOE-VPP approval?
2. Are you satisfied with being in DOE-VPP?



### III. INTERVIEW QUESTIONS FOR SAFETY AND HEALTH COMMITTEE MEMBERS

For sites where a joint management/employee safety and health committee is not the method of employee participation, interview employees who are involved in the method of participation used and adapt the questions to fit that method. Before you start, explain your purpose in being at the site. Assure committee members that their responses shall not be the sole determinant of company approval or disapproval. Please note that there are additional questions at the end for post-approvals.

#### A. General.

1. How long have you worked for this company?
2. How long have you served on the committee?
3. How are committee members chosen?
4. Does the committee have a written charter?
5. What is the total number of committee members? (For construction or other sites with a joint labor management committee):
  - a. Number of management representatives?
  - b. Number of employee representatives?
6. How often does the committee meet?
  - a. In view of the committee's workload, is this number of meetings too many? Just about right? Too few?
  - b. How are members notified of scheduled meetings?
7. How many of the committee members usually attend meetings? All? Most? About half? Less than half? Is there a quorum requirement?
  - a. Are members encouraged to attend the meetings?
  - b. What happens if you miss a meeting?
8. Does the committee meet on company time?
9. Are there safety and health professionals on the committee? If so, do these people take the time to explain technical points when they arise?
10. Does the committee have access to the OSHA Log of Injuries and Illnesses?
11. What other safety and health records has the committee been able to review?
12. Does the committee base inspections on this data?
13. Does the committee keep and distribute written minutes? Do non-committee members have ready access to the minutes?

B. Inspections.

1. How often does the committee do whole site inspections?
2. If inspections cover only part of the workplace, how many safety and health inspections are needed before the entire workplace has been inspected?
3. Do you normally participate in the inspection process? What area do you inspect?
4. How many safety and health inspections have you made in the past year?
5. Do you consider this an adequate number?
6. Does the committee bin, trend, or otherwise evaluate findings from inspections?
7. In terms of keeping the workplace safe, do you consider the inspections very useful? Somewhat useful? Not useful? How would you change or improve them if you could?
8. What role (if any) does the committee play in accident investigations?
9. Have you seen industrial hygiene inspections at your worksite? (Make sure the employee knows what you are asking about; you may need to describe what he/she would have seen going on.) Have you accompanied or participated in any of these inspections?
10. Can you describe the committee's role (if any) in the handling of reports of safety and health problems from workers?
11. If the committee oversees the process for employee reports of safety and health problems, does it verify that hazard correction occurs on valid concerns?
12. Have you ever accompanied a DOE Occupational Safety and Health assessment, or OSHA inspection?
13. How would you compare committee inspections with DOE's? OSHA's? Are the results similar? Explain.

C. Training.

1. Have you been trained specifically to work on the committee? If so, can you describe the work?
2. Who provided the training?
3. Did your training prepare you for committee work?
4. Did your training include information on safety hazards? Health hazards?
5. Since your initial training, have you received supplementary "refresher" training? Describe briefly.
6. How would you change or improve the training, if you could?

D. Communication.

1. Do you think the committee has had an effect on employee awareness of safety and health problems? If so, describe.
2. Does the committee have authority to correct safety and health concerns? Please give examples.
3. Has the committee made suggestions to managers for safety and health improvements? If yes, give examples.
4. How are these communicated to managers?
5. Do you think that the company has been responsive to suggestions the committee has offered? Give examples.
6. If the company does not accept recommendations, does it explain why? Give an example.
7. Have there been any disagreements between employees and managers about safety and health issues? If so, how are they resolved?
8. Would you say that the company has been supportive of the time you spend on committee business?

E. Improvements.

1. Do you think that the committee functions or operations can be improved? If yes, how?
2. What else do you think the committee can do to improve safety and health conditions?

F. Overall Assessment.

1. As a whole, how would you rate the effectiveness of the committee?

G. Other.

1. Have you ever seen the Log of Injuries and Illnesses or a summary of the log? If so, did it seem to agree with your knowledge of accidents and illnesses here?
2. How does this workplace compare to others where you have worked in terms of safety health? Worse? About the same? Better? Much better?
3. Is employee turnover high?
  - a. If so, in your opinion, why?
  - b. How long does it take a new employee to learn to work safely alone?
  - c. Are there company provisions for working alone?
4. Is there anything else you think we should know about the safety and health program here?

**For post-approvals:**

1. Has the role or the amount of activity of the committee changed since the last DOE-VPP approval? If so, how?
2. Are you pleased with DOE-VPP participation? Why? Why not?

**IV. INFORMAL EMPLOYEE INTERVIEW TOPICS**

**A. For Pre-approval.**

1. Safety and health orientation for new employees.
2. Ongoing safety and health training provided.
3. Awareness of the joint committee and its functions (where applicable).
4. Safety rules and enforcement.
5. Safe work practices.
6. Freedom to point out safety or health hazards.
7. Awareness of an internal safety and health complaint procedure.
8. Responsiveness of managers in correcting hazards.
9. Emergency procedures.
10. Comparison of the safety/health conditions at this workplace in relation to others.
11. Visibility of top managers' involvement.

**B. For Post-approval.**

1. Questions from the list above, as applicable.
2. Awareness of VPP participation rights, including right to receive, upon request, results of self-inspections or accident investigations.
3. Satisfaction with VPP.
4. Knowledge of any changes since last DOE onsite visit.

**V. QUESTIONS FOR RECORDKEEPERS**

This questionnaire is an abbreviated version of one designed by the BLS to determine the level of understanding of safety and health recordkeeping requirements. Use your discretion in choosing questions that could help you determine the level of understanding of recordkeeping at a DOE-VPP applicant site.

1. Who is responsible for recordkeeping?
2. (If multi-contractor site ask) Is your recordkeeping centralized? Computerized? Do you have data entry capability into the Computerized Accident Incident Reporting System (CAIRS) database?
3. Is your recordkeeping computerized?
4. Do you have a completed Log and Summary of Occupational Injuries and Illnesses, OSHA No. 300, for the last 3 calendar years?
5. Do you have a completed supplementary record for each case entered on the log?
6. After an injury or illness occurs, how long does it take to enter it on the log?
7. In keeping the records, which of the following do you use? Instructions on the OSHA forms, BLS guidelines, trade association guidelines, insurers' guidelines, or other?
8. Who decides whether a case is recordable?
9. Are decisions made consistently in borderline cases? For those cases not specifically covered by recordkeeping rules, and where the case could be classified as either recordable or non-recordable, is the default action recordable or non-recordable?
10. How do you determine whether a case is work-related?
11. Do you record any cases on the OSHA forms that are not compensable under Workers' Compensation?
12. Have your managers ever changed a recordability decision you made? If yes, can you describe the case, and why they changed the decision?
13. Do managers regularly question or challenge your recordability decisions?
14. How do you distinguish between an injury and an illness?
15. How do you distinguish between medical treatment and first aid?
16. What causes an OSHA recordable case to be a DART case?
17. What constitutes restricted work activity?
18. If you need assistance in making recordkeeping decisions, how is it obtained?
19. Has your company ever submitted a request for an interpretation of recordkeeping requirements to DOE or OSHA to determine if a case is recordable?

**QUESTIONS FOR MAINTENANCE PERSONNEL**

These questions were developed for OSHA VPP's use at establishments using or producing high-hazard chemicals. Use questions at your discretion to determine the quality of preventive/predictive maintenance at DOE-VPP applicant or participant sites.

1. Is there a scheduled preventive maintenance program? How is it carried out?
2. Does it include:
  - a. Critical instrumentation and controls?
  - b. Pressure relief devices and systems?
  - c. Metals inspection?
  - d. Environmental controls, scrubbers, filters, etc.?
3. Do the design, inspection and maintenance activities include procedures to preclude cross connections between potable water systems and non-potable systems?
4. How do maintenance personnel implement these procedures, and how do personnel monitor and inspect systems to find any cross connections?
5. Do maintenance personnel participate in safety committees and other safety functions?
6. Is there a priority system for safety/environmental-related maintenance items? Is it being followed?
7. Does the preventive maintenance program include onsite vehicles, sprinkler systems, detection/alarm equipment, fire protection and emergency equipment?
8. Do you have input concerning safety and maintainability for new equipment and machinery purchases?
9. Do you have an inventory of spare parts critical to safety and environmental protection or a system in place to acquire these parts when needed?

**APPENDIX D.  
ONSITE REVIEW REPORT FORMAT**

**I. PURPOSE OF THE REPORT.**

- A. **For pre-approval.** The report provides information to the Associate Under Secretary for Environment, Health, Safety and Security (AU-1) verifying the application information submitted by contractors applying for participation in DOE-VPP and documenting the qualifications of the site for the DOE-VPP. If AU-1 approves the site, the report shall be publicly available along with the application and shall provide baseline data for re-evaluation purposes. Volume 2: Procedures Manual: section IV.B.3.i contains additional information addressing preparation of the draft report, and section V.C. addresses the report's finalization and concurrence.
- B. **For post-approval evaluation.** When the Team uses this report format for post-approval evaluations, the report provides evaluation of the continuing qualification for DOE-VPP and determination, where possible, of the impact of DOE-VPP on the site safety and health program and other important aspects of employment. The completed report, when approved by AU-1, shall become part of the public file.

**II. GUIDELINES.**

- A. To allow the use of one format for both pre-approval reviews and post-approval re-evaluation, certain sections of the format are marked “**For pre-approval reviews and Merit re-evaluations.**” Other sections of the report are marked for use “**Only for post-approval evaluation.**” The Team Leader shall use these sections if they are relevant.
- B. The sections should be concise and adequately represent the items covered. At the Team Leader's discretion, the Team may use an abbreviated format specifically addressing previous opportunities for improvement or needs (e.g. small site triennial assessment or Merit progress assessments).
- C. Sources of information for the report shall be available from the application, documents reviewed at the site, conditions observed by team members during the onsite tour, and employee and site representative interviews. Statements made in the report should refer specifically to one or more of these sources of information so the reader is aware of what evidence the Team relied on to support statements and conclusions.
- D. Compare each aspect of the site program to each DOE-Star requirement. For post-approval Merit evaluations, provide specific information on progress made toward achieving the Merit goals. Include information not specifically referred to in the interview guidelines or the format but relevant to the subject.
- E. The text of the report should clearly identify “**Opportunities for Improvement.**” After explaining the opportunity, a “text box” following the relevant text shall call out the opportunity in the report body and in a table at the beginning of the report.
- F. For post-approval re-evaluations, focus on the current functioning of the safety and health program and changes since initial approval or the last evaluation.



### III. SAMPLE DOE-VPP ONSITE REVIEW REPORT

#### FOREWORD

The Department of Energy (DOE) recognizes that true excellence can be encouraged and guided, but not standardized. For this reason, on January 26, 1994, the Department initiated the DOE Voluntary Protection Program (VPP) to encourage and recognize excellence in occupational safety and health protection. This program closely parallels the Occupational Safety and Health Administration (OSHA) VPP. Since its creation by OSHA in 1982, and implementation by DOE in 1994, VPP has demonstrated that cooperative action among Government, industry, and labor can achieve excellence in worker safety and health.

DOE-VPP outlines areas where DOE contractors and subcontractors can surpass compliance with DOE Orders and OSHA standards. The program encourages a *stretch for excellence* through systematic approaches, which emphasize creative solutions through cooperative efforts by managers, employees, and DOE.

DOE bases requirements for DOE-VPP participation on comprehensive management systems with employees actively involved in assessing, preventing, and controlling the potential health and safety hazards at their sites. DOE-VPP is open to all contractors in the DOE complex including production facilities, laboratories, and various subcontractors and support organizations. DOE contractors are not required to apply for participation in DOE-VPP. In keeping with OSHA and DOE-VPP philosophy, *participation is strictly voluntary*. Additionally, any participant may withdraw from the program at any time.

DOE-VPP consists of three programs with names and functions similar to those in OSHA's VPP: Star, Merit, and Demonstration. The Star level is the core of DOE-VPP. This program recognizes outstanding protectors of employee safety and health. The Merit level is a steppingstone for participants that have good safety and health programs, but need time and DOE guidance to achieve Star status. The Demonstration level allows DOE to recognize achievements in unusual situations about which DOE needs to learn more before determining approval requirements for the Merit or Star level.

By approving an applicant for participation in DOE-VPP, DOE recognizes that the applicant exceeds the basic elements of ongoing, systematic protection of employees at the site. The symbols of this recognition provided by DOE are certificates of approval and the right to use flags showing the program in which the site is participating. The participant may also choose to use the DOE-VPP logo on letterhead or on award items for employee incentive programs.

This report summarizes the results from the evaluation of [contractor name] at the [site or facility name] in [site location], from [assessment dates], and provides the Associate Under Secretary for Environment, Health, Safety and Security with the necessary information to make the final decision regarding [contractor's] [continued] participation in DOE-VPP as a Star or Merit site.

**TABLE OF CONTENTS**

ABBREVIATIONS AND ACRONYMS

EXECUTIVE SUMMARY

OPPORTUNITIES FOR IMPROVEMENT

- I. INTRODUCTION
- II. INJURY INCIDENCE CASE RATE
- III. MANAGEMENT LEADERSHIP
- IV. EMPLOYEE INVOLVEMENT
- V. WORKSITE ANALYSIS
- VI. HAZARD PREVENTION AND CONTROLS
- VII. SAFETY AND HEALTH TRAINING
- VIII. CONCLUSIONS

Appendix A

**ABBREVIATIONS AND ACRONYMS**

## EXECUTIVE SUMMARY

### Recommendation

Begin with the recommendation of the Team to the Associate Under Secretary for Environment, Health, Safety and Security (AU-1) for or against approval into the program and at what level. When making a recommendation for Merit, please include the number of years or participation recommended. The Team should add at least one year to the number of years agreed upon to accomplish the goals.

**General.** Summarize the review Team's findings in terms of the qualifications required for DOE-VPP, the accuracy of the information provided in the application and any special aspect of this site that AU-1 should consider in making a decision. Information in the body of the report should support all statements.

The summary usually includes one or two paragraphs of descriptive information specific to the site covering the following:

1. Management Commitment;
2. Employee Involvement;
3. Worksite Analysis;
4. Hazard Prevention and Control; and
5. Safety and Health Training.

**Contingency.** When the Team can only recommend approval or re-approval after the applicant takes steps to meet remaining requirements, include a statement that approval is contingent on accomplishing the items on the attached list within a specific 90-day period, starting at the end of the onsite visit. Write the report as though the Team recommends the site for approval. Avoid any conditional phrases so the Team shall not have to rewrite the report. When the contingent items are completed, delete the contingency statement and the list from the report before forwarding to AU-1.

TABLE 1: OPPORTUNITIES FOR IMPROVEMENT

Opportunity for Improvement	Page

**I. INTRODUCTION**

- A. Include the date of the onsite review or post-approval evaluation. **For post-approval evaluations** note the approval date and the program to which the site was approved as well as the dates of any subsequent evaluations.
- B. Indicate the information on which the report is based; e.g., review of the submitted application and the documents onsite, types and numbers of personnel interviewed as well as the type of interviews (formal or informal) and the areas toured at the site. **For post-approval reviews**, include office file notes and reports written for earlier onsite visits.
- C. Describe the work site and activities. Usually, this shall require one or two paragraphs at most. Include the number of workers.
- D. **For post-approval reviews:** describe any significant changes that have occurred in production processes and facilities since the DOE pre approval review or the last evaluation.
- E. Include a statement about the appropriateness of the NAICS code. If there is uncertainty, consult the NAICS Manual.
- F. **For pre-approval:** note whether DOE has received all required assurances.
- G. Indicate any collective bargaining agent involvement and note collective bargaining agent agreement to cooperate in DOE-VPP.
- H. Include a statement about DOE-VPP interaction history. Provide summary information about the general status of any outstanding occupational safety and health (OSH) corrections needed. Where there have been delays in corrections, provide information about whether those delays are legitimate and describe the adequacy of interim protections established. Provide any evidence that would indicate an inability to interact with DOE in a cooperative manner.
- I. Describe innovative or outstanding aspects of the safety program, if any. **For post-approval reviews** describe any program changes made that are particularly impressive (highlights or success stories that would be appropriate for the Secretary of Energy or the approval letter.)
- J. **For post-approval evaluations**, provide the following information:
  - 1. Top-level manager's assessment of the value of VPP participation;
  - 2. If unionized, union leadership's assessment of the value of VPP participation;
  - 3. A summary, from interviews and interactions with hourly and non-supervisory personnel, of employees' assessment of VPP participation;
  - 4. Any improvements noted in morale, absenteeism, productivity, or quality control during this period; and
  - 5. The Team's overall impression of the progress this workplace has made as a program participant.

**II. INJURY INCIDENCE CASE RATE**

<b>Injury Incidence/Lost Workdays Case Rate ([Contractor] Employees)</b>					
<b>CAIRS Org Code(s):</b>					
Calendar Year	Hours Worked	Total Recordable Cases (TRC)	TRC Rate per 200,000 hours	DART* Cases	DART* Case Rate per 200,000 hours
3-Year Total					
Bureau of Labor Statistics (BLS-xxxx) average for NAICS** Code					
<b>Injury Incidence/Lost Workdays Case Rate (subcontractors)</b>					
<b>CAIRS Org Code(s):</b>					
Calendar Year	Hours Worked	TRC	TRC Rate	DART* Cases	DART* Case Rate
3-Year Total					
Bureau of Labor Statistics (BLS-xxxx) average for NAICS** Code					

\* Days Away, Restricted or Transferred

\*\* North American Industry Classification System

***3-year TRC Incidence Rate, including subcontractors:******3-year DART Case Rate, including subcontractors:*****Conclusion**

- A. For post-approval evaluations, compare the current rates with the rates calculated for pre-approval or the last evaluation. Provide the percentage change in the rates since last evaluation or pre-approval review. Describe the factors that influenced this result and your assessment of the possibility for any potential problems concerning the rates or the 3-year averages between now and the next evaluation.
- B. Note whether there are any temporary workers at the project under the applicant/participant's control and, if so, whether the log and the calculation of rates includes them. This is required even if they are hired through a service to provide temporary employees, as long as the contractor provides them direction and control.
- C. Note whether the review of the log supports the information provided in the application. If not, please explain.
- D. Note whether the OSHA 301's or the Workers' Compensation first reports of injury/illness generally support the data in the log. If not, explain.
- E. If there is any other injury/illness data kept at the site, such as the nurse's or first aid station log, note whether those data support the OSHA log. If not, explain.
- F. If the Team interviewed any employees concerning injury/illness records, note whether their answers generally support the log. If not, explain.
- G. Note whether the person(s) responsible for keeping the log understand the requirements for recording TRC and DART cases. If not, please explain.
- H. Note whether the person(s) responsible for keeping the log vouch for the accuracy of the entries. If not, please explain.
- I. Provide the Team's judgment as to whether the log overstates, understates or generally reflects safety and health conditions under this contractor's control. Please explain.



### III. MANAGEMENT LEADERSHIP

Management leadership is a key element of obtaining and sustaining an effective safety culture. The contractor shall demonstrate senior-level management commitment to exceeding occupational safety and health requirements and meeting the expectations of DOE-VPP. Management systems for comprehensive planning shall address health and safety requirements and initiatives. Elements of the management system include: (1) clearly communicated policies and goals; (2) clear definition and appropriate assignment of responsibility and authority; (3) adequate resources; (4) accountability for both managers and workers; and (5) managers shall be visible, accessible, and credible to employees. Authority and responsibility for employee health and safety shall be integrated with the management system of the organization and shall involve employees at all levels of the organization.

*(The template provides headers for organizational purposes only, and the Team should omit them for clarity in the written report. The Team Leader should modify the order to ensure a clear, concise, logical discussion of the Team's observations.)*

#### A. Policy and Goals

Describe the evidence seen that established policies and results-oriented goals and objectives for worker safety have been communicated to all employees. **For pre-approval reviews and DOE Merit re-evaluations** describe the evidence seen that the establishment and communication have been adequate for at least 1 year.

#### B. Written Program

**For pre-approval reviews and Merit re-evaluations:** note whether all aspects of the safety and health program are in writing. If some are not, note whether the Team is recommending a waiver on the requirements for a formal, written program on the basis that the contractor has a small operation that makes written formality unnecessary. If the Team is making such a recommendation, note the evidence seen by the Team demonstrating alternative methods to meet the objectives of a formal written program.

**For Star re-evaluations:** note any changes to the status of the written program, the results and your assessment of the value or problems resulting from the changes.

#### C. Responsibility

**For pre-approval reviews and Merit re-evaluations where responsibility has been the subject of a Merit goal:** Describe the manner in which the written program clearly assigns responsibilities for workplace safety and health at every level of the organization.

Describe evidence that top-level line managers understand their safety and health responsibilities as set out in Volume 1. *Program Elements*, Management Leadership.

Note whether the assignment of responsibility is adequate and evidence seen by the Team that all employees know and understand their responsibilities, that none overlap and that no areas have “fallen between the cracks.”

**For pre-approval reviews and Merit re-evaluations:** note whether adequate assignment of responsibility has been in place for at least 1 year and describe the evidence that this judgment is based on.

**D. Authority and Resources**

Provide evidence that personnel have appropriate authority and resources to fulfill their assigned responsibility. For resources, describe in summary the adequacy of budget, personnel (including size of staff, training, and appropriate promotions), space, equipment, and capital expenditures for OSH.

**For pre-approval reviews and Merit re-evaluations:** note whether adequate authority and resources have been in place for at least 1 year and describe the evidence this judgment is based upon.

**E. Line Accountability**

Describe the evidence you saw of how the evaluation of general industry line managers/supervisors/employees holds them accountable for safety and health. If evaluation is not the method of accountability, please describe the method used and evidence that it is effective. If not effective, explain why and what evidence you are basing your determination on. In construction, describe the evidence you saw that contractors and subcontractors are held accountable.

**For pre-approval reviews and Merit re-evaluations:** describe the evidence seen that an adequate system has been in place for at least 1 year.

**F. Management Visibility**

Describe evidence seen that top managers are involved in worker safety and health concerns. Provide a summary of any relevant information from employee interviews about the visibility of managers' involvement in safety and health.

**For pre-approval reviews and Merit re-evaluations:** describe the evidence found that consistent top managers' involvement has been occurring for at least 1 year.

**G. Subcontractor Programs**

**For pre-approval reviews:** describe the documented programs for orienting and holding accountable all persons operating or entering in contractor-controlled spaces such as subcontractor employees, vendors, consultants, students, and visiting scientists.

Describe the evidence seen demonstrating:

- The adequacy of the system used to take into account the safety and health program and record of the potential subcontractor during or before the bidding and selection process;
- The adequacy of contract provisions specifying authority to provide for oversight, coordination and enforcement, including the means to provide prompt correction and control of hazards which subcontractor personnel have failed to provide and the authority to dismiss from the site any subcontractor or subcontractor personnel for willful and repeated non-compliance; and
- **For pre-approval reviews and Merit re-evaluations:** describe the evidence seen that adequate programs of selection and oversight have been in place for at least 1 year.

Provide TRC rate information for the combined activities of all subcontractors under the contractor's control at the DOE site. Compare the average for the last three complete calendar years to the latest industry average published by BLS for the industry to which the most predominant subcontractor activity belongs.

#### **H. Annual Self-Evaluation**

Describe the evidence found that the annual evaluation covers all aspects of the safety and health program which are required for DOE-VPP Star approval. Describe the written guidance for annual self-evaluation of the entire safety and health program.

**For pre-approval reviews and Merit re-evaluations:** provide information about the form of the evaluation, taking particular care to note whether or not it is a narrative report with written recommendations.

Describe evidence seen by the Team that documents the participant's actions responding to recommendations, and whether or not those actions were adequate and timely.

Comment on the effectiveness of the annual self-evaluation in terms of real analysis of possible program problems or areas needing improvement. Provide particular attention to the depth of the analysis in order to discourage simple descriptions of activities.

**For pre-approval reviews and Merit re-evaluations:** describe evidence seen by the team that an adequate self-evaluation system has been in place for at least 1 year.

#### IV. EMPLOYEE INVOLVEMENT

Employees at all levels shall continue to be involved in structuring and operating the safety and health program and in decision making that affects employee health and safety. Employee involvement is a major pillar of a strong safety culture. Employee participation is in addition to the right to notify managers of hazardous conditions and practices. Managers and employees shall work together to establish an environment of trust where employees understand that their participation adds value, is crucial, and is welcome. Managers shall be proactive in recognizing and rewarding workers for their participation and contributions. Employees and managers shall communicate and collaborate in open forums to discuss continuing improvements, to recognize and resolve issues, and to learn from their experiences.

Describe the “atmosphere” found during employee interviews. In particular, note managers' degree of assistance in providing access for random employee interviews. Note also whether most employees interviewed spoke with pride and a sense of ownership about the safety and health program. Provide examples of this evidence without providing identifying information.

Where pride and ownership were not apparent, provide information about the employees' comfort level in speaking with interviewers (once again with no identifying information) or about any factors besides safety and health which might affect employee comfort, such as unionization efforts for non-union contractors, union contract disputes for unionized contractors, or business difficulties.

Provide information about the extent of employee knowledge about the safety and health program and their roles and responsibilities. Note whether their impressions generally matched those of the Team.

Describe information about the extent of employee knowledge about the employee participation program(s). Note whether their impressions of the effectiveness of employee participation generally matched those of the Team.

Describe the method(s) used to ensure meaningful employee participation, the kind of impact on decision-making achieved by employee participation, the evidence that the Team has seen demonstrating that impact.

**For pre-approval reviews and Merit re-evaluations:** describe the evidence seen by the Team that the method has been in place at least 1 year.

**For construction contractors:** describe how the contractor's joint labor-management committee meets the stipulated requirements.

## V. WORKSITE ANALYSIS

Management of health and safety programs shall begin with a thorough understanding of all hazards that might be encountered during the course of work and the ability to recognize and control any new hazards. Implementation of the first two core functions of an integrated safety management system (ISMS), defining the scope of work and identifying and analyzing hazards, form the basis for a systematic approach to identifying and analyzing all hazards encountered during the course of work. The results of the analysis shall be used in subsequent work planning efforts. Effective safety programs also integrate feedback from workers regarding additional hazards that are encountered and include a system to ensure that new or newly recognized hazards are properly addressed. Successful worksite analysis also involves implementing preventive and/or mitigative measures during work planning to anticipate and minimize the impact of such hazards.

### A. Change analysis

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the system for the analysis of planned, new, newly acquired facilities, equipment, materials or processes to identify hazards and evaluate risks before use begins.
2. Describe the evidence seen by the Team that the system is used effectively.
3. **For pre-approval reviews and Merit re-evaluations:** describe evidence seen or heard by the Team that the system has been in place for at least 1 year.

### B. Comprehensive surveys

1. For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program: describe the system for comprehensive surveys for both health and safety and whether it involves the use of appropriate safety, industrial hygiene and occupational medicine professionals.
2. Describe the evidence that the Team has seen that the participant uses the system effectively.
3. **For pre-approval reviews and Merit re-evaluations:** describe evidence seen or heard that the system has been in place for at least 1 year.

### C. Routine inspections

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the system for routine, general hazard control verifications.
2. **Note** whether the contractor conducts construction hazard assessments at least weekly and all others at least monthly. Note also the frequency with which the whole area of contractor-operations is covered. Provide the Team's judgment as to whether the frequency is adequate. If the Team found uncontrolled hazards, or inadequate or ineffective hazard controls the contractor should have found during site inspections, please note.

3. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** indicate the clarity and quality of written instructions, guidance or procedures for routine, general inspections.
4. **Describe** the quality of the written inspection reports and the system of tracking missing or ineffective hazard controls to completion.
5. **For pre-approval reviews and Merit re-evaluations:** describe the evidence seen by the Team that an adequate general hazard assessment system with written reports and correction tracking has been in place for at least 1 year.

**D. Hazard analyses**

1. Job Hazard Analysis (JHA) or Job Safety Analysis (JSA):
  - a. For pre-approval reviews, and any post-approval re-evaluations where there is a related goal, or there has been a change to this part of the program, describe the system(s) used for conducting hazard analyses, including JHAs or JSAs. Provide information on how the contractor uses analyses in the preparation and revision of job procedures and training.
  - b. Describe evidence that the Team has seen that the analysis and use of the analysis is effective.
  - c. **For pre-approval reviews and Merit re-evaluations:** describe evidence that the system for analyzing job safety has been in place for at least 1 year.
2. Process Safety Analysis where complex processes and highly hazardous materials are used:
  - a. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the system used for process safety analysis.
  - b. Describe the evidence that the team has seen demonstrating the contractor uses the system effectively.
  - c. **For pre-approval reviews and Merit re-evaluations:** describe evidence seen or heard that the system has been in place for at least 1 year.
3. Phase Hazard Analysis where construction or other phased operations are part of the contractor's activities:
  - a. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the system of phase hazard analysis used.
  - b. Describe the evidence the Team saw that the system is effective.
  - c. **For pre-approval reviews and Merit re-evaluations:** describe the evidence the Team saw that the system has been in place for at least 1 year.

**E. Employee reports of hazards**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the method(s) used by employees to bring their safety and health concerns to managers' attention. Describe protection for employees who report concerns. Describe whether there is a formal, written system for tracking hazard reports.
2. **Provide** information about encouragement of employees to report their concerns. Provide information from employee interviews about overall impressions of the reliability, adequacy and timeliness of response to their reports of concern. Provide information from both employee interviews and document reviews, about evidence that the contractor tracks correction of hazards discovered through employee reports to completion.
3. **For pre-approval reviews and Merit re-evaluations:** describe the evidence seen by Team members that an adequate formal, written system with protection for employees and tracking of hazard correction has been in place for at least 1 year.

**F. Accident/incident investigations**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the accident/incident investigation system including the circumstances that trigger investigation by someone other than the supervisor of the area where the accident/incident occurred and the definition used for "incident." Describe the written procedures for investigation and their adequacy.
2. **Provide** evidence from document reviews and employee interviews that the investigations target a comprehensive analysis of all possible root causes and not at fixing blame. Provide evidence from employee interviews and document review that each investigation results in a written narrative with root causes and analysis, which the contractor makes available to all employees.
3. **For pre-approval reviews and Merit re-evaluations:** describe the evidence seen by the Team that an adequate accident investigation system meeting all Star requirements has been in place for at least 1 year.

**G. Trend analysis**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the system used to analyze accumulated data from injury and illness experience and hazard identification to determine the existence of patterns that were not evident during individual investigations.
2. **Describe** the evidence seen by the Team that trend analysis is being used effectively to identify patterns of problems and adjust systems.
3. **For pre-approval reviews and Merit re-evaluations:** describe the evidence seen by the Team that a complete and effective trend analysis system has been in place for at least 1 year.

## VI. HAZARD PREVENTION AND CONTROLS

The third and fourth core functions of an ISMS, identify and implement controls, and perform work in accordance with controls ensure that once hazards have been identified and analyzed they are eliminated (by substitution or changing work methods) or controlled using engineered controls, administrative controls, or PPE. Equipment maintenance processes shall ensure compliance with requirements and emergency preparedness. Safety rules and work procedures shall be developed, communicated, and understood by supervisors and employees. These rules and procedures shall also be followed by everyone in the workplace to prevent, control the frequency of, and reduce the severity of mishaps.

### A. Access to certified professionals

1. **For pre-approval reviews, and any post-approval re-evaluations with a related goal, or there has been a change to this part of the program:** describe the availability of Certified Industrial Hygienists, Certified Safety Professionals, Certified Safety Engineers, Certified Occupational Physicians, or Certified Occupational Health Nurses; the arrangements for their use at the contractor operations at the site; what they are used for and how often.
2. **Provide** the judgment of the Team as to the evidence of adequacy of access to certified professionals.

### B. Methods of hazard control

1. Describe the evidence seen by the Team that the contractor has attempted to prevent or control hazards by process or material substitution where feasible; by engineering controls where substitution is not feasible; by administrative controls where complete engineering control remedies are not feasible, including adequate and appropriate work rules and operating procedures which are updated as needed.
2. Describe the adequacy of the hazard communication program.
3. Describe evidence seen and heard by the Team that supervisors understand the hazards associated with the job performed by their employees and their role in ensuring that those employees understand and follow rules and practices designed to protect them.
4. Describe evidence seen and heard by the Team that employees understand the hazards associated with their jobs and the need to follow rules set to protect them.
5. Provide the judgment of the Team as to the effectiveness of the methods of hazard control.

### C. Work Rules, Procedures and PPE

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the safe work rules and safe work procedures. Describe the personal protective equipment program (PPE).
2. Where PPE is required, describe evidence seen and heard by the Team that employees understand why it is necessary, that they understand its limitations, how to maintain it, and how to use it properly. Where respirators are used, provide information about the quality of the respirator program.



3. Describe evidence from interviews, site walk-throughs, and documents that employees are aware of the rules, work procedures and any PPE requirements.
4. **For pre-approval reviews and Merit re-evaluations**, describe evidence seen by the Team that the following have been in place for at least 1 year:
  - a. Effective method(s) for determining the best hazard control system;
  - b. Adequate safe work rules and safe work procedures; and
  - c. Adequate PPE program(s).

**D. Positive reinforcement**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the method(s) used for positive reinforcement of safety rules and safe work procedures.
2. Provide information about the evidence seen by the Team of effective positive reinforcement.
3. **For pre-approval reviews and Merit re-evaluations** describe the evidence seen by the Team that the implemented system of positive reinforcement has been in place for at least one year.

**E. Disciplinary System**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the written disciplinary system and the method for ensuring that all employees know and understand it.
2. Provide general evidence both from interviews with employees and documents that personnel understand, and consistently and fairly apply the system as written.
3. **For pre-approval reviews and Merit re-evaluations:** describe the evidence seen by the Team that a disciplinary system meeting Star requirements has been in place for at least 1 year.

**F. Preventive/Predictive Maintenance**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal or there has been a change to this part of the program:** describe the system for ongoing monitoring and preventive maintenance of workplace equipment, including methods for determining frequency of routine maintenance and replacement.
2. Describe information from interviews and the Team walk through concerning the adequacy of the preventive maintenance program and its impact on worker safety and health.
3. **For pre-approval reviews and Merit re-evaluations:** describe the evidence that this system has been in place for at least 1 year.

**G. Tracking systems**

1. Provide a summary of information about the overall adequacy of tracking systems for correction/control of hazards discovered through all hazard analysis systems.
2. Note whether the Team's review of injury and illness, industrial hygiene monitoring, and medical records kept indicate that the contractor is keeping required records appropriately. If the contractor has gone beyond standard requirements for records where safety, industrial hygiene or health professionals felt it desirable, please describe. Give a general summary of the quality of injury/illness, industrial hygiene and medical recordkeeping at this site, being sure to include strengths and weaknesses, objective facts, and subjective perceptions.
3. **For pre-approval reviews and Merit re-evaluations:** describe evidence seen by the Team that effective tracking system(s) have been in place for at least 1 year.

**H. Emergency procedures**

1. Provide information describing the adequacy of emergency procedures for the contractor's operations at the site, including requirements for PPE, if any, first aid, medical response, emergency egress and emergency drills including at least annual evacuation drills.

Provide evidence seen or heard by the Team that evacuation drills practiced at least annually. Provide evidence seen or heard by the Team that all employees understand their role in all likely types of emergencies and have had a chance to practice them.

Include a summary discussion of any relevant findings and corrective actions from other emergency management assessments performed by DOE.

2. **For pre-approval reviews and Merit re-evaluations:** describe evidence seen or heard by the Team that emergency procedures that meet Star requirements have been in place for at least 1 year.

**I. Medical Programs**

1. **For pre-approval reviews, and any post-approval re-evaluations where there is a related goal, or there has been a change to this part of the program:** describe the medical program, including the availability of physician and other occupational health professionals services, first aid and CPR; medical hazard analysis; early recognition and treatment of illnesses and injuries and limiting severity of harm; wellness program; and special programs such as audiograms and other medical tests. Determine if the content of worker health evaluations, including new employment or job transfers were determined under the direction of a licensed physician and include the establishment of a medical baseline as well as fitness-for-duty determinations.
2. Provide the judgment of the Team as to the effectiveness and adequacy of the medical program available for contractor operations at the site in terms of the size, nature of hazards and location of the site.
3. **For pre-approval reviews and Merit re-evaluations:** describe evidence seen and heard by the Team that these programs have been in place at least 1 year.

## VII. SAFETY AND HEALTH TRAINING

Managers, supervisors, and employees shall know and understand the policies, rules, and procedures that prevent or reduce exposure to hazards. Training for health and safety shall ensure that responsibilities are understood, that personnel recognize hazards they may encounter, and that employees are capable of acting in accordance with managers' expectations and approved procedures.

Provide a brief summary describing safety and health training programs used at the site.

Describe evidence that the training program identifies training requirements for each employee, and that employees complete this training prior to exposure to workplace hazards.

Describe the methods to ensure that employees complete retraining as required.

Describe the methods to ensure that new employees, visitors, vendors, and temporary workers receive safety orientation adequate for the hazards of the site.

Discuss the safety and health training program in place for managers.

Discuss the adequacy of the program in place to track training completion.

Discuss how training programs are evaluated and updated, and how employees are involved in this process.

Describe evidence seen and heard by the Team that the safety and health program trains subcontractor managers and employees in their responsibilities under the safety and health program.

**For pre-approval reviews and Merit re-evaluations:** describe evidence seen by the Team that a safety and health training program meeting Star requirements has been in place for at least 1 year.

## VIII. CONCLUSIONS

Begin with the recommendation of the Team to AU-1 for or against approval and at what level. When making a recommendation for Merit, please include the number of years recommended as well. Remember to add at least 1 year to the number recommended for accomplishing the agreed-upon goals.

Discuss the impact of any pattern of problems noted in the OSHA 300 log, and evaluate whether the site is taking adequate steps to reduce those injuries or illnesses.

Characterize the housekeeping and general conditions noted during the tour of the site in terms of the norms for the predominant activity of contractor operations at the site. Note agreements for improvements.

Provide a succinct assessment of the overall adequacy of the safety and health program to provide a safe and healthful workplace at this site.

***Contingency:*** When the Team can only recommend approval or re-approval after the applicant has taken steps to meet remaining requirements, include a statement that approval is contingent on accomplishing the items on the attached list within a specific 90-day period, starting at the end of the onsite visit. Avoid any conditional phrases so that the Team shall not have to rewrite the report. Write the report as though the Team is recommending the site for approval. When the contingent items are completed, delete the contingency statement and the list from the report before forwarding to AU-1.

**APPENDIX A**

**Management**

[NAME]

Associate Under Secretary for  
Environment, Health, Safety and Security [NAME]

Deputy Associate Under Secretary for  
Environment, Health, Safety and Security  
[NAME]

Director  
Office of Health and Safety  
Office of Environment, Health, Safety and Security  
[NAME]

Director  
Office of Worker Safety and Health Assistance  
Office of Health and Safety

**ONSITE REVIEW TEAM ROSTER**

Name	Affiliation/Phone	Project/Review Element