Student Guide

Safety and Health Committee Training

This workbook was written and developed by the Community Services Agency, Inc. of the New Jersey State AFL-CIO.

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Introduction

The Community Services Agency (CSA) of the New Jersey State AFL-CIO partners with employers and unions to create an active "culture of safety" in workplaces through innovative training and support. This program is funded by the United States Department of Labor, Occupational Safety and Health Administration under a Susan Harwood Training Grant.

CUSTOMIZED CURRICULUM

CSA customized training programs are driven by a joint labor-management process that helps to strengthen labor-management relations, and helps to ensure successful implementation and follow-through. Customized training programs involve developing site-specific curriculum based on the needs of the organization(s), and working with the organization(s) to implement and evaluate the training program. CSA's goal is to help our partners achieve cost-effective, high quality, and innovative in-house training programs that work for each stakeholder. All learning activities are developed with committee input, reviewed by the committee, and tested by workers before implementation.

For more information about CSA's programs and services, contact:

New Jersey State AFL-CIO CSA

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Intervention Model
Safety and Health Committee Training

The Community Service Agency of the New Jersey State AFL-CIO will partner with an employer, organization or facility in the development of a Joint Labor/Management Committee as a workplace intervention model designed to accomplish the following goals:

- Improve the organizational/facility culture of safety
- Reduce the incidence of occupational safety and health injuries and illnesses
- Reduce workers compensation insurance and lost time costs

Joint/labor management committees are a proven and effective intervention strategy. They involve the formation of a workplace joint labor/management committee that meets on a regular schedule and oversees the implementation of a safety and health program. Workers are the ones most familiar with the hazards and risks they face. Involving them with management in the process of identifying and mitigating workplace hazards will lead to a much more successful safety and health program.

Implementation Steps

1. **Labor and management** cooperatively identify joint labor/management safety and health committee members.
2. **CSA** provides customized, two-day training to members of committee focusing on organizational/facility occupational safety and health problems, committee structure, committee operations, and goals.
3. **Committee** begins and continues to meet monthly implementing action plan developed during two-day training.
4. **Committee** selects peer trainers to provide training to other employees.
5. **CSA** provides ongoing support to committee, as requested, by:
    a. Providing technical advice and feedback at the first two to three committee meetings after the two-day training.
    b. Distributing a one page culture of safety survey to all personnel before the committee begins implementing workplace changes. At some point in time later (e.g., one year), distributing the same survey again to measure changes in the culture of safety.
    c. Assisting with the development of a one year training plan.
    d. Providing customized initial and ongoing training to committee members.
    e. Providing customized initial and ongoing training to all personnel.
    f. Analyzing changes in injury/illness incident rates over time (e.g., one year) as the committee makes changes in the workplace.
    g. Reviewing committee meeting minutes to track committee activities.
6. **CSA** provides a three-day train-the-trainer course to peer trainers.
7. **CSA** provides Peer Training Portal and support to peer trainers.
8. **Committee and CSA** meet after a defined time period (e.g., one year) to evaluate progress and review next steps.
9. **Committee** continues to meet monthly implementing workplace interventions needed to reduce injuries and illnesses.

10. **CSA** continues to provide long term assistance in training and injury/illness prevention strategies.

Training will be provided primarily through the use of the Small Group Activity Method, which is an active and participatory approach that improves learning and makes training fun. The Small Group Activity Method (SGAM) is based on the idea that learning is shared in every training session. With SGAM, learning is a structured procedure that allows participants to share information rather than experience a one-way exchange that flows from Trainer to Worker. SGAM is based on three learning exchanges:

- **Worker to Worker**
- **Worker to Trainer**
- **Trainer to Worker**

Worker to Worker: Most of us learn best from each other. SGAM is set up to ensure that the "Worker to Worker" exchange is a key element of the training session. The Trainer can facilitate this process by allowing people to solve problems and learn from each other during "Small Group Activities."

Worker to Trainer: Lecture-style training assumes that the Trainer knows all the answers. SGAM acknowledges that Workers could have as much or perhaps more collective knowledge and or experience than the Trainer or expert leading the class. The "Worker to Trainer" exchange occurs primarily during the "Report-Back" session.

Trainer to Worker: This is the Trainer's opportunity to clear up any confusion and make key points. By waiting until the "Summary" session to do this, Trainer's can gain a better understanding of what the Workers need to know.

After the two-day training, the committee will meet monthly to implement a safety and health program at their facility. CSA will provide ongoing support to the committee by attending initial meetings, providing additional targeted training as needed, and assisting with program implementation. CSA will also assist the committee with program evaluation by analyzing injury/illness trends and working with the committee to establish other benchmarks of success.

PROGRAM GOALS
The goal of this training program is to prepare members of a joint employee/management safety and health committee to use the CSA Occupational Safety and Health Committee Model to reduce the incidence of occupational safety and health injuries and illnesses at their worksites.

TARGET AUDIENCE
The target audiences for this training are workers and managers/supervisors who are members of a joint safety and health committee.

CONTACT TIME
12.5 hours

LEARNING OBJECTIVES

At the end of this training session, learners will be able to:

1. Organize and implement a sustainable and functional Joint Labor/Management Safety and Health Committee.

2. Create and implement strategies that will reduce the incidence of occupational safety and health injuries and illnesses.

3. Describe the roles, responsibilities, structure, and activities of occupational safety and health committees.

4. Identify safety and health hazards and implement control strategies.

5. Explain the major components of an effective occupational safety and health program.

TRAINING AGENDA

Day 1

Time	Title
8:30 a.m. – 8:45 a.m.	Introductory Ice Breaker
8:45 a.m. – 9:20 a.m.	Unit #1: Why incidents occur
9:20 a.m. – 10:05 a.m.	Unit #2: Introduction to OSHA
10:05 a.m. – 10:20 a.m.	Break
10:20 a.m. – 11:05 a.m.	Unit #3: What does the data show?
11:05 a.m. – 11:30 a.m.	Unit #4: Establishing committee expectations
11:30 a.m. – 12:30 p.m.	Lunch
12:30 p.m. – 1:30 p.m.	Unit #4: Establishing committee expectations
1:30 p.m. – 2:15 p.m.	Unit #5: Mapping hazards
2:15 p.m. – 2:30 p.m.	Break
2:30 p.m. – 3:30 p.m.	Unit #6: Developing a Mission Statement
3:30 p.m. – 4:15 p.m.	Unit #7: $25,000 Pyramid Game
4:15 p.m. – 4:30 p.m.	Review and wrap up

Day 2

Time	Title
8:30 – 9:30 a.m.	Unit #8: Overview of Hazards at Your Facility
9:30 – 10:30 a.m.	Unit #9: Ergonomics
10:30 – 10:45 a.m.	Break
10:45 – 12:00 p.m.	Unit #10: Committee operations, functions and duties
12:00 – 1:00 p.m.	Lunch
1:00 – 2:00 p.m.	Unit #11: Linking Hazards to Jobs
2:00 – 2:15 p.m.	Break
2:15 – 3:45 p.m.	Unit #12: Developing a Committee Action Plan
3:45 – 4:00 p.m.	Review, wrap up, and evaluation

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Unit #1
Why Do Incidents Happen?

Learning Objectives

By the end of this lesson, participants will be able to:

1. Distinguish between an incident, an accident, and a near hit (near miss)
2. List factors that lead to incidents
3. Describe possible strategies for preventing incidents

Why do incidents happen?

Introduction: In this unit, you will view a series of occupational incidents. For each incident, be prepared to answer the following questions:

1. Describe the event.
2. Describe what hazards caused the harm.
3. Provide possible reasons why the incidents happened.
4. Suggest possible solutions for how the incidents might be prevented.

Important terms in this unit are:

- **Accidents** are unpreventable workplace injuries and illnesses.
- **Incidents** are preventable workplace injuries and illnesses.
- **Near misses** are incidents that could have caused workplace injuries and illnesses, but did not.

Unit #2
Introduction to OSHA

LEARNING OBJECTIVES:

By the end of this module, participants will be able to:

1. Describe OSHA and its roles and responsibilities
2. Identify resources provided by OSHA online as well as through its regional offices
3. Explain the different types of OSHA recordable injuries and illnesses
4. Describe employer and employee roles and responsibilities under OSHA
5. List common OSHA violations.
6. Complete an OSHA complaint form.

Introduction to **OSHA**

Introduction: In this unit, you will review the general occupational safety and health requirements by the Occupational Safety and Health Administration (OSHA). Special emphasis will be on OSHA record keeping as a source of information for occupational safety and health committee planning.

OSHA's Form 301
Injury and Illness Incident Report

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

This *Injury and Illness Incident Report* is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the *Log of Work-Related Injuries and Illnesses* and the accompanying *Summary*, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

Completed by _____

Title _____

Phone (_____)_____–_____ Date ____/ ____/ ____

Information about the employee

1) Full name _____

2) Street _____

City _____ State _____ ZIP _____

3) Date of birth ____/ ____/ ____

4) Date hired ____/ ____/ ____

5) ☐ Male
☐ Female

Information about the physician or other health care professional

6) Name of physician or other health care professional _____

_____

7) If treatment was given away from the worksite, where was it given?

Facility _____

Street _____

City _____ State _____ ZIP _____

8) Was employee treated in an emergency room?
☐ Yes
☐ No

9) Was employee hospitalized overnight as an in-patient?
☐ Yes
☐ No

Information about the case

10) Case number from the *Log* _____ *(Transfer the case number from the Log after you record the case.)*

11) Date of injury or illness ____/ ____/ ____

12) Time employee began work _____ AM / PM

13) Time of event _____ AM / PM ☐ Check if time cannot be determined

14) ***What was the employee doing just before the incident occurred?*** Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. *Examples:* "climbing a ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."

15) ***What happened?*** Tell us how the injury occurred. *Examples:* "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when gasket broke during replacement"; "Worker developed soreness in wrist over time."

16) ***What was the injury or illness?*** Tell us the part of the body that was affected and how it was affected; be more specific than "hurt," "pain," or sore." *Examples:* "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."

17) ***What object or substance directly harmed the employee?*** *Examples:* "concrete floor"; "chlorine"; "radial arm saw." *If this question does not apply to the incident, leave it blank.*

18) ***If the employee died, when did death occur?*** Date of death ____/ ____/ ____

OSHA 301 Form

OSHA 300 Form

OSHA's Form 300 (Rev. 01/2004)

Log of Work-Related Injuries and Illnesses

Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.

Year 20__ __

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local OSHA office for help.

Establishment name ______________________

City ______________________ State ____________

Identify the person			Describe the case			Classify the case — CHECK ONLY ONE box for each case based on the most serious outcome for that case:		Remained at Work		Enter the number of days the injured or ill worker was:		Check the "Injury" column or choose one type of illness: (M)					
(A) Case no.	(B) Employee's name	(C) Job title (*e.g., Welder*)	(D) Date of injury or onset of illness	(E) Where the event occurred (*e.g., Loading dock north end*)	(F) Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (*e.g., Second degree burns on right forearm from acetylene torch*)	Death (G)	Days away from work (H)	Job transfer or restriction (I)	Other record-able cases (J)	Away from work (K)	On job transfer or restriction (L)	Injury (1)	Skin disorder (2)	Respiratory condition (3)	Poisoning (4)	Hearing loss (5)	All other illnesses (6)
____	____	____	__/__ month/day	____	____	☐	☐	☐	☐	___ days	___ days	☐	☐	☐	☐	☐	☐
____	____	____	__/__ month/day	____	____	☐	☐	☐	☐	___ days	___ days	☐	☐	☐	☐	☐	☐
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					Page totals	____	____	____	____	____	____	____ Injury (1)	____ Skin disorder (2)	____ Respiratory condition (3)	____ Poisoning (4)	____ Hearing loss (5)	____ All other illnesses (6)

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

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Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instructions, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any other aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistical Analysis, Room N-3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

Year 20__ __

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the Log. If you had no cases, write "0."

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases

Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
_____	_____	_____	_____
(G)	(H)	(I)	(J)

Number of Days

Total number of days away from work	Total number of days of job transfer or restriction
_____	_____
(K)	(L)

Injury and Illness Types

Total number of . . . (M)

(1) Injuries _____
(2) Skin disorders _____
(3) Respiratory conditions _____
(4) Poisonings _____
(5) Hearing loss _____
(6) All other illnesses _____

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Establishment information

Your establishment name _____

Street _____

City _____ State _____ ZIP _____

Industry description (*e.g., Manufacture of motor truck trailers*)

_____

Standard Industrial Classification (SIC), if known (*e.g., 3715*)

___ ___ ___ ___

OR

North American Industrial Classification (NAICS), if known (e.g., 336212)

___ ___ ___ ___ ___ ___

Employment information *(If you don't have these figures, see the Worksheet on the back of this page to estimate.)*

Annual average number of employees _____

Total hours worked by all employees last year _____

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

_____
Company executive — Title

( ) -
Phone — Date

OSHA Background

OSHA's Mission

Employers are responsible for providing a safe and healthful workplace for their employees. OSHA's role is to assure the safety and health of America's workers by setting and enforcing standards; providing training, outreach, and education; establishing partnerships; and encouraging continual process improvement in workplace safety and health.

OSHA establishes and enforces protective standards and reaches out to employers and employees through technical assistance and consultation programs. OSHA and its state partners have approximately 2,400 inspectors and about 550 state consultants, plus complaint discrimination investigators, engineers, physicians, educators, standard writers, and other technical and support personnel spread over more than 130 offices throughout the country.

OSHA works to assure the safety and health of all of America's working men and women. Most employees in the nation come under OSHA's jurisdiction. Other users and recipients of OSHA services include: occupational safety and health professionals, the academic community, lawyers, journalists, and personnel of other government entities.

Part of OSHA's mission is to provide assistance to employers to reduce or eliminate workplace hazards. OSHA provides a vast array of informational and training materials focusing on numerous safety and health hazards in the workplace.

For more information, visit OSHA's website at www.osha.gov.

OSHA stands ready to help both employers and employees in ensuring a safe and healthy workplace.

Since OSHA's creation in 1970, the nation has made substantial progress in occupational safety and health. OSHA and its many partners in the public and private sectors have for example:

- Since 1970, workplace fatalities have been reduced 65% and injury and illness rates have decreased by 67%.
- Virtually eliminated brown lung disease in the textile industry;
- OSHA logged 87,687 violations of its standards and regulations for worker safety and health, with 67,052 of these violations cited as "serious."
- FY 2008, OSHA conducted almost 39,000 worksite inspections, surpassing the agency's goal for the year by 2.4 percent

OSHA Coverage

The OSH Act covers private sector employers and their employees in the 50 states and certain territories and jurisdictions under federal authority. Those jurisdictions include the District of Columbia, Puerto Rico, the Virgin Islands, American Samoa, Guam, Northern Mariana Islands,

Wake Island, Johnston Island, and the Outer Continental Shelf Lands as defined in the *Outer Continental Shelf Lands Act*.

The OSH Act covers employers and employees either directly through Federal OSHA or through an OSHA-approved state program.

Who is not covered

The OSH Act does not cover:

- The self-employed;
- Members of immediate family of farm employers that do not employ outside workers;
- Worker conditions that are regulated under worker safety or health requirements of other federal agencies;
- Employees of state and local governments; some states have their own occupational safety and health plans that cover these workers.

OSHA's Requirements

In general, OSHA standards require that employers:

- Maintain conditions or adopt practices reasonably necessary and appropriate to protect workers on the job;
- Be familiar with and comply with standards applicable to their establishments; and
- Ensure that employees have and use personal protective equipment when required for safety and health.

Hazards Addressed

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

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

In addition, where there are no specific OSHA standards, employers must comply with the OSH Act's "general duty clause." The general duty clause, Section 5(a)(1), requires that each employer "furnish ... a place of employment which [is] free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees. "

Guidelines versus Standards

A guideline is a tool to assist employers in recognizing and controlling hazards. It is voluntary and not enforceable under the OSH Act. Failure to implement a guideline is not itself a violation of the OSH Act's general duty clause.

Guidelines can be developed quickly and can be changed easily as new information becomes available with scientific advances. Guidelines make it easy for employers to adopt innovative programs to suit their workplaces.

OSHA's Reporting Requirements

All employers must report to OSHA within eight hours of learning about:

- The death of any employee from a work-related incident; and
- The in-patient hospitalization of three or more employees as a result of a work-related incident.

In addition, employers must report all fatal heart attacks that occur at work. Deaths from motor vehicle accidents on public streets (except those in a construction work zone) and in accidents on commercial airplanes, trains, subways or buses do not need to be reported. These reports may be made by telephone or in person to the nearest OSHA area office listed at www.osha.gov or by calling OSHA's toll-free number, (800) 321-OSHA (6742). Employers may be subject to other reporting requirements in other OSHA standards as well.

OSHA's Recordkeeping Requirements
The *Occupational Safety and Health Act of 1970* (OSH Act) requires covered employers to prepare and maintain records of occupational injuries and illnesses. OSHA is responsible for administering the recordkeeping system established by the Act. The OSH Act and recordkeeping regulations provide specific recording and reporting requirements which comprise the framework for the nationwide occupational safety and health recording system.

The OSHA Whistleblower Program
To help ensure that employees are free to participate in safety and health activities, Section 11(c) of the OSH Act prohibits any person from discharging or in any manner retaliating or discriminating against any employee because the employee has exercised rights under the Act. These rights include complaining to OSHA and seeking an OSHA inspection, participating in an OSHA inspection, and participating or testifying in any proceeding related to an OSHA inspection.

"Discrimination" can include the following actions:

- Firing or laying off
- Blacklisting
- Demoting
- Denying overtime or promotion
- Disciplining
- Denial of benefits
- Failure to hire or rehire
- Intimidation
- Reassignment affecting promotion prospects
- Reducing pay or hours

Worker Rights Under the OSH Act

The law encourages workers to be active players in their workplace's safety and health effort. It gives employees the right to

- Review copies of appropriate standards, rules, regulations, and requirements that the employer is required to have available at the workplace;
- Request information from the employer on safety and health hazards in the workplace, appropriate precautions to take, and procedures to follow if the employee is involved in an accident or is exposed to toxic substances;
- Gain access to relevant employee exposure and medical records;
- Request an OSHA inspection if they believe hazardous conditions or violations of standards exist in the workplace;
- Accompany an OSHA compliance officer during the inspection tour, or have an authorized employee representative do so;
- Respond to questions from the OSHA compliance officer;
- Observe any monitoring or measuring of hazardous materials and see the resulting records, as specified under the OSH Act and required by OSHA standards;
- Review or have an authorized representative review the employer's Log of Work-Related Occupational Injuries and Illnesses (OSHA 300) at a reasonable time and in a reasonable manner;
- Object to the timeframe set by OSHA for the employer to correct a violation by writing to the OSHA area director within 15 working days from the date the employer receives the citation;
- Submit a written request to the National Institute for Occupational Safety and Health for information on whether any substance in the workplace has potentially toxic effects in the concentration being used, and, if requested, have their names withheld from the employer;
- Be notified if the employer applies for a variance from an OSHA standard, and have an opportunity to testify at a variance hearing and appeal the final decision;
- Have their names withheld from their employer, by request to OSHA, if they sign and file a written complaint;

- Be advised of OSHA actions regarding a complaint, and request an informal review of any decision not to inspect the site or issue a citation; and
- File a complaint if punished or discriminated against for acting as a "whistleblower" under the OSH Act or 13 other federal statutes for which OSHA has jurisdiction, or for refusing to work when faced with imminent danger of death or serious injury and there is insufficient time for OSHA to inspect.

Right to refuse to perform unsafe work
Although nothing in the OSHA law specifically gives an employee the right to refuse to perform an unsafe or unhealthful job assignment, OSHA's regulations, which have been upheld by the U.S. Supreme Court, provide that an employee may refuse to work when faced with an imminent danger of death or serious injury. The conditions necessary to justify a work refusal are very stringent, however, and a work refusal should be taken only as a last resort. If time permits, the employee should report the unhealthful or unsafe condition to OSHA or another appropriate regulatory agency.

Worker Rights During the Inspection Process

Right to representation
The OSH Act gives employees or a workers' representative the right to accompany an OSHA compliance officer (also referred to as a compliance safety and health officer, CSHO, or inspector) during an inspection. The labor union, if one exists, or the employees must choose the representative.

Right to help the compliance officer
Workers have a right to talk privately to the compliance officer on a confidential basis, whether or not a workers' representative has been chosen. Workers are encouraged to

- Point out hazards;
- Describe accidents or illnesses that resulted from those hazards;
- Discuss past worker complaints about hazards; and
- Inform the inspector if working conditions are not normal during the inspection.

Worker Rights to Protection from Retaliation

Right to confidentiality
Employees who make a complaint to OSHA about safety and health hazards in their workplaces have a right to confidentiality. If the employee requests that his or her name not be used, OSHA will not tell the employer who filed the complaint or requested an inspection.

Whistleblower protections
Employees have a right to seek safety and health on the job without fear of punishment. That right is spelled out in Section 11(c) of the OSH Act. The law forbids the employer from punishing or discriminating against employees for exercising such rights as

- Complaining to the employer, union, OSHA, or any other government agency about job safety and health hazards; and

- Participating in OSHA inspections, conferences, hearings, or other OSHA-related activities.

Workers who believe they have been punished for exercising safety and health rights must contact the nearest OSHA office within 30 days of the time they learn of the alleged discrimination. A representative of the employee's choosing can file the complaint for the worker. Following a complaint, OSHA will contact the complainant and conduct an in-depth interview to determine whether an investigation is necessary.

OSHA's publication, "Protecting Whistleblowers," (OSHA 3164) provides additional information. It is available on the agency website at www.osha.gov. If you believe that you have been discriminated against, call (800) 321-OSHA (6742) to be connected to the nearest OSHA office to report your complaint.

Worker Rights to Access Records and Test Results

Access to exposure and medical records

Employers must inform employees of the existence, location, and availability of their medical and exposure records when they begin employment and then at least annually.

Employers also must provide these records to employees or their designated representatives upon request.

Whenever an employer plans to stop doing business and there is no successor employer to receive and maintain these records, the employer must notify employees of their right of access to these records at least three months before closing the business.

Right to observe monitoring procedures and see testing results

OSHA standards require the employer to measure exposure to harmful substances. The employee (or employee representative) has the right to observe the testing and examine the records of the results. If the exposure levels are above the limit set by an OSHA standard, the employer must tell employees what will be done to reduce the exposure.

During an OSHA inspection, an OSHA industrial hygienist may conduct exposure tests if health hazards may be present in the workplace. The inspector may take samples to measure levels of dust, noise, fumes, or other hazardous materials.

OSHA will inform the employee or employee representative who participates in the inspection as to whether the employer is in compliance with OSHA standards. The inspector also will gather detailed information about the employer's efforts to control health hazards, including results of tests the employer may have conducted.

Right to review injury and illness records

An employer with more than 10 employees must maintain records of all work-related injuries and illnesses, and the employees or their representative have the right to review those records. Some industries with very low injury rates are exempt from these recordkeeping requirements.

Worker Rights to Promote Workplace Safety

Working cooperatively to reduce hazards

OSHA encourages employers and employees to work together to reduce hazards. Employees should discuss safety and health problems with the employer, other workers, and, if a labor union exists, union representatives. The OSHA area office can provide information on OSHA requirements.

Recourse if the employer does not correct a hazard

An employee may file a complaint by phone, mail, email, or fax with the nearest OSHA office and request an inspection if there are unsafe or unhealthful working conditions. When doing so, the employee request that OSHA not reveal his or her name. If the OSHA area or state office determines that there are reasonable grounds for believing that a violation or danger exists, the office will investigate.

To file a complaint, call (800) 321-OSHA (6742); contact the nearest OSHA regional, areas, state plan, or consultation office; or file on online complaint at www.osha.gov. The teletypewriter (TTY) number is (877) 889-5627.

Worker Rights Following the Inspection Process

Rights to information following the inspection

At the end of the inspection, the OSHA inspector will meet with the employer and the employee representatives in a closing conference to discuss how any hazards that may have been found will be abated. If it is not practical to hold a joint conference, the compliance officer will hold separate conferences. OSHA will provide written summaries, on request.

How to challenge the abatement period

Whether or not the employer accepts OSHA's findings, the employee (or representative) has the right to contest the time OSHA allows for correcting a hazard. This contest must be filed in writing with the OSHA area director within 15 working days after the citation is issued. The Occupational Safety and Health Review Commission, an independent agency that is not part of the Department of Labor, will decide whether to change the abatement period.

Worker Responsibilities

Although OSHA does not cite employees for violations, the OSH Act requires that each employee "shall comply with all occupational safety and health standards and all rules, regulations, and orders issued under the Act" that are applicable. Each employee should

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

Employer Responsibilities and Rights Under OSHA

Employers are responsible for providing a safe and healthful workplace for their employees. OSHA can provide extensive help through a variety of programs, including assistance about safety and health programs, state plans, workplace consultations, voluntary protection programs, strategic partnerships, alliances, and training and education. An overall commitment to workplace safety and health can add value to your business, your workplace, and your life

Employers have certain responsibilities and rights under the Occupational Safety and Health Act of 1970. The following provides a review of some of those obligations. Employers must:

● Meet their general duty responsibility to provide a workplace free from recognized hazards that are causing or are likely to cause death or serious physical harm to employees, and comply with standards, rules, and regulations issued under the Act.

● Be familiar with mandatory OSHA standards and make copies available to employees for review upon requests.

● Inform all employees about OSHA.

● Examine workplace conditions to make sure they conform to applicable standard

● Minimize or reduce hazards where elimination is not possible

● Make sure employees have and use safe tools and equipment (including appropriate personal protective equipment) and that such equipment is properly maintained.

● Use posters, labels, or signs when needed to warn employees of potential hazards.

● Establish or update operating procedures and communicate them so that employees follow safety and health requirements.

● Provide medical examinations when required by OSHA standards.

● Provide training required by OSHA standards (e.g., hazard communication, lead, etc.).

● Report to the nearest OSHA office within 8 hours any fatal accident or one that results in the hospitalization of three or more employees.

● Keep OSHA-required records of work-related injuries and illnesses, and post the OSHA 300A with the occupational injury and illness totals during the months of February, March and April of each year. (This applies to employers with 11 or more employees.)

● Post at a prominent location within the workplace, the OSHA poster informing employees of their rights and responsibilities. (In states operating OSHA-approved job safety and health programs, the state's equivalent poster may be required.)

● Provide employees, former employees, and their representatives access to the Log and Summary of Occupational Injuries and Illnesses (OSHA 300) at a reasonable time and in a reasonable manner.

● Provide access to employee medical records and exposure records to employees or their authorized representatives.

● Cooperate with OSHA compliance officer by furnishing names of authorized employee representatives who may be asked to accompany the compliance officer during an inspection. (If none, the compliance officer will consult with a reasonable number of employees concerning safety and health in the workplace.)

● Not discriminate against employees who properly exercise their rights under the Act (e.g., file safety or health grievance).

● Not retaliate for such activities in any way such as through firing, demotion, taking away seniority or other earned benefits, transferring the worker to an undesirable job or shift, or threatening or harassing the worker.

● Employer must post the OSHA citation (or a copy of it) at or near the place where each violation occurred to make employees aware of the hazards to which they may be exposed. The citation must remain posted for 3 working days or until the violation is corrected, whichever is longer. (Saturdays, Sundays, and Federal holidays are not counted as working days.) The employer must comply with these posting requirements even if the employer contests the citation.

● Abate cited violations within the prescribed period.

● Request and receive proper identification of the OSHA compliance officer prior to inspection.

- Be advised by the compliance officer of the reason for an inspection.

- Have an opening and closing conference with the compliance officer.

- Accompany the compliance officer on the inspection.

- File a Notice of Contest with the OSHA area director within 15 working days of receipt of a notice of citation and proposed penalty if they disagree with OSHA's findings.

Helpful Resources

Federal and National Organizations and Resources

Occupational Safety and Health Administration (OSHA)
Congress created OSHA under the Occupational Safety and Health Act, which was signed by President Richard M. Nixon on December 29, 1970. OSHA's mission is to prevent work-related injuries, illnesses, and deaths. Since the agency was created in 1971, occupational deaths have been cut by 62% and injuries have declined by 42%.
http://www.osha.gov

OSHA Statistics and Data
OSHA has implemented new search technology to provide faster and more accurate access to OSHA Inspection data. Access is available 24 hours a day, seven days a week.
http://www.osha.gov/oshstats/

OSHA's Worker Page
This portion of OSHA's website is devoted to information helpful to workers including helpful resources and answers to common questions about workers' rights and responsibilities under OSHA, OSHA publications, and information on various OSHA regulations that apply to workplaces in the United States.
http://www.osha.gov/as/opa/worker/index.html

Bureau of Labor Statistics
The Bureau of Labor Statistics is the principal fact-finding agency for the Federal Government in the broad field of labor economics and statistics. Here you can find information regarding a variety of statistics by industry, occupation, rate of employment, wages, occupational injuries, illnesses, etc.
http://stats.bls.gov/

Centers for Disease Control Workplace Safety and Health
This Centers for Disease Control website is devoted to workplace safety and health and provides useful information on common workplace hazards, workplace illnesses, injuries and health disorders, workplace safety and prevention, and numerous data, statistics, and publications.
http://www.cdc.gov/Workplace/

National Institute for Occupational Safety and Health (NIOSH)
The National Institute for Occupational Safety and Health (NIOSH) is the federal agency responsible for conducting research and making recommendations for the prevention of work-related injury and illness. NIOSH is part of the Centers for Disease Control and Prevention (CDC) in the Department of Health and Human Services.
http://www.cdc.gov/niosh/

NIOSH Worker Notification Page
http://www.cdc.gov/niosh/pgms/worknotify/

U.S. Department of Health and Human Services (US DHHS)
The Department of Health and Human Services is the United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves.
http://www.dhhs.gov/

The National Institutes of Health (NIH)
The National Institutes of Health, a part of the U.S. Department of Health and Human Services, is the primary Federal agency for conducting and supporting medical research. Helping to lead the way toward important medical discoveries that improve people's health and save lives, NIH scientists investigate ways to prevent disease as well as the causes, treatments, and even cures for common and rare diseases. Composed of 27 Institutes and Centers, the NIH provides leadership and financial support to researchers in every state and throughout the world.
http://www.nih.gov/

National Institute of Arthritis and Musculoskeletal and Skin Diseases
The mission of the National Institute of Arthritis and Musculoskeletal and Skin Diseases is to support research into the causes, treatment, and prevention of arthritis and musculoskeletal and skin diseases, the training of basic and clinical scientists to carry out this research, and the dissemination of information on research progress in these diseases.
http://www.niams.nih.gov/

The National Institute of Environmental Health Sciences (NIEHS)
The National Institute of Environmental Health Sciences, located in Research Triangle Park, North Carolina, is one of 27 research institutes and centers that comprise the National Institutes of Health (NIH) (http://www.nih.gov/), U.S. Department of Health and Human Services (DHHS) (http://www.dhhs.gov/). The mission of the NIEHS is to reduce the burden of human illness and disability by understanding how the environment influences the development and progression of human disease.
http://www.niehs.nih.gov/

National Clearinghouse for Worker Safety and Health Training
The National Clearinghouse is funded by the National Institute of Environmental Health Sciences (NIEHS) Worker Education and Training Program (WETP) and is the primary national source for hazardous waste worker curricula, technical reports, and weekly newshttp://tools.niehs.nih.gov/wetp/

Agency for Toxic Substances and Disease Registry (ATSDR)
The Agency for Toxic Substances and Disease Registry (ATSDR)**,** based in Atlanta, Georgia, is a federal public health agency of the U.S. Department of Health and Human **Services**. ATSDR serves the public by using the best science, taking responsive public health actions, and providing trusted health information to prevent harmful exposures and diseases related to toxic substances.
http://www.atsdr.cdc.gov/

U.S. Environmental Protection Agency
EPA leads the nation's environmental science, research, education and assessment efforts. The mission of the Environmental Protection Agency is to protect human health and the environment. Since 1970, EPA has been working for a cleaner, healthier environment for the American people.
http://www.epa.gov/

U.S. Chemical Safety and Hazard Investigation Board
The CSB is an independent federal agency charged with investigating industrial chemical accidents. Headquartered in Washington, DC, the agency's board members are appointed by the President and confirmed by the Senate. The CSB conducts root cause investigations of chemical accidents at fixed industrial facilities.
http://www.csb.gov/

American Society of Safety Engineers
Founded in 1911, ASSE is the oldest and largest professional safety organization. Its more than 32,000 members manage, supervise and consult on safety, health, and environmental issues in industry, insurance, government and education. ASSE is guided by a 16-member Board of Directors, which consists of 8 regional vice presidents; three council vice presidents; Society president, president-elect, senior vice president, vice president of finance and executive director. ASSE has 14 practice specialties, 151 chapters, 28 sections and 58 student sections.
http://www.asse.org/

The National Transportation Safety Board (NTSB)
The National Transportation Safety Board is an independent Federal agency charged by Congress with investigating every civil aviation accident in the United States and significant accidents in the other modes of transportation -- railroad, highway, marine and pipeline -- and issuing safety recommendations aimed at preventing future accidents.
http://www.ntsb.gov/

American National Standards Institute
As the voice of the U.S. standards and conformity assessment system, the American National Standards Institute (ANSI) empowers its members and constituents to strengthen the U.S. marketplace position in the global economy while helping to assure the safety and health of consumers and the protection of the environment.
http://www.ansi.org/

National Safety Council
The NSC works at a local level through its nationwide network of 39 state and regional chapters that invites members and the public to more fully engage in industry-specific injury prevention

issues. Chapters identify safety needs of particular interest to their areas and deliver community-based programs and services, trainings, conferences, workshops and consultations, and serve as a local voice for safety advocacy.
http://www.nsc.org/

American Society of Heating, Refrigerating, and Air-Conditioning Engineers
ASHRAE, founded in 1894, is an international organization of 50,000 persons. ASHRAE fulfills its mission of advancing heating, ventilation, air conditioning and refrigeration to serve humanity and promote a sustainable world through research, standards writing, publishing and continuing education.
http://www.ashrae.org/

National Fire Protection Association
The mission of the international nonprofit NFPA, established in 1896, is to reduce the worldwide burden of fire and other hazards on the quality of life by providing and advocating consensus codes and standards, research, training, and education.
http://www.nfpa.org/index.asp

American Conference of Governmental Industrial Hygienists
ACGIH is a member-based organization that advances occupational and environmental health. Examples of this include our annual editions of the Threshhold Limit Values (TLVs) and Biological Exposure Indices (BEIs) and work practice guides in ACGIH's Signature Publications.
http://www.acgih.org/home.htm

The National Labor College George Meany Campus
The National Labor College (NLC) is located on a beautiful 47-acre campus in Silver Spring, Maryland. It began with the vision of George Meany that labor have its own college - a national center that would provide continuous labor education for all union activists.
http://www.nlc.edu/

State Agencies and Other Local Resources

New Jersey Department of Labor and Workforce Development
The New Jersey Department of Labor and Workforce Development comprises a staff of 3,700 public servants dedicated to promoting economic growth, job creation and providing crucial services to the workers and employers of the state. The Department works to further the development of the state's world-class workforce through the statewide One-Stop Career Center system; provides almost $3 billion per year in vital income security to workers who are unemployed or unable to work due to illness, accident, or injury; equitably enforces New Jersey's labor laws and standards; analyzes the state's labor market and demographic information; helps disabled individuals succeed in the workplace, and protects the health and safety of workers on the job.
http://lwd.state.nj.us/labor/index.shtml

Occupational Safety and Health Education Program (CSA)
The Occupational Safety and Health Education Program (CSA) is dedicated to making workplaces and communities safer and more secure. It improves the quality of occupational safety and health training services to the State of New Jersey by accurately tailoring training programs to the needs of workers and employers, by generating new and innovative training methods, and by identifying best practices for disseminating information to workers. In addition, the program focuses on increasing workers' security awareness as an integral part of its overall focus on safety and health training.
http://www.njaflcio.org/CSA

New Jersey Department of Health and Senior Services
The New Jersey Department of Health and Senior Services' mission is to foster accessible and high-quality health and senior services to help all people in New Jersey achieve optimal health, dignity and independence. The department works to prevent disease, promote and protect well-being at all life stages and encourage informed choices that enrich quality of life for individuals and communities.
http://www.state.nj.us/health/

Right to Know Hazardous Substance Fact Sheets
More than 1,600 Fact Sheets have been completed and more than 800 have been translated into Spanish. The Fact Sheets are prepared on pure substances and contain information on health hazards, exposure limits, personal protective equipment, proper handling, first aid, and emergency procedures for fires and spills. Click on the various links below to view our fact sheet collection, search or order Fact Sheets, or sign up to be notified about new postings.
http://web.doh.state.nj.us/rtkhsfs/rtkhsl.aspx

New Jersey Division of Workers' Compensation
http://lwd.dol.state.nj.us/labor/wc/workers/workers_index.html

New York Committee for Occupational Safety and Health (NYCOSH)
NYCOSH, the New York Committee for Occupational Safety and Health, is a non-profit coalition of 200 local unions and more than 400 individual workers, physicians, lawyers and other health and safety activists - all dedicated to the right of every worker to a safe and healthful job. Part of a nation-wide network of 25 union-based safety and health organizations, NYCOSH fights job hazards where the fight is needed most: on the shop floor.
http://www.nycosh.org/index.html

Unit #3
What does the data show?

Learning Objectives:

At the end of this unit, participants will be able to:

1. Define the word hazard.
2. Use occupational injury and illness incident data to identify potential hazards and establish priorities.

Unit #3 Workplace Injury and Illness Data

Directions: You will be divided into groups for this activity. Review the various graphs and tables showing data about workplace fatalities, injuries and illnesses. Then as a group, answer the following questions:

1. What are the **two** most significant hazards that could cause **workers to be killed** at wholesale grocery facilities **in the United States**?

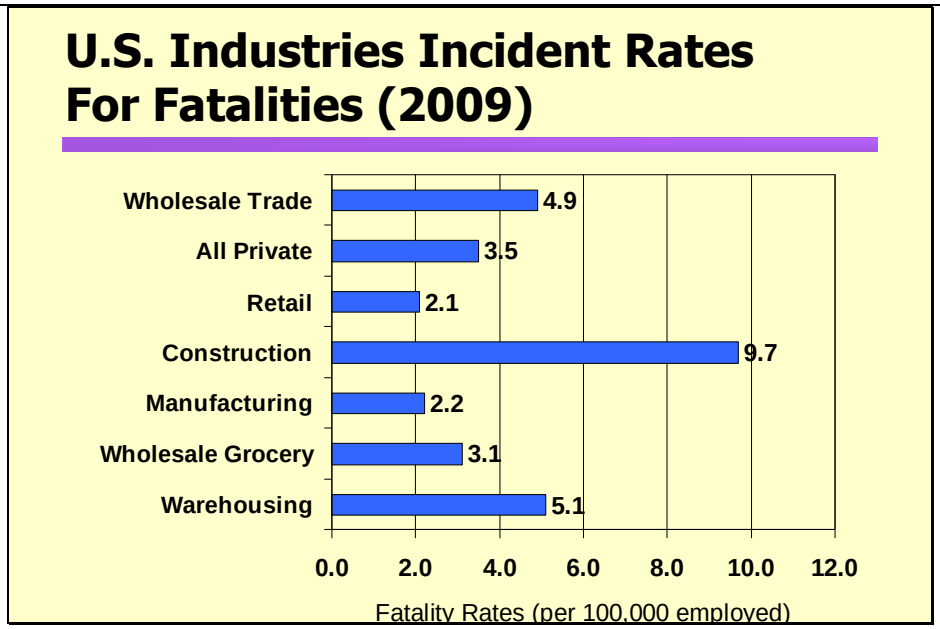
2. What two hazards at your facility do you think would be the most likely to cause a fatality?

3. What are the **five** most significant hazards that could cause **worker injuries and illnesses** in wholesale grocery facilities **in the United States**?

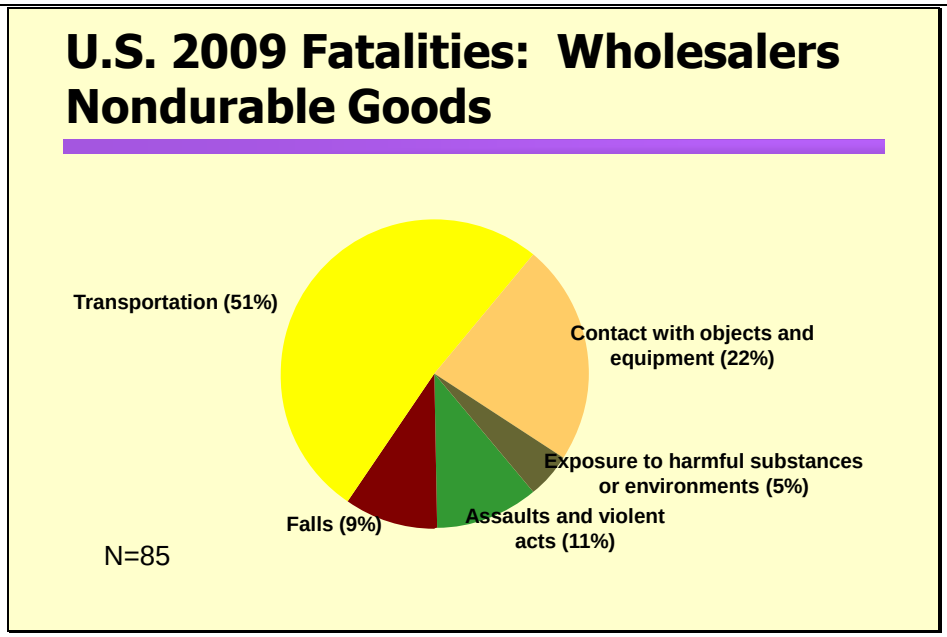
4. How does your facility incident rates compare with other wholesale grocery facilities **in New Jersey**?

5. What additional data about incident rates or causes of incidents would you like to see?

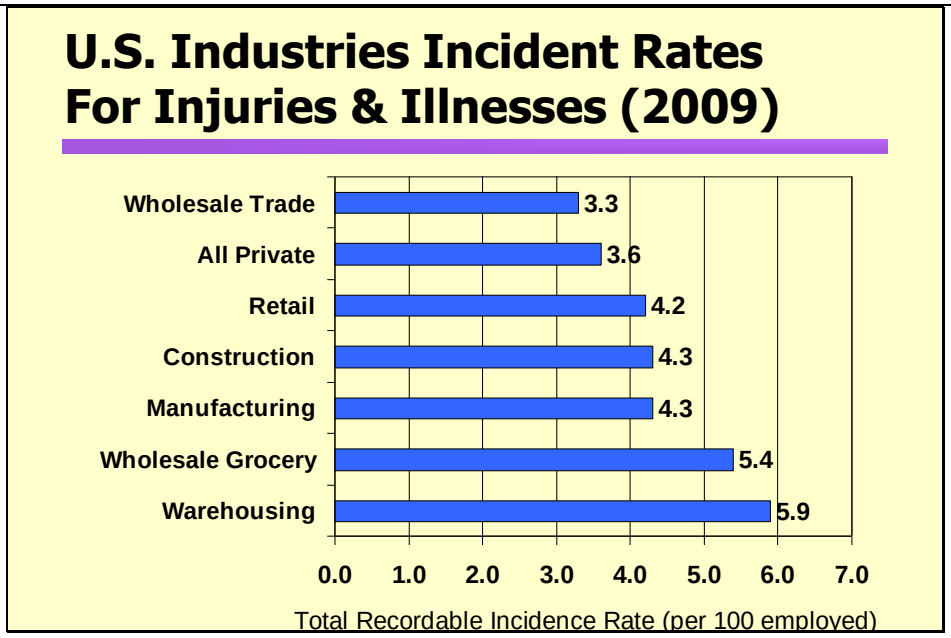
6. List **three** specific actions that you think you should take in response to this data?



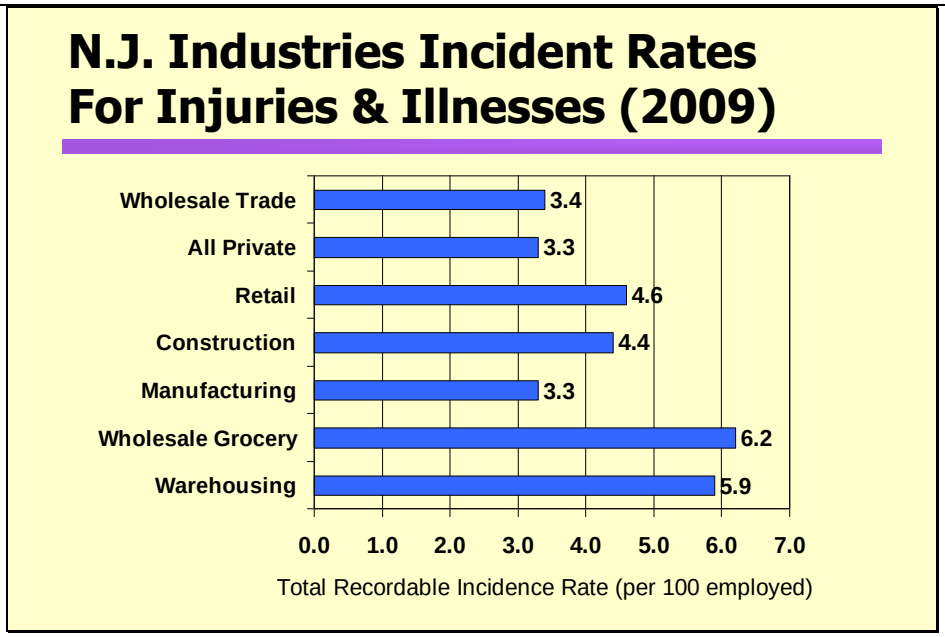
This chart shows the rate of fatalities per 100,000 employed for different industries. It can be used to determine the relative risk of a fatality between the industries listed.



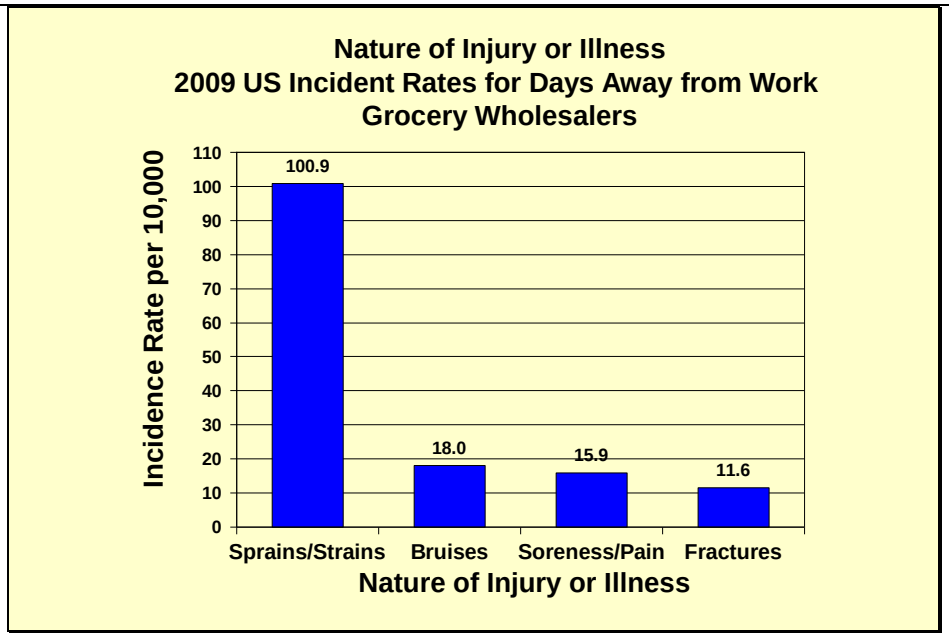
This chart shows that 85 workers died in all nondurable goods wholesalers in the United States in 2009. The pie chart shows the percent of the fatalities resulting from various types of events or exposures. It can be used to determine which events or exposures are the most significant in worker fatalities.



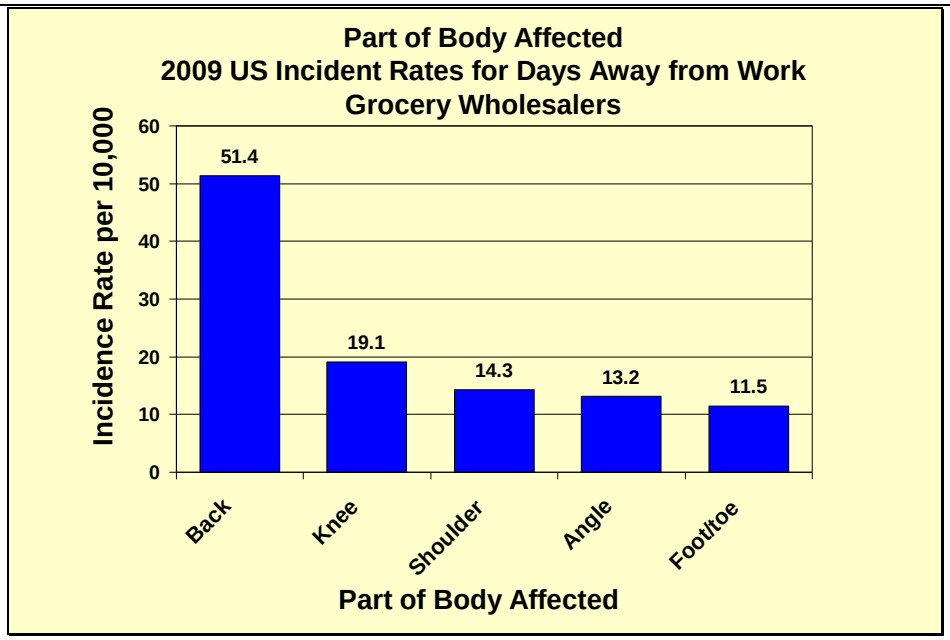
This chart shows the OSHA recordable incidence rate per 100 employed for various industries in the United States. The graph can be used to see how wholesale grocery rates compare with other industries.



This chart shows the OSHA recordable incidence rate per 100 employed for various industries in New Jersey. The graph can be used to see how wholesale grocery rates compare with other industries.

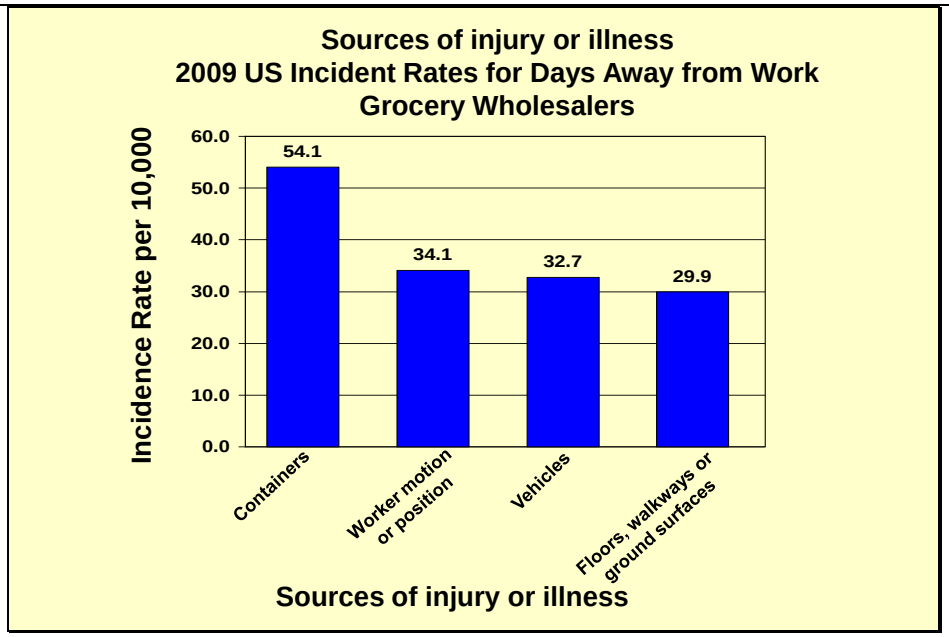


This chart shows the incidence rate for 10,000 workers for the nature of injury and illness in wholesale grocery facilities in the United States in 2009. It can be used to determine which natures of injury and illness are the most significant in workplace injuries and illnesses in whole sale grocery workplaces.

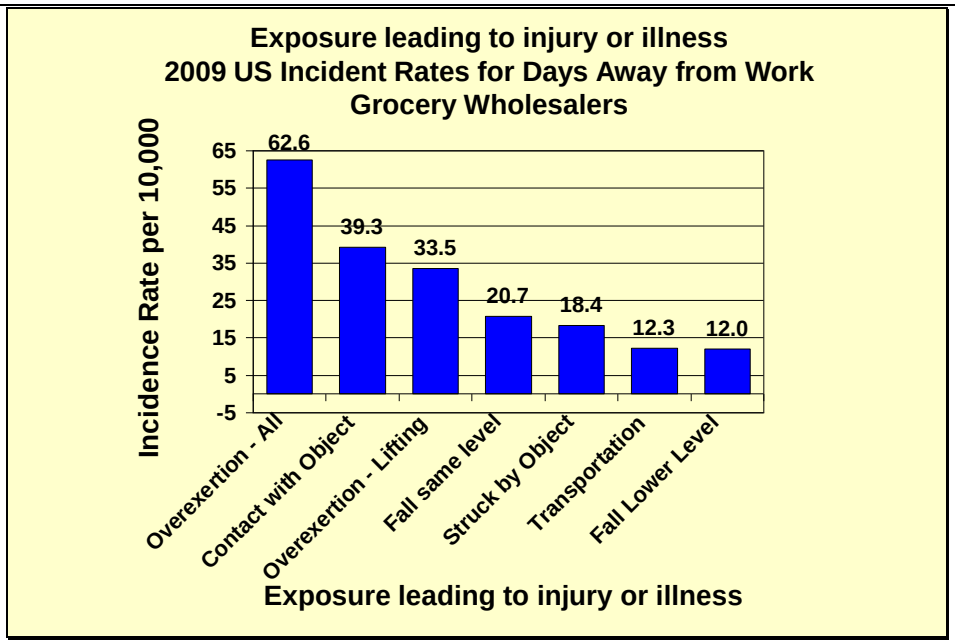


This chart shows the incidence rate for 10,000 workers for the part of body affected in workplace injuries and illnesses in wholesale grocery facilities in the United States in 2009. It can be used to determine which parts of the body are most likely to be affected from workplace injuries and illnesses in wholesale grocery workplaces.

Source for all slide information: 2009 BLS



This chart shows the incidence rate for 10,000 workers for the sources of workplace injuries and illnesses in wholesale grocery facilities in the United States in 2009. It can be used to determine which sources are most likely to be involved in workplace injuries and illnesses in wholesale grocery workplaces.



This chart shows the incidence rate for 10,000 workers for the event or exposure causing workplace injuries and illnesses in whole grocery facilities in the United States in 2009. It can be used to determine which events or exposures are most likely to be involved in workplace injuries and illnesses in wholesale grocery workplaces

Source for all slides in this unit: 2009 BLS

OSHA Form 300A Summaries: 2007-2009

Year	Cases Days Away	Cases Transfer/ Restrictions	Cases Other	Days Away	Days Transfer/ Restrictions	Total Number Injuries	Total Rate Recordable NJ = 6.2*	DART Rate NJ=4.9*	Average Days Away per Case
2009									
2008									
2007									

- 2009 New Jersey incidence rates for certain type of industry.

This table shows the numbers taken off the OSHA Form 300A Summaries for the years 2007 to 2009. Data for each facility is provided as a separate handout. New Jersey rates for certain types of industry are shown for comparison purposes. DART stands for Days Away from work, days of Restricted work activity, and/or job Transfer. The DART rate is a measure of severity.

Unit #4
Establishing Committee Expectations

Learning Objectives:

At the end of this unit, participants will be able to:

1. Explain the important elements of an effective safety and health program.
2. Describe the purpose and goals of their safety and health committee
3. Assess the "Culture of Safety" at their facility

Unit #4: Establishing Committee Expectations

Directions: You will be divided into groups. As a group, please answer the following questions and be prepared to discuss your responses.

1. Describe what you think is the purpose of your safety and health committee?

2. What major activities should your safety and health committee carry out?

3. In general, what does your safety and health committee need to be effective?

4. How would you describe the "culture of safety" at your facility? The "Culture of safety" is the general attitudes and behaviors of individuals in a facility towards safety. Key components of a positive safety culture are management commitment, supervisor support, coworker support, employee participation, and competence.

5. What do you expect your safety and health committee to accomplish?

6. What authority is needed for your safety and health committee to carry out its purpose?

Unit #4: Safety Culture Survey

This anonymous survey asks questions about the culture of safety at your worksite. In order to help interpret the survey, please answer the following questions:

1. **Date: _____**
2. **Are you a member of a union? (check one)**
   a. __ Yes
   b. __ No
3. **How many years have you worked for your employer? (check one)**
   a. __ Less than one year
   b. __ One to five years
   c. __ More than five years
4. **Job Title: _____**
5. **Department: _____**

Please indicate your level of agreement with the following statements about your worksite. Mark your answer by circling the number.		Strongly Disagree	Disagree	Neither	Agree	Strongly Agree
1.	Safety is a high priority at my worksite.	1	2	3	4	5
2.	My worksite is a safe place to work.	1	2	3	4	5
3.	I have the materials and equipment to work safely.	1	2	3	4	5
4.	I get enough training to do my work safely.	1	2	3	4	5
5.	My supervisor cares about me being safe.	1	2	3	4	5
6.	My co-workers are committed to being safe.	1	2	3	4	5
7.	My co-workers follow safety rules and procedures.	1	2	3	4	5
8.	I feel comfortable raising safety issues with others.	1	2	3	4	5
9.	Workers who break safety rules are treated fairly.	1	2	3	4	5
10.	Safety problems are fixed quickly.	1	2	3	4	5
11.	You get recognition for working safely.	1	2	3	4	5
12.	Safety rules and procedures are enforced.	1	2	3	4	5
13.	Being safe on the job is important to me.	1	2	3	4	5
14.	I have the opportunity to make changes that will improve safety.	1	2	3	4	5
15.	At my worksite, being safe on the job is more important than getting the work done.	1	2	3	4	5
16.	Management listens to safety concerns.	1	2	3	4	5
17.	Workers must take shortcuts to get the work done.	1	2	3	4	5
18.	Safety issues are included in meetings.	1	2	3	4	5

Unit #5
Mapping hazards

Learning Objectives:

At the end of this unit, participants will be able to:

1. Identify common safety, health, and emergency hazards at your facilities.
2. Compare the relative risks for common hazards.

Unit #5: Hazard Mapping

Introduction: Hazard Mapping is an excellent technique to track hazards and health issues in a workplace. Maps are a picture of the workplace and its hazards, based on employee experiences and knowledge.

The map gives employees, management and the health and safety specialists working with them:

- A common language about workplace and health and safety issues.
- A common understanding and consensus about the health and safety issues in a workplace or work area.
- A powerful tool to communicate to everyone in the workplace who may not be familiar with problems beyond their work areas.

Tackling problems is easier when individual parts of the picture can be connected and seen together. The map is a starting point about how to solve health and safety problems, and what is possible.

The principles of prevention (i.e.: fixing the job) are emphasized, as opposed to "fixing" the employees. Like other visual tools, these maps can be used as a way to bridge language and other differences.

The objectives of hazard mapping are:

- To list the main occupational risk factors;
- To create a diagram/s of potential hazards in the workplace; and
- To help to prioritize workplace hazards so that measures can be implemented to control them.

The information shown on a risk map includes:

- The type of process;
- The location of machinery, equipment, storage areas, exits, firefighting equipment, first-aid boxes, rest rooms etc;
- Potential hazards (chemical, physical etc.).

The following are the major categories of hazards found in many workplaces:

Safety hazards are generally visible, cause immediate harm, and only take one exposure.

- Walking and working surfaces
- Electrical
- Flammables and combustibles
- Exit routes, emergency action plans and fire prevention
- Compressed gases
- Powered platforms and vehicle-mounted work platforms
- Machinery and machine guarding

- Hand and portable powered tools
- Hand-held tools
- Welding, cutting and brazing
- Control of hazardous energy (logout/tagout)
- Permit-confined spaces
- Material handling
- Driving
- Workplace violence
- Contact with temperature extremes
- Personal protective equipment

Health hazards are generally not visible, cause delayed harm, and take repeated exposures to cause harm.

- Toxic substances (inhalation, ingestion, absorption)
- Oxygen deficiency
- Hazard communication/RTK
- Ionizing radiation
- Nonionizing radiation
    - UV
    - Laser
    - Microwave
- Ergonomic (lifting, repetitive motion, vibration)
- Biological
    - Mold and fungus
    - Communicable disease (e.g., TB)
    - Hepatitis/HIV
    - Bloodborne pathogen
    - Allergens
- Stress
- Noise

Directions: You will be divided into groups to conduct this activity. The Hazard Mapping process is quite simple – all you have to do is draw a floor plan of the workplace or the component sections/floors, marking as accurately as possible, the main features of the workplace – doors, windows, stairs, etc.

Once you have your floor plan mark all potential hazards/risks. You may be asked to label safety and health hazards with different colors. You may also be asked to rank the level of risk with each hazard identified. Be prepared to explain your results.

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Unit #6
Developing a Mission Statement

Learning Objectives:

At the end of this unit, participants will be able to:

1. Write a mission statement for the joint management safety and health committee.

Unit #6: Developing a Mission Statement

Introduction: A mission statement provides overall direction and commitment to safety and health. It enables management and employees to work together for a common purpose and provides the foundation for developing a strategic plan to improve the work environment.

1. Mission statements should be easily understood and embraced by all employees.
2. Acted upon by all employees every day.
3. Firmly rooted in the work environment **culture of safety** that everyone operates in:
    a. All individuals believe they have a right to a safe and healthy workplace.
    b. Each person accepts personal responsibility for ensuring his or her own safety and health.
    c. Everyone believes s/he has a duty to protect the safety and health of others.
4. Should establish clear and attainable goals.
5. Should not include specific details, individual assignments, tasks or responsibilities. These would be included in the committee's action plan.

Directions: You will be divided into groups. In your group, please answer the following questions and then use your response to draft a mission statement for your committee.

1. What are the overall goals of your committee? What are the outcomes you expect as a result of your efforts?

2. In general, how do you plan to accomplish these goals?

3. Is the committee going to be advisory or decision-making? If its decision-making, does the committee take actions, or report to someone who implements its decisions?

4. Will the committee respond to hazards, complaints, accidents or other situations as they come up, or does it take a preventive approach, such as getting involved in long-range planning on equipment, renovations, employee training, etc.?

5. Based on the answers to these questions, write a draft of the committee's mission statement. Use the following questions to evaluate the mission statement you have developed. Is the statement realistic? Is it clear and concise? Is it powerful? Does it cover the key points you listed under questions 1 through 4?

Unit #7
25 Thousand Dollar Pyramid Game

Learning Objectives:

At the end of this unit, participants will be able to:

1. Identify control methods to eliminate or reduce occupational risk.
2. Classify applied control methods using the OSHA categories for hierarchy of controls.

25 Thousand Dollar Pyramid Game

Introduction: This is the hierarchy of controls pyramid. It shows the three major ways to eliminate or reduce the risk of a hazard in the workplace that might cause a workplace injury or illness.

- **Engineering controls:** A method that prevents a worker from being exposed to the hazard by physically changing the workplace. It is not dependent on what the worker does or wears (e.g., using a safer product, using guards, or installing barriers).

- **Administrative controls including work practices:** A method that prevents a worker from being exposed to the hazard by something the worker or employer does (e.g., training, standard operating procedure, or warning sign).

- **Personal protective equipment (PPE):** A method that prevents a worker from being exposed to the hazard by something the worker wears (e.g., gloves, hardhat, of safety glasses).

OSHA requires that engineering controls and/or administrative controls be used, if feasible, before using PPE.

Directions: In this game, you will be divided into competitive groups and each group given a unique colored post-it. A short story about a workplace injury or illness will then be shown and read. After the story is read, the groups will have one to two minutes to write down as many control solutions as possible that will prevent or mitigate the incident. A separate post-it must be used for each unique solution and the solution must be posted on the appropriate category on the control pyramid at the front of the room. Each group will get credit as follows:

- $3000 for an engineering control
- $2000 for administrative controls including work practices
- $1000 for personal protective equipment.

Additional stories are read and the group with highest number of dollars wins.

Unit #8

Overview of Hazards at Your Facility

Learning Objectives:

At the end of this unit, participants will be able to:

1. Identify the more significant sources of workplace injuries and illnesses at your facility.
2. Recognize the basic safety and health issues associated with sharp edges and walking and working surfaces.

Overview of Hazards

Introduction: This unit will provide an overview of selected hazards at your worksite. The more significant hazards are:

- Walking and working services (slips, trips & falls – miscellaneous injuries)
- Sharp edges (cuts and lacerations)
- Material Handling
- Fire Safety (Emergency Action Plans)
- Machine Guarding

Slips, Trips and Falls

What causes slips, trips and falls?
Slips can occur when floors or other working surfaces become slippery due to wet or oily processes, floor cleaning, leaks, or from materials and debris left in walkways. Trips can occur due to uneven floor or working surfaces, protruding nails and boards, from stretched carpet or bunched floor mats intended to prevent slipping, from holes or depressions in working surfaces, and from step-risers on stairs that are not uniform in height. Both slips and trips can result in falls. In addition, falls can occur when ladders are not maintained or used properly, elevated storage and work surfaces are left unguarded, and when stairways and elevated working surfaces are not designed properly.

What types of injuries can occur?
According to OSHA, slips, trips and falls constitute the majority of general industry accidents and result in back injuries, strains and sprains, contusions, and fractures. Additionally, they cause 13 percent of all workplace deaths in 2008.

What can employers and employees do to prevent slips, trips and falls in the workplace?

- Where there are wet or oily processes, maintain drainage and provide false floors, platforms, nonslip mats or floor surfaces, or other dry standing places where practicable.
- Use no-skid waxes and surfaces coated with grit to create nonslip surfaces in slippery areas such as toilet and shower areas.
- Use slip-resistant footwear.
- Clean up floors and working surfaces promptly and frequently when they become wet.
- Use prudent housekeeping procedures such as cleaning only one side of a passageway at a time.
- Provide warning signs for wet floor areas.

- Provide floor plugs for equipment, so power cords need not run across pathways. Temporary electrical cords that must cross aisles should be taped or anchored to the floor.
- Aisles and passageways should be sufficiently wide for easy movement and should be kept clear at all times.
- Re-lay or stretch carpets that bulge or have become bunched to prevent tripping hazards.
- Eliminate cluttered or obstructed work areas and keep file cabinet drawers closed.
- Provide good lighting for all halls and stairwells, especially during night hours.
- Make sure stairs have proper handrails, that treads and risers are maintained, and that treads have a slip-resistant surface.
- Instruct workers to use the handrail on stairs, to avoid undue speed, and to maintain an unobstructed view of the stairs ahead of them even if that means requesting help to manage a bulky load.
- Eliminate uneven floor surfaces.
- Make sure elevated storage and work surfaces have guardrails, toe boards and a permanent means of access.
- Make sure that floor drains, pits and other floor or wall openings are covered or protected with guardrails.
- Use only properly maintained ladders with uniformly spaced rungs and nonslip safety feet to reach items. Do not use stools, chairs or boxes as substitutes for ladders.
- Train employees in the safe use of ladders.

Preventing Cuts & Lacerations

Introduction: Each year, millions of workers suffer workplace injuries that could have been prevented. Some of the most common and preventable injuries are cuts and lacerations. Although statistical data differs from study to study, cuts and lacerations often rank as the second or third most frequent workplace injury. Approximately 30 percent of all workplace injuries involve cuts or lacerations, and about 70 percent of those injuries are to the hands or fingers. Common cut/laceration injuries include:

- Scratches and abrasions, or minor cuts requiring first aid;
- Needle sticks, or puncture wounds;
- Deep lacerations requiring medical attention, sutures;
- Lacerations involving nerve and/or tendon damage;
- Amputations.

Typical hazards/causes of cuts and lacerations:

- Improper training
- Lack of established safety procedures

- Employees in a hurry, taking short cuts or not following safety procedures
- Failure to wear cut-resistant gloves or wearing improper gloves for job
- Contact with metal items such as nails, metal stock or burrs
- Hand tools with blades (e.g., knives, box cutters, screwdrivers, chisels)
- Handling sharp objects or material such as glass, sheet metal
- Improper tool for the job or tool used improperly (e.g., using a screwdriver as a pry bar)
- Tools in poor condition (e.g., cracked or broken handle, dull blade, mushroomed head or slippery from exposure to oil-based chemicals)
- Poor housekeeping, clutter, debris
- Poor lighting, reduced visibility
- Using defective machinery

Prevention strategies: The key to preventing these injuries is keeping body parts away from hazards. Employers should establish work procedures to identify and control exposure to hazards. Ask participants to suggest control measures to minimize the risk for cuts and lacerations. Possible answers include:

- Training employees to use established safety procedures
- Only use machinery that you have been trained to use
- Using lockout/tagout procedures
- Turn off the machinery when unattended
- Keep hands away from any moving parts and blades
- Do not leave sharp objects in hazardous positions
- Wearing personal protective equipment
- Safe tool use
- Good housekeeping
- Tag and remove defective machinery

One of the most common sources of cuts and lacerations is the use of knives and other cutting tools. Gather examples of utility knives and other cutting tools used at your facility and a copy of safety procedures regarding their use. Review your safety procedures, or use the following suggestions.

Knife/blade safety:

- Wear proper safety gear; eyewear, gloves, sleeves.
- Use the proper tool for the job.
- Inspect tools prior to use.
- Keep work area clear.
- Keep tool under control at all times.
- Keep the item you are cutting secured; don't hold work in hand while cutting.
- Use a sharp blade; a dull blade requires greater force, increasing potential hazards.
- Replace blades when they become dull; use caution when disposing of used blades (e.g., use approved sharps container or wrap the cutting edge with heavy tape).
- Stand in a well-balanced position.
- The cutting stroke of knives should be away from the body and hand when you are able control the cut.

- Make sure the path of the cut is clear, and keep the non-cutting hand out of the path of the cut.
- When cutting thick material, use several passes of the blade and apply more downward pressure with each pass.
- Never use a cutting blade as a screwdriver, pry bar or chisel.
- Don't leave exposed blades unattended; use self-retracting cutting blades.
- When appropriate, use rounded tip cutting blades rather than pointed tip blades.
- Maintain proper storage or use a separate drawer for sharp cutting tools.
- Keep cutting tools in a closed position or covered with a protective sheath.

Gather examples of gloves or other personal protective equipment designed to minimize risk of cuts and lacerations.

Gloves: Selecting the right glove for the right application can improve worker safety and productivity. Comfort is one of the most important factors when selecting hand protection. If gloves are not comfortable, workers are less likely to wear them. Understanding the different types of gloves and their appropriate uses is important to a good hand-protection program.

-- edited version from the Ohio Bureau of Workers' Compensation *Safety Leaders Guide, 2009*

Material Handling / Powered Industrial Trucks

Causes of accidents include:

- Improper training
- Lack of maintenance
- Overloading forks
- Traveling with raised loads

Safe forklift operation:

- Do not place arms or legs outside the vehicle while operating
- Unattended vehicles must be shut off with a lowered load
- Maintain headroom under lights and sprinklers
- Overhead guard must be in place to protect from falling objects

Fire Safety / Emergency Action Plans

- Exit routes must be permanent and there must be enough exits in the proper arrangement for quick escape
- Exits must be separated by fire-resistant materials
- Openings into an exit must be limited to those necessary to allow access to the exit or to the exit discharge
- An opening into an exit must be protected by an approved self-closing fire door that remains closed or automatically closes in an emergency
- Exit routes must be free and unobstructed

- Keep exit routes free of explosive or highly flammable materials
- Arrange exit routes so that employees will not have to travel toward a high hazard area, unless it is effectively shielded
- Emergency safeguards (e.g., sprinkler systems, alarm systems, fire doors, exit lighting) must be in proper working order at all times

Machine Guarding

Causes of Machine Accidents:

- Reaching in to "clear" equipment
- Not using Lockout/Tagout
- Unauthorized persons doing maintenance or using the machines
- Missing or loose machine guards

Requirements for Safeguards:

- Prevent contact - prevent worker's body or clothing from contacting hazardous moving parts
- Secure - firmly secured to machine and not easily removed
- Protect from falling objects - ensure that no objects can fall into moving parts
- Create no new hazards - must not have shear points, jagged edges or unfinished surfaces
- Create no interference - must not prevent worker from performing the job efficiently, safely, and comfortably
- Allow safe lubrication - if possible, be able to lubricate the machine without removing the safeguards

Types of Guards:

- fixed
- interlocked
- adjustable
- self-adjusting

Unit #9
Ergonomics

Learning Objectives:

At the end of this unit, participants will be able to:

1. Identify ergonomic risk factors associated with common work areas and job tasks.
2. Define work-related musculoskeletal disorders and determine the how they develop.
3. Assess effective ways to mitigate these risk factors to minimize associated illnesses.

Ergonomic Risk Factors at Your Worksite

Introductions: Ergonomics is the study of workplace design and how the workplace design affects the worker. Examples of workplace design issues include table height, desk height, and chair support for the back.

Many workplace aches and pains can be attributed to poor workplace design that forces the worker to fit the job, rather than have the job be designed for the worker. This activity will help you identify some of the job tasks at your worksite that contribute to worker ergonomic problems.

Directions: You will be divided into groups and each group will select one member and map their job. Each group will answer questions 1-4 and then present their answers to the class. After the last group is finished, each group will answer and present question 5.

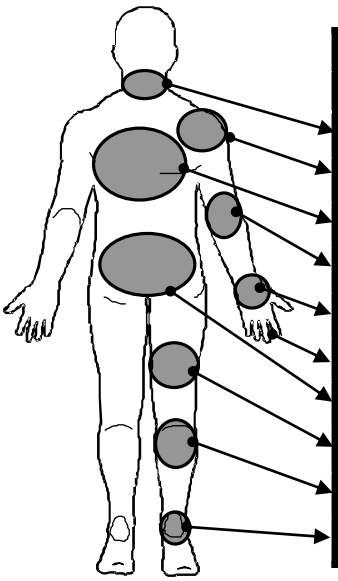
BODY MAPPING EXERCISE

Job Title: _____ **Major tasks**: _____

_____

_____

1. Indicate the body part/area which bothers you and the level of pain or discomfort you experienced:



Body Part	Level of pain/discomfort		
	Just noticeable	Moderate	Intolerable
☐ Neck			
☐ Shoulder			
☐ Upper back			
☐ Elbow/Forearm			
☐ Wrist/Hand			
☐ Fingers			
☐ Lower back			
☐ Hip/Thigh			
☐ Knee			
☐ Ankle/Foot			

2. Please mark the word(s) that best describe your problem:

☐ Aching ☐ Burning ☐ Cramping ☐ Numbness ☐ Pain ☐ Swelling

☐ Stiffness ☐ Tingling ☐ Weakness ☐ Discoloration ☐ Other

3. How long does each episode last? (mark an "**X**" along the line)

_____/ _____/ _____/ _____/ _____/ _____/

(1 hour) (1 day) (2-3 days) (1 week) (1 month) (6 months)

4. What do you think caused the problem? _____

_____

_____

5. Please comment on what you think would improve your symptoms? _____

_____

_____

Source: "Symptom Survey: Ergonomics Program" ("Elements of Ergonomics Programs", DHHS-NIOSH Publication No. 97-117, Page 87)

Unit #10
Committee Operations, Functions, and Duties

Learning Objectives:

At the end of this unit, participants will be able to:

1. Describe the roles and function of an effective safety and health committee.

Unit #10: Defining committee operations, functions, and duties

Directions: You will be divided into groups. Each group will be given some questions about committee operations, functions and duties. In your group, decide on the best answers for each question. Be prepared to present your results to the class.

PART 1: Committee Structure

1. What should be the structure of your committee? Who should be members? How many members should there be? What roles need to be established and what should be committee member responsibilities for these various roles?

2. Should the chairperson be elected by the committee? How long will the chair serve?

3. How long will committee members serve? How will committee members be replaced?

4. Should there be alternates for each member?

5. Should subcommittees be formed for specific tasks?

PART 2: Meeting Times and Schedules of Meetings

6. How often should the committee meet?

7. What should happen when meetings that are scheduled get canceled or members don't attend or are not able to attend?

8. How should these problems be addressed?

9. How will conduct of meetings/ground rules be established?

10. Will unscheduled meetings be called when the need arises? How?

PART 3: Decision-Making Process and Record-Keeping

11. Who should take minutes and how will they be distributed?

12. How should decisions be made within the committee?

13. How should workers and other management personnel be given input into decisions?

14. How should the committee resolve conflicts or differences within the committee?

PART 4: Communication Procedures with Employees

15. How should the responsibilities of committee members be made known to the workforce?

16. How can the committee best communicate with employees?

17. What systems need to be put in place to obtain safety-related suggestions, reports of hazards, or other information directly?

18. What communication obstacles might you face? How might they be handled?

Unit #11
Linking Hazards to Jobs

Learning Objectives:

At the end of this unit, participants will be able to:

1. Conduct a job safety analysis to identify hazards associated with tasks and implement control strategies to reduce risk.

Unit #11: JOB SAFETY ANALYSIS WORKSHEET

Directions: You will be divided into groups. Each group will conduct one or more job safety analyses of jobs at your facility by looking at the job's tasks, the potential hazards associated with the tasks, and how the risk of injury or illness can be reduced.

TITLE OF JOB OPERATION: Date: _____

_____

Title of person who does job: _____

Employee observed: _____ Location: _____

Analysis made by: _____ Analysis approved by: _____

Sequence of basic job tasks	Potential hazard(s)	Way to control hazard(s)

Personal protective equipment required for this position:

Employee Training Needed:

Can Engineering or Administrative Controls be used to eliminate hazard:

Unit #12
Developing a Committee Action Plan

Learning Objectives:

At the end of this unit, participants will be able to:

1. Develop a committee action plan with specific tasks and timeline.

Unit #12: Developing a Committee Action Plan

Directions: You will be divided into groups. As a group, develop answers to the following questions. Be prepared to discuss your results.

1. Before this training, what were the three greatest strengths of the **existing safety and health committee** or what was the committee doing right (e.g., committee members are committed to safety)?

2. Before this training, what were three things about your **existing safety and health committee** that needed improvement (e.g., committee doesn't meet often enough)?

3. Facility wide, what are the three greatest strengths of your **safety and health program** or what is working at your facility to prevent injuries and illnesses (e.g., quality training)?

4. Facility wide, what are the three greatest weaknesses of your **safety and health program** or what could be improved that would help prevent injuries and illnesses (e.g., incident rates are too high)?

5. As a safety and health committee, what are as the three most important health and safety issues within your facility that the committee should address first? Use your answers to questions one to four as a guide. Issues could be how the committee operates and/or the effectiveness of the safety and health program.

6. What reports, logs, and documents should be reviewed by the committee when they meet? How often should they be reviewed?

7. How should workplace inspections be conducted? Who should do them? How often should they be done?

8. What will be the procedures for investigating safety-related incidents, including injury accidents, illnesses, and deaths?

9. How will recommendations on ways to eliminate or correct hazards and unsafe work practices be made?

10. What additional training do committee members need?

11. What are the greatest barriers to your safety and health committee being successful and how might these barriers be overcome?

12. Outline the action steps your committee should accomplish within:

a. Three (3) months:

b. Six (6) months:

c. One (1) year:

d. Reason for not accomplishing goals as scheduled and new schedule (visit in one year)

Appendix A

Glossary

Appendix A: Glossary

Accident: a workplace related event that is not preventable that caused a person to be injured or suffer an illness.

Administrative controls: types of controls for reducing or eliminating the risk of hazards that involve regulating people and how they work (e.g., training, workplace rules, e.g., safety signs).

Biological hazards: substances created by nature that can result in harm to health (e.g.,viruses, bacteria, diseases, mold, and spores).

Case: the time, person, and place that defines an incident.

Chemical hazards: chemical substances that can cause harm (e.g., bleach, acid, and cleaning fluids).

Claim: an incident resulting in a reportable injury or illness that resulted in an insurance payment.

Days away from work: the number of days a worker had to stay out of work because of an incident.

Emergency hazards: hazards created when a situation is uncontrolled and has the potential to cause immediate harm.

Engineering controls: types of controls for reducing or eliminating the risk of hazards that are not dependent on humans (e.g., use a safer chemical, enclose the process that uses a hazardous chemical, install local ventilation to remove the hazard, and use a mechanical lift).

Ergonomic hazards: a motion or position that can harm the musculoskeletal system (e.g., awkward lifting, typing on a keyboard, and holding your wrist repeatedly in an awkward position).

Exposure: coming in contact with something.

Hazard: an object, substance, process, or condition that has the potential to cause harm (e.g., step ladder, meat slicer, wet floor, and lifting a heavy box).

Health hazards: an object, substance or process that has the potential to cause harm to health (e.g., chemicals, noise, radiation, and, UV light). A health problem typically is not apparent until after repeated exposure to the hazard.

Hierarchy of controls: The preferred order of strategies for eliminating or reducing the risk of hazards: 1) engineering controls, 2) administrative controls, and 3) personal protective equipment.

Incident: a workplace related event that is preventable that either caused or could have caused a person to be injured or suffer an illness.

Incident rate: a mathematical calculation that describes the number of recordable incidents that a facility experiences per so many employees in one year. The total recordable incident rate is usually calculated for 100 full-time employees in one year. It is calculated by multiplying the "Number of OSHA Recordable Cases" X 200,000 and dividing by the "Number of Employee Labor Hours Worked."

Nature of injury: various terms used to define the harm caused by an incident (e.g., strain, burn, fracture, amputation, cancer, and carpal tunnel syndrome).

Near-miss: an incident that could have caused a person to be injured or suffer an illness, but did not.

Near-hit: same as a near miss.

Personal protective equipment: pieces of clothing or equipment worn by individuals to block or prevent exposure to a hazard (e.g., gloves, respirator, hard hat, safety shoes, and safety glasses).

Physical hazards: hazards associated with chemicals that can cause immediate harm (e.g., explosive, water reactive, ignites spontaneously in air, and reacts with other chemicals). It can also be a form of energy that can cause harm (e.g., noise, vibration, radiation, and temperature).

Probability: chances or odds (e.g., the probability of winning at NJ Pick Six is approximately 1 in 10,000,000).

Psychological hazards: a situation that causes mental difficulties (e.g., stress).

Recordable Incident: an incident that meets the Occupational Safety and Health Administration definition of a recordable incident. A recordable incident generally means a workplace injury or illness involving medical treatment beyond simple first aid.

Restricted duty: the number of days a worker had to do work other than normal duties because of an incident.

Risk: the probability and severity of harm.

Safety hazards: hazards that can cause immediate harm (e.g., fire, falls, and struck by object).

Severity: the amount of potential harm and whether the harm is reversible (e.g., high severity = death versus low severity = bruise).

Sources of injuries or illnesses: various terms used to define what caused a workplace injury or illness (e.g., bodily motion, container, chemical, and hand tools

Threshold: a scientifically determined level between safe and unsafe.