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RECORDKEEPING

All PFI Standards and Best Practices are advisory only. There is no agreement to adhere to any PFI Standard or Best Practice and their use by anyone is entirely voluntary.

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PFI Recordkeeping Best Practice

Introduction

OSHA places significant emphasis on injury and illness recordkeeping because the data pulled from employers' injury and illness logs is used by OSHA to identify workplace safety and health trends and to track progress in resolving those issues. OSHA also uses recordkeeping data to improve standards, tailor enforcement programs, and focus individual inspections.

SCOPE OF RECORDKEEPING RULE

Determine Whether a Partial Exemption Applies – Are you exempt?

Employers are required to record certain work-related injuries and illnesses unless the employer:

- Has 10 or fewer employees (company-wide) at all times during the previous calendar year; or
- Operates in one of the specific low-hazard industries identified by OSHA (e.g., retail, service, finance, insurance or real estate).
- For a complete list, see <u>Appendix A to Subpart B of OSHA's</u> <u>Recordkeeping Rule.</u>

Determine Whether Injured Employees Are Covered

Recordkeeping requirements apply to an injury or illness of:

- All employees on the payroll (whether labor, executive, hourly, salary, part-time, seasonal, or migrant)
- Employees not on the payroll but who are supervised on a day-to-day basis (e.g., temporary employees, subcontractors, borrowed employees, etc.)
- All contract employees who work in process areas covered by OSHA's Process Safety Management standard, even if the employer does not supervise the contract employees on a day-to-day basis

The OSH Act does not treat any of the following as employees for recordkeeping purposes:

- contractors not supervised by the employer
- unpaid volunteers
- sole proprietors
- family members working on family farms
- domestic workers in residences

OSHA RECORDKEEPING FORMS OSHA 300, 300 A, and 301

The required OSHA forms for recordkeeping are all available for download on the OSHA website: https://www.osha.gov/recordkeeping/RKforms.html

Private Concern List

Enter "Privacy Case" on the 300 Log in lieu of the injured employee's name, if the injury relates to:

- intimate body part or reproductive system
- sexual assault
- mental illness
- HIV, hepatitis, or tuberculosis infection
- needlestick or cut by a sharp object contaminated with another person's blood or potentially infectious material
- another illness (not injury) for which the employee independently and voluntarily requests that he not be named on the 300 Log

Maintain a separate confidential list of the case numbers and employee names of the privacy concern cases. If the employee's job title or description of the nature of the injury or illness may enable others to identify the employee, employers should leave the job title blank or limit the description on the log.

WHAT MUST I REPORT DIRECTLY TO OSHA

All employers must report

- 1. All work-related fatalities within 8 hours.
- 2. All work-related inpatient hospitalizations, all amputations and all losses of an eye within 24 hours.

You can report to OSHA by

- 1. Calling OSHA's free and confidential number at 1-800-321-OSHA (6742).
- 2. Calling your closest Area Office during normal business hours.

Only fatalities occurring within 30 days of the work-related incident must be reported to OSHA. Further, for an in-patient hospitalization, amputation or loss of an eye, these incidents must be reported to OSHA only if they occur within 24 hours of the work-related incident. In-patient hospitalization is defined as a formal admission to the in-patient service of a hospital or clinic for care or treatment.

WHAT IS RECORDABLE

- Covered employers must record all work-related fatalities.
- Covered employers must record all work-related injuries and illnesses that result in days away from work, restricted work or transfer to another job, loss of consciousness or medical treatment beyond first aid.
- In addition, employers must record significant work-related injuries or illnesses diagnoses by a physician or other licensed health care professional, even if it does not result in death, days away from work, restricted work or job transfer, medical treatment beyond first aid, or loss of consciousness.
- Injuries include cases such as, but not limited to, a cut, fracture, sprain, or amputation.
- Illnesses include both acute and chronic illnesses, such as, but not limited to, a skin disease (i.e. contact dermatitis), respiratory disorder (i.e. occupational asthma, pneumoconiosis), or poisoning (i.e. lead poisoning, solvent intoxication).
- OSHA's definition of work-related injuries, illnesses and fatalities are those in which an event or exposure in the work environment either caused or contributed to the condition. In addition, if an event or exposure in the work environment significantly aggravated a pre-existing injury or illness, this is also considered work-related.

WHAT IS CONSIDERED FIRST AID TREATMENT – NOT RECORDABLE

- Using a non-prescription medication at nonprescription strength (for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes)
- Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment)
- Cleaning, flushing or soaking wounds on the surface of the skin
- Using wound coverings such as bandages, Band-AidsTM, gauze pads, etc.; or using butterfly bandages or Steri-StripsTM (other wound closing devices such as sutures, staples, etc., are considered medical treatment)
- Using hot or cold therapy
- Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes)

- Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.)
- Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister
- Using eye patches
- Removing foreign bodies from the eye using only irrigation or a cotton swab
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
- Using finger guards
- Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes)
- Drinking fluids for relief of heat stress