PART IV. RECORDKEEPING, TRAINING AND INSPECTIONS, ACCIDENT INVESTIGATION AND REPORTING

CONTENTS

4(a) Introduction	IV-3
4(b) Safety Recordkeeping Practices and Protocols	
4(b)(1) Illnesses	
4(b)(2) Injuries	IV-4
4(b)(3) Deaths	
4(b)(4) What's Not Recordable	IV-4
4(b)(5) How to Analyze Injury and Illness Records	IV-5
4(b)(6) Ensuring Accuracy in Recordkeeping	IV-5
4(c) Accident Recordkeeping Forms	IV-6
4(d) Safety Training and Recordkeeping	IV-10
4(d)(1) Type of Training	
4(d)(2) Recordkeeping	IV-13
4(e) OHSAS 18001 (Occupation Health and Safety Assessment Series)	
4(f) Bibliography	IV-15

4(a) Introduction

Version 1: March 2008

Occupational injury and illness records have several distinct functions or uses. One use is to provide information to employers whose employees are being injured or made ill by hazards in their workplace. The information in NERC safety records makes employers more aware of the kinds of injuries and illnesses occurring in the workplace and the hazards that cause or contribute to them. When employers analyze and review the information in their records, they can identify and correct hazardous workplace conditions on their own. Injury and illness records are also an essential tool to help employers manage their company health and safety programs effectively.

Employees who have information about the occupational injuries and illnesses occurring in their workplace are also better informed about the hazards they face. They are therefore more likely to follow safe work practices and to report workplace hazards to their employers. When employees are aware of workplace hazards and participate in the identification and control of those hazards, the overall level of safety and health in the workplace improves.

This Part provides procedures and recommended protocols for documentation, reporting and accident investigations.

4(b) Safety Recordkeeping Practices and Protocols

The extent of occupational illness and injury is much greater than government statistics indicate. The problem is recognized in the United States for example. Some U.S. researchers suspect that the number of injuries is twice as great as reported, and the number of illnesses may exceed the number reported by a factor of five. No one really knows. In Nigeria, accident statistics have only recently been recorded in the industry sector and there are no official published values. It's time that we learned the full extent and nature of occupational illness and injury in the Nigerian workforce. The proper compensation for workers with workplace injuries and the direction of research on occupational disease prevention depend on accurate recordkeeping. Employers are required by law to record occupational injuries and illnesses. Records must be kept in the Daily Injury and Illness Log (NERC Accident Statistics Reporting Form provided in Section 4(c)). An annual summary of that form is to be posted by the employer every February for the entire month. Records are to be kept for ten years.

Under-reporting of illness and injury may occur if employers aren't aware of the proper reporting procedures, if they misdiagnose conditions, if they fail to inform workers' compensation boards and insurance carriers when an illness/injury has occurred, if they make clerical errors in tabulating records, if they deliberately falsify records, etc.

Failure to comply with the recordkeeping regulations can bring stiff fines – up to \$10,000 or its equivalent in Naira for a willful violation. What's more, intentional falsification of records is a crime, grounds for a jail term.

4(b)(1) Illnesses

NERC requires employers to record any work-related illness that is "diagnosed or recognized." A diagnosis is performed by a physician, registered nurse or someone with training and experience to make a diagnosis. NERC requires employers to record "recognized" (not diagnosed) illnesses

because "employers, employees and others may be able to detect some illnesses such as skin diseases or disorders without the benefit of specialized medical training." Recordable illnesses include:

Version 1: March 2008

- skin diseases:
- lung diseases and other respiratory conditions;
- poisoning;
- disorders due to physical agents (such as heat or noise); and
- disorders associated with repeated trauma (such as carpal tunnel syndrome and tendonitis).

These cases do not require any lost time or medical treatment to be reported, only to be diagnosed or recognized.

4(b)(2) Injuries

An injury which involves any of the following must be recorded:

- medical treatment (other than first aid);
- loss of consciousness;
- restriction of work motion;
- transfer to another job;
- termination of employment;
- electrical burns; and
- electrocution.

The distinction between an illness and an injury is not always obvious, but it is important, because all illnesses must be recorded, but some injuries do not need to be recorded. Whether a case is "an injury or an illness is determined by the nature of the original event or exposure which caused the case, not by the resulting condition." Injuries are caused by "instantaneous events." A condition that is caused by anything other than an instantaneous event must be recorded as an illness. "For example, a loss of hearing resulting from an explosion (an instantaneous event) is classified as an injury; the same condition resulting for exposure to industrial noise over a long period of time" must be classified as an illness, which means that it must be recorded even if it does not meet any of the criteria for a recordable injury.

4(b)(3) Deaths

Any death of an employee or former employee that occurs as a result of an injury or illness that is recordable must also be recorded. If an employee has a recordable injury or illness and then is terminated or retires, and then dies as a result of the recordable injury or illness, the death must also be recorded.

4(b)(4) What's Not Recordable

An injury that requires only first aid, that is, a minor injury that is resolved with one-time treatment (with follow-up for observation only, not additional treatment). A minor injury may be

Version 1: March 2008

treated by a doctor or a nurse, but any injury that must be treated by a doctor or nurse or any injury that requires follow-up medical treatment is not minor, and must be recorded.

4(b)(5) How to Analyze Injury and Illness Records

Local unions can analyze the NERC records to see if they are accurate and to pinpoint patterns of disease and injury in the workplace. Here's how:

- 1. Ask your employer in writing for the NERC Incident Reporting daily log, NOT JUST THE SUMMARY, for the past ten years. The right to review and copy these records is provided by the NERC standard. The log and summary of all recordable occupational injuries and illnesses shall, upon request, be made available by the employer to any employee, former employee, and to their representatives for examination and copying in a reasonable manner and at reasonable times. The employee, former employee, and their representatives shall have access to the log for any establishment in which the employee is or has been employed.
- 2. Consult people knowledgeable about workers' compensation or insurance problems of the membership, since they know names of individual members who have filed claims which may not be recorded. The failure to list any cases known to the union is a tip-off that something is wrong.
- 3. Find out what current criteria the employer uses to record occupational illness and injury. This will also provide clues about how the employer interprets the NERC guidelines when filling out the Incident Reporting log.
- 4. Obtain copies of employee exposure and medical records. Employers must provide this information to union representatives, free of charge, within 15 working days. This includes:
 - industrial hygiene reports;
 - biological monitoring;
 - medical histories and questionnaires*;
 - results of medical examinations & lab tests*;
 - medical opinions, diagnoses, & recommendations*; and
 - worker medical complaints*.
 - * Requires prior written consent from affected employee(s).

4(b)(6) Ensuring Accuracy in Recordkeeping

In order to avoid recordkeeping violations, NERC has adopted recognized procedures as a model for reporting injuries and illnesses. These procedures were developed by the U.S. company Chrysler Corporation in response to the record fines levied against them. Whether your employer adopts these guidelines or uses some other set of procedures, the union must actively police them to ensure accurate and complete reporting. The Chrysler procedures are reprinted below:

1. Each patient visiting the plant medical facility to report injuries or signs or symptoms of illnesses will be asked whether their medical condition is caused or aggravated by work. Responses will be recorded. Where the patient states that an injury or illness is work

related, and that case otherwise meets the criteria for recording, that case will be entered on the log pending final determination of causality.

Version 1: March 2008

- 2. Injuries and illnesses for which workers' compensation claims are filed will be entered on the Daily Injury and Illness Log pending final determination. A list of claims paid voluntarily or by decisions will be maintained. This list will be available for examination and copying by the union.
- 3. Sickness and accident claims for which occupational causation is claimed and which come to the attention of plant medical or safety departments will be investigated for occupational causation. Those instances which meet the recording criteria specified in the guidelines will be entered on the injury and illness log.
- 4. Instances where employees are granted medical restrictions or job transfers as a result of injuries or illnesses claimed to be of occupational origin will be entered on the log pending final determination. A list of such restrictions and transfers will be maintained. This list will be available to the union.
- 5. Where a case is removed from the log as a result of investigation, the reasons will be documented and the record of the investigation maintained. In general, investigations of illnesses will require on-site participation of medical personnel. The record of these investigations will be available to the union.
- 6. All personnel responsible for investigation of injury and illness reports and the maintenance of injury and illness records will be instructed by NERC. Special attention should be paid to diagnosis and recording criteria for repeated trauma disorders, strains and sprains, back injuries, and traumatic events.

4(c) Accident Recordkeeping Forms

The following accident reporting and recordkeeping forms have been modeled after the U.S. OSHA 300 Log records. Modifications to the Log 300 are based on local conditions and observations pertinent to Nigeria.

NERC's Accident Reporting Form 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						
	ord information								•	•	•					
	ss, restricted w				work, or medi	cal treatment		Establishm	ent name							
beyond first a	id. You must	also record sig	nificant work-	relate				City		!		State				
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Identify the	he person		Describe	the case		Classify the	e case			[t t						
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				dock north end)	and			Job transfer or	Other recordable		(days)	Injury	Skin Disorder	Resp Cond	Poisoning	All other illnesses
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NERC's Form										Year
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									II	
All establishments must complete this Summary page, eve	n if no									
injuries or illnesses occurred during the year. Remember										
Using the Log, count the individual entries you made for e	ach category.	Establish	ment inforn	nation						
Then write the totals below, making sure you've added the										
		Your esta	blishment ı	name						
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Injuries and Illnesses Incident Report					extent possible while the information is being used for occupational safety and health purposes.							
		Information about the employee)			nformation about the case						
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first forms you must fill out when a recordable work- related injury or illness has occurred.	1)	Full Name		10	0) (Case number from the Log		(Transfer the case number from the Lo after you record the case.)				
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		City	State	12	2)	ime employee began work		AM/PM	AM/PM			
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										Check if time cannot		
	3)	Date of birth		13	3)	Time of event		AM/PM		be determined		
Within 7 calendar days after you receive	4)	Date hired		14		What was the employee doing j						
information that a recordable work-related injury or illness has occurred, you must fill out this form or an	5)	Male	1		٩	activity, as well as the tools, equip	ment or ma	terial the em	ployee wa	s using.		
equivalent.	<u>, , , , , , , , , , , , , , , , , , , </u>	Wale										
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		Information about the physician	or other health care professi	onal								
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				— -		What happened? Tell us how the	injury occu	rred. Examp	le: "When	ladder slipped on wet		
	6)	Name of physician or other health	care professional	15	5) f	loor, worker fell 20 feet";						
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If you need additional copies of this form, you may	7)	If treatment was given away from	the worksite, where was it giver	?								
photocopy and use as many as you need.			•	Ш.,	2)							
		Facility			6) 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";							
		Street				chemical burn, hand"; "carpal tun						
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4(d) Safety Training and Recordkeeping

4(d)(1) Type of Training

Each organization should develop appropriate safety training programs. Programs should be tailored to the needs of the organization and based on a job hazards evaluation. At a minimum, all employees must receive hazard awareness training in addition to job specific training with emphasis on safe practices and familiarity with the NERC safety standards. The following are some recommended programs that organizations may consider developing:

Version 1: March 2008

- Accident Investigation Training for Supervisors and Safety Teams (2 hours) Defines an
 "accident" in the workplace and explains why they should be investigated. Covers the
 rules of accident investigation and how to illicit information from victims and witnesses.
 Training should also cover the importance of investigating "near miss" incidents.
 Recommended for supervisors and safety committees.
- Back Injury Prevention (1 1/2 hours) This session should cover statistics and causes of back pain and injury in the workplace. It also should discuss contributing factors such as medical conditions, lifestyle, posture and body mechanics. It should emphasize employee and employer responsibilities to help prevent back injuries in the workplace.
- Bloodborne Pathogens Awareness Training (1 hour awareness, 2 hour in-depth) Such a course will inform employees of the hazards due to occupational exposure to bloodborne pathogens (Contained in blood and other potentially infectious materials). Participants should be informed of the employer's Exposure Control Plan and its contents. Simple awareness training is usually adequate for non-medical personnel.
- Confined Space Entry Training (1 hour unless performing rescue) The course should explain what confined spaces are and NERC's requirements for working in and around these spaces. This training can be performed according to the employer's Confined Space Entry Program and can also include a simulated rescue utilizing the employer's rescue equipment.
- General Safety Awareness Training (1 1/2 hours) This session should touch on all of NERC's requirements regarding employer responsibilities for worker safety. It is recommended that the session include information on NERC's General Duty Clause, Hazard Communication, Fire Extinguishers in the Workplace, First Aid and Bloodborne Pathogens, Lock Out, Tag Out, Personal Protective Equipment, Employer Safety Programs, Confined Space Entry, Hearing Conservation Programs, Lift Truck Requirements, Respiratory Protection, NERC Citation Trends, and Common Shop Violations.
- Hearing Conservation Training (1 hour) This session should cover NERC's requirements for employers who have employees exposed to noise in the workplace. It should examine time-weighted-averages and decibel level exposures. It should also cover the employers' responsibility for having a written Hearing Conservation Program and the components required in it. It should also discuss requirements for annual audiometric testing and follow-up, training, access to information and recordkeeping for employees included in the program.
- Heat Stress in the Workplace (1/2 to 1 hour) This session should cover risk factors (human and environmental) associated with heat stress injuries/illnesses. It should define signs and symptoms of heat-related illnesses including heat rash, heat cramps, heat

- syncope, heat exhaustion and heat stroke. It should also cover first aid procedures related to each as well as engineering and work practice controls to avoid heat stress.
- Ladder Safety (1/2 hour) It is recommended that a basic session detailing NERC requirements for ladders and proper usage in the workplace including proper selection, inspection, set-up and use be implemented.
- Lock Out, Tag Out (1 hour awareness, 2 to 3 hour in-depth) This session should inform employees of NERC's requirements. This course should cover the proper measures for preventing the release or escape of hazardous energy (electrical, mechanical, thermal and other potential sources). Elements of this program should discuss required documented energy control procedures (written plans), employee training requirements and periodic inspections of the use of these procedures. Awareness training should be done on employees working on or around equipment that has been locked out and in-depth training should be done for those employees who actually perform the lock-out function.
- Office Safety (1/2 to 1 hour) Office personnel are not immune to workplace injuries. This session should detail workplace hazards in an office setting including chairs and desks, stacking and storage, stairs, filing cabinets, office machines, slips trips and falls, proper office layout, lighting, housekeeping, ergonomics, material handling, electrical/heat-generating appliances, chemical safety and lock-out, tag-out.
- NERC Log Training (Recordkeeping Requirements 2 to 3 hours) This session should cover requirements of NERC's Records keeping Standard (Part 4) including how to fill out the NERC Incident Reporting forms. Such a program will help those required to keep these forms to know what constitutes a NERC recordable injury and/or illness and the importance of not over or under-recording.
- Safety Committees (2 hours) This program should detail how to put together an effective safety committee, how an effective committee operates and the purpose they exist. It should cover proper make-up of a committee and discuss why safety committees sometimes fail to meet their objectives. Good, practical advice on how to have a successful and productive safety committee should be offered.
- Safety Training for Supervisors and Managers (1 to 2 hours) This session should approach safety in the workplace from the manager or supervisor's standpoint. This program will help those in authority prioritize safe work practices and convey the importance of safety to their employees.

The employer may find the need to develop other programs. Not all programs should be mandatory – rather those which address site-specific hazards, job functions and working conditions. In addition to the recommended programs above, facilities should consider developing written safety programs for some or all of the topics listed below and then familiarizing workers with them in safety meetings and training sessions:

- Asbestos Safety Program
- Assured Equipment Grounding Program
- Benzene Safety Program
- Chemical Hygiene Plan
- Chemical Labeling Program
- Compressed Gas Safety Program

IV-11

- Contractor Safety Verification Program
- Crane Safety Program
- Crisis Management Plan
- Drug Free Workplace Program State and Federal

Version 1: March 2008

- Electrical Safety Hazards Program
- Eye/Face Protection Program
- Eyewash Station Program
- Facility Evacuation Plan
- Facility Smoking Program
- Facility Physical Security Plan
- Fall Protection Program
- Fire Extinguisher Program
- Fire Prevention Program
- First Aid Response Program
- Flammable and Combustible Liquids Safety Program
- Forklift Safety Program
- Hand and Power Tool Safety Program
- Hazard Communication Program
- Industrial Housekeeping Program
- Industrial Burn Safety
- Laboratory Safety Program
- Laser Safety Program
- Light Duty Return To Work Program
- Loading Dock Safety Program
- Machine Guarding Program
- Marking Industrial Hazards Program
- Medical Services and First Aid Program
- MSDS Development Program
- New Products, Procedures, Equipment Program
- Overall Company Safety Program
- Portable Ladder Safety Program
- Power Press Safety Program
- PPE and Job Hazard Analysis Program
- Preparing for Workplace Emergencies
- Radiation Safety for X-ray Units
- Respiratory Protection Program
- Safety Committee Program
- Sand Abrasive Blasting Safety Program
- Scaffolding Safety Program
- Sling Safety Program
- Slips, Trips, & Falls Safety Program
- Spill Prevention, Control and Countermeasure
- Stairway and Ladder Safety Program
- Supervisor Safety Program

- Trenching and Excavations Program
- Violence in the Workplace Program
- Welding Safety Program
- Working in Hot Conditions Program
- Workplace Back Safety
- Bomb Threat Response Program
- Aerial Lift and Scissors Lift Safety Program
- Electrical Safety for Unqualified Employees Program.

4(d)(2) Recordkeeping

Employers should maintain records of employee training for all employees for the life of employment and up to five years beyond retirement or termination. The records shall include name of employee, name of training session, dates of training, and number of contact hours.

The records should be made available to NERC inspectors upon request. Maintaining accurate records will protect both employees and employers from liabilities and will help to identify areas where safer working environments can be created.

It is recommended that each organization adopt the use of Continuing Education Units (CEUs) to keep track of overall training records for employees. The Continuing Education Unit (CEU) is an internationally recognized method of quantifying the time spent in the classroom during professional development and training activities. Ten hours of instruction = 1.0 CEU. One hour of instruction = 0.1 CEU.

4(e) OHSAS 18001 (Occupation Health and Safety Assessment Series)

The following section is general information on the OHSAS 18000 series. OHSAS 18000 is a voluntary program which the NERC recommends organizations consider adopting to improve safety performance.

OHSAS 18000 is an international occupational health and safety management system specification. It comprises two parts, 18001 and 18002, and embraces BS8800 (British Standard) and a number of other publications.

OHSAS 18001 was created via a concerted effort from a number of the worlds leading national standards bodies, certification bodies, and specialist consultancies. OHSAS helps in a variety of respects. It helps: minimize risk to employees/etc; improve an existing OH&S (Occupational Health and Safety) management system; demonstrate diligence; gain assurance; etc. Central to OHSAS requirements are strong policies and procedures.

Occupational Health & Safety is a subject that must be addressed by all organizations large and small. The organization's management system should identify all legislative requirements, identify the hazards and control the risks of the organization.

Progressive businesses will aim to go beyond compulsory measures and promote continuous improvement on health and safety matters.

Managing the health and safety of an organization can be approached using a structured management system and it can be integrated into current systems, to reduce the burden of bureaucracy.

Version 1: March 2008

A formal H&S management system will provide the following benefits:

- A system for continually identifying legal and other requirements.
- A clear management structure delegating authority and responsibility.
- A clear set of objectives for improvement, with measurable results.
- A structured approach to risk assessment within the organization.
- A planned and documented approach to health and safety.
- The monitoring of health and safety management issues, auditing of performance and review of policies and objectives.

Time spent on improving an organization's health and safety could provide a financial return in terms of:

- Reduced accidents and occupational ill health.
- Reduced stress and greater productivity.
- An improvement in underwriting risk.
- A reduction in the likelihood of paying regulatory compliance fees.

For many years, there has been demand for a certification scheme for occupational health and safety, which intensified with the publication of BS 8800 in 1996. However, while BS 8800 offers guidance on implementing an occupational health & safety management system, it is not and never was intended for certification purposes. The pressure was for a certification scheme that could offer independent verification that an organization has taken all reasonable measures to minimize risks and prevent accidents.

The situation prompted many certification bodies to develop their own specifications based on BS 8800. The inevitable irregularities between the specifications made this an undesirable way forward. In response, a committee was formed in November 1998 chaired by the British Standards Institution, and consisted of the major certification bodies and other national standard organizations known to be active in health and safety, with the goal of creating a single specification. This resulted in the occupational health and safety assessment series OHSAS 18001, which unified the existing schemes. Guidance to this specification can be found in OHSAS 18002.

The structure of OHSAS 18001 is:

- General requirements
- OH&S policy
- Hazard identification, risk assessment and determining controls
- Legal and other requirements
- Objectives and programs

- Resources, roles, responsibility, accountability and authority
- Competence, training and awareness
- Communication, participation and consultation
- Documentation
- Control of documents
- Operational control
- Emergency preparedness and response
- Performance measurement and monitoring
- Evaluation of compliance
- Incident investigation, nonconformity, corrective action and preventive action
- Control of records
- Internal audit
- Management review.

The certification process is similar to that of ISO 9001 or ISO 14001. Once the Certification Body receives a completed application form, a Stage One assessment is undertaken on site, to determine the state of the policy, procedures and work instructions. If the readiness is satisfactory, then a date is set for the Stage Two assessment, which will assess the level of implementation. Once satisfactory, a certificate is issued. Annual surveillance ensures continued conformance. Information on the certification process can be obtained from the Internet.

There are currently no costs published for certification; however it is anticipated that initially costs are high. As in the case of ISO 14001 (Environmental Management Series) companies may initially opt to sidestep certification and formally adopt the principles of OHSAS 18001. Many companies opt to formally adopt the management system and establish their own system following the OHSAS structure. Analogously, this approach has worked well in the environmental sector as there are many more companies throughout the world that have self declared ISO 14001 programs than certified programs.

4(f) Bibliography

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