

Outcome Goal 3.1

Reduce Workplace Injuries, Illnesses, and Fatalities

Working together with the mining industry and outside safety organizations is an important strategy for further reductions in mining deaths and injuries. In FY 2003, MSHA signed alliance agreements with the National Stone, Sand & Gravel Association, the Industrial Minerals Association of North America, and the American Society of Safety Engineers. The purpose of such agreements is to promote the sharing of expertise and best practices between MSHA, safety professionals, and mine operators and to foster a culture of accident prevention where safety is embraced as a value.

One of MSHA's most recent alliance agreements is with the National Safety Council (NSC). Founded in 1913 and chartered by the United States Congress in 1953, the NSC has historically been one of our Nation's leading advocates for safety and health. The Agreement between MSHA and the NSC will result in a more focused relationship, with the objective of developing safety and health programs for the mining industry. As noted by NSC President Alan McMillan: "The National Safety Council and the Mine Safety and Health Administration share a passion for doing everything we can to keep mine workers safe and prevent mining accidents. Mining can be a hazardous occupation and miners deserve to have the very best knowledge and training about safety and health issues."



MSHA Assistant Secretary Lauriski and National Safety Council President Alan C. McMillan signing the Alliance Agreement, September 9, 2003
Photo Credit: National Safety Council

Overview

The Department's Occupational Safety and Health Administration (OSHA) and Mine Safety and Health Administration (MSHA) are committed to protecting the safety and health of America's workers and to working with employers to reduce lost productivity due to workplace injuries, illnesses, and fatalities. To accomplish this, OSHA and MSHA are taking similar approaches — combining enforcement with helping employers through increased outreach, education, compliance assistance, partnerships and voluntary programs. Because injuries and illnesses have economic costs as well as social costs, attainment of this outcome goal helps further the global competitiveness of the Nation's industries.

Serving The Public

The Department of Labor is responsible for protecting the safety and health of approximately 111 million workers at 7 million sites. Over the last 30 years significant reductions in fatalities, injuries, and illnesses have been achieved. For example, our country now has the lowest occupational injury and illness rate since OSHA was created — 5.7 cases per 100 workers — with rates having dropped for 9 years in a row. In the mining sector, fatalities are at their lowest level in history.

The Department believes that there is universal benefit in promoting the added value of safety and health; maintaining a strong and fair enforcement program; developing partnerships, alliances, and voluntary programs; and assisting workers and employers through training and outreach initiatives. These practices generate positive returns in every nation and in all kinds of companies — from small businesses to multi-national corporations.

Not only is building a safe and healthful workplace the right thing to do — it saves money and adds value to the organization. When workers stay healthy, businesses prosper. Businesses experience lower workers' compensation insurance costs, reduced medical expenditures, smaller expenditures for return-to-work programs, fewer faulty products, increased productivity, increased quality, higher morale, and reduced turnover.

A strong safety and health program also benefits businesses by enhancing their corporate reputations as caring employers. This is particularly important in an age of globalization where a company's reputation is not confined to one nation. Each company's actions are publicized and scrutinized worldwide by investors, by the press, by non-governmental organizations and others. The best companies in the United States and throughout the world build a brand reputation that is synonymous not only with an excellent product but with an outstanding management philosophy where safety and health is a core value. To help realize this value and improve our economy the Department wants to drive occupational injuries, illnesses, and deaths down.

Program Costs

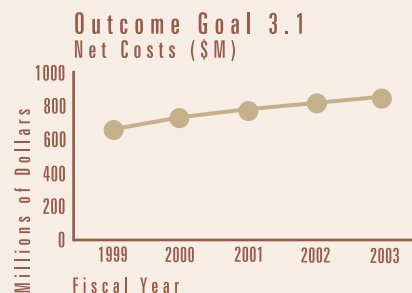
FY 2003 program costs of \$815 million supported OSHA and MSHA programs to reduce worker fatalities, injuries, and illnesses, including the Department's expanded and enhanced efforts in compliance assistance.

DOL Challenges for the Future

OSHA's recent success with its outreach, training, compliance assistance, partnerships and alliances demonstrate that they are an excellent way to boost safety and health. Over 1,000 sites participate in Voluntary Protection Programs (VPP) and they save millions each year because injury and illness rates at VPP sites are more than 55 percent below the averages for their industries. There are also nearly 700 small businesses participating in OSHA's Safety and Health Achievement Recognition Program (SHARP) — the DOL recognition program for those who have successfully established effective safety and health systems with the help of DOL's consultation program. The Assistant Secretary of Labor for OSHA has challenged the agency to substantially increase the number of businesses participating in these voluntary programs, partnerships and alliances.

Examples of how OSHA and MSHA have leveraged resources are their alliances with the National Safety Council. The OSHA alliance will work to provide employers and workers with information, guidance and access to training resources. It calls for cross-training of OSHA staff and industry safety and health professionals in best practices or effective approaches as jointly defined. The MSHA alliance will identify ways to collaborate on developing and conducting technical sessions at a variety of events and identify ways to enhance participation in the National Safety Council's Mining and Minerals Resources Section in safety and health outreach to the industry.

These efforts are making a real difference and the Department recognizes the importance of expanding its teaming initiatives. We are fortunate in the United States that the Congress and the President have given the Department a wide array of tools to help employers increase safety and health. The challenge for the Department is to use these tools effectively to make a continuing and significant positive impact on workplace conditions.



Reduce Mine Fatalities and Injuries

Performance Goal 3.1A (Mine Safety and Health Administration) – FY 2003

Reduce mine fatalities and injuries

Indicators

Reduce the mine industry fatal injury incidence rate by 15 percent annually.

Reduce the all-injury incidence rate 50 percent below the FY 2000 baseline by the end of FY 2005. This is a four-year goal; in FY 2003 the target is a 17 percent reduction.

Results

The goal was not achieved. The fatal injury incidence rate decreased by 9.6 percent and the all injury incidence rate declined by 7.8 percent (based on preliminary fourth quarter data).

Program Description

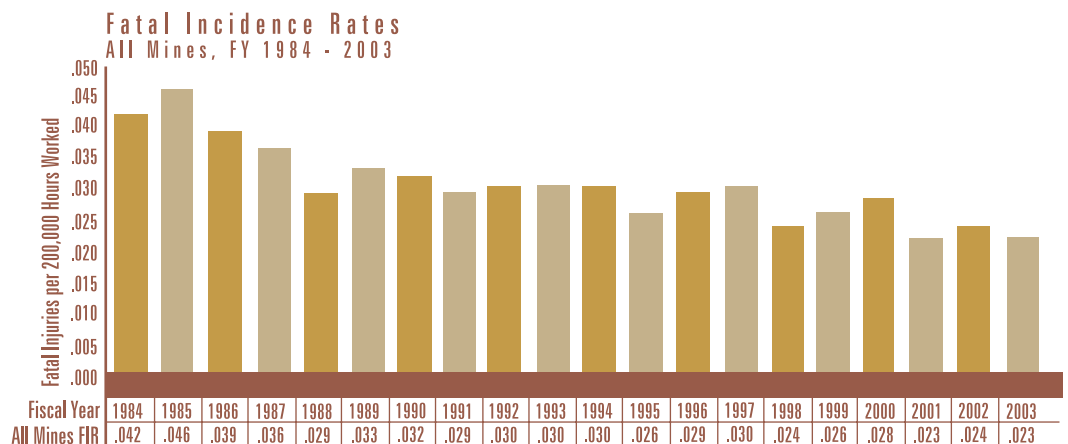
The mission of the Department’s Mine Safety and Health Administration (MSHA) is to protect the safety and health of our Nation’s miners. Through safety and health enforcement, compliance assistance, education, training, and technical assistance efforts and in partnership with the American mining community, MSHA works to reduce the frequency and severity of accidents in accordance with the Federal Mine Safety and Health Act of 1977.

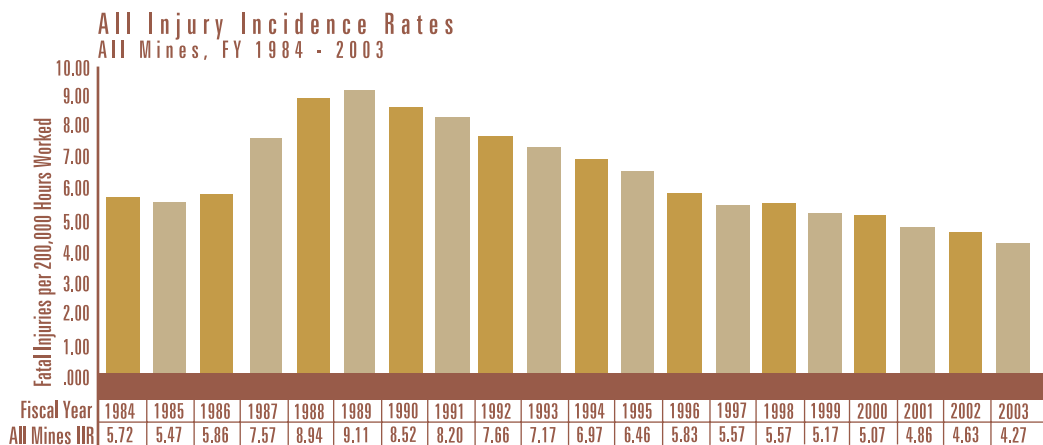
Incidence rates, which measure of the number of fatalities and injuries divided by miner work hours, are used by MSHA to report on performance because they reflect not only the number of fatalities and injuries which occur each year but also the amount of time miners are exposed to potential hazards.

Analysis of Results

Fatalities: During FY 2003, accidents in the Nation’s mines claimed the lives of 61 workers – 30 in metal and nonmetal mines and 31 in coal mines. Although the fatal incidence rate in coal mining increased by 11 percent from the prior year, the fatal incidence rate in metal and nonmetal mines decreased by 21 percent – the second lowest rate recorded in metal and nonmetal mining history.

Overall, while the 9.6 percent decrease in the fatal injury incidence rate in FY 2003 was not sufficient to meet MSHA’s ambitious 15 percent target, the fatal incidence rate in FY 2003 was the *lowest* recorded in MSHA’s history.





Injuries: Although the 7.8 percent decrease in the all-injury rate in FY 2003 was not sufficient to meet MSHA's aggressive 17 percent target, the all-injury rate of 4.27 was also the lowest recorded in MSHA's history.

Strategies

MSHA's performance should be viewed within the context of the record setting lows for mining deaths and injuries in FY 2003. Therefore, MSHA will continue what has been successful while taking advantage of new opportunities to build upon past success.

Key to further reductions in deaths and injuries will be working together with the mining industry and external safety organizations. In this regard, MSHA will continue to leverage and extend its strategic partnerships. For example, in FY 2003 MSHA signed alliance agreements with the National Stone, Sand & Gravel Association, the Industrial Minerals Association of North America, the American Society of Safety Engineers, and the National Safety Council. The purpose of such agreements is to promote the sharing of expertise and best practices between MSHA, safety professionals, and mine operators to foster a culture of accident prevention where safety is embraced as a value.

MSHA will also continue to work with state governments in partnerships such as the Tri-State Initiative, which focuses on Appalachian mining areas in West Virginia, Virginia, and Kentucky which are historically responsible for the bulk of coal mining fatalities (66 percent in FY 2002). The Tri-State Initiative is just one example of MSHA integrating its enforcement and compliance assistance activities. Nationwide, mine operators and miners are provided with compliance assistance, accident reduction, and hazard recognition training materials during the course of MSHA's regular inspections. In addition to onsite compliance assistance, web-based compliance assistance tools are continually being developed and enhanced. These include website links to accident prevention ideas from miners, industry, and MSHA officials, and web-based newsletter services for stakeholders which provide instant notification of mining fatalities, hazard alerts, and other safety and health related news.

The States are important partners in MSHA's work to protect the health and safety of our Nation's miners. The Tri-State Initiative brings together Federal and State resources in a cooperative effort with the mining industry to focus on safety and health issues in the Appalachian mining areas of West Virginia, Virginia and Kentucky. This relatively small area has been the location of more than one-half of the nation's coal mine fatalities over the past five years, and requires special educational and compliance assistance efforts.

For example, coal truck haulage accidents and fatalities are a major concern in the Tri-State Area; therefore, several compliance assistance training sessions have been conducted in Eastern Kentucky for trucking contractors, drivers, and mechanics. This training provided instruction in how to conduct pre-operational safety checks on haulage trucks. In addition, the Tri-State Group has developed an Accident Prevention CD and poster campaign that illustrates some of the deficiencies that are commonly found during truck inspections and that are common to many of the truck haulage accidents. These materials also illustrate how truck haulage accidents occur and provide suggestions and illustrations of how they can be prevented.



Truck Drivers and Mechanics Observing Demonstration
Photo Credit: MSHA

For the first time, MSHA requested and received funding to support permanent staff for its Small Mines Office. Historically, small mines experience fatalities at nearly twice the rate of larger mines and generally require more extensive compliance assistance and safety program support. Early results from the on-site compliance assistance efforts by the Small Mines Office are encouraging, with only one fatality occurring at a small mine in the last three quarters of FY 2003 compared to five during the same period in FY 2002. Small mine operators have expressed appreciation for MSHA's technical and compliance assistance efforts.

Management Issues

Data: Accident and injury data are accurate and reliable. MSHA receives employment, injury, and accident data from mine operators and has an audit program in place that verifies the reliability of the data annually.

Internal Program Evaluations and Audits: An independent evaluation of aspects of MSHA's safety inspection program and compliance assistance activities was conducted in FY 2003. The evaluation included recommendations that MSHA continue to institutionalize compliance assistance during inspection activities and to increase recognition of mines that have outstanding performance records.

Goal Assessment and Future Plans

MSHA has extended the period of performance for this goal through FY 2008. The goal will remain ambitious, targeting a 15 percent reduction in the fatal incidence rate by FY 2008 from the record FY 2003 baseline and a 50 percent reduction in the all-injury incidence rate from the FY 2000 baseline.

Reduce Miners' Exposure to Health Hazards

Performance Goal 3.1B (Mine Safety and Health Administration) – FY 2003

Reduce miners' exposure to health hazards

Indicators

Reduce the percentage of respirable coal dust samples exceeding the applicable standards by 5 percent for designated occupations in coal mines.

Reduce the percentage of silica dust samples in metal and nonmetal mines exceeding the applicable standards by 5 percent for designated high-risk occupations.

Reduce the percentage of noise exposures above the citation level in all mines by 5 percent.

Results

The goal was achieved. Compliance with coal dust, silica dust, and noise standards has improved by 27, 29, and 44 percent respectively from established baseline levels.

Program Description

The Department's Mine Safety and Health Administration (MSHA), through safety and health enforcement and compliance assistance, and in partnership with the American mining community, works to minimize health and safety hazards in accordance with the Federal Mine Safety and Health Act of 1977.

Major health hazards to miners include black lung disease and silicosis. These are disabling respiratory diseases caused by exposure to excessive amounts of respirable coal and silica dust. In addition, noise exposure above regulatory standards can cause permanent hearing loss to miners. Measuring the exposures that lead to these conditions allows the Department and the mining community to help today's mine workers look forward to better health in the future than their predecessors.

Analysis of Results

Coal Mine Dust: The 5 percent reduction was achieved (actual: 27 percent), as the FY 2002 baseline of 15 percent of samples exceeding the regulatory standard was reduced to 11 percent in FY 2003.

Silica Dust (metal and nonmetal mines): The 5 percent reduction was achieved (actual: 29 percent), as the FY 2002 baseline of nine percent of samples exceeding the regulatory standard was reduced to 6.4 percent. As with coal dust and noise samples, miners wear the sampling equipment used to measure exposure levels. However for silica dust, samples are taken only from miners designated by MSHA as working in the highest-risk occupations.

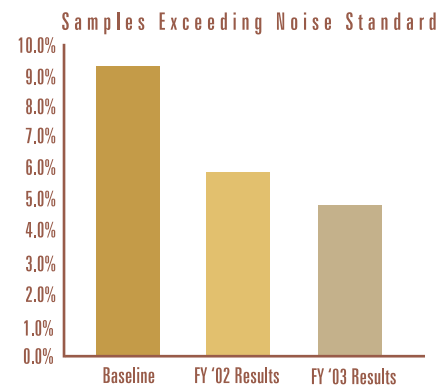
Noise: The 5 percent reduction was achieved. 5.2 percent of samples exceeded the regulatory standard, a 44 percent reduction from the FY 2000-2001 baseline. This reduction includes the 10 percent improvement from FY 2002.

During mine rescue or recovery operations, rescue teams are presented with environmental conditions that impact their ability to respond effectively without jeopardizing their own safety and health. Explosions, fires, flooding, and accumulations of methane and toxic gas present significant risks to mine rescue teams.

To safely provide mine rescue teams with more accurate and reliable environmental data, MSHA acquired a prototype Wolverine robot in 2001. Using navigation and surveillance cameras and a manipulator arm to move and carry objects, the Wolverine is capable of operating in an underground mine for up to eight hours, and can supply data and video for 1 1/2 miles between the vehicle and an above-ground control station. It was deployed in a recovery mission in a gold mine in FY 2003. After testing and modification, the Wolverine was approved for use in potentially explosive environments such as underground coal mines.



Photo Credit: DOL/MSHA



Historically, the fatal incident rate at small mining operations has been more than double the rate of larger mines. Typically, these mines are family-owned, have five or fewer employees, and usually do not have engineering, safety or health resources. To help better protect the miners working at small mines, MSHA established the new Office of Small Mines in FY 2003. The Office of Small Mines provides compliance, safety and health assistance to the more than 6,500 small mines throughout the country.

Ultimately, the mission of the Small Mines Office is to work with small operators and help them to reduce injuries and illnesses and embrace safety and health as a value. To accomplish this, Small Mine Compliance Assistance Specialists work with mine owners and their miners to help identify potential hazards, to develop and actively maintain safety and health programs tailored to their mines, and to comply with MSHA regulations. Feedback from small mine operators has been very positive. "This is awesome. I wish I had it a long time ago," says Sally, safety director for IA Construction Corporation. "Our guys were asking all kinds of questions and (MSHA representatives) were answering them one right after another. It was great."

Over time MSHA expects to see reductions in injuries and illnesses at small mines. Early results of the Small Mines Office's work with small mine operators are encouraging, with significant reductions in fatalities at small mines in 2003.



IA Construction's safety director, Sally
Photo Credit: MSHA

Strategies

MSHA is positively impacting the health of the Nation's miners by targeting compliance assistance efforts at mines with recurring dust and noise exposures in excess of the standard. These efforts include onsite monitoring, raising awareness of the hazards associated with exposure to excessive levels of respirable coal dust, silica dust and noise, and assisting operators to improve their dust and noise control practices. In addition, web-based interactive training programs on health related issues have been developed, and website health related topics have been expanded.

Management Issues

Data: MSHA safety and health compliance specialists conduct dust and noise sampling following well-established procedures. A quality control process and edit checks assure the accuracy and reliability of the performance data.

Internal Program Evaluations and Audits: An independent evaluation of aspects of MSHA's safety inspection program and compliance assistance activities was conducted in FY 2003. The evaluation included recommendations that MSHA continue to institutionalize compliance assistance during inspection activities, and to increase recognition of mines that have outstanding performance records.

Goal Assessment and Future Plans

Revision of this goal will be considered to take into account prior performance, which has greatly exceeded performance targets. In addition, potential technological breakthroughs, such as personal dust monitors for use with continuous mining equipment, may influence MSHA's future health-related performance goals.

Reduce Workplace Fatalities

Performance Goal 3.1C (Occupational Safety and Health Administration) – FY 2003

Reduce the rate of workplace fatalities by two percent from baseline.

Results

The goal was not achieved. The average fatality rate for FY 2001-2003 was 1.61 deaths per hundred thousand workers, a 0.6 percent decline from the FY 2000-2002 baseline rate of 1.62 deaths per hundred thousand workers.

Program Description

The Department's occupational safety and health programs are designed to reduce fatalities, injuries, and illnesses in the workplace. OSHA uses direct interventions, such as inspections and on-site consultations to help employers and workers to reduce fatalities, injuries and illnesses in the workplace. Direct interventions work because they establish relationships with employers and employees and can prompt both parties to make workplace safety and health a priority.

Partnerships developed in cooperation with employers and employees are critical to the Department's approach to improving workplace safety and health. For example, sports stadiums present the kinds of hazards that have made construction traditionally one of the more dangerous industries. In order to reduce these hazards, DOL has partnered with major football stadium projects. These partnerships included the construction of the Chicago Bears' new Soldier Field, the renovation of the Green Bay Packers' Lambeau Field, and the construction of the New England Patriots' Gillette Stadium.

The partners involved in these stadium projects made three key commitments. First, each partner agreed to 100 percent use of fall protection above six feet. Second, each partner required all contractors to have formal safety and health programs in place. Third, each partner required all contractors to have at least one employee with 30 hours of OSHA safety training. As an example of the magnitude of these construction projects, at the height of the Lambeau Field renovation more than 1,000 construction workers worked at the site. Despite the substantial size of these projects and the danger inherent to construction work, no fatalities occurred at any of the sites, and each partner has saved a substantial amount on workers' compensation costs. At the Lambeau Field project alone, the savings on workers' compensation costs were estimated at about one half million dollars.

Analysis of Results

Although the FY 2001-2003 fatality rate used to measure this goal was 1.61, the FY 2003 fatality rate was 1.54, the lowest in ten years and six percent lower than the FY 2002 rate. The number of fatalities was seven percent lower than in FY 2002. About 40 percent were in the private construction industry. Construction's fatality rate declined 11 percent from FY 2002 to FY 2003 and the number of fatalities declined by almost 11 percent as well. The data demonstrate that not only did the risk of dying on the job for a worker under OSHA jurisdiction decline, but also the absolute number of fatally-injured workers under OSHA jurisdiction declined.

More than two years after Ford-Visteon, the United Auto Workers, and OSHA entered into a national partnership focused on workplace safety and health, UAW Local 249's health and safety representative says the partners have developed some of the best safety programs in the industry. The partnership covers 30 plants in OSHA's New York, Philadelphia, Atlanta, Dallas, and Kansas City regions and 25 plants in Michigan. Signed in November 2000, it builds on existing safety and health programs developed by Ford/UAW and their National Joint Council for Health and Safety. These programs established a strict international audit system, based on 11 safety and health components, that place a high priority on management commitment to safety. The cooperative, non-adversarial relationship established through the partnership optimizes safety and health resources among all participants and reduces injuries and illness on the job.



Article in Job Safety and Health Quarterly: OSHA's Wichita Area Office joined Ford-Visteon and the United Auto Workers to Celebrate a Successful Partnership that Keeps Looking to the Future. Kristina Lenocho, author. Photo credit: Ford Motor Company

OSHA developed this e-Tool, which is an interactive, Web-based training tool for teens working in restaurants and for their employers. The e-Tool is illustrated and uses graphical menus as well as expert system modules. These modules enable the user to answer questions and receive reliable advice on how OSHA regulations apply to their situation.



www.osha.gov/SLTC/youth/restaurant/index.html
Photo Credit: DOL/OSHA

Strategies

The following strategies guide DOL's efforts to reduce workplace fatalities.

1. Reduce occupational hazards through direct intervention. The Department completed about 37,500 inspections in FY 2003. Inspections, significant cases, and total violations cited increased from FY 2002. DOL focuses over half of all inspections on the construction industry because this sector suffers the most fatalities of any sector covered by OSHA. Construction site inspections conducted by DOL inspectors increased from 21,344 in FY 2002 to 22,667 in FY 2003, which represents a six percent increase.

2. Promote a culture of safety and health through compliance assistance, cooperative programs, and strong leadership. Compliance assistance specialists in each OSHA area office help businesses with safety and health questions. OSHA responds to about 1,900 telephone calls for technical assistance and 1,000 e-mail questions each month. OSHA's website also is a primary source of workplace safety information, with about 44 million visits in FY 2003.

In FY 2003, more than 12,000 people received instruction through special grants in how to train workers and employers to recognize, avoid, and prevent safety and health hazards in their workplaces. Additionally, in FY 2003, OSHA expanded the number of its Education Centers from 12 to 20. To expand its outreach to Hispanic workers, OSHA plans to host a Hispanic and Immigrant Worker Summit in 2004 jointly with the National Advisory Committee on Occupational Safety and Health (NACOSH). The forum will showcase success stories, gather information and recommendations for future activities, and create new networks among participants.

OSHA's Voluntary Protection Program now has 1,024 participating sites, and 699 small businesses participate in the Safety and Health Achievement Recognition Program (SHARP) — the DOL recognition program for employers who establish effective safety and health systems with the help of OSHA's on-site consultation program. More than 200 Strategic Partnerships with at least 4,500 employers and 200,000 employees are currently in effect. In addition, OSHA has alliances with 100 organizations. Alliances enable organizations committed to workplace safety and health to collaborate with OSHA to prevent injuries and illnesses in the workplace.

3. Maximize OSHA effectiveness and efficiency by strengthening its capabilities and infrastructure. OSHA is strengthening its occupational safety and health infrastructure and capabilities. For example, the agency is implementing a diversity initiative, seeking to hire people with the language skills and technical experience required to address today's workplace safety needs. Also, OSHA is emphasizing professional development and certification, targeting a 10 percent annual increase in OSHA personnel receiving certification training.

Management Issues

Management Challenges: Fatality data reveal occupational safety and health issues that OSHA needs to address, including new problems in construction safety and risks to immigrant workers, as well as continuing problems in transportation safety, and workplace violence. OSHA continually adjusts its inspector training program as well as its methods for intervention as new threats to safety and health arise.

Internal Program Evaluations and Audits. In FY 2003, DOL evaluated the usefulness of OSHA's website and found the website was sometimes difficult to navigate. The evaluation made several recommendations to facilitate public use of the website and OSHA is implementing these recommendations. For more information, see Study 25 in Appendix 3.

As part of OSHA's regulatory "lookback" review process, a *Review of OSHA's Grain Handling Facilities Standard* found that since the standard was promulgated, there have been significant reductions in fatalities, injuries, suffocations at grain handling facilities. The review also found that implementation of the standard has not had a negative effect on the industry. For more information, see Study 20 in Appendix 3.

An Analysis of Fatal Events in Construction Industry in 2001, conducted by: The Construction Industry Research and Policy Center, University of Tennessee, Knoxville, found that falls from heights resulted in the largest number of construction site fatalities, followed by falls from or through roofs or structures, crushed or run over by operating construction equipment, electric shock, and being struck by falling objects. For more information, see Study 24 in Appendix 3.

External Program Evaluations and Audits. In the report *Workplace Safety and Health: OSHA Can Strengthen Enforcement through Improved Program Management* (Study 18 in Appendix 3), GAO recommends that OSHA increase the efficiency of targeting efforts, improve the precision of its measurements, provide more effective training, and strengthen the professionalism of its inspectors. In response, OSHA developed a functional training model for inspectors to help identify training gaps. This will result in a more systematic approach to updating inspectors' required training.

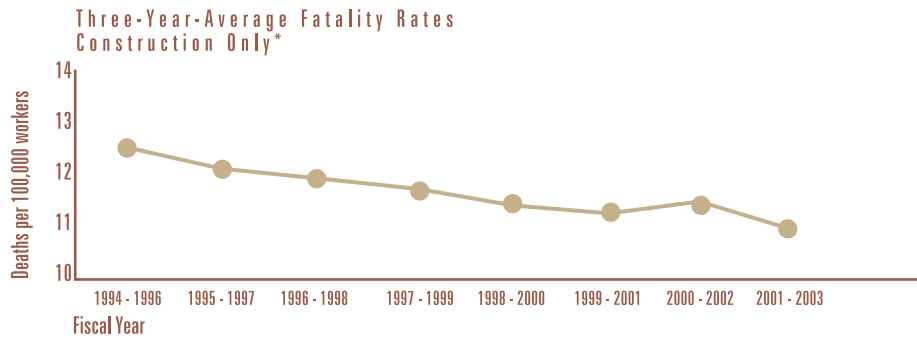
The Administration reviewed OSHA under its Program Assessment Rating Tool (PART). The Administration noted that the agency's goals were generally meaningful and measurable. However, the Administration did comment that the lack of timely data hinders timely performance assessments and that OSHA should improve its regulatory development process. OSHA is continuing to explore improved measures and data and will implement rigorous cost-benefit analysis and develop a plan to evaluate the results and cost-effectiveness of its regulatory and non-regulatory programs.

The OIG provided recommendations regarding OSHA's need to continue and expand its compliance assistance training and outreach regarding Hispanic and other non-English speakers and require employers to provide training in languages that employees understand in its report. For more information, see Study 11 in Appendix 3, *Evaluation of OSHA's Handling of Immigrant Fatalities in the Workplace*.

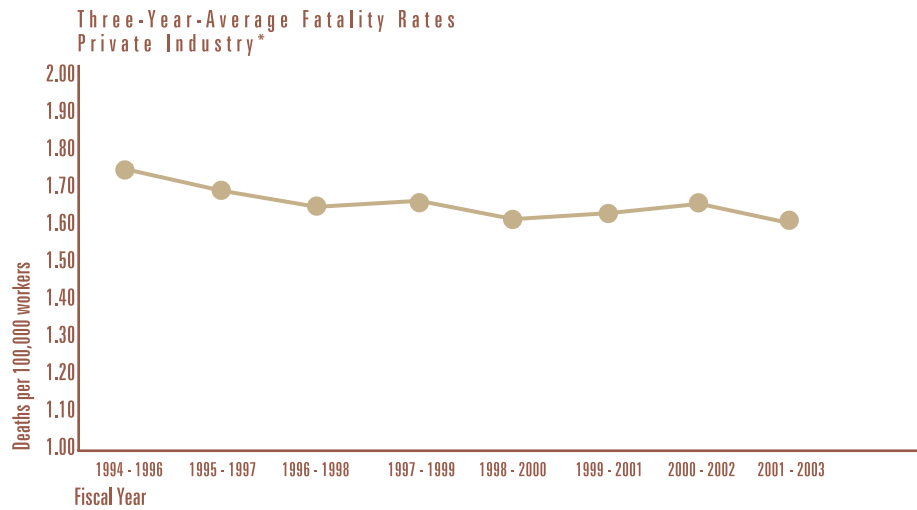
As a result of anthrax detection at a U.S. Post Office, the GAO report, *U.S. Postal Service: Better Guidance Is Needed to Improve Communication Should Anthrax Contamination Occur in the Future*, recommended that the Postal Service, OSHA, GSA, and the National Response Team work together to revise guidelines or regulations to require prompt communication of available test results to workers. See Study 19 in Appendix 3 for additional information.

Goal Assessment and Future Plans

In FY 2004, the target for this indicator will be a three percent reduction from the baseline.



* Fatality data from OSHA Integrated Management Information System. Employment data from BLS Current Employment Survey.



* Fatality data from OSHA Integrated Management Information System. Employment data from BLS Current Employment Survey.

Reduce Workplace Injuries And Illnesses

Performance Goal 3.1D (Occupational Safety and Health Administration) – FY 2001

Reduce injuries and illnesses by 11 percent from baseline in five industries characterized by high-hazard workplaces.

Results

The goal was achieved. The lost workday injury and illness rate per 100 full time workers dropped between 16 percent and 51 percent in the four non-construction targeted industries and lost workday injuries dropped 25 percent in construction compared to the baseline, a three-year average from calendar years 1993-1995.

Industry	CY 1993 - 1995 Baseline	2001	CY 2001 Change from Baseline
Shipyards	13.4	7.5	-44%
Food Processing	8.9	6.3	-29%
Nursing Homes	8.7	7.3	-16%
Logging	7.2	3.5	-51%
Construction *	5.2	3.9	-25%

* Construction industry data include injuries only.

Program Description

The Department works with employers and workers to reduce workplace injuries and illnesses in selected industries with historically high rates of lost workdays: the shipyard, food processing, nursing homes, logging, and construction sectors. One of the Department's most important roles in making the workplace safer is helping employers know the right precautions to take. Therefore, the Department provides outreach, training, and education directed to employers and workers in these industries.

Typical of the Department's outreach efforts are those in the National and Local Emphasis Programs, which focus both outreach and inspections on the targeted industries. The National Emphasis Program (NEP) for nursing homes, for example, focused outreach efforts and inspections primarily on the specific hazards most prevalent in nursing home and personal care facilities. These hazards include resident handling (ergonomic hazards), exposure to blood and other potentially infectious materials, exposure to tuberculosis, and slips, trips, and falls. Nearly 200 Department of Labor staff and nursing home industry partners received intensive training in these hazards as part of the nursing home industry NEP.

The Department is also involved in partnerships and alliances with employers and workers in these industries. Through these partnerships and alliances, the Department provides guidance and information on how to reduce injuries and illnesses. OSHA also provides outreach and education through its website, where much safety and health information, such as bulletins, interactive and industry-specific training software packages (*eTools*), and industry-specific safety and health topics pages can be found. One innovative way the Department keeps these and other industries current on OSHA policies and safety progress is an e-mail brief named *QuickTakes* that is issued every two weeks.

A construction company implemented OSHA's Voluntary Protection Program (VPP) on a reconstruction and expansion project in western New York. More than three years into the project, the construction company had not had a single accident that resulted in a lost workday. Company representatives said joining VPP provided more benefits than they expected. Protected workers are a real plus for the company, as their added workdays translate directly to profits.



Photo Credit: Norm Stahlman, Rifenburg Construction, Inc.

Analysis of Results

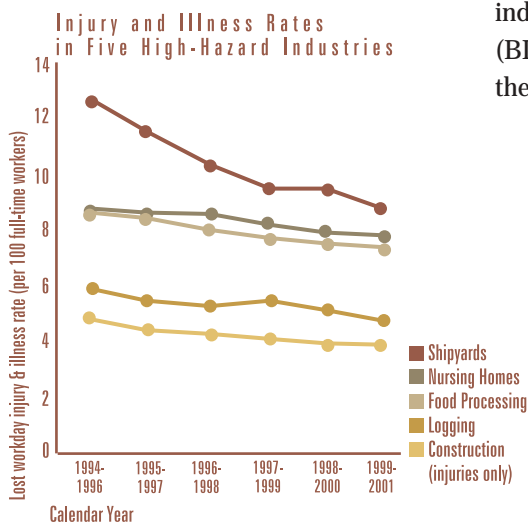
As the table and chart indicate, each of the five targeted industries has shown reductions in its lost workday rates. The chart below is based on a 3-year moving average, which helps to show these reductions by smoothing year-to-year fluctuations.

Strategies

In FY 2001, new partnerships, local emphasis programs, and outreach were directed to the industries identified above, especially nursing homes.

For FY 2003, OSHA started implementing a new Strategic Management Plan that selects industries for particular focus based on CY 2000 data from the Bureau of Labor Statistics (BLS) Survey of Injuries and Illnesses. The following seven criteria were used to identify the industries of emphasis for FY 2003:

1. At least 5,000 total injury and illness cases;
2. A lost workday injury/illness rate (LWDII) of 3.5 or greater;
3. Not in the construction sector;
4. No more than 30 percent of injuries and illnesses involving days away from work caused by ergonomic events;
5. At least 50 percent of injuries and illnesses involving days away from work so severe as to result in at least six days away from work;
6. No more than 10 percent of the injuries involving transportation incidents (including incidents involving motorized industrial vehicles, such as forklifts and backhoes); and
7. No more than 10 percent of the injuries involving assaults and violent acts.



Based on these criteria, OSHA identified new industries to receive more assistance: landscaping and horticultural services, oil and gas field services, preserved fruits and vegetables, concrete products, blast furnace and basic steel products, ship and boat building, and public warehousing and storage. Note that shipyards will continue to be targeted in the new OSHA Strategic Management Plan, as will the part of the food processing industry involved in preserved fruits and vegetables.

Management Issues

Data: BLS provides the data required for performance reporting on this goal. There is a one-year time lag in the availability of BLS injury and illness data, resulting in a two-year time lag in reporting for this performance report. For instance, the FY 2002 injury and illness reduction goal is based on CY 2002 data provided by BLS. These data will not be available until December 2003, and therefore CY 2002 performance will not be reported on until the FY 2004 report. Despite the delay in performance reporting, OSHA has decided to use these data as they give the most comprehensive information on national levels of illnesses and injuries by industrial classification.

Management Challenges: DOL has set a goal to reduce injury and illness rates in overall private industry by 20 percent by FY 2008. The lag in data availability will make it challenging to track progress and to make mid-course adjustments.

External Program Evaluations and Audits: The Administration reviewed OSHA under its Program Assessment Rating Tool (PART). The Administration noted that the agency's goals were generally meaningful and measurable. However, the Administration did comment that the lack of timely data hinders timely performance assessments and that OSHA should improve its regulatory development process. OSHA is continuing to explore improved measures and data and will implement rigorous cost-benefit analysis and develop a plan to evaluate the results and cost-effectiveness of its regulatory and non-regulatory programs.

Goal Assessment and Future Plans

The focus on high-hazard industries and the monitoring of safety and health indicators in these industries will eventually be part of the Department's Performance Goal 3.1D – reducing work-related injuries and illnesses. However, due to lags in the availability of high-quality injury and illness data, the FY 2004 report will still track the Department's performance in reducing workplace injuries and illnesses in these industries. As noted above, performance on this goal will be based on CY 2002 data.

Decrease Fatalities In The Construction Industry

Performance Goal 3.1F (Occupational Safety and Health Administration) – FY 2002

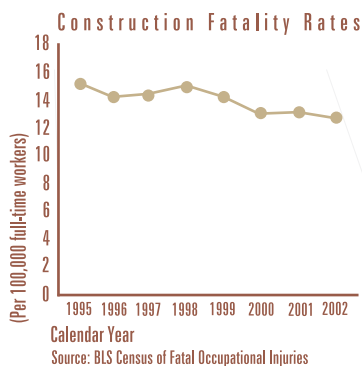
Decrease fatalities in the construction industry by 15 percent by focusing on four leading causes of fatalities (falls, struck-by, crushed-by, and electrocutions and electrical injuries).

Results

The goal was achieved. The fatality rate fell by 17 percent, from 14.7 deaths per 100,000 workers in the baseline year (CY 1995) to 12.2 in CY 2002.

Program Description

The Department's program to reduce fatalities in construction is based on inspections and compliance assistance (including partnerships). This program focuses on the leading causes of construction fatalities and efforts to reduce or eliminate these causes.



Analysis of Results

In addition to exceeding its goal of a 15 percent reduction in construction fatalities from the 1995 baseline, DOL also achieved an annual reduction (CY 2001 to CY 2002) in deaths caused by each of the four causes of construction fatalities. The number of fatal falls in construction declined 12 percent, from 421 in CY 2001 to 370 in CY 2002. The number of fatal struck-by injuries declined 12 percent, from 113 to 99. The number of fatal crushed-by injuries (including crushed by equipment or objects and collapsing materials) declined four percent from 105 to 101, and the number of fatal electrocutions declined seven percent from 155 to 144.

Strategies: Each year, more construction workers die from workplace accidents than workers in any other industry. Because construction's employers and employees are often mobile and hard to reach, the industry presents unique challenges for OSHA outreach, training, and compliance assistance efforts. These challenges call for new strategies to reduce fatalities. An example of DOL's response to these challenges is new strategies to reduce fatalities among Hispanic workers. The number of fatal work injuries among Hispanic workers in construction rose every year between CY 1996 and CY 2001, possibly due to the growing number of Hispanics engaged in construction work. One of these new strategies is an alliance with the Hispanic Contractors of America, Inc. (HCA). HCA identifies bilingual workers to take the OSHA 30-hour train-the-trainer construction safety course in English. In turn, trained workers provide the construction safety training in Spanish to member employers and their workers. Additionally, OSHA and HCA participate in conferences to raise awareness of Hispanic fatalities in the construction industry and the alliance's role in trying to prevent them. Construction fatalities among Hispanics were down by 13 percent in CY 2002 compared to CY 2001. More work is needed, however. While Hispanics accounted for 19 percent of the construction labor force in CY 2002, they still suffered a disproportionate 22 percent of fatal work injuries in construction.

Another DOL strategy to reduce construction fatalities is a focus on fall hazards. Falls account for roughly one-third of all deaths in construction. Local Emphasis Programs (LEPs) are based on knowledge of local construction industry hazards or local industry

injury/illness experience. LEPs supplement the construction inspection targeting system and avoid a one-size-fits-all approach. Because many construction LEPs specifically address falls in construction, DOL has a good mechanism to identify worksites with fall hazards and can continue to provide strong enforcement of fall protection regulations. DOL continues to increase the number of partnerships. The Department's voluntary national construction safety partnerships with the Associated Builders and Contractors (ABC) and the Associated General Contractors (AGC), the two major construction employer organizations, provide a model for safety collaboration. During FY 2002 and FY 2003, many local partnerships, covering thousands of workers, began or continued under the national-level partnership agreements with the ABC and the AGC.

DOL also makes safety and health compliance assistance available to the construction industry. One method DOL uses to improve construction safety through this strategy is to continually upgrade and enhance its webpage dedicated to construction industry compliance assistance. This webpage provides direct links to OSHA's construction standards and agency policies, and to information that is crucial to construction safety, including compliance information, web-based construction safety training, safety publications, and safety articles. The webpage also contains a link to OSHA's Office of Training and Education homepage, where visitors can take construction safety training modules to assist trainers who conduct the OSHA 10-hour Construction Industry Outreach Training.

DOL continues to emphasize firm and fair enforcement through construction inspections. The number of construction inspections has increased each of the last three years, from 20,208 construction inspections OSHA conducted in FY 2001 and 21,344 in FY 2002 to 22,667 in FY 2003.

Management Issues

Internal Program Evaluations and Audits: Because of the high fatality rate in the construction industry, OSHA annually analyzes the major causes of fatal construction accidents to focus resources more effectively. The most recent study (*An Analysis of Fatal Events in the Construction Industry, 2001*), showed that construction fatalities in 2001 most frequently resulted from falls, including falls from or through roofs and falls from or with structures, from operating construction equipment, crushing, or running over people who were not operating the construction equipment, from electric shock from equipment installation or tool use, and from being struck by falling objects. As a result, OSHA will continue to devote extensive resources to the inspection of construction worksites, actively enforcing requirements relating to these hazards.

External Program Evaluations and Audits: The Administration reviewed OSHA under its Program Assessment Rating Tool (PART). The Administration noted that the agency's goals were generally meaningful and measurable. However, the Administration did comment that the lack of timely data hinders timely performance assessments and that OSHA should improve its regulatory development process. OSHA is continuing to explore improved measures and data and will implement rigorous cost-benefit analysis and develop a plan to evaluate the results and cost-effectiveness of its regulatory and non-regulatory programs.

Safety is an integral part of the workday for employees at Pittsburgh, Pennsylvania's NexTech. NexTech maintains a virtually spotless safety record while running a round-the-clock operation that involves heating razor-thin strips of steel to 1,400 degrees Fahrenheit, and running them through a molten zinc bath. Because NexTech integrates safety and health into their operations, the company's injury rates are well below national averages. Their safety record also gives sales staff a good selling point. NexTech's plant manager views safety as "a key element of our success."



Photo Credit: NexTech

Goal Assessment and Future Plans

DOL will enhance its efforts to reach out to the construction industry and encourage it to join with the Department to reduce construction fatalities. DOL has revised and consolidated four goals from prior years' plans into two new strategic plan goals: to reduce the rate of workplace fatalities by 15 percent from the baseline, and to reduce the rate of injuries and illnesses by 20 percent from the baseline over the life of the Department's strategic plan (covering FY 2003 – 2008). For FY 2003, what was the construction fatality goal will now be part of a new, broader fatality goal for all sectors covered by the Occupational Safety and Health Act. However, OSHA will continue to track construction fatalities as part of its overall strategy to reduce work-related fatalities.