



DEPARTMENT OF THE ARMY  
U.S. Army Corps of Engineers  
Washington, D.C. 20314-1000

Reply to  
Attention of:  
CESO (385-10)


JAN 07 2009

MEMORANDUM FOR COMMANDERS, DIRECTORS AND CHIEFS OF SEPARATE  
OFFICES, HQUSACE

SUBJECT: USACE Safety Management Action Plan (SMAP) for FY 2009

1. Reference is made to AR 385-10, the Army Safety Program, that requires strategic planning for command safety programs.
2. The first step in moving the Safety Program from good to great is developing a road map to get there. A long-term strategy (Five Year Safety and Occupational Health Strategic Plan) has been drafted for this purpose and will be presented to the Chief of Engineers for approval in the near future. This strategy encompasses the safety and health goals and objectives from higher headquarters and fully supports the Chief's Campaign Plan.
3. This memorandum provides the USACE SMAP for FY 09 (enclosed) as the first year implementation of the USACE long-term strategy. The SMAP focuses on a framework of safety and health culture and the efficient, effective practice of composite risk management that will start us in the right direction. The SMAP was developed in coordination with MSC and Center safety and health managers.
4. As in the past, it is requested that MSC Commanders and Center Directors develop an implementation plan that supports the USACE SMAP. If you have any questions please contact Mr. Richard Wright, HQUSACE Chief of Safety and Occupational Health at (202) 761-8566.

Encl

  
STEPHEN L. HILL  
Colonel, Corps of Engineers  
Chief of Staff

**U. S. ARMY CORPS OF ENGINEERS  
SAFETY MANAGEMENT ACTION PLAN (SMAP) FY09**

1. **Objective:** To set and implement initiatives and actions that support the USACE Campaign Plan and FY 09-13 USACE SOH Strategic Plan and begin moving USACE towards a safety culture that is great - where composite risk management is integrated into everything we do.
2. **Value:** A successful accident prevention program is a mission enabler that will help move USACE from good to great. A great safety culture contributes to the well being of the work force, their families and the contractor work force. It enhances mission accomplishment through organizational efficiency and risk limitation using a proven systematic process.
3. **Status:** USACE has enjoyed major success for decades in regards to our Safety and Occupational Health Program. Our metrics have shown that our accident experience is considerably better than that of industry or Army. Yet over the past several years we have reached a plateau and have been unable to improve. To compound this situation, USACE has undergone, and will continue to undergo many organizational challenges. We will remain at this plateau unless a new strategy is successfully applied that will move the organization to the next level – where safety is instinctive, intuitive, and predictive.
4. **Strategy:** To provide renewed vitality and attention to accident prevention, this SMAP will establish the framework in support of the FY 09-13 USACE SOH Strategic Plan. We will continue to do the great things that work to reduce loss and implement new actions vital to:  
1) moving our safety culture from good to great; 2) improving SOH programs to be effective and efficient; 3) implementing systematic management of risk into our business culture; and 4) reducing accidental loss.
5. **Actions:** The following new actions focus on areas requiring attention during FY09. MSC Commanders and Center Directors will ensure the following actions are accomplished:

**a. Incorporate SOH into USACE Culture.** Applying systems thinking into our safety business line will have an enormous effect on our safety culture. Each component of the safety system must work and work well together – taking people, processes and communication into consideration. A successful safety culture also addresses outside influences that impact the job, such as loss due to off-duty accidents.

Action 1: MSC Commanders and Center Directors shall institute a formalized division/center-wide safety management system (SMS) utilizing the 4 elements essential to all SMS (Leadership and Employee Involvement, Worksite Analysis, Hazard Prevention and Control, and Safety and Health Training), conduct an analysis of organizational performance against the 4 essential elements, and develop an action plan to improve performance. Some recognized SMSs available as excellent models include OSHA's Challenge/Voluntary Protection Program, ANSI Z10, and ISO OHSAS 18000 (See Attachment 1 for a comparison of these models).

Metric: Using chosen SMS, provide an analysis summary detailing your organization's performance against the 4 essential elements by end 3rd QTR. By end 4th QTR provide an action plan to improve performance.

Action 2: Promote and encourage off-duty safety and wellness for USACE Soldiers, Civilians, and their Families through focused initiatives.

Metric: Develop at least one successful off-duty safety and health initiative applied throughout the Command/Centers and brief it at 4<sup>th</sup> QTR DMR.

**b. Improving SOH Programs to Be Effective and Efficient.** To insure we remain a valuable and reliable resource to USACE, it is critical that our program, processes and people are as effective and efficient as possible. This can only be accomplished by doing the right things consistently, with the right people and at the right times - *from the customer's perspective.*

Action 3: Team with the command safety managers and those they serve to analyze SOH programs, processes and procedures for ways to consistently deliver effective and efficient services to your customers (i.e., improving cost, scheduling, and quality through professional development, mentoring, lessons learned, outsourcing, regionalization, etc.).

Metric: Based on customer feedback, identify and prioritize the top 3 MSC/Center programs, processes or procedures that need improvement and provide an improvement plan that covers each by end 3<sup>rd</sup> QTR. Achieve FY09 plan milestones and report by end 4<sup>th</sup> QTR.

Action 4: Require each subordinate command to identify a high hazard project and require the Project Manager to actively involve the SOH office in all phases of the PMBP process as a member of the PDT. Collect data and lessons learned to evaluate effectiveness and value added of SOH involvement in the process.

Metric: Identify subordinate command projects by end 2nd QTR. By end 4<sup>th</sup> QTR provide AAR to include 3 pros and cons of SOH involvement in the process.

Action 5: Assure SOH PRTs, FEST-M, and military contingency cadre safety and health professionals are staffed and ready for deployment.

Metric: Each quarter the readiness status will be reported at the SOH DMR.

Action 6: Perform SOH program management evaluations of all required subordinate commands IAW ER 385-1-85.

Metric: MSC/Center reports that all required program management evaluations have been completed by end 4<sup>th</sup> QTR.

**c. Integrating Systematic Management of Risk into USACE Business Culture.** Risk management is the cornerstone of the USACE SOH program. Robust hazard prevention and control processes coupled with worksite analysis and proper training have proven to enhance the organization's bottom line through reduction in loss, higher productivity and increased morale.

Action 7: Integrate Risk Management methodologies into all jobs and activities involving the right people and using established hazard analysis tools (Position Hazard Analyses, Activity Hazard Analyses, Health Hazard Assessments, Facility Systems Safety and the PMBP Process Manual REF8016G). Based on your prior analysis or other risk data, identify at MSC and subordinate commands, the most hazardous positions, activities and projects and develop a plan to communicate this information to responsible managers, leaders and affected employees.

Metric: Distribute hazard information at MSC and subordinate command by end 3rd QTR. Report the percent completion of risk analyses for these positions, activities and projects by end 4<sup>th</sup> QTR.

**d. Reducing Accidental Loss in USACE.** Achieving results in reducing accidental loss during mission execution will demonstrate the value of SOH to USACE. This can only be shown when leading and lagging information is used in an integrated planning process to set and track goals, objectives and responsibilities that are tied to successful mission execution.

Action 8: Command/Directorate leadership will engage in a strategic planning process to develop and track loss reduction goals, objectives and responsibilities for the organization. The strategic plan implementation shall utilize key leading and lagging data analysis, meaningful comparative metrics, and be tied to successful mission execution and strategic direction of higher headquarters. See Attachment 2 for corporate lagging metrics.

Metric: MSC Commanders/Center Directors publish an implementation plan for the FY 09 SMAP with instructions to District/Subordinate offices starting in FY 09 by end 2<sup>nd</sup> QTR.

**OSHA VPP Components**

<b>Accident Rate Evaluation</b>	Injury and Illness History Requirements. Evaluate the applicant/participant's injury and illness history by using a 3-year total case incidence rate (TCIR) and a 3-year days away, restricted, and/or job transfer incidence rate (DART rate) (See Appendix A.). The 3-year TCIR and DART rates must be below at least 1 of the 3 most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by the Bureau of Labor Statistics (BLS). Compare both rates to a single year.
<b>1) Management Leadership &amp; Employee Involvement</b>	<ul style="list-style-type: none"> <li>a. Management Commitment</li> <li>b. Employee Involvement</li> <li>c. Contract Employee Coverage</li> <li>d. Safety and Health Management System Annual Evaluation</li> </ul>
<b>2) Worksite Analysis</b>	<ul style="list-style-type: none"> <li>a. Baseline Safety and Industrial Hygiene Hazard Analysis</li> <li>b. Hazard Analysis of Routine Jobs, Tasks, and Processes</li> <li>c. Hazard Analysis of Significant Changes</li> <li>d. Pre-use analysis</li> <li>e. Documentation and Use of Hazard Analyses</li> <li>f. Routine Self-Inspections</li> <li>g. Hazard Reporting System for Employees</li> <li>h. Industrial Hygiene (IH) Program</li> <li>i. Investigation of Accidents and Near-Misses</li> <li>j. Trend Analysis</li> </ul>
<b>3) Hazard Prevention &amp; Control</b>	<ul style="list-style-type: none"> <li>a. Certified Professional Resources</li> <li>b. Hazard Elimination and Control Measures</li> <li>c. Hazard Control Programs</li> <li>d. Occupational Health Care Program</li> <li>e. Preventive Maintenance of Equipment</li> <li>f. Tracking of Hazard Correction</li> <li>g. Disciplinary System</li> <li>h. Emergency Preparedness and Response</li> </ul>

<p><b>4) Training</b></p>	<p>a. Training must be provided so that managers, supervisors, nonsupervisory employees, and contractors are knowledgeable of the hazards in the workplace, how to recognize hazardous conditions, signs and symptoms of workplace-related illnesses, and safe work procedures</p>
	<p>b. Training required by OSHA standards must be provided in accordance with the particular standard.</p>
	<p>c. Managers and supervisors must understand their safety and health responsibilities and how to carry them out effectively.</p>
	<p>d. New employee orientation/training must include, at a minimum, discussion of hazards at the worksite, protective measures, emergency evacuation, employee rights under the OSH Act, and VPP.</p>
	<p>e. Training should be provided for all employees regarding their responsibilities for each type of emergency. Managers, supervisors, and non-supervisory employees, including contractors and visitors, must understand what to do in emergency situations.</p>
	<p>f. Persons responsible for conducting hazard analysis, including selfinspections, accident/incident investigations, job hazard analysis, etc., must receive training to carry out these responsibilities, e.g., hazard recognition training, accident investigation techniques, etc.</p>
	<p>g. Training attendance must be documented. Training frequency must meet OSHA standards, or for non-OSHA required training, be provided at adequate intervals. Additional training must be provided when changes occur in work processes, new equipment, new procedures, etc.</p>
	<p>h. Training curricula must be up-to-date, specific to worksite operations, and modified when needed to reflect changes and/or new workplace procedures, trends, hazards and controls identified by hazard analysis. Training curricula must be understandable for all employees</p>
	<p>i. Persons who have specific knowledge or expertise in the subject area must conduct training.</p>
	<p>j. Where personal protective equipment (PPE) is required, employees must understand that it is required, why it is required, its limitations, how to use it, and maintenance.</p>

ANSI Z10	
Basic Element	Description / Sub-element
<b>Management Leadership</b>	1. Safety and Health Policy: Signed by top management; Provides for employee participation; Compliance with laws and regulations; Protection of employees health and safety; Conformance with organization safety requirements; Effectively communicated to all employees
	2. Management Responsibility and Authority: Implement, maintain, and monitor performance; Provide for suitable resources; Plan, implement, operate, check, correct, and review; Define specific roles and responsibilities; Integrate OHSMS into regular business systems
	3. Employee Participation: Employees have time and resources allocated; Employees have timely access to information; Obstacles are identified and removed
<b>Planning</b>	4. Initial Review: Organization management systems; Hazards, risks, and controls; Resources; Regulations, standards, and requirements; Assessments
	5. Ongoing Review: Planning; Implementation; Evaluation; Corrective action; Management reviews
	6. Assessment and Prioritization: Level of risk of hazards; Establish priorities; Identification of system deficiencies
	7. Objectives: Document objectives based on priorities; Focus on system improvements; Consistent with safety and health policies; Set, reviewed, and modified periodically; Changing conditions or operations
	8. Implementation Plans: Document the implementation plan; Assign resources to achieve objectives
<b>OHSMS Operations</b>	9. Hierarchy of Controls: 1.Eliminate the hazard; 2.Substitution; 3.Engineering controls; 4.Warnings; 5.Administrative controls; 6.Personal protective equipment
	10. Design Review and Management of Change: Review of new operations; Review of changes in operations, services, suppliers; Identification of hazards; Human factors hazards; Control measures; Review of codes and standards; Determination of appropriate scope of design review and management of change
	11. Procurement: Identification of potential risks of purchased products; Establish requirements for supplies; Review of incoming supplies for compliance
	12. Contractors: Process to identify, evaluate, and control hazards introduced by contractors for the organization employees; Process to identify, evaluate, and control hazards for contractor employees operating onsite
	13. Emergency Preparedness: Establish an emergency action plan (EAP); Periodic drills and testing of plan; Evaluate and update plan periodically
	14. Education, Training and Awareness: Define and assess OHSMS competence needed: Employees & Contractors; Provide adequate training suitable for operations; Ensure access to appropriate training; Ensure competent trainer and language understood by trainee
	15. Communications: Communication of information throughout the organization; Prompt reporting of incidents, employee injuries, hazards, and risks; Encourage employee recommendations and reporting
	16. Document and Record Control Process: Identification of documents that need to be controlled; Documents are protected, accessible, protected, and retained for proper time

<b>Evaluation and Corrective Action</b>	17. Monitoring, Measurement, and Assessment: Workplace inspection and testing; Exposure assessment; Employee input; Occupational health assessments; All other methods required by OHSMS
	18. Incident Investigation: Process to investigate work-related incidents
	19. Audits: Conduct periodic audits; Document and communicate results; Immediate identification and communication of imminent dangers found
	20. Corrective and Preventive Actions: Establish actions to address OHSMS deficiencies; Identify any new hazards created by corrective actions; Expedite action for control of imminent dangers; Track action items to insure implementation
	21. Feedback for the Planning Process: Establish processes to ensure the results of audits, investigations and actions are included in planning process
<b>Management Review</b>	22. Management Review Process: Progress in the reduction of risk; Effectiveness of processes to identify, assess and prioritize risk and system deficiencies; Effectiveness of identifying root causes of risk; Input from employees; Status of corrective and preventive actions; Follow-up actions from audits and previous reviews; Evaluation of status of objectives; Performance of OHSMS compared to expectations; Outcomes and Follow-up □ Future direction of the OHSMS; Need for changes to organization's policies, priorities, objectives, resources, or other elements



<b>OHSAS 18001</b>	
<b>Basic element</b>	<b>Description / Sub-elements</b>
<b>4.1 General Requirements</b>	To establish and maintain a management system that ensures conformance to the standard. This should lead to the organization meeting regulatory concerns.
<b>4.2 OH&amp;S Policy --</b>	In the vernacular of OHSAS 18001, the policy is meant to establish an overall sense of direction and define the principles of action for an organization. A policy should set objectives, identify responsibility, establish targets for performance and demonstrate formal commitment. As with ISO 9001 and ISO 14001, the process approach should be applied.
<b>4.3 Planning</b>	<p>4.3.1, <i>Planning for Hazard Identification, Risk Assessment and Risk Control</i> --The organization must identify, determine and control risks associated with identified and unintentional hazards.</p> <p>4.3.2, <i>Legal and Other Requirements</i> --The organization must understand and be aware of any regulatory responsibilities affecting its operations. Relevant personnel must be kept informed.</p> <p>4.3.3, <i>Objectives</i> --The organization must set measurable OH&amp;S objectives and track results in all relevant locations.</p> <p>4.3.4, <i>OH&amp;S Management Program(s)</i> --The organization must ensure that OH&amp;S objectives and the processes by which they're tracked are monitored, reviewed, updated and recorded as needed. Plans and strategies should be in writing, followed and updated as needed by the organization.</p>
<b>4.4 Implementation and Operation</b>	<p>4.4.1, <i>Structure and Responsibility</i> --The organization must establish roles, responsibilities and authorities, and ensure that these are defined, documented and communicated as appropriate.</p> <p>4.4.2, <i>Training, Awareness and Competence</i> --The organization must have effective procedures ensuring that personnel assigned to tasks are competent.</p> <p>4.4.3, <i>Consultation and Communication</i> --The organization should encourage participation and support of its OH&amp;S practices, policies and objectives from anyone who might be affected by the operations (both internally and externally).</p> <p>4.4.4, <i>Documentation</i> --The organization must ensure that the OH&amp;S management system is adequately understood and that personnel can execute the system effectively and efficiently.</p> <p>4.4.5, <i>Document and Data Control</i> --The organization must identify and control related documents and information to ensure effective OH&amp;S operations.</p> <p>4.4.6, <i>Operational Control</i> --The organization must be prepared to control risk, fulfill policy and objectives, and conform to legal and other regulations.</p> <p>4.4.7, <i>Emergency Preparedness and Response</i> --The organization should actively review possible accident and emergency responses, have plans to meet these possibilities and conduct dry-run drills to test the system's readiness.</p>

<b>4.5 Checking and Corrective Action</b>	<b>4.5.1, Performance Measurement and Monitoring</b> --The organization must have key performance parameters from all parts of the organization to monitor the OH&S management system. At a minimum, measures are needed for achieving policies and objectives; risk assessment; lessons learned; effective awareness, training and communication; and other information deemed useful.
	<b>4.5.2, Accidents, Incidents, Nonconformances, and Corrective and Preventive Action</b> --The organization should have procedures that strive to prevent the occurrence and/or reoccurrence of incidents. These procedures should allow for root cause analysis and timely reporting.
	<b>4.5.3, Records and Records Management</b> --The organization should keep evidence that the OH&S is operating effectively.
	<b>4.5.4, Audit</b> --The organization should review and continually monitor the effectiveness of its OH&S management system. The internal audit program should follow ISO 19011 and be conducted at planned intervals.
<b>4.6 Management Review</b> --	Top management should conduct reviews of the OH&S management system. This includes assessing the system for continual improvement opportunities.

## Corporate lagging metrics

Corporate lagging metrics have been established by CESO at a three percent reduction from FY 05-07 average rates for Civilian and contractor lost work day cases and public fatality rates at the Directorate level for both Civil Works and Military Programs. Corporate metric tolerances are as follows:

### Civilian Tolerances (Lost Workday Cases as defined by OSHA)

Civil Funded Tolerances	Military Funded Tolerances
Green: 1.24 or less	Green: 0.43 or less
Amber: 1.25 – 1.50	Amber: 0.44 – 0.59
Red: 1.51 or greater	Red: 0.60 or greater

### Contractor Tolerances (Lost Workday Cases as defined by OSHA)

Civil Funded Tolerances	Military Funded Tolerances
Green: 0.58 or less	Green: 0.28 or less
Amber: 0.59 – 0.71	Amber: 0.29 – 0.31
Red: 0.72 or greater	Red: 0.32 or greater

### Member of Recreating Public Fatality Experience

Green: 0.77 or less
Amber: 0.78 – 0.84
Red: 0.85 or greater

Major Subordinate Commands and Centers are authorized to establish accident reduction metrics for themselves and their subordinate organizations. The corporate metrics will be tracked by CESO at Directorate Management Reviews and Command Management Reviews and are published in the Consolidated Command Guidance.