

OSHA Recordkeeping & Regulatory Update Forms, Posting, Serious Injury, and Electronic Reporting Requirements

Presented by:

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Today's Session

- Today's session is designed to promote awareness of the basic OSHA framework and recordkeeping requirements
- As you may already appreciate, certain of the events that we will discuss today from an OSHA perspective
 have important risk elements, including potential implications for workers' compensation, general liability,
 and other insurance exposures, policies and claims.
- The session is designed to provide insight based on our experience as insurance brokers assisting clients like you in the senior living and LTC space.
- It does not offer or provide legal advice. Should you require advice on specific events or requirements, you should consult with your attorneys.
- To ask a question: Click the Q&A button at the bottom of the screen and type your questions.
- Slides and replay will be sent to all registered attendees within a few days after the webinar.

- 1. Federal and State OSHA Updates
- 2. Simplified Recordability Flowchart
- 3. Work-Relatedness
- 4. General Recording Criteria
- 5. Medical Treatment vs. First Aid
- 6. Recording COVID-19, BBP & TB cases
- 7. Recording "Repeat" cases
- 8. Form 300, 301, and 300A review & detailed instructions
- 9. OSHA's site specific targeting program & DART rate calculation
- 10. Electronic Reporting Instructions & Login Requirements
- 11. Serious Injury / Fatality Reporting Requirements
- 12.Q&A

Agenda

OSHA Update Latest on Federal and State OSHA programs

Federal OSHA "Infection Control" standard on the horizon

- The Occupational Safety and Health Administration is working on a draft standard to address infectious diseases, such as tuberculosis (TB), varicella disease (chickenpox, shingles), measles, Severe Acute Respiratory Syndrome (SARS), the 2019 Novel Coronavirus (COVID-19), and pandemic influenza
- The notice of proposed rulemaking is slated for June 2024
- Scope of this proposed standard to include employers in healthcare settings; the standard will most likely
 apply to SNFs, but not apply to IL, AL, and MC communities

Cal/OSHA Standards Update

2024 Update

- Workplace Violence Prevention Standard for General Industry goes into effect on July 1, 2024, which requires the following:
 - ☐ Written Workplace Violence Prevention Plan
 - Employee training
 - □ Violent Incident Log
- Heat Illness Prevention in Indoor Places of Employment Proposed Standard in final stages of review and public comment
- Updates to the COVID 19 Prevention Non-Emergency Regulation

Cal/OSHA COVID-19 Prevention Non-Emergency Regulation

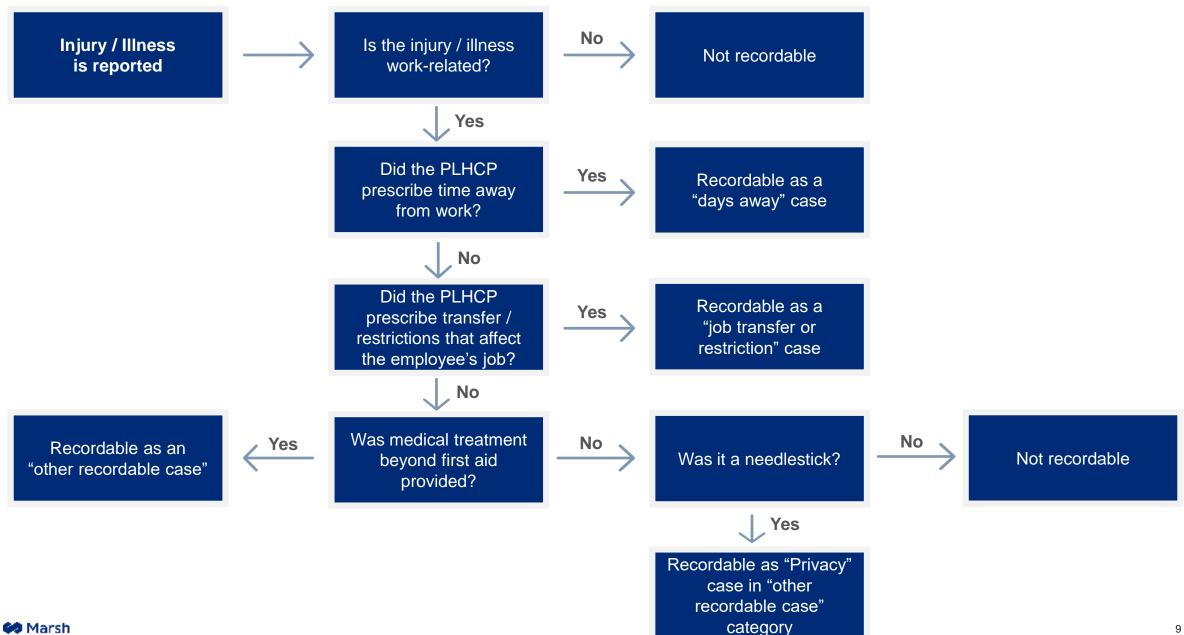
In effect until 2/3/25; recordkeeping provisions in effect until 2/3/26

Important changes include:

- Infectious period definition change, as follows:
 - ☐ The infectious period for a COVID-19 case with symptoms starts a minimum of 24 hours before the onset of symptoms
 - □ COVID-19 cases with symptoms may return to work if 24 hours have passed with no fever (without fever-reducing meds) and symptoms are mild or improving
 - ☐ There is no infectious period for non-symptomatic COVID-19 cases for the purpose of exclusion or isolation.
- Reduced isolation for COVID-19 cases
 - □ COVID-19 cases without symptoms no longer need to isolate for 5 days; they must only wear a mask for 10 days and avoid contact with people at higher risk for severe COVID-19 for 10 days (i.e., no direct contact with elderly residents and/or people with co-morbidities)
 - □ COVID-19 cases with symptoms must be excluded from the workplace for at least 24 hours and may return when 24 hours have passed with no fever (without fever-reducing meds) and symptoms are mild and improving
- Testing rules for close contacts
 - □ CDHP no longer recommends testing for all close contacts. Testing is only required when a close contact has new COVID-19 symptoms; is at higher risk of severe disease; or has contact with people who are at higher risk of severe disease
 - ☐ Still need to provide and pay for COVID-19 tests during paid working hours for employees
- Testing requirements during outbreaks stay the same
- Notification is still required for employees and independent contractors who have close contact within one business day
- Face coverings must still be provided to employees and ensure they are worn when required by CDPH; basically, face coverings must be worn 10 days from first symptoms or positive test

OSHA Recordkeeping Guidelines

Simplified OSHA Recordability Flowchart



Is a Case Work-Related?

- OSHA standards presumes work-relatedness for injuries and illnesses resulting from events or exposures
 occurring in the work environment unless an exception specifically applies.
 - ✓ The standards define work environment as the establishment and other locations where one or more employees are working or present as a condition of employment
 - ✓ The work environment includes *not only physical locations, but also the equipment or materials used* by employees during the course of their work
 - ✓ Injuries that occur when an employee works from home are work-related, generally speaking, if they are directly related to the performance of work rather to than the general home environment and the standard provides examples of this distinction.
- The presumption of work-relatedness applies if an event or exposure in the work environment caused or contributed to the resulting condition or significantly aggravated a pre-existing injury or illness.
- When an employee is traveling for work, the test is whether the employee was engaged in activities "in the interest of the employer." The standard addresses:
 - ✓ A hotel/motel is considered a "home away from home" such that some incidents occurring in the hotel are not considered work-related (e.g., slip and fall in the shower).
 - ✓ Side trips (e.g., for sightseeing or shopping) are not being classified as work-related.

General Recording Criteria

An injury or illness is recordable if it results in one or more of the following:

- ✓ Death
- ✓ Days away from work
- ✓ Restricted work activity
- ✓ Transfer to another job
- ✓ Medical treatment beyond first aid
- ✓ Loss of consciousness
- ✓ Significant injury or illness diagnosed by a PLHCP not resulting in the preceding conditions. The standard does not provide an exhaustive list, but specifically recognizes the following:
 - cancer
 - chronic irreversible disease
 - broken or cracked bone
 - punctured eardrum



Medical Treatment

OSHA's definition

- Medical treatment is the management and care of a patient to combat disease or disorder. It does not include:
 - √ Visits to a PLHCP solely for observation or counseling
 - ✓ Diagnostic procedures
 - ✓ First aid
- Sutures and surgical glue used to close a wound are considered medical treatment
- It is possible for an employee to visit the PLHCP more than once for a work-related injury / illness and the case is not recordable (e.g., follow up visit to ensure cut is healing properly and not infected)



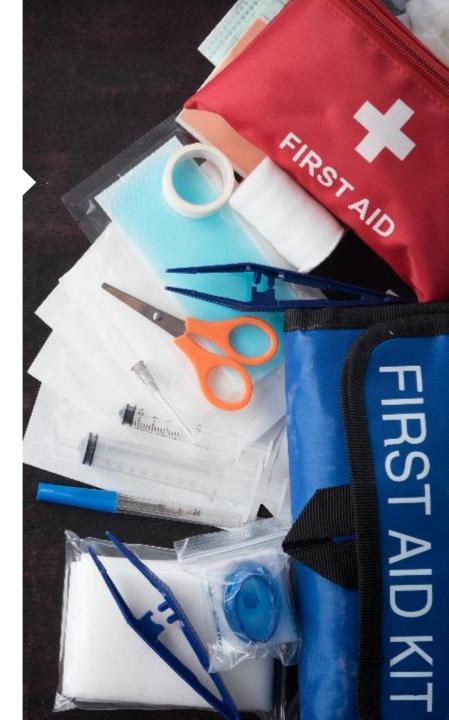


First Aid Case

The standards provide that first aid cases are not recordable

Examples of First Aid Include the following:

- Using nonprescription medication at nonprescription strength
- Tetanus immunizations
- Cleaning, flushing, or soaking surface wounds
- Wound coverings, butterfly bandages, Steri-Strips
- Hot or cold therapy
- Non-rigid means of support
- Temporary immobilization device used to transport accident victims
- Drilling of fingernail or toenail, draining fluid from blister
- Eye patches
- Removing foreign bodies from eye using irrigation or cotton swab
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
- Finger guards
- Massages
- Drinking fluids for relief of heat stress



Recording COVID-19 Cases

- COVID-19 can be a recordable illness if a worker is infected as a result of performing their work-related duties.
 Employers are responsible for recording cases of COVID-19 on the 300 log if all of the following are true:
 - ☐ The case is a confirmed case of COVID-19 with positive test result
 - ☐ The case is work-related (as defined by 29 CFR 1904.5); and
 - □ The case involves one or more of the general recording criteria set forth in 29 CFR 1904.7 (e.g., medical treatment beyond first aid, days away from work)
- Investigate reported COVID-19 cases to determine if they are work-related
- All COVID-19 cases, whether they are work-related or not, should be recorded on the COVID-19 case log. The recordkeeping requirements from the COVID-19 ETS are still in place, which includes keeping a COVID-19 Case Log

1 . 1	21.00				Last Day at	Date of	Date of First
Case	Employee Name	Phone Number	Job Title	Department	Community	Test or Diagnosis	Symptoms, if applicable
1.							
2.							
3.							
4.					_		
6.							
6.		_					_
7.							
8.	_	_			_	_	_
9.						_	
10.					_	_	
11.						_	
12.					_		
13.						_	
14.						_	
15.							
16.							
7.							

Bloodborne Pathogens Cases

Certain exposures to BBP are recordable

- Record all work-related needlesticks and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material, including human bodily fluids
- Record splashes or other exposures to blood or other potentially infectious material only if it results in diagnosis of a bloodborne disease or meets the general recording criteria
- All needlesticks must also be recorded on a separate sharps injury log under the requirements of the Bloodborne Pathogens standard
- All recordable needlesticks and bloodborne pathogens cases must also be recorded on the OSHA 300 log as privacy cases
- All privacy cases must be recorded on a separate privacy case log as well





Tuberculosis

- Record a case where an employee is exposed at work to someone with a known case of active tuberculosis, and subsequently develops a TB infection.
- A case is not recordable when:
 - ✓ The employee is living in a household with a person who
 is diagnosed with active TB
 - ✓ The Public Health Department has identified the employee as a contact of an individual with active TB
 - ✓ A medical investigation shows the employee's infection was caused by exposure away from work



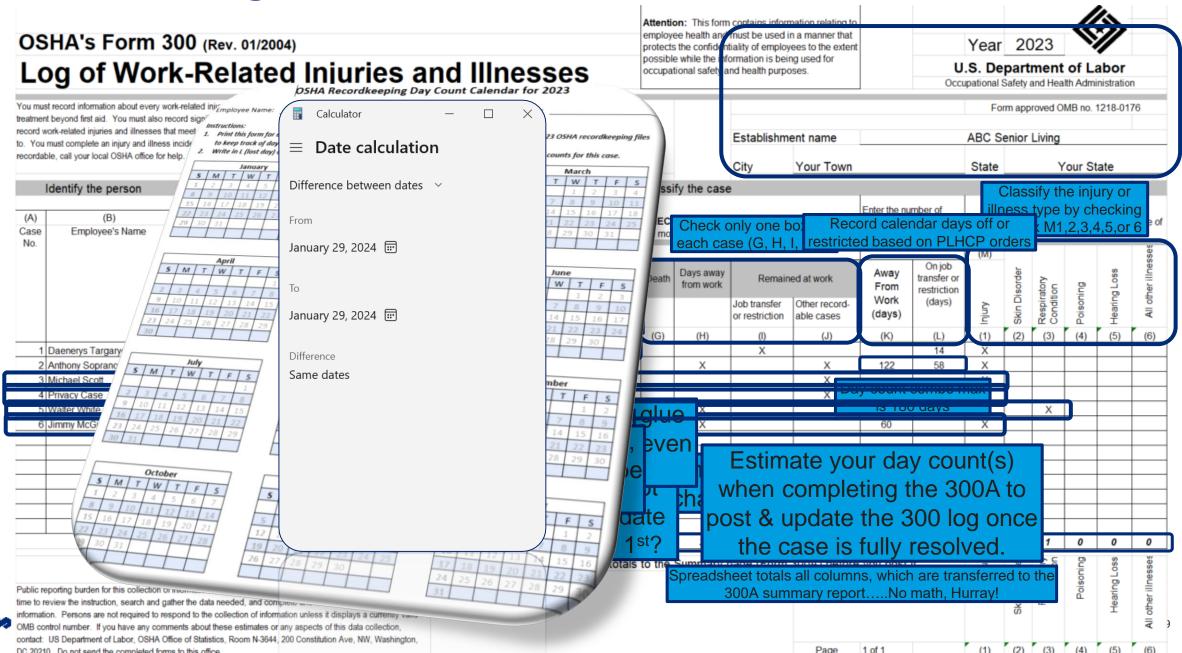
Recording "Repeat" Cases on the 300 Log

- A "Repeat" case must be recorded on the log when an employee previously experienced a recorded injury
 or illness of the same type that affected the same part of body but had recovered completely
- "Recovered completely" means that the employee returned to work without restrictions and without continued medical treatment from the previous injury or illness.
- If the employee "recovers completely" and then has an injury or illness of the same type, to the same body part, it would be recorded as a "new case" on the 300 log

OSHA Recordkeeping Forms Review

OSHA Recordkeeping Forms Review

OSHA 300 Log Review



OSHA 301 – Injuries and Illnesses Incident Report

OSHA's Form 301 Injuries and Illnesses	Incident Report	Attention: This form contains information relating to employee health and must be used in a manner that protects the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.	U.S. Department of Labor Occupational Safety and Health Administration
This Injury and Illness Incident Report is one of the	Information about the employee 1) Full Name	Information about the case 10) Case number from the Log(Tran	Form approved OMB no. 1218-0176 sfer the case number from the Log after you record the case.)
You can substitute your final as long as it records the	rst report of injury (FROI) same information. You mober on your FROI form, w	ay want to simply wri	te the corresponding
information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to	Male Female Information about the physician or other health care professional Name of physician or other health care professional	well as the tools, equipment or material the carrying roofing mat computer key-entry." *15) What happened? Tell us how the injury occ	employee was using. Be specific. Examples: erials"; "spraying chlorine from hand sprayer"; "dally curred. Examples: "When ladder slipped on wet floor, th chlorine when gasket broke during replacement";
Make sure to fill out the 'Completed by' information lower left, if using the 301 f	in the		e part of the body that was affected and how it was cal burn, hand"; "carpal tunnel syndrome."
Completed by Business Office Manager Name Title Business Office Manager Phone (123) 456-7890 Date Date Completed	8) Was employee treated in an emergency room? Yes No 9) Was employee hospitalized overnight as an in-patient? Yes No	"thlorine"; "radial arm saw." If this question of the employee died, when did death oc	loes not apply to the incident, leave it blank.



OSHA 300A Summary Report Review

OSHA's Form 300A (Rev. 01/2004) Summary of Work-Related Injuries and Illnesses U.S. Department of Labor cupational Safety and Health Administration Form approved OMB no. 1218-0176 All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete Establishment information Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0." Employees former employees, and their representatives have the right to review the OSHA Form 300 in Your establishment name ABC Senior Living its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordikeeping rule, for further details on the access provisions for these forms Street 123 Street Name City Your Town Your State Zip **Number of Cases** Industry description (e.g., Manufacture of motor truck trailers) Total number of Total number of Total number of Total number of cases deaths other recordable cases with days with job transfer or Standard Industrial Classification (SIC), if known (e.g., SIC 3715) away from work restriction (I) (G) OR North American Industrial Classification (NAICS), if known (e.g., 336212) 6 2 3 3 1 2 Number of Days NAICS Codes for Se WARNING: Math required! Total number of Total number of days of IL – 53 Add together your employee count days away from iob transfer or restriction AL & Memory Q for each week and divide by 52 203 Skilled Nursing Facility - 623110 Do not underestimate hours worked! Take hourly employee Injury and Illness Types total from HR system & add hours for salaried employees Total number of (ex. 5 salaried ee's X 40 hrs/wk X 50 wks = 10,000 hours) (1) Injury (4) Poisoning (5) Hearing Loss 0 (2) Skin Disorder I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and (3) Respiratory complete Condition (6) All Other Illnesses 0 Name of Executive Director Executive Director Company executive No work needed here, if using excel forms (123) 456-7890 1/31/2022 Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact. US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

OSHA's Site Specific Targeting Program

Based on the 2021 DART Rates (Effective 1/7/23 – 1/7/25)

OSHA has generated inspection lists of:

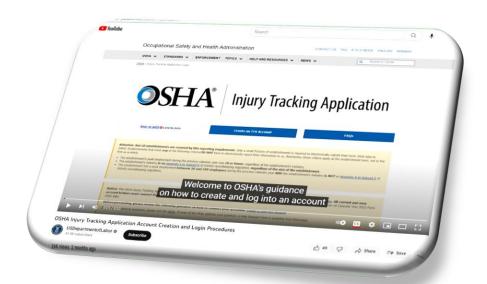
- (1) establishments with elevated Days Away, Restricted, or Transferred (DART) rates for CY 2021;
- (2) establishments with upward trending rates for the range of CY 2019-2021;
- (3) establishments that did not provide the required 2021 Form 300A data to OSHA; and
- (4) establishments with low DART rates in CY 2021 to verify data accuracy and quality control.

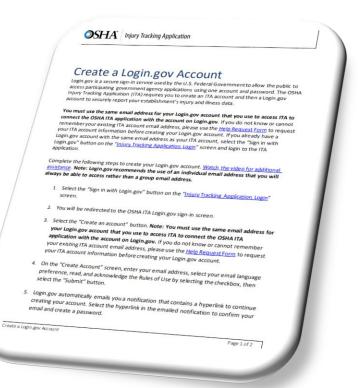
Average DART Rate for CCRC & AL Communities in 2021 = 5.1 (According to the U.S. Bureau of Labor Statistics)

OSHA Electronic Reporting Review

Creating a Login.gov Account

- You must create a Login.gov account if you haven't already done so
- Make sure you use the same email address you used for your login credentials on the ITA website
- Follow the YouTube video instructions provided by OSHA through the following web link:
 - OSHA Instructional YouTube Video https://www.youtube.com/watch?v=-e6i7xHuv7Y
 - OSHA Instructional Job Aid https://www.osha.gov/sites/default/files/02-create-login.gov-account.pdf

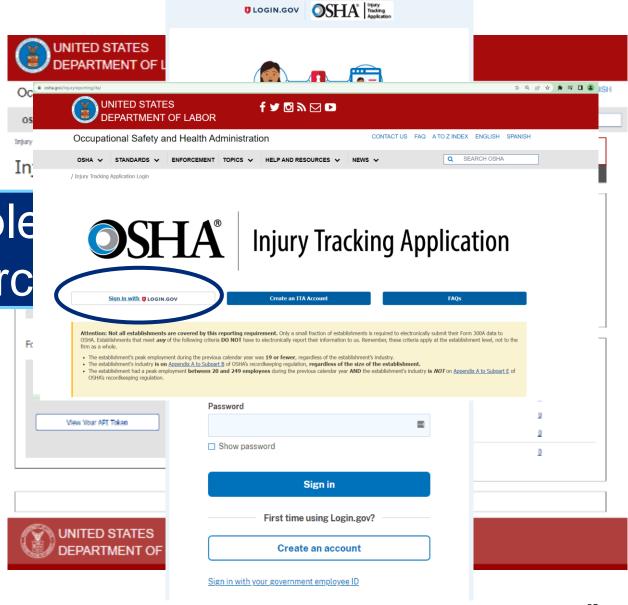




Electronic Reporting – OSHA's Injury Tracking Application

Step by step instructions

- 1. Click on "Sign in with Login.gov"
- 2. Log into OSHA ITA with your new Login.gov account at https://www.osha.gov/injuryreporting/ita/
- 3. Follow the instruction an establishment; view entered; upload a base of the by Marc
- 4. Add the 300A Summary Data for caon establishment if entering for one community at a time.
- 4a. If you have 100+ employees, you must also enter information about each case on the 300 log and 301 forms
- 5. Submit the Data to OSHA
- 6. Review your Confirmation Email



Serious Injury Reporting Requirements

Reporting to OSHA Fatality, Hospitalization, Amputation, Loss of Eye

- Report all "serious" injuries/illnesses to OSHA via phone at (800) 321-OSHA as follows:
 - ✓ Fatalities (report within 8 hours) fatality must occur within 30 days of incident to be reportable
 - ✓ Hospitalizations (report within 24 hours) must occur within 24 hours of incident to be reportable
 - ✓ Amputations (report within 24 hours) must occur within 24 hours of incident to be reportable
 - ✓ Loss of an eye (report within 24 hours) must occur within 24 hours of incident to be reportable
- Report all work-related COVID-19 hospitalizations and fatalities regardless of how long after the initial exposure.
- Cal OSHA Reporting Requirements report all of the events above as soon as practical to Cal OSHA via the website https://www.dir.ca.gov/dosh/report-accident-or-injury.html or via email at caloshaaccidentreport@tel-us.com
 - ✓ Please note that Cal OSHA does not have a limit on how long after the initial work-related incident for it to be a reportable event (amputation, hospitalization, etc.)
 - ✓ Cal OSHA also requires you to report any "permanently disfiguring injury," such as, but not limited to burns, cuts or other injuries with visible scaring.

Helpful Resource Links

- OSHA Recordkeeping Downloadable Forms Page https://www.osha.gov/recordkeeping/forms
- OSHA's Practice Site ITA website https://preview.osha.gov/injuryreporting/ita
- OSHA's Injury Tracking Application website https://www.osha.gov/injuryreporting/ita/
- Instructions for creating a Login.gov account for electronic reporting resources
 - ☐ OSHA Instructional YouTube Video https://www.youtube.com/watch?v=-e6i7xHuv7Y
 - OSHA Instructional Job Aid https://www.osha.gov/sites/default/files/02-create-login.gov-account.pdf
- OSHA COVID-19 Case Log https://www.osha.gov/sites/default/files/publications/OSHA4130.pdf
- Cal/OSHA COVID-19 Non-Emergency Standard Page https://www.dir.ca.gov/dosh/coronavirus/Non Emergency Regulations
- Cal/OSHA COVID-19 Non-Emergency Regulation Fact Sheet https://www.dir.ca.gov/dosh/coronavirus/Non-Emergency-regs-summary.pdf
- Cal/OSHA Serious Injury Reporting website https://www.dir.ca.gov/dosh/report-accident-or-injury.html
- Cal/OSHA Serious Injury Reporting email address <u>caloshaaccidentreport@tel-us.com</u>





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