Welcome and Introduction

Goals of this session

- E-Reporting – What do we have to do
- Understand why occupational injury management is important
- Learn the elements of occupational injury management
- Gain a basic understanding of OSHA recordkeeping
- Learn about the resources available to assist in OSHA recordkeeping
Injury Tracking Application
Electronic Submission of Injury and Illness Records to OSHA

ANNOUNCEMENTS
Employers can now begin to electronically report their Calendar Year (CY) 2017 Form 300A data to OSHA. All covered establishments must submit the information by July 1, 2018. Employers can view their submitted CY 2016 Form 300A summary information, but they cannot edit or submit additional 2016 data on this website. Remember, not all establishments are covered by this requirement. To review which establishments need to provide their 2017 data, click here.

Covered establishments with 250 or more employees are only required to provide their 2017 Form 300A summary data. OSHA is not accepting Form 300 and 301 information at this time. OSHA announced that it will issue a notice of proposed rulemaking (NPRM) to reconsider, revise, or remove provisions of the "Improve Tracking of Workplace Injuries and Illnesses" final rule, including the collection of the Forms 300/301 data. The Agency is currently drafting that NPRM and will seek comment on those provisions.

Who: Establishments with 250 or more employees that are currently required to keep OSHA injury and illness records, and establishments with 20-249 employees that are classified in certain industries with historically high rates of occupational injuries and illnesses. Note that the following OSHA-approved State Plans have not yet adopted the requirement to submit injury and illness reports electronically: CA, MD, MN, SC, UT, WA and WY. Establishments in these states are not currently required to submit their summary data through the ITA. Similarly, state and local government establishments in IL, ME, NJ, and NY are not currently required to submit their data through the ITA. Contact information for each of the State Plans can be found at https://www.osha.gov/dssp/osp/states.html.

What: Covered establishments must electronically submit information from their 2017 OSHA Form 300A.

When: In 2018, covered establishments must submit information from their completed 2017 Form 300A by July 1, 2018. Beginning in 2019 and every year thereafter, covered establishments must submit the information by March 2.

How: OSHA will provide a secure website that offers three options for data submission. First, users will be able to manually enter data into a web form. Second, users will be able to upload a CSV file to process single or multiple establishments at the same time. Last, users of automated recordkeeping systems will have the ability to transmit data electronically via an API (application programming interface). We will provide status updates and related information here as it becomes available.

Does not apply in CA

Electronic Reporting Fed-OSHA
Log 300 Recording and Reporting Occupational Injuries and Illnesses, with Anti-Discrimination Provisions

Effective January 1, 2017, employers in states regulated by federal OSHA were required to electronically submit Log 300 records of injuries and illnesses. The electronic reporting requirements, along with the incorporation of an existing statutory prohibition on retaliating against employees for reporting work-related injuries or illnesses, were added to federal OSHA’s recording and reporting regulations found in the Code of Federal Regulations, title 29, part 1904.

California employers are not required to follow the new requirements and will not be required to do so until “substantially similar” regulations go through formal rulemaking, which would culminate in adoption by the Director of the Department of Industrial Relations and approval by the Office of Administrative Law.

Cal/OSHA drafted a proposed rulemaking package to conform to the revised federal OSHA regulations by amending the California Code of Regulations, title 8, sections 14300.35, 14300.36, and 14300.41. The package is currently under review within the Administration.
Why is Occupational Injury Management Important

• Assures appropriate medical care for injured worker
• Provides early/initital diagnosis and prognosis
• Gives clear understanding of work limitations
• Establishes an agreed upon treatment plan
Elements of occupational injury management

- Designate occupational medical providers upfront
  - General providers and specialists
- Understand the limitations of field first-aid treatment
- Establish who is responsible to accompany injured worker(s) to the medical provider
- Establish clear injury reporting criteria
- Ensure an appropriate investigation is conducted
- Understand the difference between OSHA recordable and compensable classifications
• Common injury and illness classifications help ensure consistent reporting levels
  • First-aid treatment (non-recordable)
  • First-aid by professional (non-recordable)
  • Compensable / non-recordable
  • Non-occupational (non-recordable)
  • Medical treatment (OSHA recordable)
  • Restricted work (OSHA recordable)
  • Lost time (OSHA recordable)
  • Fatalities (OSHA recordable)
## OSHA 300 & 300A

### Appendix A

#### Log of Work-Related Injuries and Illnesses

<table>
<thead>
<tr>
<th>Case No.</th>
<th>Employee Name</th>
<th>Job Title</th>
<th>Date of Injury or Illness</th>
<th>Description of Injury or Illness</th>
<th>Mode of Occurrence</th>
<th>Initial Date of Injury or Illness</th>
</tr>
</thead>
<tbody>
<tr>
<td>10001</td>
<td>John Doe</td>
<td>Worker</td>
<td>01/01/2023</td>
<td>Sprained wrist</td>
<td>Hit by moving part</td>
<td>01/01/2023</td>
</tr>
<tr>
<td>10002</td>
<td>Jane Smith</td>
<td>Supervisor</td>
<td>01/02/2023</td>
<td>Headache</td>
<td>Overexertion</td>
<td>01/02/2023</td>
</tr>
</tbody>
</table>

### Appendix B

#### Annual Summary of Work-Related Injuries and Illnesses

- **Number of Cases**
  - Total number of cases: 2
  - Total number of cases with days away from work: 1
  - Total number of cases with restricted or transferred work: 1
- **Number of Days**
  - Total number of days away from work: 3
  - Total number of days of job transfer or restriction: 2

**Post this Annual Summary from February 1 to April 30 of the year following the year covered by the form.**
**Cal/OSHA Form 301**

**Appendix C**

**Injury and Illness Incident Report**

This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with Log of Work-Related Injuries and Illnesses and the accompanying Annual Summary, these forms help the employer and Cal/OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive 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 instructions and information asked for on this form. According to CCR Title 8 Section 14300.33 Cal/OSHA’s recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

### Information about the employee

1. Full Name: [ ]
2. Street: [ ]
3. City: [ ]
4. State: [ ]
5. ZIP: [ ]
6. Date of birth: [ ]
7. Sex: [ ] Male [ ] Female

### Information about the case

10. Case number from the log: [ ]
11. Date of injury or illness: [ ]
12. Time employee began work: [AM/PM]
13. Time of event: [AM/PM]
14. What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. Examples: “climbing a ladder while carrying roofing materials,” “spraying chlorine from hand sprayer,” “dally computer key entry.”
15. What happened? Tell us how the injury occurred. Examples: “When ladder slipped on wet floor, worker fell 20 feet”; “Worker was sprayed with chlorine when gauntlet broke during replacement”; “Worker developed weakness in wrist over time.”
16. What were the injury or illness? Tell us the part of the body that was affected and how it was affected; be more specific than “burn,” “pain,” or “numb.” Examples: “strained back,” “chemical burns,” “nerve pain,” “generalized weakness,” “generalized weakness,” “generalized weakness.”
17. What object or substance directly harmed the employee? Examples: “concrete floor,” “chlordane,” “radiated area.” If this question does not apply to the incident, leave it blank.
18. Did employee receive first aid from a health care provider at the worksite? [ ] Yes [ ] No
19. Did employee receive first aid from an independent health care provider? [ ] Yes [ ] No
20. If the employee died, when did death occur? Date of death: [ ]

**OSHA 301 or equivalent**
OSHA Recordkeeping Rule

- Purpose: §14300
- Scope: §14300.1 & §14300.2
- Forms and Recording Criteria: §§14300.4 – 14300.29
- Other Requirements: §§14300.30 – 14300.38
- Reporting to Government: §§14300.39 – 14300.42
- Transition from Formal Rule: §§14300.43 – 14300.45
- Definitions: §14300.46
• Applies to certain low-hazard businesses in retail, services, finance, insurance or real estate sectors (public or private sector)
  • Partial exemption based on the Standard Industry Code of each establishment, not on the entire company

• In the same company, some establishments may be required to keep records and some may not
Covered employers must record each fatality, injury or illness that is:

- Work-related;
- A new case; and
- Meets one or more of the general (§14300.7) or specific (§§14300.8 – 14300.12) recording criteria.
• A case is “work-related” if an event or exposure in the work environment:
  • Caused or contributed to the injury or illness; or
  • Significantly aggravated a pre-existing injury or illness

• Work-relatedness is presumed unless an exception in §14300.5(b)(2) applies
• “Work environment” means the establishment and other locations where an employee works or is present as a condition of employment.

• Work environment includes the:
  - Physical location of work; and
  - Equipment or materials used during the work.
An injury or illness is not work related if caused by:

- Voluntary participation in a wellness program, or a medical, fitness or recreational activity
- Eating, drinking or preparing food or drink for personal consumption
- Performing personal tasks (unrelated to employment) outside assigned working hours
- Personal grooming or self-medication for a non-work-related condition
- Intentional, self-inflicted act

14300.5(b)(2) - Work-Relatedness Exceptions
• Motor vehicle accident in a parking lot or on an access road during commute
• Common cold or flu
• Symptoms surfacing at work due solely to a non-work-related event or exposure
• Employee being present in the work environment as a member of the general public
• Mental illness (unless the employee provides an opinion of a qualified healthcare provider that the employee has a mental, work-related illness)

14300.5(b)(2) - Work-Relatedness Exceptions (con’t)
A “pre-existing condition” is an injury or illness that resulted solely from a non-work-related event or exposure occurring outside the work environment.
A pre-existing injury or illness is “significantly aggravated” when an event or exposure in the work environment results in any of the following, which would not have occurred but for the occupational event or exposure:

- Death
- Loss of consciousness
- One or more days away from work
- Restricted work activity
- Job transfer
- Medical treatment or a change in medical treatment
• An injury or illness that occurs while an employee is traveling is work-related if it occurs while the employee was engaged in work activities in the interest of the employer.

Examples:
• Entertainment for the purpose of transacting, discussing or promoting business at the direction of the employer.
• Traveling to or from customer contacts.
• Conducting job tasks.
An injury or illness that occurs while an employee is traveling is not work-related if the employee:

- Detours for personal reasons that are not work-related; or
- Establishes a temporary residence (e.g., checks into a hotel) and performs activities that are not in the interest of the employer.
An injury or illness is a new case if the employee has:

- Not previously experienced a recorded injury or illness of the same type that affects the same part of the body; or
- Previously experienced a recorded injury or illness of the same type that affects the same part of the body, but recovered completely; and
- An event or exposure in the work environment caused the signs / symptoms to reappear

14300.6(a) - Determination of New Cases
• Recurring symptoms of a chronic illness are not new cases (e.g., cancer, asbestosis, silicosis)

• Each episode caused by a new event or exposure in the work environment is a new case (e.g., occupational asthma, skin disorders)

• If medical advice is sought to determine if an injury or illness is a new case or a recurrence or an existing condition, the employer must follow the medical advice

14300.6(a) - Determination of New Cases
• An injury or illness is recordable (Cal/OSHA Form 300) if it results in one or more of the following (as defined in the regulation):
  • Death
  • Days away from work
  • Restricted work
  • Transfer to another job
  • Medical treatment beyond first-aid
  • Loss of consciousness
  • Significant injury or illness diagnosed by a licensed physician or other healthcare provider
• Mark the “days away from work” column
  • Enter number of calendar days
  • Exclude the day of injury or illness
  • Cap the total days away at 180 calendar days
  • Count the number of calendar days the employee was unable to work regardless of whether the employee was scheduled to work those days (e.g., weekends, holidays, vacation days)
• If an employee becomes ill on Friday and returns to work on Monday and was not scheduled to work the weekend, count the weekend only if a physician or other licensed healthcare provider indicates that the employee should not have worked those days.

• If an injury or illness occurs the day before scheduled time off (e.g., holiday, planned vacation, temporary plant closing), count the days of scheduled time off only if a medical opinion indicates that the employee should not have worked those days.
If a licensed healthcare provider recommends that the employee:

- Stay home but s/he comes to work anyway, count the days away from work in the medical recommendation and record them on the Cal/OSHA Form 300
- Return to work but s/he stays home, end the count of days away from work on the date the medical recommendation states the employee should return to work

If two or more recommendations from licensed healthcare providers exist, decide which is the most authoritative and record the days away from work based on that recommendation

14300.7(b)(3) - Days Away Cases
• If employee leaves the company due to:
  • Retirement or a reason unrelated to the injury or illness, stop the days away from work count
  • An injury or illness that occurred at the worksite, estimate the total number of days away from work
If a case occurs in one year but results in days away in the next year, record the injury or illness once:

- Count the number of calendar days away for the year when the injury or illness occurred
- If the employee is still away, estimate the total number of calendar days the employee is expected to be away and report in the year the injury or illness occurred
  - Use this number for the annual summary
  - Update the initial log entry when the day count is known or reaches the 180-day cap
Restricted work occurs when:

- The employer, on the recommendation of a licensed healthcare provider, keeps the employee from:
  - Performing one or more “routine functions” of the job (i.e., work activities regularly performed at least once per week); or
  - Working a full workday

- Restricted work days do not include the day of the injury or illness
• If the healthcare provider’s recommendations are vague, ask if the employee can:
  • Perform all routine job functions; and
  • Work the full assigned work shift

• Then, record the injury/illness as a restricted work case if:
  • The answer to either question above is no; or
  • Clarifying information cannot be obtained from the healthcare provider
“Job transfer” means an injured or ill employee is assigned to a job other than their regular job for at least a part of a workday

- Under “Remained at work”, mark the job transfer or restricted workdays column
- Count just like days away from work
- Stop counting the number of days of job transfer if:
  - Job is permanently modified to eliminate the routine functions the employee was restricted from performing; and
  - Employee is permanently assignment to this modified job
- Do not count the day the injury or illness occurred
- Count at least one day
“Medical treatment beyond first-aid” means the management and care of a patient to combat disease or disorder, not including:

- Visits to licensed healthcare provider solely for observation or counseling
- Diagnostic procedures (x-rays, blood tests, prescription medications used solely for diagnosis)
- First-aid (as defined in the regulation)

14300.7(b)(5) – Medical Treatment Beyond First Aid
• “First-aid” means using:
  • Non-prescription medication at nonprescription strength
  • Wound coverings, gauze pads, butterfly bandages, Steri-Strips
  • Hot or cold therapy
  • Non-rigid means of support
  • Temporary immobilization devices (backboards; c-collars)
  • Eye patches
  • Finger guards
  • Massages

• Removing foreign bodies and splinters by irrigation, tweezers, cotton swabs or other simple means
• Removing foreign bodies from the eye using only irrigation or a cotton swab
• Administering Tetanus immunizations
• Cleaning, flushing, or soaking surface wounds
• Drilling of fingernail or toenail, draining fluid from blister
• Drinking fluids for heat stress
Medical treatment beyond first-aid must be recorded on Cal/OSHA Form 300:

• Under “Remained at work”, mark “Other recordable cases” (column J) only if the work-related injury or illness did not result in:
  • Death;
  • Days away from work; or
  • A job transfer or restriction

• Even if an employee does not follow the medical treatment recommended by a licensed healthcare provider

14300.7(b)(5) – Medical Treatment Beyond First Aid
Non-prescription medications include:

- Ibuprofen (Advil) < 467 mg
- Naproxen Sodium (Aleve) < 220 mg
- Diphenhydramine (Benadryl) < 50 mg
- Ketoprofen < 25 mg
- IV fluids = OSHA recordable medical treatment

- Surgical glue is OSHA recordable medical treatment
- Oxygen is first-aid if only for precautionary measures; OSHA recordable medical treatment if symptoms are present
- Loss of consciences is OSHA recordable
- Broken teeth are OSHA recordable
• **Second Opinions**: If a physician or other licensed healthcare professional recommends medical treatment, days away from work or restricted work activity as a result of a work-related injury or illness can the employer decline to record the case based on a contemporaneous second provider’s opinion that the recommended medical treatment, days away from work or work restriction are unnecessary, if the employer believes the second opinion is more authoritative?

Yes. However, once medical treatment is provided for a work-related injury or illness, or days away from work or work restriction have occurred, the case is recordable. If there are conflicting contemporaneous recommendations regarding medical treatment, or the need for days away from work or restricted work activity, but the medical treatment is not actually provided and no days away from work or days of work restriction have occurred, the employer may determine which recommendation is the most authoritative and record on that basis. In the case of prescription medications, Cal/OSHA considers that medical treatment is provided once a prescription is issued.

• **Minor CTDs and Recordability**

Does the employer have to record a work-related injury and illness, if an employee experiences minor musculoskeletal discomfort, the health care professional determines that the employee is fully able to perform all of his or her routine job functions, but the employer assigns a work restriction to the injured employee?

A case would not be recorded under section 14300.7(b)(4) if 1) the employee experiences minor musculoskeletal discomfort, and 2) a health care professional determines that the employee is fully able to perform all of his or her routine job functions, and 3) the employer assigns a work restriction to that employee for the purpose of preventing a more serious condition from developing. If a case is or becomes recordable under any other general recording criteria contained in section 14300.7, such as medical treatment beyond first aid, a case involving minor musculoskeletal discomfort would be recordable.

1Taken from Cal-OSHA FAQ’s January 2005
Hearing loss must be recorded if employee’s audiogram reveals:

- Work-related Standard Threshold Shift of 25 decibels or more (averaged at 2000, 3000 and 4000 hertz) above audiometric zero in the same ear
- Age adjustment is allowed
- Determine if case is work-related using 8CCR 14300.5
- Check “Other Illnesses” on Cal/OSHA Form 300 (or equivalent)
Employer Records of Occupational Injury and Illness

Getting Started

Additional Resources
Reporting

• No exemptions; all employers must report:
  • Immediately any serious injury, illness or death occurring in a place of or in connection with employment to the Division of Occupational Safety and Health as required by Title 8, Section 342; and
  • Occupational injury or illness to the Division of Labor Statistics and Research
From 8CCR330 and 8CCR342

Every employer shall report immediately by telephone or telegraph to the nearest District Office of the Division of Occupational Safety and Health any serious injury or illness, or death, of an employee occurring in a place of employment or in connection with any employment. Immediately means as soon as practically possible but not longer than 8 hours after the employer knows or with diligent inquiry would have known of the death or serious injury or illness. If the employer can demonstrate that exigent circumstances exist, the time frame for the report may be made no longer than 24 hours after the incident.

Serious Injury/Illness

Serious injury or illness" means any injury or illness occurring in a place of employment or in connection with any employment which requires inpatient hospitalization for a period in excess of 24 hours for other than medical observation or in which an employee suffers a loss of any member of the body or suffers any serious degree of permanent disfigurement, but does not include any injury or illness or death caused by the commission of a Penal Code violation, except the violation of Section 385 of the Penal Code, or an accident on a public street or highway.

Whenever a state, county, or local fire or police agency is called to an accident involving an employee covered by this part in which a serious injury, or illness, or death occurs, the nearest office of the Division of Occupational Safety and Health shall be notified by telephone immediately by the responding agency.

Reporting Injuries & Illnesses to Cal-OSHA