Occupational Safety and Health Administration (OSHA) Recordkeeping and North American Industry Classification System (NAICS) Determination
Objectives

After this training you will be able to:

• Explain the history of OSHA recordkeeping
• Identify recordable and non-recordable incidents
• Maintain accurate injury and illness records
• Identify requirements for NAICS code determination
• Compare Total Case Incident Rate (TCIR) and Days Away, Restricted, and Transferred (DART) case rate.
OSHA Recordkeeping History

- 1971 – Recordkeeping required
- January 19, 2001 – New rule published
- January 1, 2002 – Effective date
Importance of Recordkeeping

• Trend Analysis for the site
• Outreach/intervention by OSHA
• Assists BLS
  – Generates statistics on Injury/Illness
• VPP application requirement.
OSHA Injury and Illness Recordkeeping

5 Step Process

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Step 2</th>
<th>Step 3</th>
<th>Step 4</th>
<th>Step 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did the employee experience an injury or illness?</td>
<td>Is the injury or illness work-related?</td>
<td>Is the injury or illness a new case?</td>
<td>Does the injury or illness meet the general criteria or the application to specific cases?</td>
<td>Record the injury or illness.</td>
</tr>
</tbody>
</table>

Key References:

- 29 CFR 1904
- OSHA Recordkeeping Handbook
- Both available from [www.osha.gov](http://www.osha.gov)
Identifying Work Related Incidents

- Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the workplace, unless the case fits one of the exceptions allowed by the paragraph 1904.5 of the standard.

- If an event or exposure in the work environment significantly aggravates a pre-existing condition, it is also considered work-related.

- OSHA Recordkeeping and Workers’ Compensation rules are **NOT** identical. Not all compensable cases are recordable.
Recordable Incidents

- Recordable work-related injuries and illnesses are:
  - Death
  - Days away from work
  - Restricted work or transfer to another job
  - Medical treatment beyond first aid
  - Loss of consciousness
  - Standard Threshold Shift in hearing in one or both ears
  - Musculoskeletal disorders that require medical treatment
  - Diagnosis of a significant injury/illness by a physician or other licensed health care professional.
Non-Recordable Incidents

- The following are not considered recordable:
  - Visits to the doctor or health care professional for observation or counseling only
  - Diagnostic procedures
  - Colds, flu, and blood donations
  - First aid:
    - OSHA has published an inclusive list of first aid measures
    - If a procedure is not on the list, it is considered “medical treatment.”
First Aid

• First Aid consists of the following:
  – Using a non-prescription medication at nonprescription strength
  – Administering tetanus immunizations
  – Cleaning, flushing or soaking wounds on the surface of the skin
  – Using wound coverings such as bandages, gauze pads, or butterfly bandages
  – Using hot or cold therapy.
First Aid

• Other injuries considered First Aid are:
  – Using any non-rigid means of support, such as:
    • Elastic bandages
    • Wraps
    • Non-rigid back belts, etc.
  – Using temporary immobilization devices while transporting an accident victim
  – Drilling of a fingernail or toenail to relieve pressure
  – Draining fluid from a blister.
• Also:
  – Using eye patches
  – Removing foreign bodies from the eye using only irrigation or a cotton swab
  – Removing splinters or foreign materials from areas other than the eye by:
    • Irrigation
    • Tweezers
    • Cotton swabs
    • Other simple means.
First Aid

• Finally:
  – Using finger guards
  – Using massages
  – Drinking fluids for relief of heat stress.
OSHA Forms

- OSHA Form 300, Log of Work-Related Injuries and Illnesses
- OSHA Form 300A, Summary of Work-Related Injuries and Illnesses
- OSHA Form 301, Injury and Illness Incident Report
# OSHA Form 301

## 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 the Log of Work-Related Injuries and Illnesses and the accompanying summary, these forms help the employer keep OSHA 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 information asked for on this form.

According to Public Law 91-506 and 29 CFR 1904.6, employers 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

<table>
<thead>
<tr>
<th>1. Job title</th>
<th>2. Full name</th>
<th>3. Date of injury or illness</th>
<th>4. Date of report</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Information about the physician or other health care professional

<table>
<thead>
<tr>
<th>5. Name of physician or other health care professional</th>
<th>6. Facility</th>
<th>7. Place where injury or illness was reported</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Information about the case

<table>
<thead>
<tr>
<th>8. Was employee treated in an emergency room?</th>
<th>9. Was employee hospitalized overnight or on weekends?</th>
<th>10. Date of death</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>Yes</td>
<td></td>
</tr>
</tbody>
</table>

**Attention:** This form contains information relating to employee health and must be used in a manner that preserves the confidentiality of employees to the extent possible while the information is being used for occupational safety and health purposes.
Mishap/Injury Reports

January 14, 2009, a warehouse worker was working in receiving opening boxes with a pocket knife. She cut the palm of her left hand which required five stitches, and ibuprofen at 800MG. She was released to return to work where she was assigned light duty for 5 days.

April 1, 2009, an office administrator slipped on frayed carpet at the threshold to her office and bruised her hip. She reported to the clinic and was given a prescription for pain and returned to work the next day.

July 20, 2009, a fuel truck operator reported to his supervisor that he had developed a rash on both forearms. Employee reported to base clinic and was diagnosed with dermatitis that was attributed to handling fuels and lubricants. Employee was transferred to a non-fuel related job for two weeks and was given over the counter skin cream.

October 16, 2009, an airplane mechanic smashed left thumb while removing an engine from an aircraft. Employee reported to the base clinic where an x-ray revealed a broken finger causing him to miss 15 days of work.
OSHA's Form 300 (Rev. 01/2004)
Log of Work-Related Injuries and Illnesses

You must record information about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an injury and illness incident report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you're not sure whether a case is recordable, call your local...

<table>
<thead>
<tr>
<th>Case No.</th>
<th>Employee's Name</th>
<th>Job Title</th>
<th>Date of Injury or Illness</th>
<th>Where the event occurred</th>
<th>Injury or Illness, Parts of Body Affected, and Object/Substance that Directly Injured or Made Person Ill</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Worker one</td>
<td>Laborer</td>
<td>1/12/03</td>
<td>Warehouse Building 1430</td>
<td>Palm of left hand cut requiring stitches</td>
</tr>
<tr>
<td></td>
<td>Worker two</td>
<td>Office Adm</td>
<td>4/1/03</td>
<td>Administration Building 1</td>
<td>Bruised hips, received RX</td>
</tr>
<tr>
<td></td>
<td>Worker three</td>
<td>Driver</td>
<td>7/20/03</td>
<td>Loading Dock</td>
<td>Dermatitis on both forearms</td>
</tr>
<tr>
<td></td>
<td>Worker four</td>
<td>Mechanic</td>
<td>10/16/03</td>
<td>Hanger 3</td>
<td>Fractured left middle finger</td>
</tr>
</tbody>
</table>

Public reporting burden for this collection of information is estimated to average 14 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.
OSHA’s Form 300 (Rev. 01/2004)

Log of Work-Related Injuries and Illnesses

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you’re not sure whether a case is recordable, call your local OSHA office for help.

<table>
<thead>
<tr>
<th>Identify the person</th>
<th>Describe the case</th>
<th>Classify the case</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A) Case no.</td>
<td>(B) Employee’s name</td>
<td>(E) Date of injury or onset of illness</td>
</tr>
<tr>
<td>(C) Job title (e.g., Loader)</td>
<td>(D) Where the event occurred (e.g., Loading dock north end)</td>
<td>(F) Describe injury or illness, parts of body affected, and objects/substances that directly injured or made person ill (e.g., Second degree burn on right forearm from arcitus torch)</td>
</tr>
</tbody>
</table>

Classify the case

CHECK ONLY ONE box for each case

Based on the most serious outcome for each case:

- Days away from work
- Restricted activity
- Other record-keeping case

Enter the number of days injured or ill worker was:

- Away from work
- On job transfer or restriction

Check the “injury” column or choose one type of illness:

- Fatality
- Permanent total disability
- Temporary total disability
- Temporary partial disability
- Medical treatment
- Lost work time
- Resulting in death
- Other

Page totals:

Be sure to transfer these totals to OSHA Form 301 before you post it.

TCIR (Total of columns H, I, and J)

DART (Total of columns H and I)
### Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

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 300A in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR Part 1904.35, in OSHA's recordkeeping rule, for further details on the access provisions for these forms.

#### Number of Cases

<table>
<thead>
<tr>
<th>Category</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of deaths</td>
<td>(6)</td>
</tr>
<tr>
<td>Total number of cases away from work</td>
<td>(4)</td>
</tr>
<tr>
<td>Total number of cases with job transfer or restriction</td>
<td>(1)</td>
</tr>
<tr>
<td>Total number of cases, recordable</td>
<td>(4)</td>
</tr>
</tbody>
</table>

#### Number of Days

<table>
<thead>
<tr>
<th>Category</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of days away from work</td>
<td>(K)</td>
</tr>
<tr>
<td>Total number of days of job transfer or restriction</td>
<td>(L)</td>
</tr>
</tbody>
</table>

#### Injury and Illness Types

<table>
<thead>
<tr>
<th>Category</th>
<th>Total Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Injuries</td>
<td>(4) Poisonings</td>
</tr>
<tr>
<td>(2) Skin disorders</td>
<td>(5) Hearing loss</td>
</tr>
<tr>
<td>Respiratory conditions</td>
<td>(6) All other illnesses</td>
</tr>
</tbody>
</table>

### Establishment Information

<table>
<thead>
<tr>
<th>Year of establishment name</th>
<th>____________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
<td>___________________</td>
</tr>
<tr>
<td>City</td>
<td>___________________</td>
</tr>
<tr>
<td>State</td>
<td>___________________</td>
</tr>
<tr>
<td>ZIP</td>
<td>____________</td>
</tr>
</tbody>
</table>

Industry description (e.g., Manufacturer of motor truck trailers) | ___________________
Standard Industrial Classification (SIC), if known (e.g., 3715) | ____________
North American Industrial Classification (NAICS), if known (e.g., 336212) | ____________

### Employment Information

If you don't have these figures, see the worksheet on the back of this page to estimate.

| Annual average number of employees | ____________ |
| Total hours worked by all employees last year | ____________ |

### Sign Here

I hereby certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company signature: ___________________  Date: ____________

Phone: ___________________
### OSHA's Form 300A (Rev. 01/2004)

**Summary of Work-Related Injuries and Illnesses**

All establishments covered by Part 1904 must complete this Summary page, even if no injury or illness occurred during the year. Remember to review the Log to verify that the entries are correct.

Using the Log, count the individual entries you make for each category. Then write the total below, making sure you've added the entries from every page of the Log. If you had no cases write "R".

Employees, former employees, and their representatives have the right to review the OSHA Form 300A and injury logs. They also have limited access to the OSHA Form 300 and injury logs. See 29 CFR 1904.25 in OSHA's Record Keeping rule, for further details on the access provisions for these logs.

### Number of Cases

<table>
<thead>
<tr>
<th>Total number of deaths</th>
<th>Total number of cases with days away from work</th>
<th>Total number of cases with job transfer or restriction</th>
<th>Total number of other recordable</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>(G)</td>
<td>(H)</td>
<td>(I)</td>
</tr>
<tr>
<td>1</td>
<td>(J)</td>
<td></td>
<td>1</td>
</tr>
</tbody>
</table>

### Number of Days

<table>
<thead>
<tr>
<th>Total number of days away from work</th>
<th>Total number of days of job transfer or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>15</td>
<td>19</td>
</tr>
<tr>
<td>(K)</td>
<td>(L)</td>
</tr>
</tbody>
</table>

### Injury and Illness Types

<table>
<thead>
<tr>
<th>Total number of...</th>
<th>(M)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Injury</td>
<td>3</td>
</tr>
<tr>
<td>(2) Skin Disorder</td>
<td>1</td>
</tr>
<tr>
<td>(3) Respiratory Condition</td>
<td>0</td>
</tr>
<tr>
<td>(4) Poisoning</td>
<td>0</td>
</tr>
<tr>
<td>(5) Hearing Loss</td>
<td>0</td>
</tr>
<tr>
<td>(6) All Other Illnesses</td>
<td>0</td>
</tr>
</tbody>
</table>

---

**Establishment Information**

- **Your establishment name**: Bygally Airbase
- **Street**: 1234 S telescope Lane
- **City**: Anywhere
- **State**: USA
- **Zip**: 
- **Industry description**: (e.g., Manufacturer of motor truck trailers)
  - DeDrug store firefighters
- **Standard Industrial Classification (SIC), if known**: (e.g., 3111)
  - North American Industry Classification (NAICS), if known: (e.g., 334212)

**Employment Information**

- **Annual average number of employees**: 1,600
- **Total hours worked by all employees last year**: 3,000,000

---

**Sign here**

- **Mr. Bigwig**

**Knwoingly falsifying this document may result in a fine.**

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

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Post this Summary page from February 1 to April 30 of the year following the year covered by the entries.
Annual Summary – OSHA 300A

- Federal establishments certification
  - The senior establishment management official
  - The head of the Agency for which the senior establishment management official works, or
  - Any management official who is in the direct chain of command between the senior establishment management official and the head of the agency head
- Must post for 3-month period from February 1 to April 30 of the year following the year covered by the summary
Calculation for TCIR

- **3-Year TCIR Calculation:** add the number to calculate 3-year TCIR of all recordable injuries and illnesses for the past 3 years [combined total of columns H, I, and J from the OSHA 300 log] and divide by total hours worked for those years, then multiply the result by 200,000.
Calculations for DART

- **3-year DART Rate Calculation:**
  To calculate 3-year DART rate, add the number of all recordable injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer [combined total of columns H and I from OSHA 300 log], divide by total hours worked for those years, then multiply x 200,000.
E-VPP Tool Injury and Illness Rates Entry

- Only Site Coordinators and higher can enter Injury and Illness Rates
- Click the Site tab on the Site Menu

Click the Site Tab

- Manage Action Plan
- **View by Assignment** [ Completed (89) | Assigned (0) | Not Assigned (154) ]
- **View All** [ Files (0) | Links (0) ]
- Sort & Filter Action Plan
- Search Action Plan
E-VPP Tool Injury and Illness Rates Entry

Click the Manage Yearly Site Injury & Illness Rates

- View/Edit Site Information
- Manage Yearly Site Injury & Illness Rates
- Mock Audit Results
- Manage Site Notes
- Manage Consultant Notes (action-specific)
- Deactivate Site
E-VPP Tool Injury and Illness Rates Entry

- To enter rates click the blue link under the title of Manage Yearly Site Injury & Illness Rates

Click Enter New Yearly Rates to enter new data

Manage Yearly Site Injury & Illness Rates

Enter New Yearly Rates
• Fill out chart with all pertinent information for the Injury and Illness Rates
For More Help

- OSHA’s Recordkeeping Page
- OSHA Regional Recordkeeping Coordinators
- DoD VPP Center of Excellence website [http://vppcx.org](http://vppcx.org)

Safety and Health Training
- Recordkeeping Decision Making Process
- OSHA Recordkeeping and NAICS Determination
- Recordkeeping and Reporting Occupational Injuries and Illnesses
There are two main VPP application requirements in regards to the NAICS Code:

- A VPP application requires a NAICS Code identification
- The site’s most recent 3-year combined TCIR and DART rates must be **below at least 1 of the 3** most recent years published BLS rates for the site’s NAICS Code
Primary Activity

• “Primary Activity” is the key to performing a NAICS Code search
• Identify the primary activity by:
  – Reviewing the installation’s primary mission, i.e., the reason the installation was built or the service provided to tenant activities
  – Determining the activity that utilizes the most employees
  – Determining the activity that generates the most revenue.
336411 Aircraft Manufacturing

This U.S. industry comprises establishments primarily engaged in one or more of the following: (1) manufacturing or assembling complete aircraft; (2) developing and making aircraft prototypes; (3) aircraft conversion (i.e., major modifications to systems); and (4) complete aircraft overhaul and rebuilding (i.e., periodic restoration of aircraft to original design specifications).

Cross-References.

- Establishments primarily engaged in manufacturing guided missiles and space vehicles are classified in U.S. Industry 336414, Guided Missile and Space Vehicle Manufacturing.
- Establishments primarily engaged in the repair of aircraft (except overhauling, conversion, and rebuilding) are classified in Industry 488190, Other Support Activities for Air Transportation; and
- Research and development establishments primarily engaged in aircraft R&D (except prototype production) are classified in Industry 541710, Research and Development in the Physical, Engineering, and Life Sciences.

<table>
<thead>
<tr>
<th>Go to:</th>
<th>No change 1997 to 2002</th>
<th>2002 NAICS to 1987 SIC</th>
<th>1997 Economic Census</th>
<th>Bridge Between 1997 NAICS and SIC</th>
<th>Corresponding Index Entries</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002 NAICS</td>
<td>1997 NAICS</td>
<td>1987 SIC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>336411</td>
<td>336411</td>
<td>3721</td>
<td></td>
<td></td>
<td>Aircraft conversions (i.e., major modifications to systems)</td>
</tr>
<tr>
<td>336411</td>
<td>336411</td>
<td>3721</td>
<td></td>
<td></td>
<td>Aircraft manufacturing</td>
</tr>
<tr>
<td>336411</td>
<td>336411</td>
<td>3721</td>
<td></td>
<td></td>
<td>Aircraft overhauling</td>
</tr>
<tr>
<td>336411</td>
<td>336411</td>
<td>3721</td>
<td></td>
<td></td>
<td>Aircraft rebuilding (i.e., restoration to original design specifications)</td>
</tr>
<tr>
<td>336411</td>
<td>336411</td>
<td>3721</td>
<td></td>
<td></td>
<td>Autogiros manufacturing</td>
</tr>
<tr>
<td>336411</td>
<td>336411</td>
<td>3721</td>
<td></td>
<td></td>
<td>Blimps (i.e., aircraft) manufacturing</td>
</tr>
</tbody>
</table>
# 2006 BLS Incidence Rate for Occupational Injuries/Illnesses

## TABLE 1. Incidence rates\(^1\) of nonfatal occupational injuries and illnesses by industry and case types, 2006 — Continued

<table>
<thead>
<tr>
<th>Industry(^2)</th>
<th>NAICS code(^3)</th>
<th>2006 Annual average employment(^4) (thousands)</th>
<th>Total recordable cases</th>
<th>Cases with days away from work, job transfer, or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>TCIR</td>
<td>DART</td>
</tr>
<tr>
<td>Motor vehicle seating and interior trim manufacturing</td>
<td>33636</td>
<td>61.8</td>
<td>8.4</td>
<td>5.4</td>
</tr>
<tr>
<td>Motor vehicle metal stamping</td>
<td>33637</td>
<td>95.9</td>
<td>9.5</td>
<td>4.9</td>
</tr>
<tr>
<td>Other motor vehicle parts manufacturing</td>
<td>33639</td>
<td>168.4</td>
<td>7.4</td>
<td>4.4</td>
</tr>
<tr>
<td>Motor vehicle air-conditioning manufacturing</td>
<td>336391</td>
<td>110.7</td>
<td>5.5</td>
<td>3.2</td>
</tr>
<tr>
<td>All other motor vehicle parts manufacturing</td>
<td>336399</td>
<td>156.8</td>
<td>7.5</td>
<td>4.5</td>
</tr>
<tr>
<td>Aerospace product and parts manufacturing</td>
<td>3364</td>
<td>467.3</td>
<td>4.2</td>
<td>2.2</td>
</tr>
<tr>
<td>Aerospace product and parts manufacturing</td>
<td>336411</td>
<td>219.0</td>
<td>4.4</td>
<td>2.6</td>
</tr>
<tr>
<td>Aircraft manufacturing</td>
<td>336412</td>
<td>83.4</td>
<td>3.9</td>
<td>1.7</td>
</tr>
<tr>
<td>Aircraft engine and engine parts manufacturing</td>
<td>336413</td>
<td>90.2</td>
<td>6.3</td>
<td>2.9</td>
</tr>
<tr>
<td>Other aircraft parts and auxiliary equipment</td>
<td>336414</td>
<td>53.7</td>
<td>1.2</td>
<td>0.6</td>
</tr>
<tr>
<td>Guided missile and space vehicle</td>
<td>336415</td>
<td>13.6</td>
<td>2.0</td>
<td>1.1</td>
</tr>
<tr>
<td>Guided missile and space vehicle propulsion unit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guided missile and space vehicle propulsion unit</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guided missile and space vehicle propulsion unit</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Guided missile and space vehicle propulsion unit</td>
<td></td>
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</tbody>
</table>

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\(^1\) Incidence rates are based on rates per 100 full-time equivalent employees.

\(^2\) See notes at end of table for a complete description of industries.

\(^3\) NAICS codes are from the North American Industry Classification System, 2007.

\(^4\) Average employment is the average of the number of employees each quarter.

\(^5\) Days away from work includes cases away for one or more days and work-related fatalities.
## Example Comparison of TCIR and DART

### Aircraft Manufacturing – NAICS 336411

<table>
<thead>
<tr>
<th>Year</th>
<th>Site Rate</th>
<th>Site Rate</th>
<th>BLS Data</th>
<th>BLS Rate</th>
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<tr>
<td>TCIR</td>
<td>DART</td>
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<td>DART</td>
<td></td>
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<td>5.5</td>
<td>2.4</td>
<td>2004</td>
<td>4.8</td>
<td>2.7</td>
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<td>2.9</td>
<td>2005</td>
<td>4.4</td>
<td>2.6</td>
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<td>4.3</td>
<td>2.2</td>
<td>2006</td>
<td>4.4</td>
<td>2.6</td>
</tr>
<tr>
<td>3-Year Combined</td>
<td>4.7</td>
<td>2.6</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Discussions with OSHA VPP Office

- Sites should initiate discussions concerning the appropriate NAICS Code with their Regional or Area OSHA VPP office early in the VPP preparation process.
In this training you learned about:

- The history of OSHA recordkeeping
- Recordable and non-recordable incidents
- Maintaining accurate injury and illness records
- Identifying requirements for NAICS code determination
- The Total Case Incident Rate (TCIR)
- The Days Away, Restricted, and Transferred (DART) case rate.
References

- Occupational Injury and Illness Recording and Reporting Requirements – Federal Register #66:5916-6135
- OSHA Forms for Recording Work-Related Injuries and Illnesses
  http://www.osha.gov/recordkeeping/new-osha300form1-1-04.xls
- Bureau of Labor Statistics
  http://www.bls.gov/iif/oshsum.htm
OSHA Recordkeeping Handbook
  http://www.osha.gov/Publications/recordkeeping/OSHA_3245_REVISED.pdf#search=%22OSHA%203245-09R%20202005%22
Knowledge Check

1. While some OSHA standards impose their own special recordkeeping requirements, the two key OSHA references for overall injury/illness recordkeeping requirements are:
   a. 29 CFR 1904
   b. 29 CFR 1910
   c. 29 CFR 1925
   d. OSHA Recordkeeping Handbook

2. Federal agencies have been required to maintain OSHA 300 logs since:
   a. 1982
   b. 1971
   c. 2005
   d. 2001
3. If an employee sustains an injury, and then returns to normal duties after receiving “first aid” treatment provided by base clinic personnel, the injury is not required to be recorded on the OSHA 300 log.
   a. True
   b. False
   c. It depends on the specific type of first aid treatment provided

4. For any given set of injury/illness cases recorded on a site’s OSHA 300 log, the site’s TCIR may be greater than its DART, but the DART can never be greater than the TCIR.
   a. True
   b. False
5. Under Workers Compensation Program rules, employees may only receive compensation for OSHA recordable injuries and illnesses.
   a. True
   b. False

6. A tenant command on a military installation is pursuing VPP recognition, but the installation as a whole is not. For purposes of applying to OSHA for VPP recognition, the tenant should select its NAICS code based on.
   a. The primary mission of the installation
   b. The primary mission of the tenant
   c. The combined mission of the installation and the tenant
   d. Neither – military commands always use NAICS 928110 (National Security)