



DEPARTMENT OF THE NAVY
THE ASSISTANT SECRETARY OF THE NAVY
(ENERGY, INSTALLATIONS AND ENVIRONMENT)
1000 NAVY PENTAGON
WASHINGTON DC 20350-1000

MAY 1 2015

Mr. Francis Yebesi
Director, Office of Federal Agency Programs
U.S. Department of Labor - OSHA
Directorate of Enforcement Programs
Office of Federal Agency Programs
Room N-3622
200 Constitution Avenue, N.W.
Washington, DC 20210

Dear Mr. Yebesi:

As the Department of the Navy (Navy and Marine Corps) Designated Agency Safety and Health Official, it is my pleasure to provide to you the Department of the Navy's Calendar Year 2014 Annual Report on Occupational Safety and Health in accordance with the requirements of Section 19(a)(5) of the Occupational Safety and Health Act [29 U.S.C. 668(a)(5)], and Section 1-201(1) of Executive Order (EO) 12196.

The Department of the Navy contact for this report is Mr. Paul Hanley, Deputy Assistant Secretary of the Navy for Safety, who can be reached at (703) 614-5179.

A handwritten signature in black ink, appearing to read "Dennis V. McGinn".

Dennis V. McGinn
DON Designated Agency
Safety and Health Official

Enclosures:
Report

Copy to:
ASD (EI&E)
DASN(S)
DASN(HR)
CNO (Code N09FB, N4)
CMC (Code SD)
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BUMED (M3F42)

**CY 2014 ANNUAL OCCUPATIONAL SAFETY & HEALTH REPORT TO THE SECRETARY OF LABOR
AGENCY NARRATIVE OF SELF-EVALUATION**

Name of Agency: Department of the Navy (Navy and Marine Corps)
Address: 1000 Navy Pentagon, Washington DC 20350
Number of federal civilian employees covered by this report: 193,721¹

	Name	Official Title	Telephone	E-mail
DASHO:	Honorable Dennis V. McGinn	Assistant Secretary of the Navy (Energy, Installations and Environment)		dennis.mcgin@navy.mil
Department of the Navy Safety Executive:	Mr. Paul Hanley	Deputy Assistant Secretary of the Navy (Safety)	(703) 614-5179	paul.w.hanley@navy.mil

I. ASSESSMENT OF OCCUPATIONAL SAFETY & HEALTH PROGRAM ACTIVITIES AND EVENTS.

a. Federal Government-wide and Presidential Initiatives.

- 1) Motor Vehicle Safety (MVS). The Department of the Navy (DON) follows traffic safety requirements and guidance found in Executive Orders 13043² and 13513³, Department of Defense (DoD) traffic safety policy⁴, and service-specific Navy⁵ and Marine Corps⁶ instructions. The Navy and Marine Corps use a multi-pronged approach to reduce the frequency and severity of motor vehicle mishaps. This approach includes MVS program reviews, centralized MVS program training, management, implementation, and enforcement, as well as increased data collection and analysis.

MVS program reviews occur at the installation, regional, and headquarters level and are included in the Naval Inspector General safety oversight reviews. Where safety gaps are identified, the responsible organization must develop a plan of action and milestones indicating how they will mitigate any MVS deficiencies identified through the oversight process.

Training and education represent a cornerstone of the MVS effort, with training requirements provided for specific vehicle type, initial and refresher training, a prescribed quantity of supervised driving experience, certification procedures, driving restrictions for operators

¹ https://www.osha.gov/dep/fap/statistics/fedrprgrms_stats15_1st.html; as of 31 December 2014

² Executive Order 13043, *Increasing Seat Belt Use in the United States*, April 16, 1997

³ Executive Order 13513, *Federal Leadership on Reducing Text Messaging While Driving*, October 1, 2009

⁴ DoDI 5100.04, *DoD Traffic Safety Program*, Change 1, April 2, 2010

<http://www.dtic.mil/whs/directives/corres/pdf/605504p.pdf>

⁵ OPNAVINST 5100.12J, *Navy Traffic Safety Program*, 26 June 2012

<http://doni.daps.dla.mil/Directives/05000%20General%20Management%20Security%20and%20Safety%20Services/05-100%20Safety%20and%20Occupational%20Health%20Services/5100.12J.pdf>

⁶ MCO 5100.19F, *Marine Corps Traffic Safety Program (DRIVESAFE)*⁶, 29 November 2011,

http://www.marines.mil/news/publications/Documents/MCO%205100_19F.pdf

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awaiting training and certification, frequency and content of refresher training, and remedial training for observed undesirable driving behaviors.

Navy and Marine Corps installation commands play a vital role in enforcing safe driving behaviors and compliance with all MVS policies. To reinforce safe driving and allow ample opportunity for driver compliance, MVS programs target high volume personnel traffic areas with promotional material and media, such as permanent road signs and electronic marquees posted at base entrances/exits. Programs may also provide telephone hotlines that allow third party individuals to report unsafe driving behaviors and conditions.

All personnel, military and civilian, convicted of serious moving traffic violations (e.g., reckless driving, impaired driving, speeding, following too closely, or failure to yield) or who have been found at fault in a traffic mishap while operating a government-owned/leased vehicle, on or off a DoD installation, must complete an approved driver improvement training course. Numerous safety stand-downs have also been held to discuss lessons learned from motor vehicle mishaps in an effort to prevent recurrence of similar mishaps.

The Marine Corps established, and provides to requesting commands, a Marine Corps Mobile Training Team (MTT), which is in great demand. In addition, the Marine Corps Ground Mishap Investigation Course is held approximately 8-10 times annually and still has an attendance waiting list. These courses have significantly heightened safety manager awareness of the importance of MVS and development of prevention strategies from both reactive and proactive hazard analysis through use of established mishap investigation techniques.

Navy and Marine Corps personnel, both fleet and non-fleet drivers, whether operating or riding in official vehicles, or in or on private conveyances, benefit equally from targeted national and service-specific driver safety campaigns as well as programs aimed at seatbelt use, distracted driving, driving under the influence, aggressive driving, etc. Examples of campaigns include the following:

- *National 3D (Drunk, Drugged, Driving)*
- *Keep What You've Earned*
- *That Guy*
- *Click-it-or-Ticket*
- *Drunk Driving over the Limit*
- *Drive Drunk Get Nailed*
- *Distracted Driving Month (April)*
- *Arrive Alive*
- *Alive at 25 (National Safety Council program)*

All drivers and passengers also benefit from regularly generated MVS messages from Navy and Marine Corps leadership that provide mishap statistics and safe driving tips seasonally and prior to holidays.

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The Marine Corps increased motor vehicle accident (MVA) reporting through expanded use of the Electronic Safety Applications Management System (ESAMS) and enhanced focus on mishap reporting procedures backed by strong leadership. These efforts resulted in a 37.5 % increase in MVA reporting.

Number of Motor Vehicle Accidents (MVAs)

The DON dedicates significant resources to reducing MVA risk to all its personnel. The Navy reports there were ten civilian Lost Time Cases (LTC) from injuries involving official motor vehicles and involved drivers, passengers or pedestrians. Of the Department's two services, the Marine Corps (with a tenth the number of civilians as the Navy), had the most successful year in this risk area. The Marine Corps experienced an overall 74% reduction in the number of civilian MVAs resulting in personal injury. Of the reported MVA mishaps, only six resulted in minor first aid-type injuries. Select Marine Force-level commands reported reductions in MVAs of up to 75% during calendar year (CY) 2014.

The Marine Corps enhanced emphasis on mishap reporting during CY 2014 began in 2012 with the establishment of a Marine Corps Installations Command (MCICOM). Similar to the Navy's Commander, Navy Installations Command, which is responsible for centralized implementation of the Navy's MVS program, MCICOM has quickly grown to be a risk reduction model within the Department. The continued growth and development of the MCICOM safety program includes MCICOM aggressive pursuit of VPP implementation with emphasis on employee involvement, adoption of ESAMS, enforced mishap reporting requirements, and training initiatives such as the MTT. This has resulted in the evolution of a fledgling safety program to an energized DON model safety program in a short period of time.

- 2) Protecting Our Workers and Ensuring Reemployment (POWER). In FY⁷ 2014, the DON improved in six out of seven POWER goals, but actually met the target for only Goals⁸ 5 and 6, and narrowly missed the Goal 1 target by 0.5%. Although the Department missed its target goals in four out of six categories, the trend continues in the right direction for all of them except for LTC Rate. The Department continues a relentless, collective, all-hands focus on safety within the organization. This aggressive approach has produced results—proven safety and health and worker case management policies, programs, initiatives, and dedication—that will continue to positively improve worker safety and health. A number of the safety and health policies, programs and initiatives are addressed in Appendix 4.

⁷ Although this report is a calendar year report, POWER data is provided by fiscal year and allows comparative trending to previous fiscal year data.

⁸ Protecting Our Workers and Ensuring Reemployment (POWER) Initiative Goals - <http://www.dol.gov/owcp/dfec/power/POWERMemofromSecretarySolis.pdf>

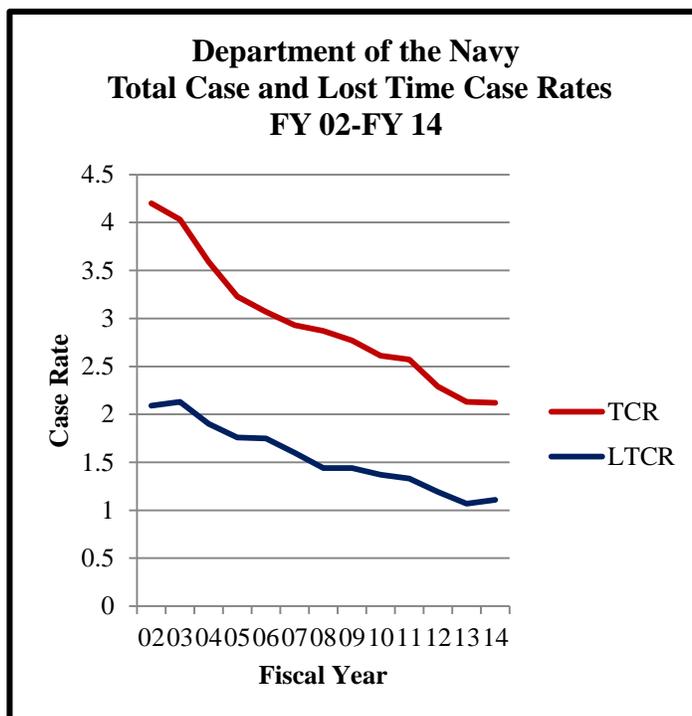
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Safety POWER Goals

Goal 1—Total Case Rate (TCR)

Goal 2—Lost Time Case Rate (LTCR)

The DON continues to show remarkable progress in reducing the TCR and LTCR over time. Since FY 2002, the Department has seen a 49.5% decline in TCR and a 46.9% decline in LTCR. Although the TCR continues to decline, LTCR increased 3.7% from FY 2013 missing the POWER goal by 4.5%. The decrease in LTCR rate of decline in FY 2014 was driven by a 14% increase in the Marine Corps LTCR, with the most frequent cause of injury attributed to the handling manual equipment category. The Marine Corps is assessing further potential causative and contributing factors driving this increase.



Mature and aggressive policies and programs, supported by strong leadership and an engaged workforce, and overseen by dedicated safety and occupational health professionals have significantly reduced the number and severity of personnel injuries and illnesses in the Department..

It is also important to note the potential impact of the aging workforce on the Department’s injury and illness rates. “The Bureau of Labor Statistics estimates that 25% of the workforce will be over 55 in 2020, representing one in four workers and up from one in every five workers two years ago. The elimination of mandatory retirement and the enactment of age discrimination laws accounts for some of this trend. Better life expectancy and health is also partly responsible. Many workers now choose to or must remain in the workforce longer than they had originally planned. And, there are many advantages to maintaining and hiring older workers. They generally have more experience, better relationships with co-workers, and report less stress at work. Older workers also have fewer non-fatal injuries than their younger counterparts. However, when an injury occurs, the injury tends to be more severe and it takes longer for the worker to recover.”⁹

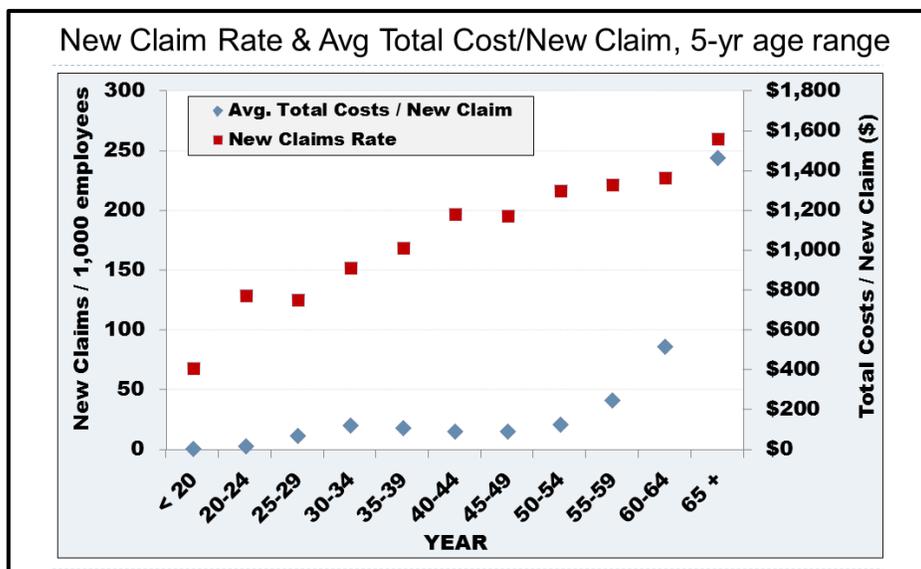
DON data bear this out. The Uniformed Services University of the Health Sciences (USUHS) analyzed 13 years (2002–2012) of DON workers’ compensation data. Although the number of

⁹ *Safer and Healthier at Any Age: Strategies for an Aging Workforce*; Centers for Disease Control and Prevention, National Institutes of Health, Total Worker Health Initiative; <http://blogs.cdc.gov/niosh-science-blog/2012/07/19/agingworkforce/>

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Navy and Marine Corps workers' compensation claims is declining over time, the analysis indicates claims submission rates and claims costs increases with age.

A civilian population of nearly 200,000, with a median age approaching 50, threatens increased liability for the Department over time. In the years ahead, the Department will need to collaborate closely with human resources and medical personnel, as well as other organizations to develop injury prevention strategies for its aging civilian workforce. Age will need to be assessed as a potential factor in injury and illness data analysis.



Goal 3—Analysis of Lost Time Injury and Illness Data

An analysis of injury and illness statistics for FY 2014 reveals a continuation in trends noted in previous annual reports, although the magnitude of decline in the TCR decreased and the LTCR increased 3.7% from FY 2013. The five categories contributing most to lost time were: Slip/Twist/Trip–Not Falling (25%); Handling Manual Equipment (24%); Falls (20%); Handling Tools or Instruments (15%); and Fall on Stairway or Steps (14%). Combined, Sprain/Strain Of Ligament, Muscle, Tendon, Not Back and Back Sprain/Strain, Back Pain, Subluxation, Intervertebral Disk (IVD) disorders account for 59% of injury types that resulted in lost time, followed by Pain/Swelling/Stiffness/Redness In Joint (14%); Fracture (14%); Traumatic Injury–Unclassified (Except Disease, Illness) (7%); and Contusion (6%). The 60% increase in Falls, as a significant cause of injury claims, may account for the more frequent categories of type of injury that lead to lost time, such as fractures, traumatic injury, and contusion.

Injury and Illness Case Management POWER Goals

- Goal 4—Timely Filing of Injury and Illness Notices
- Goal 5—Timely Filing of Wage Loss Claims
- Goal 6—Lost Production Days
- Goal 7—Return to Work

As noted above, the Department did not meet the targets for FY 2014 POWER Goals 4 and 7. DON policy¹⁰ directs Injury Compensation Program Administrators (ICPA) to use the Federal

¹⁰ Deputy Assistant Secretary of the Navy for Human Resources Memo, *Electronic Filing of Injury Compensation Claims*, 10 November, 2004,

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Employee Compensation Act Electronic Data Interchange to improve the case management process. Use of this tool is promoted during training of ICPAs, supervisors, and employees, as well as other promotional venues. Despite the progress in lowering the lost production day rate, there is still room for improvement. Reasons for missing the goal include failure to charge back compensation costs to the activity level (no monetary incentive to control costs) and lack of control once an employee enters treatment by the local medical community. The DON is in the process of testing the Department of Labor's (DOL) Employees' Compensation Operations & Management Portal system.

Current DON Efforts to Achieve Unmet POWER Goals

Efforts to meet POWER Goals 1 and 2 include use of workers' compensation claims data to more clearly target prevention areas. In 2013, USUHS completed an enumeration of millions of workers' compensation data and provided a comprehensive report of findings. The most significant finding was the potential impact of the aging workforce on injury and illness rates and the liability to the Department going forward. For purposes of this report, five years (FY 2010–FY 2014) of workers' compensation claims were analyzed to determine the “Top 5” Cause of Injury and Nature of Injury categories. There is a more detailed discussion included in paragraph b below.

In terms of case management, DON human resources personnel leverage a number of available policies, processes, and procedures to include return to work (RTW) programs. These programs provide restricted duty assignments, outreach programs to educate the local medical community about RTW options, use of DOL Office of Worker Compensation Program (OWCP) nurses for home visits, multi-disciplinary teams (HRO/ICPA, Medical, Safety, Line Management, etc.) to review cases, and access to DoD *Pipeline Reemployment Program*. Supervisors are encouraged to maintain contact with employees to ascertain their needs and to monitor their recovery. When limited or permanent medical restrictions render the employee unable to return to his or her position of record, safety managers (working with supervisors, ICPAs, and occupational health care providers) advise management on reassignment strategies to place the employee in an appropriate position.

Compliance with Executive Orders 13043 and 13513

Navy and Marine Corp traffic safety policies require all persons, military or civilian, operating or riding in any government motor vehicle, on or off base, to wear seatbelts. In addition, all persons, military or civilian, operating or riding in any private motor vehicle on a military installation must wear seatbelts. Seatbelt use is aggressively monitored and enforced on all Navy and Marine Corps installations. Installations conduct random and frequent seat belt surveys, which are a joint effort between safety, installation law enforcement, and transportation dispatch personnel. In addition, each major command is required to submit a consolidated annual seat belt survey report to the Commander, Naval Safety Center and the Director, Commandant of the

<http://www.public.navy.mil/donhr/Benefits/WorkersCompensation/Documents/Nov%2010,%202004.DASN%20%20Memo.%20Electronic%20Filing%20of%20Injury%20Compensation%20Claims.pdf>

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Marine Corps Safety Division. Compliance is near 100% for both services; violators are often visitors to the installation.

In the Marine Corps, the minimum penalty for non-compliance of the seatbelt policy on installations is in addition to standard local ticketing policies. The first violation carries a 30-day suspension of all base driving privileges (including POVs and GOVs) plus attendance at an approved remedial driver improvement class. The second violation earns a six month suspension of all driving privileges and a third violation results in a one year suspension of all base driving privileges.

Navy and Marine Corps MVS policies strictly prohibit texting and using cell phones while driving. Users are required to safely pull over to the side of the road and stop before answering or using a hand held device. Regular training and public awareness campaigns are conducted at all installations to raise traffic safety awareness. Specific awareness initiatives include base newspaper articles, safety stand-downs, and regular driver safety messages from supervisors. Policy related to handheld device use and compliance is highlighted prior to each holiday and liberty period, as well as the two required semiannual safety stand-downs/operational pauses held by each unit. The policy prohibiting use of hand held devices when operating a moving vehicle is also monitored and enforced during the seat belt surveys.

Navy and Marine Corps personnel operate an array of official vehicles including special purpose vehicles, tactical vehicles, passenger vehicles and vans, emergency vehicles, school buses, heavy equipment, etc. Operator training intensity varies with the type of vehicle and level of risk associated with its operation. For example, fleet passenger vehicle operators who drive passenger cars as their primary duty (8 or more hours a week) attend an approved course of driver improvement instruction at no cost to the individual.

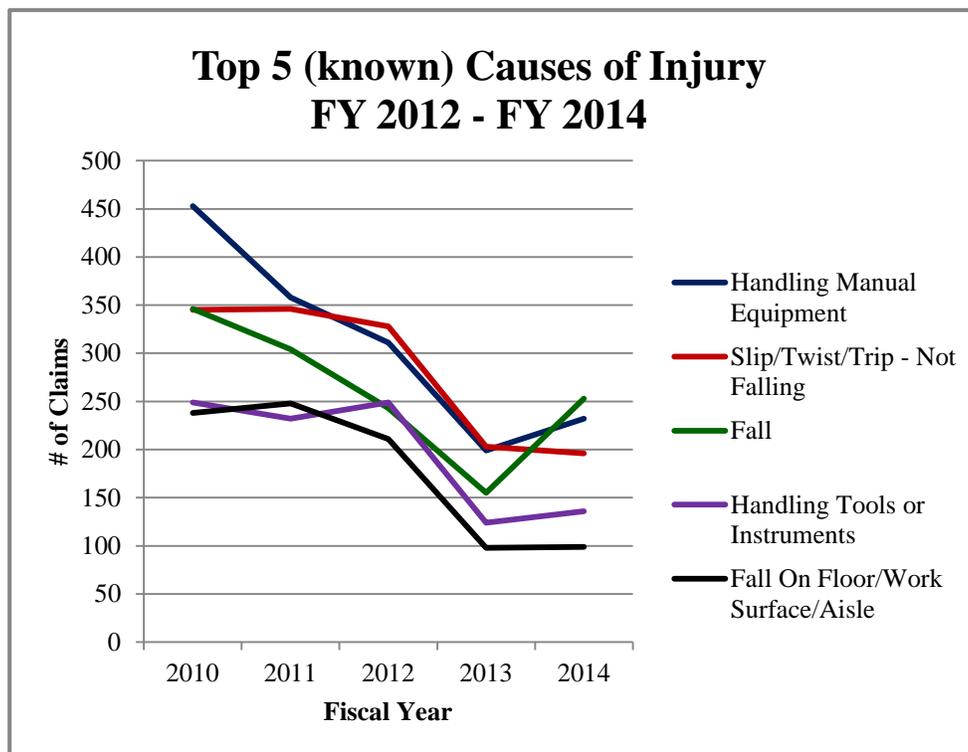
b. Illnesses, Injuries, Fatalities and Catastrophic Events.

- 1) Illness and Injury Experience; Slips, Trips and Falls and Exertion Injury Prevention Efforts. Slips, Trips and Falls are significant causes of injury and, therefore, major focus areas for prevention. Musculoskeletal injuries continue to be cited under “Nature of Injury” in over half of DON workers’ compensation claims.

There have been some significant successes in reducing injuries and injury claims from Slips, Trips and Falls. An analysis of five years (FY 2010–FY 2014) of workers’ compensation claims data indicates that 59% of “Cause of Injury” claims have been in the Slip/Twist/Trip–Not Falling, Fall, and Fall On Floor/Work Surface/Aisle categories. However, Slip/Twist/Trip–Not Falling claims decreased 43% during the five-year period and decreased a further 3% from FY 2013 to FY 2014. Fall On Floor/Work Surface/Aisle claims decreased 58% from FY 2010 to FY 2014, with a small 1% increase between FY 2013 to FY 2014. Although there have been significant declines in claims submissions for Slips and Trips, claims submissions for Falls have increased dramatically (63%) in both the Navy and Marine Corps from FY 2013 to FY 2014. Musculoskeletal injuries are identified in 57% of claims for Nature of Injury.

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2) DON Injury and Illness Experience¹¹ and Actions Taken



Analysis identified the **Top 5 Cause of Injury** categories as:

- Falls
- Handling Manual Equipment
- Slip/Twist/Trip–Not Falling
- Handling Tools or Instruments
- Fall On Floor/Work Surface/Aisle

The **Top 5 Nature of Injury** categories include the following:

- Sprain/Strain of Ligament, Muscle, Tendon–Not Back
- Back Sprain/Strain, Back Pain, Subluxation and IVD Disorders
- Contusion
- Pain/Swelling/Stiffness/ Redness in Joint
- Laceration

The number of claims submitted during the five-year period has decreased 37%. Claims submitted between 2010 and 2013 declined 46%, with an uptick of 17% between FY 2013 and FY 2014. It is worth noting that of the 10, 218 claims submitted for the 5-year analysis period

¹¹ Force Risk Reduction (FR2), <https://fr2.safety.army.mil> <<https://fr2.safety.army.mil>>

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shown above, 40% are listed with Unknown injury causes. The number of Unknown cause category claims for Navy is 38%; Marine Corps is 45%.

Key findings include:

- In FY 2014, the Cause of Injury claims rose in four of five categories, with the exception of the Fall on Floor/Work Surface/Aisle category, which decreased 3.4%.
- 57% of Nature of Injury claims are attributed to musculoskeletal-related injuries in the Sprain/Strain of Ligament, Muscle, Tendon–Not Back; Back Sprain/Strain, Back Pain; Subluxation; and IVD Disorders categories.
- Sprain/Strain of Ligament, Muscle, Tendon–Not Back injuries decreased 37% during the 5-year analysis period; Back Sprain/Strain, Back Pain, Subluxation, IVD Disorders decreased 39%. These two categories also saw the lowest increase in the Top 5 categories from FY 2013 to FY 2014.
- 59% of claims site Slip/Twist/Trip–Not Falling, Fall, and Fall On Floor/Work Surface/Aisle under Cause of Injury.
- “Slip/Twist/Trip–Not Falling claims decreased 43% during the 5-year analysis period and decreased a further 3% from FY 2013 to FY 2014.
- In the Fall category, Navy claims decreased 34%; Marine Corps increased 27.5%. Fall category claims rose 63.2% from FY 2013 to FY 2014 for Navy and Marine Corps combined, both increasing in similar amounts.
- Fall On Floor/Work Surface/Aisle claims decreased 58% from FY 2010 to FY 2014, with a small 1% increase between FY 2013 to FY 2014.

The DON is acutely aware that falls are avoidable and, based on the recent significant increase in fall-related injury claims, there is a clear need to focus more on fall prevention in the civilian workforce. The Naval Facilities Engineering Command (NAVFAC) spearheads the Department’s Fall Protection Working Group, a very active and professionally executed Center of Excellence for Fall Protection. Working Group members include subject matter experts and safety managers from the DON’s main mission areas including aviation, afloat, and shore/ground, as well as members from the other military services and federal agencies. The group met recently and is developing a plan of action and milestones to address ongoing fall challenge areas.

There are multiple initiatives in place across the DON to prevent slips, trips and falls and exertion injuries including the following examples from the Department’s largest commands:

- Naval Sea Systems Command (NAVSEA):
 - Continues to emphasize situational awareness;

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- Uses Stretch and Flex and similar programs to increase resiliency;
 - Implements a robust Fall Protection program to prevent falls from heights;
 - Continues to emphasize ergonomics programs to reduce exertion injuries; and,
 - Naval Shipyards use a “blue man” analysis tool to communicate to production and departments actual injuries by body locations to facilitate operational risk management discussions that lead to prevention.
- Commander, Naval Installations Command (CNIC):
 - Implemented the *Fire and Safety Initiative* to address the elevated rate of slips, trips and falls and exertion injuries in the Navy’s Fire and Emergency Services (F/ES) and Force Protection community. CNIC is partnering with the Navy Operational Fitness and Fueling System (NOFFS) to assign coordinators to tailor a physical fitness and nutrition regimen for Navy Firefighters and Emergency Medical Technicians to make fitness a top priority and maintain peak physical readiness.
 - NAVFAC:
 - Developed a web based training in ESAMS for slips, trips, and falls prevention that is given as part of the new employee orientation and on a periodic basis as needed.
- 3) Fatality and Catastrophic Events. During CY 2014, the DON (Navy and Marine Corps) experienced three fatalities involving Navy employees. For each fatality, the Navy employer reported the event to OSHA in accordance with 29 CFR 1904. Medical issues influenced the fatal outcomes in two cases, but safety program lapses were identified as causal to all the events. In the third case, the Navy command reported the event to the OSHA Area Office, but the OSHA Area Office determined the event was not OSHA reportable. OWCP accepted all three claims. Neither Navy nor Marine Corps reported a catastrophic event in CY 2014.

c. 29 CFR 1960 Requirements

1) Organization of Agency Safety and Health Mission. The Secretary of the Navy and his leadership team, the Assistant Secretaries of the Navy, the Chief of Naval Operations (CNO), and the CMC, are staunch supporters of safety and health for all Navy and Marine Corps personnel and their families, and supporting contractor personnel. The Assistant Secretary of the Navy (Energy, Installations and Environment) is the Department’s Designated Agency Safety and Health Official (DASHO). The Deputy Assistant Secretary of the Navy (DASN) (Safety) reports to the DASHO. (It is worth noting that, of the three DoD military services, the DON is the only service to have a senior executive assigned solely to the safety mission at the Secretariat level.) The CNO and CMC each have a senior, direct report for Safety on their respective staffs; the Navy Surgeon General is a direct report to the CNO for Occupational Health matters. These same senior personnel serve in an “additional duty” status to the DASN (Safety) to ensure solutions for safety and health matters address the needs of the Department as well as the individual services. It is through these three individuals and their supporting organizations that the DASN (Safety) communicates to the Navy and Marine Corps

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higher headquarters leadership and safety managers. Within each high headquarters command, safety managers oversee subordinate activity safety programs and personnel.

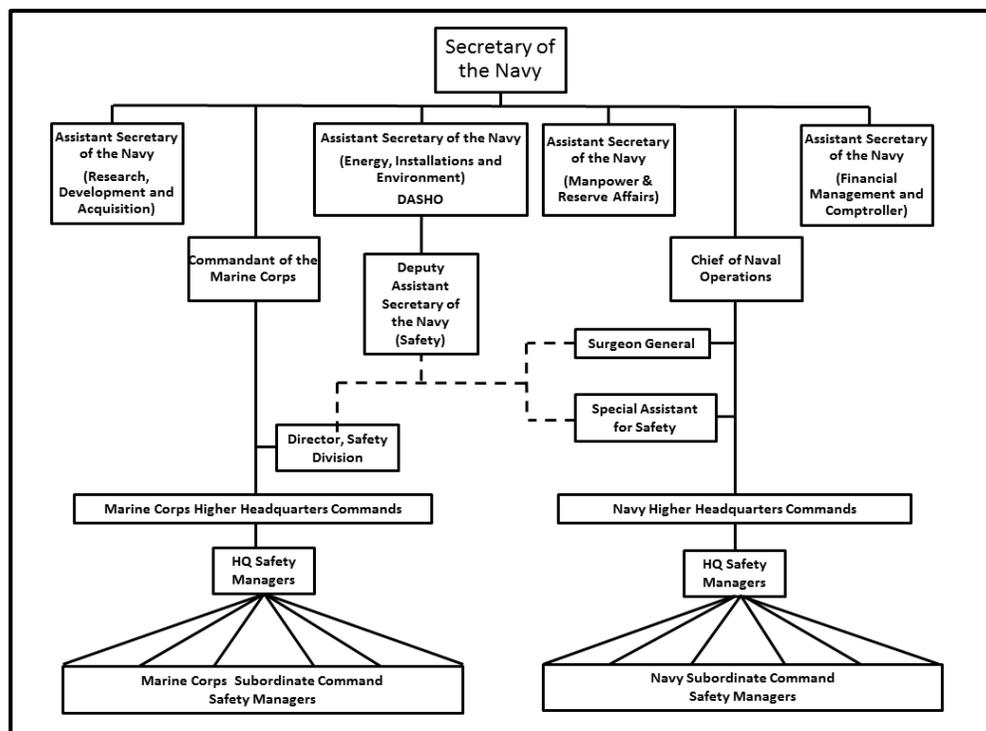


Figure 1. Organization of the Department of the Navy Safety and Health Mission

The DON expends extensive resources on safety and health for its personnel throughout the life cycle of its activities from capability definition, requirements establishment, acquisition, manpower development and training, operations and sustainment, demilitarization and/or demobilization and materiel disposal.

Safety and health functions are clearly defined across the Department, beginning with the recently updated DON Safety Program Policy. Both the Navy and Marine Corps have well established safety and health policies that clearly articulate safety and health roles, responsibilities and authorities, including budget authorities, at headquarters and subordinate commands.

The DON is a risk management organization. Hazard awareness, reporting and abatement are a requirement for all Department activities and represent the cornerstone of the Department's continuously improving safety and health record over time. Navy and Marine Corps Base safety and health personnel collaborate with personnel at all levels of the command structure, from the Commanding Officer, to his staff, managers, supervisors, contract officer representatives, employee representatives and employees to ensure hazards are identified and funding for their abatement is in place. Employees at the front lines are instructed to use the chain of command to report safety issues to their immediate supervisor. If that is not satisfactory then they use the

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engagement to occasional attendance at FFSHC meetings. In CY 2014, FFSHC participation included Navy and Marine Corps SOH representation from:

- Commander, Pacific Fleet (COMPACFLT)
- Fleet Cyber Command (FLTCYBERCOM)
- Space and Naval Warfare Systems Command (SPAWAR)
- Naval Supply Systems Command (NAVSUP)
- Naval Air Systems Command (NAVAIR)
- Naval Sea Systems Command (NAVSEA)
- Bureau of Navy Medicine (BUMED)
- Commander, Navy Reserve Forces Command (COMNAVRESFOR)
- Naval Facilities Engineering Command (NAVFAC)
- Naval Education and Training Command (NETC)
- Naval Special Warfare Command (NAVSPECWARCOM)
- Commander, Navy Installations Command (CNIC)
- Commander, U.S. Fleet Forces Command (USFF)
- Commander, Naval Safety Center (COMNAVSAFECEN)
- Marine Forces Command (MARFORCOM)
- Marine Forces Pacific (MARFORPAC)
- Marine Forces Special Operations Command (MARFORSOC)
- Marine Corps Logistics Command (MARCORLOGCOM)
- Marine Corps Installations East (MCI-E)
- Marine Corps Installations West (MCI-W)

All commands listed above cite some level of participation in their local FFSHC either directly or through subordinate commands, including several DON SOH professionals who chair their respective councils. All commands strongly encourage full-time and collateral duty safety personnel to participate in the councils. Commands encourage their personnel to attend council meetings, with some commands also covering travel expenses. As in 2013, several commands indicated that participation has decreased as a result of limited funds and operational tempo.

- 3) Inspection of the Safety and Health Management System. The expansion of Safety and Health Management Systems across the Navy ensures auditing/inspection by internal and external entities through self-assessment and oversight activities. The DON has a number of Safety Management Systems in place already, including OSHA VPP, which collectively incorporate over half of the civilian workforce (100,000+ employees). The Naval Inspector General, headquarters and regional commands also perform SHMS inspections at various levels of effort. Recently, safety professionals have augmented the Naval Inspector General in performance of safety and health oversight inspections. Marine Corps safety managers from subordinate commands are invited to participate with the Marine Corps Safety Division in their Command Safety Assessments. Both of these innovations enable sharing of best practices and enhance the professional development of Department personnel.

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The NAVFAC Northwest region Field Engineering Command office was inspected by OSHA as part of their VPP recertification process. NAVFAC HQ was inspected by the Navy Inspector General in 2014, as part of the overall inspections of NAVFAC by the Navy.

On 06 AUG 2014, COMNAVSPECWARCOM had one unannounced OSHA inspection of one of its indoor shooting ranges on the Naval Amphibious Base on Coronado, CA. OSHA identified the following eight issues in its 08 DEC 2014 issuance.

- Employer did not administer a continuing, effective hearing conservation program. (Type of Violation: Other-than-Serious)
- Employer did not obtain a new audiogram for employee. (Type of Violation: Other-than-Serious)
- Training program was not repeated annually for each employee in hearing conservation program. (Type of Violation: Other-than-Serious)
- Employees were permitted to consume food or beverage in areas exposed to toxic materials. (Type of Violation: Serious)
- Food and beverages were stored in toilet room and/or areas exposed to toxic materials. (Type of Violation: Serious)
- Additional exposure monitoring was not conducted when there was a change in process that may have resulted in new or additional exposure to lead. (Deleted/Vacated)
- Employer did not make available medical examinations to employee, upon notification by employee, that he had developed signs of lead intoxication. (Type of Violation: Other-than-Serious)
- Shoveling, sweeping or brushing methods were used to remove lead accumulations where vacuuming was available. (Deleted/Vacated)

COMNAVSPECWARCOM appealed these findings on 07 JAN 2015 and five of the eight were deleted from the report, two were reduced, and one was tabled for further discussion. However, upon further review, OSHA reversed its decision and re-instated six of the eight citations although at a reduced level of severity which is reflected above. Currently, COMNAVSPECWARCOM has submitted their Certification of Corrective Action abating all identified issues and is waiting for OSHA's acceptance of the abatement certification.

OSHA issued 67 citations to the Navy through the third quarter of FY 2014; 55 serious citations at two facilities; and 12 Other Than Serious at four establishments. The Naval Safety Center tracks OSHA citations and posts a spreadsheet that summarizes the citations on its website at http://www.public.navy.mil/comnavsafecen/Pages/osh/SOH_Metrics/OSHACitations.aspx. The spreadsheet allows viewers to drill down and see specifics for each citation written in a given year. The Navy uses the OSHA citations posted on this website to identify program and implementation areas where improvements are needed and to perform trend analyses.

Navy policy in Chapter 11 of the Navy's *Safety and Occupational Health Program Manual* (OPNAVINST 5100.23G) requires the commander of the inspected Navy Activity, or the

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Regional Commander on behalf of the inspected Navy activity, to forward a summary report with a copy of such notices immediately to the Naval Safety Center if Federal OSHA officials issue reports or notices of unsafe or unhealthful working conditions discovered during their inspections. The commanding officer is also required to provide information copies to the chain of command having management cognizance.

- 4) Occupational Safety and Health Training. Navy and Marine Corps SOH training and education policies are aligned to legal requirements and with Specific Training Requirements described in the OSHA *Occupational Safety and Health Training Guidelines For Federal Agencies*:

Top Management Officials:

- Safety orientation and other learning experiences
- Navy occupational safety and health (NAVOSH) program
- Section 19 of the 1970 OSHA Act
- Executive Order 12196
- 29 CFR 1960, Sub-Part H, Section 54
- Basic Program Elements of Federal Employees OSHA

Supervisory Training:

- Occupational safety and health standards applicable to the assigned workplaces
- Procedures for reporting hazards;
- Procedures for reporting and investigating allegations of reprisal
- Procedures for the abatement of hazards
- Other appropriate rules and regulations;
- Written OSH program applicable to the establishment (mission-specific)

Collateral Duty Safety Officers and Safety Committee Members

- Navy Occupational Safety and Health (NAVOSH) program
- Section 19 of the 1970 OSHA Act
- Executive Order 12196
- 29 CFR 1960, Sub-Part H, Section 58
- Procedures for the reporting, evaluation and abatement of hazards
- Procedures for reporting and investigating allegations of reprisal
- Recognition of hazardous conditions and environments
- Identification and use of occupational safety and health standards
- Written OSH program applicable to the establishment (mission-specific)
- Other appropriate rules and regulations

Employees

- Job-specific safety and health training;
- Occupational safety and health program with emphasis on their rights and responsibilities
- Employee representatives of employee groups (Section 59)

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- Introductory and specialized training on recognizing hazards and safe and healthful working conditions and practices in the workplace
- Training to assist in conducting workplace safety and health inspections
- Written OSH program applicable to the establishment (mission-specific)

Navy and Marine Corps activities use ESAMS to document required training. ESAMS uses the basis of job/duty task evaluations to capture all required training for tasks and then assigns these duty tasks to employees. The duty tasks ensure employees receive the appropriate required training based on the task they will perform. The Navy also uses the Navy Training Management and Planning System to identify, record and track training requirements for Navy employees.

Training Overseas Federal Employees

As of the end of September 2014, the DON employed approximately 3,748 civilians overseas and in U.S. territories¹². These employees are afforded the same level of protection and must comply with the same DON Safety and Occupational Health (SOH) policy and program requirements as their stateside counterparts. The occupational safety and health programs and training of overseas employees is administered through local Safety Officers who ensure coordination with host service providers. In addition to generic SOH training, personnel overseas receive training to address local hazards as appropriate, including local driving conditions and requirements. Before employees are sent into an active area of operations, they are evaluated to ensure they are medically fit for the environment to which they will be deployed, and to gather baseline medical information for post-deployment comparison. The Naval Safety and Environmental Training Center offers several online courses at greater frequency, which generated an increase in use.

The Ship Repair Facility, Japan Regional Maintenance Center (SRF-JRMC), and SRF-JRMC Detachment Sasebo received SECNAV's equivalent of the OSHA VPP Star Status in February 2012 and successfully underwent a recertification assessment in March 2015. These facilities provided annual self-assessments as part of the certification process. The self-assessments revealed dynamic programs which ensure a high level of employee safety and health. The Navy promotes the safety and health of its overseas employees through the Chief of Naval Operations Shore Safety Award process which includes recognition of industrial and non-industrial commands outside the continental United States (OCONUS).

The DON has embarked on a career development program for its SOH management professionals as part of the DoD Strategic Human Capital Planning initiative. Navy and Marine Corps personnel participated in an Office of Personnel Management (OPM)-DoD SOH competency model development effort in 2011. Later, the DON incorporated the DoD competency model into an expanded model to professionalize SOH in the DON. The competency model is now being integrated into an electronic career tracking program. Personnel

¹² U.S. Office of Personnel Management, FEDSCOPE *Federal Human Resources Data*; <http://www.fedscope.opm.gov/ibmcognos/cgi-bin/cognosisapi.dll>

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will assess their competencies in the tracking program, verified by their supervisor, and obtain training based on the competency gaps that are integrated into an Individual Development Plan. The aggregate results of the assessment will be used to assess the overall competencies of the SOH workforce, track progress in closing gaps, and inform SOH training needs for SOH training events. Of note, the Marine Corps and CNIC already have well-established career development programs for their SOH professionals.

The DON lists over 200 courses available to employees online or provided in a classroom setting. The list is available upon request. ESAMS indicates a reasonable rate of SOH training compliance in FY 2014 for SOH Classroom Training (77%); Safety On The Job Training and Web-based Training (81%); Traffic Safety Training (77); Risk Management (72%), with an average Total Training Compliance of 79%. The greatest advance in training delivery is the expansion of the Navy Safety and Environmental Training Center's Global On-Line training and also the on-line training available through ESAMS. Personnel can access the system to gauge training effectiveness. The DON reviews hazard reports, conducts work task observations, analyzes injury and illness trends, monitors changes in technology, policy, processes and procedures, and examines test scores to identify training areas requiring changes to the training curricula and delivery.

Funding for safety and health training is documented in the payroll system. Navy and Marine Corps budgets allocate prescribed training hours per employee, with greater allotments permitted for those requiring professional credential, certification, or skills training as a condition of employment. For example, SOH personnel are required to receive a minimum of eight continuing education units (CEU) or equivalent per year.

5) Whistleblower Protection Program

DON policy^{13,14} requires commands to establish procedures to protect all Navy and Marine Corps personnel from coercion, discrimination, or reprisals for participation in the SOH program. The policy further requires development of procedures for all personnel to report suspected hazards to their supervisors and or safety and health officials without fear of reprisal including ensuring that employees are aware that they may file, through their appropriate grievance processes, allegations of reprisals for having filed a complaint of unsafe or unhealthy working conditions. All headquarters commands have policies in place that support and promote this overarching policy. During CY 2014, there were no employee reprisal allegations.

6) Product Safety

All product materials are procured through NAVSUP Consolidated Hazardous Material Reutilization and Inventory Management Program (CHRIMP) Centers and managed by the Naval Supply System. Safety Data Sheets (SDS), Authorized User Lists, and product recalls are all part of standard operating procedures at CHRIMP Centers. Labeling and accessible SDS

¹³ OPNAVINST 5100.23G, *Navy Safety and Occupational Health Program Manual*

¹⁴ Marine Corps Order, MCO 5370.8, *Marine Corps Hotline Program*

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compliance can be identified by any employee, not just Safety Inspectors. Hazard Communication and Globally Harmonized System (GHS) Awareness training are standard and have been implemented at all Navy and Marine Corps Installations and are tracked in ESAMS. Additionally, acquisition and procurement processes include safety as part of the evaluation process, especially for new products to be purchased. Product recalls are conveyed to acquisition and procurement specialists and to the field to ensure any recalled products are replaced accordingly. The Navy Facilities Engineering Command maintains a list of all protection recall listings on a public website.

II. SAFETY & HEALTH MANAGEMENT SYSTEM SELF-EVALUATION.

Overall Assessment.

Agency Safety & Health Management System – Overall Assessment Score				
0	1	2	3	NA
			✘	

Summary of Self-evaluation.

The DON is making significant strides to implement a Department-wide Safety and Health Management System (SHMS). A number of Navy and Marine Corps commands are implementing SHMS in some form, with a significant number on the road to full implementation. With the promulgation of the *Department of the Navy Safety Program*¹⁵ SHMS implementation is now a Department-wide mandate for all Navy and Marine activities. The Department SHMS policy does not dictate which specific systems must be used, as long as the fundamental tenets of the SECNAV instruction are met. The DON policy is in close alignment with recently published Department of Defense Instruction 6055.1, *DoD Safety and Occupational Health (SOH) Program*, which mandates the military departments implement SHMS in their activities. Currently, the DON SHMS effort incorporates over half the civilian population. The Department will continue on this path to progress for the foreseeable future.

III. GOALS.

The top three DON Safety Program improvement goals are: advancing a Risk Management Information system; implementing an enterprise level SHMS; and professionalizing the safety workforce.

¹⁵ *The Department of the Navy Safety Program* policy includes “all safety-related policies, programs, and functions including, but not limited to, acquisition safety, environmental health, emergency response, explosives safety, fire and emergency services, industrial hygiene, occupational health, occupational safety, radiation safety, operational safety, and public safety.”

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1. Risk Management Information (RMI)—In FY 2014, the Department continued to develop the Risk Management Information system to store, link, analyze, and distribute data needed to effectively manage risk, and allow personnel at all levels of the Department to make more informed risk decisions.
2. Safety and Health Management System (SHMS)—With the promulgation of the *Department of the Navy Safety Program* policy, implementation can begin. To implement the SHMS effort Department-wide, a draft strategic plan describes the two main objectives; developing business cases to enable leadership to make informed business decisions and establishing measures of performance and effectiveness for safety oversight. Additionally, the key tenets of the Departmental SHMS are to be integrated into an electronic tracking tool to assess implementation progress.
3. Professionalize the Safety Workforce—The framework for a DON safety workforce is in place. Competencies have been established, a career tracking tool has been identified (into which the competencies are to be integrated), planning is underway for a “virtual” safety university, and a manpower analysis is also planned. The safety career program will be dependent mainly on technology with a mentoring program to guide and oversee progress. Currently, the focus is on securing funding for an enduring career development program. The effort is one of the Secretary of the Navy’s highest priorities.

APPENDIX 1—SUBAGENCY OSH CONTACTS

Intentionally left blank.

APPENDIX 2—FATALITIES AND CATASTROPHIC EVENT SUMMARY REPORT

Total number of fatalities: 3

Total number of catastrophic events:0

During CY 2014, the DON (Navy and Marine Corps) experienced three fatalities involving Navy employees. For each fatality, the Navy employer reported the event to OSHA in accordance with 29 CFR 1904. Medical issues influenced the fatal outcomes in two cases, but safety program lapses were identified as causal to all the events. In the third case, the Navy command reported the event to the OSHA Area Office, but the OSHA Area Office determined the event was not OSHA reportable. OWCP accepted all three claims. Neither Navy nor Marine Corps reported a catastrophic event in CY 2014.

Fatality/Catastrophic Event Summary Report (Use Box to Report Each Event Separately)

Fatality Catastrophic Event Work related? Yes No

Number of employees injured: 0

Date of Incident: September 3, 2014

Number of employee fatalities: 1

Time of Incident: 1255

Description of workplace operations: Maintenance and Repair

Description of incident: WG-10 employee ran off the road and hit a guardrail. The police report indicates he had a seizure while driving. His car came to a stop in a creek. The Operator pronounced deceased at the scene.

Analysis of workplace cause: Employee's license had been suspended because he suffered epileptic-type seizures and was taking prescription medication to control the seizures. At the time of the crash, the employee was not wearing a seatbelt. The police report indicates that a seatbelt would not have prevented the fatal injury but lack of seatbelt use was noted due to the requirement to wear seatbelts in all government vehicles. The seatbelt warning alarm was not working or was disabled.

Corrective actions taken? Yes No

If yes, please describe:

–Periodically review operator driver's license and medical history as part of the validation process

–Reinforcement of policy requiring seatbelt use in government vehicles.

–Inspect assigned government vehicles for non-functioning seat belt alarms.

Programmatic changes made? Yes No

–Updated NAVFAC P-300, *Management of Civil Engineering Support Equipment*, to include seatbelt alarm in pre-operational vehicle checks, and recommended similar revision for OPNAVINST 5100.12 (SERIES).

–Supervisors of employees who operate government owned or leased vehicles or possess a government driver's license shall enforce existing policy to ensure employees are medically qualified and continue to demonstrate competence to operate the type of motor vehicle to which assigned.

Fatality/Catastrophic Event Summary Report (Use Box to Report Each Event Separately)

Fatality Catastrophic Event Work related? Yes No

Number of employees injured: 0 Date of Incident: February 18, 2014
Number of employee fatalities: 1 Time of Incident: 0630

Description of workplace operations: Personnel Support

Description of incident: Civilian employee fell while entering place of work and had broken femur and suffered an aortic dissection. She was being treated in the hospital for her injury and died some time during the night after surgery.

Analysis of workplace cause:

- Civilian had coronary artery disease with cardiac hypertrophy accelerated by the fall and subsequent surgery.
- Ice on sidewalk due to accumulation of snow melting through a leaking roof and refreezing overnight.
- No policy regarding snow and ice removal responsibilities for the building.
- Command not proactive with resolving known material deficiencies.

Corrective actions taken? Yes No

If yes, please describe: Developed a plan for snow and ice removal throughout the base.

- Working Hours will be adjusted when inclement weather prevents easy passage.
- Command Duty Officer will have responsibility of clearing snow or ice.
- Staff will be encouraged and trained on the procedures for reporting material deficiencies
- Place non-skid on ramp
- Inspected and Cleaned Roof. (Awaiting funding to repair roof)

Programmatic changes made? Yes No

If yes, please describe:

- Building Manager Instruction (SUBASEINST 3440.1D) modified to assign responsibility of snow and ice removal to Command Duty Officer.
- Building Manager Contact Information will be posted at all worksites.
- Emergency Management Plan regarding winter preparedness has been purchased and distributed to the BMS and PWD the necessary equipment to building managers to fully implement the EMP.

Fatality/Catastrophic Event Summary Report (Use Box to Report Each Event Separately)

Fatality Catastrophic Event Work related? Yes No

Number of employees injured: 1 Date of Incident: July 23, 2014

Number of employee fatalities: 1 Time of Incident: 1419

Description of workplace operations: Naval Station

Description of incident: Civilian employee was walking on a sidewalk and was struck by a privately-owned vehicle driven by a military member. Military member unfamiliar with direction of the road and overcorrected his vehicle at a turn. His vehicle jumped the curb and went onto the sidewalk. Victim was transported to hospital where she was declared deceased.

Analysis of workplace cause: Driver unfamiliar with road, driving too fast for conditions.

Corrective actions taken? Yes No

If yes, please describe: Installed "candlestick" dividers at the turn at the intersection where the mishap occurred.

Programmatic changes made? Yes No

If yes, please describe: Unknown. Final Investigation Results not reported.

APPENDIX 3—CERTIFIED SAFETY & HEALTH COMMITTEE

PART I: GENERAL INFORMATION

- 1) Does your agency have an Occupational Safety and Health Committee (OSHC) at the National level? Yes No

APPENDIX 4—SAFETY AND HEALTH MANAGEMENT SYSTEM SELF-EVALUATION

I. HAZARD ANTICIPATION AND DETECTION

- 1. A comprehensive, baseline hazard survey has been conducted within the past five years.**

0	1	2	3	NA
		✘		

The DON SOH program pre-dates the establishment of OSHA. The DON’s baseline hazard surveys, including hazardous material inventories, were completed years ago. The Department continues its drive to safety excellence with the expanded implementation of safety management systems while continuing to maintain its established SOH programs at a high level of performance. As processes are updated, new baselines are conducted in accordance with applicable guidance from the Navy’s *Safety and Occupational Health Program Manual* (OPNAVINST 5100.23G) and the *Marine Corps Safety Program* (MCO 5100.29B). This system depends on line managers notifying SOH professionals when changes are made to existing procedures.

- 2. Effective safety and health self-inspections are performed regularly.**

0	1	2	3	NA
		✘		

Chapter 9 of OPNAVINST 5100.23G addresses workplace inspections, Chapter 8 addresses industrial hygiene (IH) surveys, and Chapter 7 addresses hazardous material inventories maintained as part of the Navy’s *Hazardous Material Control and Management Program*. Navy and Marine Corps commands have established inspection procedures that include inspection of all workplaces and operations by qualified SOH professionals on at least an annual basis with high hazard areas and operations inspected more frequently. These inspections are conducted by members of the in-house SOH office for many of our industrial commands or by members of our higher level installation SOH offices, including workplace inspections, for tenant commands. At some of our sites pursuing VPP Star status, workforce personnel supplement workplace inspections at least quarterly with surveys using checklists approved by SOH professionals. Personnel use the checklists as guidelines for even more frequent review by individual employees of their workspaces. Periodic industrial hygiene (IH) surveys are completed under the supervision of an experienced industrial hygienist. The IH surveys are conducted in accordance with the Navy’s *Industrial Hygiene Field Operations Manual* at <http://www.med.navy.mil/sites/nmcphc/industrial-hygiene/industrial-hygiene-field-operations-manual/Pages/default.aspx>. Additionally, facility and fire inspections are made on regular

cycles. The NETC also performs quarterly reviews of high risk training operations. Employees are encouraged to report hazards. Such reports are submitted to supervisors and/or the safety office through the *Employee Reports of Unsafe/Unhealthy Working Conditions* process for investigation and follow-up.

OSHA citations during CY 2014 and employee reports of unsafe/unhealthy conditions have occurred in situations in which full-time SOH professionals were employed and inspections were completed within the required periodicity.

Marine Corps policy requires the CMC Safety Division to conduct triennial assessments of SOH programs at major commands and installations. All Marine Corps commands are required to conduct annual self-assessments and report quarterly on the Warrior Preservation Status Report (WPSR) compliance with minimum safety program standards. In addition, each Marine Corps higher headquarters organization conducts biennial oversight assessment of subordinate commands. Formal reviews and oversight of U. S. Marine Corps SOH programs are also conducted by the Inspector General of the Marine Corps (IGMC), Inspection Division. SOH self-assessments of buildings/structure and other facilities are conducted and documented by qualified SOH professionals at all installation and tenant work centers, buildings, training facilities, and ranges.

3. Effective surveillance of established hazard controls is conducted.

0	1	2	3	NA
				

Hazards identified through the workplace inspection and industrial hygiene processes are addressed in written or electronic reports, and those problems that cannot be immediately abated are entered into the activity’s Deficiency Abatement System for tracking until abatement is complete. The reports are filed with the affected activities for action, medical surveillance, and monitoring, as appropriate. Exposure monitoring plans developed during the IH survey process are developed to ensure controls are implemented and effective. Follow-up workplace inspections are conducted by SOH professionals to verify that completed corrections have been made or that actions addressing specific problem areas were taken. Supervisors are briefed on their safety responsibilities, including day-to-day inspections and corrective actions, and Collateral Duty Safety Representatives conduct periodic safety inspections of their respective workplaces. Designated Fire Wardens conduct weekly walk-through inspections of work areas to verify ongoing compliance. Within the Naval Air Systems Command (NAVAIR), supervisors support on site, real time surveillance. Job hazard analyses (JHAs) and Operational Risk Management (ORM) Plans are developed by NAVAIR Mission Safety and monitored in real time, primarily for aircraft test programs. Naval Shipyards have specific work controls, such as task instructions, the OSHE Control Manual, and local safety instructions.

Many Navy and Marine Corps tenant activities receive services from the host installation SOH office that identify hazards such as confined space, fall hazards, etc. All Navy and Marine Corps activities conduct Safety and Occupational Health Management Evaluations (SOHMEs) at least triennially by the cognizant Navy Headquarters/Marine Forces command. During the SOHMEs, the oversight teams validate that commands are actively identifying and effectively controlling hazards. If controls are ineffective, communication and coordination are made with the supporting host Safety Office to resolve any remaining issues.

4. Change analysis is performed whenever a change in facilities, equipment, materials, or processes occurs.

0	1	2	3	NA
		✘		

Per DON policy, any changes in the workplace that could affect exposures shall prompt a reevaluation. The surveyed activities are required to establish procedures to ensure that the knowledgeable SOH professional or IH is notified of any such changes. Other examples include:

- NAVFAC engineers perform change analysis during the planning process or for any change to facility, equipment or materials under NAVFAC ownership. Post change analysis is incumbent on the supervisor and personnel who are familiar with the facilities, equipment, materials, or processes. Changes in facilities, processes and materials often occur in Navy and Marine Corps facilities without NAVFAC’s awareness. The original design criteria, assumptions, and levels of control may be rendered ineffective or increase the hazard presented by the implemented changes.
- NAVAIR safety experts support systems safety and logistical departments to ensure safety reviews and change analysis are properly completed for all major acquisitions. This process is completed via a comprehensive Programmatic Environmental Safety and Occupational Health Evaluation (PESHE) document, or through an Integrated Logistical Assessment (ILA). In the facility arena, changes are monitored and approved through an Infrastructure Business Operations section (IBO), and approved plans, or waivers are issued to the appropriate activity.
- Many commands conduct job hazard analyses for introduction of new machines and tools and new processes. NAVSEA has an effective hazardous material management program in which an Authorized Use List (AUL) is developed to minimize the use of hazardous material, and a thorough review is conducted for introduction of new hazardous material to the activity.

5. Safety Data Sheets are used to reveal potential hazards associated with chemical products in the workplace.

0	1	2	3	NA
		✘		

The Navy and Marine Corps have effective hazard communication programs, with field activities at varying levels of compliance; some programs serve as models for others to emulate. For example, at Naval Surface Warfare Center–Carderock and Ship Systems Engineering Station in Philadelphia, PA (under a single command), the hazard communication program was identified as a Best Practice during a VPP On-Site Review. Safety Data Sheets (SDSs) are used and stored as required for any chemicals used in the work place. SDSs are reviewed to identify appropriate protections for workers who may be exposed to them during their work day, and recommended precautions are provided for incorporation into local work processes. The annual workplace inspection, as well as the annual industrial hygiene survey, checks the use and availability of SDSs on a regular basis. Commands are required to ensure the appropriate SOH professionals perform a safety and health review of Hazardous Material (HM) proposed for addition to the command’s Authorized Use List (AUL) prior to purchase of the HM. Commands are also required to perform a periodic review of the AUL to eliminate unnecessary HM and substitute less hazardous HM if feasible.

II. HAZARD PREVENTION AND CONTROL

6. Feasible engineering controls are in place.

0	1	2	3	NA
		✘		

The DON fully applies the hierarchy of hazard controls. If elimination and substitution controls are infeasible, engineering controls are preferred and implemented. Where engineering controls are not feasible, affordable, or do not provide an adequate return on investment, administrative/management controls, and personal protective equipment are put in place. To fund higher cost hazard controls, NAVFAC centrally manages the Navy’s Hazard Abatement Program to remove, control, or fully correct the hazardous exposure in the most effective manner.

7. Effective safety and health rules, and work practices are in place.

0	1	2	3	NA
		✘		

SOH rules and work practices are in place at Navy and Marine Corps activities. They are current and sufficient for the identified hazards and communicated to all. Requirements are communicated in local instructions, standard operating procedures, business management system processes, etc. General work processes are addressed in training and enforced by supervisors. When followed correctly, these processes are effective at mitigating potential impacts associated with the exposure to hazards.

For example, Naval Shipyards implement task instructions giving specific directions that include safety considerations and guidance in the OSHE Control Manual to complete tasks. For maritime confined space entry, NAVSEA implements the NAVSEA Technical Manual S6470-AA-SAF-010 *Naval Maritime Confined Space Program*. For hazardous Energy Control aboard naval ships while in a shipyard, the Naval Shipyards follow NAVSEA Technical Manual S0400-AD-URM-010/TUM *Tag-Out User's Manual*. Non-compliance with safety rules in a ship repair industrial environment result in a Trouble Report investigation to determine root causes, as well as short term and long term corrective actions.

8. Applicable OSHA-mandated programs are effectively in place.

0	1	2	3	NA
		✘		

The DON has effective programs to comply with OSHA-mandated programs; most program requirements are addressed in the Navy and Marine Corps SOH program policy. Specific programs include, but are not limited to: asbestos, blood-borne pathogens, confined space entry, energy control, ergonomics, fall protection, hazard communication, lead, and personal protective equipment, including respiratory protection. An integral part of the annual activity self-assessment process is an evaluation of the command's compliance posture. The triennial headquarters SOHME process is directed to review compliance with program requirements. Additionally, those Navy and Marine Corps commands actively engaged in OSHA's VPP have demonstrated that OSHA-mandated programs are effectively in place through on site reviews and annual self-assessments.

9. An effective procedure for tracking hazard correction is in place.

0	1	2	3	NA
		✘		

Navy and Marine Corps SOH policy requires the official in charge of the operation to take prompt action to correct hazards and to implement interim protective measures pending permanent abatement. Those hazards assigned Risk Assessment Codes 1, 2, or 3, needing more than 30 days for correction, are required to be recorded and tracked in a formal hazard abatement plan that includes the following standard data for each hazard (or logical grouping of similar hazards):

- Dates of hazard identification
- Location of the hazard(s)
- Description of the hazard(s) including reference to applicable standards
- Calculated RAC or estimated RAC (with hazard severity, probability of single occurrence, and annual personnel exposure cited separately)
- Interim control measures in effect
- Description of the abatement action, including estimated cost and completion date
- Abatement priority
- Closeout statement, indicating completed abatement action and cost, with date of completed action; or process discontinued or worksite vacated.

Many commands use the Enterprise Safety Applications Management System (ESAMS) for the recording and administration of all hazard identification and corrections until the hazard is abated. NAVSEA has an effective hazard tracking program. Hazard correction is reviewed by commanding officers and employee teams contribute to the process when VPP are in place.

III. PLANNING & EVALUATION

10. Hazard incidence data are effectively analyzed.

0	1	2	3	NA
		✘		

The Navy and Marine Corps have seven instructions addressing the collection and analysis of data related to hazards, including a mishap reporting instruction and the Navy and Marine Corps SOH program policies (OPNAVINST 5100.23G and MCO 5100.29B). Multiple databases are used to capture and analyze this data, which supports the need for the Risk Management Information effort discussed in the Goals section of the main report. Until RMI is functional (2nd Quarter of FY16), commands will continue to use systems such as ESAMS and the Naval Safety Center’s Web Enabled Safety System to analyze hazard incidence data. As part of the annual compliance assessment conducted by all NAVFAC commands, hazard data are analyzed to find trends and identify possible corrective actions.

Hazard incidence data are reviewed and regularly analyzed by NAVSEA commands to determine hazard control effectiveness, identify new trends, and adjust prevention strategies. Formal and informal analysis is performed and reported within NAVSEA’s field activities, within activity groups (for example, Naval Shipyard high hazard working groups), and discussed at Safety Director Conferences attended by NAVSEA Headquarters leadership. Improvement is needed for NAVSEA Headquarters to analyze data received from Trouble Reports and OSHE Communication Forms required by NAVSEA directives that highlight hazards encountered at the field activity level. NETC uses a seven step risk assessment to analyze, plan and mitigate all facets of potential hazards during the planning process.

11. An action plan designed to accomplish the organization’s safety and health objectives is in place.

0	1	2	3	NA
		✘		

The DON’s annual self-assessment process requires commands to report their top five areas for improvement. These reporting areas include any combination of program deficiencies, barriers to mishap prevention, and workplace hazards. Self-assessments also include best practices that can be shared across the Department. The self-assessments are reported using a standardized template developed by the Navy’s Safety Quality Council (SQC). The template is available at the Naval Safety Center’s website at <http://www.public.navy.mil/comnavsafecen/Pages/osh/nsar-index.aspx>.

The self-assessment process also requires that commands develop a program improvement plan to address deficiencies identified during the self-assessment. Commands monitor the improvement plans throughout the year to ensure progress.

An important part of the self-assessment process is the roll-up of self-assessment results from across the Navy into an overarching aggregate summary. The SQC analyzes the aggregate results to formulate recommended program improvements service-wide. FY 2013 marked the third year of this process.

NAVFAC’s SOH strategic plan goals and objectives are placed on NAVFAC’s leadership dashboard for regular progress review. Activities that have achieved VPP Star, or are working on their VPP certification, also develop improvement plans that are tracked until completion. Safety corrective actions are sometimes integrated into overall activity business plans.

The CMC published policy regarding SOH policy and posture in the *Commandant’s Planning Guidance* and the *Safety & Force Preservation Policy of the Commandant of the Marine Corps*. This policy is intended “to establish and maintain a safety culture throughout the Marine Corps that preserves all resources through risk management, reinforces safe behaviors (both on and off duty), and results in an enhanced state of combat readiness.”

12. A review of the overall safety and health management system is conducted at least annually.

0	1	2	3	NA
		✘		

The annual self-assessment process described in the response to Question 11 is the vehicle used to conduct the review of the overall safety and health management system. VPP Star sites submit their annual VPP self-assessment to OSHA annually. Additionally, the Marine Corps use of the

quarterly Warrior Preservation Status Report functions as a continuous evaluation of the status, posture and health of the services SOH programs.

IV. ADMINISTRATION AND SUPERVISION

13. Safety and health program tasks are each specifically assigned to a person or position for performance or coordination.

0	1	2	3	NA
		✘		

Safety and health tasks are assigned to and led by SOH professionals and other designated subject matter experts across the Navy and Marine Corps, consistent with DON SOH policies. Chapters 2 and 3 of OPNAVINST 5100.23G assign specific responsibilities, ranging from headquarters commands and commanding officers to individual employees, while other chapters assign specific responsibilities, such as Confined Space Program Manager or Fall Protection Competent Person.

DON policy related to mishap investigation and reporting in several Navy instructions assigns specific responsibilities at the headquarters command and activity level and addresses specific training requirements before personnel can assume these responsibilities.

In the Navy, many commands have implemented local guidance that assigns specific safety roles and responsibilities, such as CNECNAC6FSTAFFINST 5100.1A for U.S. Naval Forces Europe-Africa. Commanding officers at NAVFAC commands sign a letter of designation providing the information as to what safety and health programs are assigned to specific personnel for performance of specific duties. The designation information is recorded in ESAMS in the personnel records. At other commands, line organizations have a safety point of contact to whom safety actions are assigned.

In the Marine Corps, every Battalion and Squadron level unit must have an assigned and trained collateral or additional duty safety manager. Typically, this individual is a Staff Non-Commissioned or Company Grade Officer. At a minimum, collateral or additional duty SOH personnel are required to attend the 80-hour Ground Safety for Marine Course within 90 days of appointment to the position.

14. Individuals with assigned safety and health responsibilities have the necessary knowledge, skills, and timely information to perform their duties.

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Chapter 6 of OPNAVINST 5100.23G provides guidance concerning training requirements for full-time and collateral duty safety personnel, top management, supervisors, and non-supervisory personnel. Other chapters provide training requirements for specific programs, such as respiratory protection and confined space entry, to help personnel meet their assigned safety and health responsibilities. Individual development plans identify specific training required to develop or maintain proficiency. For example, BUMED requires all full-time journeyman level and higher industrial hygienists, IH officers, occupational health nurses, occupational medicine (OM) providers, occupational audiologists (OA), and safety specialists and managers to receive an equivalent of four continuing education units (CEUs) or 40 hours of professional development training annually. All full-time SOH personnel in a training status receive an equivalent of eight CEUs or 80 hours of professional development training annually. In addition to training, the Navy makes heavy use of electronic media to provide timely information related to SOH responsibilities. The Command Safety Officer page on the Naval Safety Center’s website at <http://www.public.navy.mil/comnavsafecen/Pages/osh/SafetyOfficer/Index.aspx> provides an example of this.

Some Navy and Marine Corps commands are supported by full-time SOH professionals as well as other subject matter experts to augment the Command’s overall SOH program, while other commands rely on Collateral Duty Safety Officers (CDSOs) and Base Operating Support (BOS) safety related services provided by regional safety offices. Our self-assessment and oversight processes reveal that individuals at specific installations sometimes lack adequate breadth of knowledge, skills, and abilities, to adequately manage an effective and compliant SOH program. This challenge is exacerbated by limitations on travel and training, which have prevented on-site assist visits from upper echelons or attendance at a training course.

More serious than some of the individual inadequacies are programmatic challenges to obtaining professionals with adequate knowledge, skills, and abilities to manage or serve as the competent (or qualified) person for specific SOH programs, e.g., fall protection, confined space, dive safety, ionizing radiation, scaffolding, excavation and trenching, etc. Commands that employ CDSOs encounter unique challenges related to staff proficiency. CDSOs have short position terms of 12 to 18 months. Many do not receive appropriate training and must rely heavily on BOS safety related services provided by regional safety offices, which are less than adequate in some situations. The Naval Inspector General has identified this as an ongoing concern. During FY 2013, the Naval Safety and Environmental Training Center increased its offerings of the NAVOSH Program Ashore online course to address this issue. The Department is addressing this deficiency in the coming year as part of a strategic initiative to rationalize the DON safety workforce.

15. Individuals with assigned safety and health responsibilities have the authority to perform their duties.

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Navy policy in OPNAVINST 5100.23G requires commands to designate a competent SOH professional with sufficient authority and responsibility to represent and support the headquarters or activity commander in the management and administration of the command safety program. In some instances, the safety officer is placed several layers deep in the organizational structure rather than reporting directly to the commanding officer as required. This can result in a reduction in authority. When program managers are centrally located and responsible for geographically disbursed field offices, their authority to perform their role is impeded by restrictions on travel needed to perform on-site assessments and mitigation strategies. Marine Corps full-time SOH specialists are qualified through training and years of safety experience and are appointed for the implementation of their assigned safety program. Each SOH position description requires incumbents to meet the knowledge, skills and abilities of their specific occupational series as published by the Office of Personnel Management. The professional development of these workers is a top DON priority.

In addition to SOH professionals, other personnel assigned safety and health duties have the authority to perform their duties. It is the responsibility of the supervisor or person assigning individual actions to adequately explain what is expected. Often the individual has the authority over the work and authority over subordinates. What is missing most often is authority over necessary resources. Unfunded mandates occur frequently, but safety of personnel conducting work is not optional. Employees have the authority to stop work if necessary. They also have the authority to raise issues to higher authority if necessary.

16. Individuals with assigned safety and health responsibilities have the resources to perform their duties.

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Part of the annual planning process includes ensuring safety and health personnel have the right resources to perform their duties. Although every command is required to develop and submit an annual budget request, many commands report apportioned travel and training funds have been insufficient because of sequestration and other issues, which often combine to hamper effectiveness.

17. Organizational policies promote the performance of safety and health responsibilities.

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Organizational policies, stated through instructions, Commander Policy Statements, training, performance evaluation components, etc., promote the performance of safety and health

responsibilities. Additionally, the command’s performance management system, including annual performance evaluations, standardized performance requirements for supervisors, annual individual development plans, mishap review boards, fact-finding investigations, JAGMAN, and litigation reports, as well as disciplinary actions exercised through the personnel departments, promotes every individual’s unique SOH program responsibility.

For example, NAVFAC uses business management system processes, which follow the guidance and requirements of OPNAVINST 5100.23G, to convey organizational policies for safety and health. NAVSEA has endorsed OSHA’s VPP as its Safety Management System for ensuring the safety and health of our employees. In doing so, NAVSEA goes beyond compliance with Federal Regulation in our goal to encourage employees to watch out for each other and become an integral part of the NAVSEA Safety Program. Positive cues include people identifying hazards to their supervisors, reduction of mishaps, and filing Trouble Reports of ship building and repair activities.

V. SAFETY & HEALTH TRAINING

18. Employees receive appropriate safety and health training (including those overseas).

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Both Navy and Marine Corps SOH policies address SOH training requirements for SOH personnel, top managers, supervisors, employee representatives, and non-supervisory personnel. Navy and Marine Corps employees, including those overseas, participate in Navy and OSHA formal and informal safety training courses. Employees receive training appropriate to the hazards in their worksite, and there is always a safety module in the new employee orientation process. Consistent with Navy and Marine Corps policy, supervisors receive supervisory training. Union representatives also receive training. Training covers various topics applicable to employees including mishaps, traffic safety, motorcycle safety, compensation, SDSs, work procedures, smoking, stress, plans and goals, radiation, etc. HAZCOM training is required to orient all personnel to the HAZCOM program and training for personnel occupationally exposed to hazardous materials. Activities tailor the training to individual jobs and specific exposures.

Three areas of systemic weakness exist among the industrial workforce—equipment specific training, the experience/knowledge of the individuals performing the training and how it is delivered, and the certification of proficiency or evaluation (and documentation) of the effectiveness of the training. Regarding equipment specific training, there is a growing concern that the equipment (i.e., aerial work platforms, forklifts, power tools, switchgear, boilers, weight handling equipment, etc.) training is generic in nature and that the nuances and manufacturer’s specific requirements are inadequately addressed through formal or on the job training. Additionally, when training is delivered on the job, but not through a formal/documented apprenticeship program, the quality of the training (and trainer) is unknown, and effectiveness is not validated, evaluated or documented. Through the use of the SOH Management System,

increased focus will be placed on training documentation, and certification of competence will be provided through a supervisory validation process.

As noted in other areas, the ability to train personnel is often encumbered by fiscal limitations, such as sequestration.

19. New employee orientation includes applicable safety and health information.

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Safety Orientation is provided during Command Indoctrination/New Employee training; it includes all required safety topics per OPNAV 5100.23G. In the Marine Corps, Installations Safety Managers or qualified SOH specialists provide safety training (awareness) as part of the Human Resource Office new employee orientation. This orientation is provided for all personnel on the installation, including tenant activities.

20. Supervisors receive training that covers the supervisory aspects of their safety and health responsibilities.

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Navy and Marine Corps commands provide management personnel with sufficient training to actively and effectively support programs in their specific areas of responsibility. This training includes:

- (1) An overview of appropriate statutes.
- (2) An in-depth examination of management's responsibilities in relation to the region's or activity's safety program. The general emphasis of this aspect of management level training is to ensure that an aggressive and continuing safety program is implemented throughout the region or activity. Training topics include compliance procedures, mishap costs and prevention strategies, and performance standards and evaluation.
- (3) A review of applicable Navy and Marine Corps policy on all relevant aspects of safety. A broad understanding of the material addressed in this manual is essential.
- (4) An examination of region and activity program goals and objectives. Training also includes a review of local mishap experience, trends and reduction target areas.
- (5) An overview of current safety emphasis programs as defined by higher command. Supervisory personnel are defined as military personnel, E-5 or above and civilian personnel who give direction to one or more military and or civilian personnel. Regions or activities provide training for supervisory personnel and employee representatives that includes introductory and specialized courses to enable them to recognize and resolve unsafe and unhealthful working conditions and practices in the workplace.

Additionally, regions or activities provide supervisory personnel with training which includes the development of skills necessary to manage programs at the work or unit level. These skills include the training and motivation of subordinates in the development of safe and healthful work practices and involve the integration of safety with job training. Training for supervisory personnel also includes safety performance measurement (in terms of mishap and hazard prevention and individual employee and supervisor performance), hazard identification and analysis, enforcement of standards, mishap investigation, the use and maintenance of personal protective equipment (PPE), and hazardous material management.

VI. MANAGEMENT LEADERSHIP

21. Top management policy establishes clear priority for safety and health.

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Navy policy in SECNAVINST 5100.10K, OPNAVINST 5100.23G and MCO 5100.29B require commands to designate a competent SOH professional with sufficient authority and responsibility to effectively represent and support the headquarters or activity commander in the management and administration of the command safety program. Commands are either supported by full-time SOH professionals, as well as other subject matter experts to augment the Command’s overall SOH program, or by CDSOs and BOS safety related services provided by regional safety offices.

Marine Corps Occupational Safety and Health (OSH) Program, directs commanders to ensure the installation safety manager or unit safety officer is a trained, qualified SOH specialist to be assigned as a special staff member at command level per MCO 5100.29B. The installation safety manager or unit safety officer reports directly to the commander as the command safety advisor and operates under the administrative cognizance of the deputy commander or executive officer. The safety manager is delegated the authority to ensure the safety office is funded, organized, staffed and maintained.

22. Top management provides competent safety and health staff support to line managers and supervisors.

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The Vice Chief of Naval Operations (CVNO) chairs the Navy Executive Safety Board (NESB) . The NESB convenes annually in the Pentagon to consider and shape Safety & Occupational

Health and Behavioral Health policies pertinent to service readiness and support commanders at all levels to execute effective SOH programs. The NESB comprises Navy Flag Officers, the Director of Marine Corps Safety, and the Deputy Assistant Secretary of the Navy for Safety.

Additionally, the Assistant Commandant of the Marine Corps [(ACMC), the service DASHO] chairs the Executive Force Preservation Board (EFPB, the U.S. Marine Corps executive level safety council) at the national level. The EFPB convenes semi-annually in the Pentagon and via video teleconference to consider and shape Safety and Occupational, Environmental and Behavioral Health policies pertinent to service readiness. EFPB membership comprises the Deputy Commandants, Commanders of the operational forces, and the various supporting establishment commands.

During CY14, Marine Corps had approximately 1,572 federal civilian employees working overseas. The Marine Corps safety training programs and policies apply worldwide to all civilian employees, including foreign national employees. Overseas installations, bases and stations train civilian employees to the same standards as stateside offices. The Marine Corps also deploys SOH Specialists (Tactical Safety Specialists) to support operational units and Forward Operating Bases with skilled safety and occupational health professionals. Federal regulations, Department of Defense and DON instructions, and U. S. Marine Corps orders cover overseas federal civilian employees. Overseas installation safety programs are inspected by the same safety oversight programs as stateside, i.e. Commanding General Inspection Program, Command Safety Assessments, the Inspector General of the Marine Corps Inspection Program, and the Commandant of the Marine Corps Command Safety Assessment Program.

The Navy and Marine Corps Safety program provides for approximately 2000 full-time SOH specialists who are qualified through training and years of safety experience, and are appointed in writing for the implementation of their assigned safety program. Each SOH position description requires that incumbents meet the knowledge, skills and abilities of their specific occupational series as published by the Office of Personnel Management. Navy and Marine Corps civilian SOH personnel comprise the General Schedule occupational specialties: 0017–Explosives Safety Specialist, 0018–Occupational Safety & Health Specialist, 0019–Occupational Safety & Health Technician, 0803–Safety Engineer, and 0690–Industrial Hygienist. The professional development of these workers is supported by the Safety and Occupational Health Community of Interest, which provides training opportunities and fiscal resources.

23. Managers delegate the authority necessary for personnel to carry out their assigned safety and health responsibilities effectively.

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In the DON, the authority and responsibility for creating and maintaining a safe workplace is delegated down to the lowest supervisory level including the responsibilities of individual staff members to help ensure a safe workplace. Many commands use designation or appointment

letters to delegate authority necessary to carry out assigned safety and health responsibilities. Service doctrine and policy states in each unit the Executive Officer or Deputy Commander is responsible for the command's SOH program. Additionally, select qualified installation SOH safety specialists are appointed in writing by Commanders as SOH program managers. These SOH program managers have authority and responsibility for the day-to-day implementation of the SOH program, as well as the authority and responsibility to provide the commander with SOH consultation and advice.

24. Managers allocate the resources needed to properly support the organization's SHMS.

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Navy and Marine Corps policy requires headquarters commands to ensure SOH professionals in each region and field activity have sufficient authority and responsibility to plan for and ensure funds for the staff, their equipment, materials, and the training required to ensure implementation of an effective SOH program. Per this guidance, resources are allocated to support the organization's safety and health management system, but those resources are inadequate to properly support development and implementation of new initiatives and process improvements, fund upper echelon oversight, and validate managers' internal control program. Commands are required to examine the adequacy of resource levels during the annual self-assessments, and this area is also evaluated during the SOHME process.

For example, the Marine Corps has approximately 300 full-time employees executing the service-wide SOH program. During CY14, the service expended ~\$31,119,000 to administer and implement the Marine Corps Safety Program. As a "Special Staff Officer" to the commander, the safety officers or managers have the responsibility and authority to ensure the safety office is organized, staffed and funded, and maintains a comprehensive SOH Management System (SOHMS) capable of supporting the commander's mission.

When significant shortfalls are identified or emerging hazards are encountered, subordinate units may request additional funds to correct or mitigate the deficiencies. During CY14, CMC Safety Division provided \$609,000 in special funding to assist unit safety managers in correcting the aforementioned deficiencies.

25. Managers assure that appropriate safety and health training is provided.

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Command and Installation Safety Managers ensure SOH personnel are fully trained. Training is received during formal or informal courses, laboratory exercises, field study, and other experiences. Training ensures competency to perform technical monitoring, consulting, testing,

designing, and other related program development and implementation. SOH personnel are required to receive a minimum of eight continuing education units (CEU) or equivalent per year. Formal subject matter training includes SOH standards—general industry and construction, introduction to hazardous materials, electrical safety standards, hazard prevention and control, mishap investigation, risk management, and introduction to industrial hygiene. Training also includes statistics, safety law, explosives safety, confined space entry, fire prevention safety, safety training methods, radiation safety, traffic safety, safety engineering/facility design, ergonomics, machines and machine guarding, lead and asbestos program management, and range safety.

Training is delivered in several venues, e.g., OSHA Training Institutes, Colleges and Universities, Naval Safety and Environmental Training Center, US Army Career Program-12 SOH Training Program, Computer Based/Distance Learning, and through commercial SOH training courses. Of particular note is the Joint Safety Professional Development Symposium (JSPDS) Webinar. This annual training event is hosted by the Naval Safety and Environmental Training Center and delivered virtually via Adobe Connect. In addition to the traditional Safety, Occupational and Environmental Health, Industrial Hygiene, and Radiation Safety training tracks, this year the JSPDS integrated both Environmental Protection and Energy Management into the syllabus. The Naval Safety and Environmental Training center reports that over 2,200 individuals have registered and participated in at least one of the 150 discrete training or educational seminars.

The end result is a Navy/Marine Corps SOH workforce highly skilled and available worldwide to provide requisite SOH training to all naval personnel, (i.e., military members, civilian managers, supervisors, employees and even family members) in accordance with the requirements detailed in 29 CFR Part 1960.

26. Top management is involved in the planning and evaluation of safety and health performance.

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The DON’s DASHO is the Assistant Secretary of the Navy for Energy, Installations and Environment. Additionally, the DASHO has delegated SOH management and oversight to the Deputy Assistant Secretary of the Navy for Safety. Service level SOH responsibilities reside with the VCNO and the ACMC. These Four Star officers are responsible for the management and administration of the safety and health program in the Navy and Marine Corps.

OPNAVINST 5100.23G, Navy Safety and Occupational Health (SOH) Program Manual and NAVMC DIR 5100.8, Marine Corps Occupational Safety and Health (OSH) Program Manual, directs commanders to ensure the installation safety manager or unit safety officer is a trained, qualified SOH specialist assigned as a special staff member at command level. The installation

safety manager or unit safety officer reports directly to the commander as the command safety advisor and operates under the administrative cognizance of the deputy commander or executive officer. The safety manager is delegated the authority to ensure the safety office is funded, organized, staffed and maintained. All mishap reports, inspections, program assessments, and hazard remediation plans ultimately flow up and down through this codified chain of command.

VII. EMPLOYEE PARTICIPATION

27. There is an effective process to involve employees in safety and health issues.

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Both Navy and Marine Corps policy strongly encourages direct employee involvement in the command’s safety councils and committees to serve as safety representatives and, if necessary, file an anonymous report of unsafe/unhealthy working conditions (such as the Marine Corps’ Any-Mouse Program). NAVFAC has found that the most effective safety committees are employee driven. Additionally, as part of the self-assessment process, employees are asked for their input on the effectiveness of their commands’ safety program. Employees are encouraged to report an unsafe situation or near-miss to both their chain of command and the SOH professional(s) for their command. Participation in OSHA’s VPP has been highly effective at engaging employees to influence safety at their commands. Instead of just providing safety for employees, safety offices work with employees to ensure an optimal safety program focused on continuous improvement.

28. Employees are involved in organizational decision-making regarding the allocation of safety and health resources.

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VPP is one of several DON approved Safety Occupational Health Management Systems (SOHMS) and satisfies emerging DoD policy requiring SOHMS implementation. VPP was developed and implemented by OSHA to recognize the private industries and federal agencies that have implemented effective safety and health management systems and maintain injury and illness rates below national Bureau of Labor Statistics averages for their respective industries. Those workplaces that do so are awarded “Star” status by OSHA. The Navy and Marine Corps currently have 23 sites participating in VPP.

VPP sites must demonstrate a high degree of management support and employee involvement. Management and employees take this responsibility seriously, and their actions are an example of how an exemplary safety and health management system operates. Employee input and

feedback is encouraged through empowerment, so safety and health deficiencies are identified and corrected as they arise. Employees are involved in safety and health teams, meetings, and inspections. New equipment and processes are analyzed in an effort to avoid injuries and illnesses. The result of this empowerment and involvement is that employees, along with management, are successful in their efforts to continuously improve the safety and health environment. Also, this involvement increases feelings of ownership of and commitment to the overall command safety program process.

29. Employees are involved in organizational decision-making regarding safety and health training.

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Both Navy and Marine Corps Safety Programs encourage all personnel to assume greater roles in their safety by championing command participation in the VPP. Command Safety Council and safety committees are opportunities for employees and supervisors to participate in their safety program. In addition, all personnel are encouraged to communicate safety concerns and solutions through the Any-Mouse Program; reporting unsafe or unhealthful hazards without fear of reprisals; safety’s open door policies; semi-annual (all hands) safety stand downs; new employee orientation; supervisor safety committee; and supervisor safety training. Additionally, the Marine Corps Center for Lessons Learned collects from military and civilian personnel data for analysis and distribution of after-action reports, critical material assessments, and hazard & near miss reports.

30. Employees participate in the evaluation of safety and health performance.

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Employees and military members are encouraged and empowered to participate by providing input and feedback to command safety processes, being involved in safety inspections, joining in safety and health teams and meetings, analysis of current processes with the encouragement to provide enhancements, and the empowerment to speak with the command element regarding safety. The 42 individuals qualified as VPP Special Government Employees provide a good example of exceptional employee involvement in SOH programs.