

# CONN-OSHA QUARTERLY

Connecticut Department of Labor - Division of Occupational Safety and Health

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## Job Hazard Analysis

By Dave Boutin, Safety Consultant

Most jobs have hazards, many of them are serious hazards. When uncontrolled, these hazards can cause employees to get sick or hurt at work. Some of these cases will be serious and disabling with a few even resulting in death. A Job Hazard Analysis (JHA) is a technique of breaking a job into small steps, identifying the hazards of each step and putting effective controls in place to stop injuries and illnesses. In addition to reducing injury and illness rates, employers will likely reduce property damage and down time as well.

As for the JHA itself, writing one can be fairly simple. In many cases it is really just writing down the thought process that the company owner, supervisor or project manager is probably already doing for each job; figuring the steps of doing the job, thinking about problems that may occur and then planning ways to avoid each problem.

JHA formats may vary. A quick search on the internet will reveal a variety of formats. Most have three sections, one section listing the steps of doing the job, a second section listing hazards associated with each step and a third section listing controls for each hazard. Some may have additional sections for convenience, such as listing personal protective equipment (PPE) typically needed for the job. A sample JHA form can be found in OSHA's JHA booklet Publication [OSHA 3071](#).

When listing controls for identified hazards, give first consideration to **engineering controls**. Engineering controls, such as replacing a hazardous cleaner in favor of a non-hazardous alternative may provide other benefits aside from just eliminating the hazard. Eliminating hazardous chemicals may eliminate the need to wear bulky PPE and make employees more comfortable. Using a less hazardous product may save time normally needed for suiting up and decontamination. Even when a non-hazardous solution is more expensive, costs may be outweighed by savings in time, PPE consumption, exposure monitoring, medical exams and waste disposal. If the process hasn't been reviewed for a while, you may even find new products that work better than the old ones.

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## Sample Job Hazard Analysis Form

<i>Job Title:</i>	<i>Job Location:</i>	<i>Analyst</i>	<i>Date</i>
<i>Task #</i>	<i>Task Description:</i>		
<i>Hazard Type:</i>	<i>Hazard Description:</i>		
<i>Consequence:</i>	<i>Hazard Controls:</i>		
<i>Rational or Comment:</i>			

Using a JHA is easier than making one. Make copies of the JHA for employees to have in their work area or take to their jobsite. At the work area, read through the JHA as you walk the job. Use the JHA as a guide to help you think about possible hazards. If you see a hazard that isn't listed on the JHA, write it in. The foreman should review the JHA with each new employee assigned to the job. For jobs that don't change often, review the JHA periodically giving thought to new equipment, new chemicals or new techniques that may create new hazards or present opportunity for better controls. Even if the job doesn't change, it should be reviewed periodically. Check to see if any injuries or illnesses were reported since the JHA was last reviewed.

A job hazard analysis is a helpful tool, but is only one component of a comprehensive safety and health management system. When used consistently, a comprehensive safety and health program protects employees from injuries and illnesses. Employers with fewer injuries and illnesses benefit from better employee morale, less down time, lower premiums and other savings. Start using JHAs today to take that first step in advancing your program to a higher level.

Utilize **work practice controls** when engineering controls do not eliminate the hazard. Regular use of work practice controls like wet sweeping to prevent dust and proper glove removal techniques develop good habits. Making good methods into habits makes employees more likely to use them when it counts.

When engineering or work practice controls cannot eliminate the hazard, employers must use **administrative controls and PPE**. Administrative controls include limiting the amount of time an employee performs certain activities to keep exposures below permissible exposure limits. PPE includes using respirators, gloves, hearing protection or safety glasses. Although PPE can provide effective protection, the equipment can fail if not used correctly. For example, if a respirator doesn't seat properly or a glove rips, employees may be exposed to hazards. Administrative controls and PPE are the least protective measures and should not be used in place of feasible engineering and work practice controls.

### Fatality & Casualty Reporting

#### State & Town:

- Report to CONN-OSHA
- (866) 263-6946
- (866) 241-4060 *Toll Free*

#### Private Employers:

- Report to Federal OSHA
- (800) 321-6742

## Safety & Health Program Management

By John Able, CSP

Every company strives to maintain a safe workplace. Companies intend to comply with relevant laws, and have an expectation the employees will follow rules and regulations that apply to their actions and conduct. To achieve this end, employees should be provided effective on-going training & education and written programs need to be current. Employees also should be trained to identify and immediately address observed hazards, and to report them in a timely manner.

The following is one example of how to improve/boost your current safety culture and programs. I call it the **“READ, WALK, TALK”** system:

First, assign each month a safety or health subject. The table illustrates a partial list of safety & health subjects that may or may not apply to your facility. Only list those items which apply to your facility. You may have more, or less than 12 requirements, just be sure to cover those with annual requirements every year.

MONTH	SUBJECT
January	Personal Protective Equipment (PPE)
February	Hazard Communication (chemical safety)
March	Powered Industrial Trucks (fork trucks)
April	Emergency Action & Fire Prevention Plans
May	Machine Guarding
June	Electrical Safety
July	Trips, slips & falls
August	Confined Spaces
September	Noise/Hearing Protection
October	Respirators
November	Lockout/Tagout (Control of hazardous energy sources)
December	Bloodborne Pathogens/Universal Precautions

### Requesting a Consultation

To learn more or request your free consultation from CONN-OSHA:

Call us at 860-263-6900,

Or visit our [webpage!](#)

**“READ”** Each month, those responsible for that month’s written program subject area will review that company policy. If revisions are required, appropriate changes will be authorized and made. Then, affected employees will be trained concerning policy changes, and training should be documented.

**“WALK”** After this program review, the facility will be assessed for compliance concerning this specific safety or health subject. During the walk-around, with the program requirements fresh in your mind, determine if there are any physical changes required for uniformity with the written program. As you assess the facility, you may find there are inconsistencies between the written program and the facility, materials, equipment or tools. Decide if any actions are required to provide consistency, by either updating the program, or correcting the issues identified.

**“TALK”** Also, during this facility inspection, employees will be reminded of their responsibilities as they relate to the safety or health subject. These informal discussions will quickly determine if affected employees need refresher training, and in addition, employees may have suggestions or concerns that could improve overall safety or productions needs.

By engaging in **“READ, WALK, TALK”** activities on a monthly basis, written programs will remain current, and equipment needs and defects may be uncovered. Employees are provided a monthly opportunity to discuss safety in an informal setting. Choose topics that apply to your workplace operations and assign each to a Calendar month and begin your monthly Safety Culture of **“READ, WALK, TALK.”**

## OSHA Injury and Illness Reporting and Recording

Reminder: If you are required to keep an OSHA 300 log, post your OSHA 300A- "Summary of Work-Related Injuries and Illnesses" for calendar year 2020 in your workplace from February 1 through April 30. If required to do so, electronically report your OSHA Form 300A by March 2 via this [portal](#).

### All of Connecticut's public sector employers are required to electronically report their OSHA 300A data.

In the private sector, only a small fraction of establishments are required to electronically submit their Form 300A data to OSHA. Establishments that meet *any* of the following criteria DO NOT have to send their information to us. Remember, these criteria apply at the establishment level, not to the firm as a whole.

- The establishment's peak employment during the previous calendar year was 19 or fewer, regardless of the establishment's industry.
- The establishment's industry [is on this list](#), regardless of the size of the establishment.
- The establishment had a peak employment between 20 and 249 employees during the previous calendar year AND the establishment's industry [is not on this list](#).

### OSHA's Recordkeeping Requirements During the COVID-19 Pandemic

Tragically, Connecticut's public and private sector employees have been exposed to COVID-19 at work.

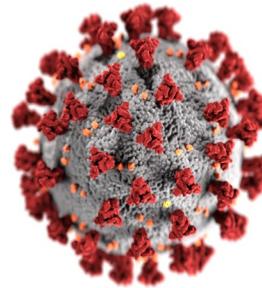
OSHA has issued temporary enforcement guidance related to the COVID-19 pandemic for Recording and Reporting Occupational Injuries and Illnesses.

#### How to Subscribe

Contact [grayson.gregory@ct.gov](mailto:grayson.gregory@ct.gov) and in the subject line type "Subscribe" and then provide your e-mail address in the body of the message.

Under OSHA's recordkeeping requirements, COVID-19 is a recordable illness, and thus employers are responsible for recording cases of COVID-19, if:

- The case is a confirmed case of COVID-19;
- The case is work-related as defined by 29 CFR § 1904.5; and
- The case involves one or more relevant recording criteria set forth in 29 CFR § 1904.7 (e.g., medical treatment, days away from work).



Employers should make every effort to determine whether employee COVID-19 illnesses are work-related and thus recordable. COVID-19 is a respiratory illness and should be recorded as such on the OSHA Form 300. Given the nature of the disease and the ubiquity of community spread, in many instances it remains difficult to determine whether a COVID-19 illness is work-related, especially when an employee has experienced potential exposure both in and out of the workplace.

In light of these considerations, OSHA is exercising its enforcement discretion in order to provide certainty to employers and workers. Accordingly, until further notice, Federal OSHA has stated that it will enforce the recordkeeping requirements of 29 CFR 1904 for employee COVID-19 illnesses for all employers according to the guidelines summarized in the memo: [Enforcement Guidance for Reporting Cases of COVID-19](#).

Note: Pursuant to existing regulations, employers in the private sector with 10 or fewer employees and certain employers in [low hazard industries](#) have no recording obligations unless they receive a Bureau of Labor Statistics survey. However, these employers and all other private and public sector employers must report fatalities, amputations, loss of an eye and in-patient hospitalizations. These reporting requirements include work-related COVID-19 illnesses that result in a fatality or an employee's in-patient hospitalization.

Save the  
**DATE**

## Training Schedule



### **OSHA Reporting and Recording of Injuries and Illnesses**

2/19/21

Everybody knows that recording occupational injuries and illnesses is a critical part of every safety program, but many companies still are unsure of the criteria required by the OSHA Recordkeeping rule. This interactive session will help remove the confusion, provide numerous examples of injuries and their recordability, and prepare you to complete the summary form for posting.

### **Ladder Safety**

3/2/21

Ladders are a major source of injuries and fatalities in the workplace. However, falls can be reduced if people use caution when climbing ladders or when working in places where falls are a potential hazard. This class will show attendees how falls from ladders can be prevented through education that includes planning for their use, inspecting the ladder prior to use, and using basic ladder safeguards.

### **Powered Industrial Trucks (Fork Trucks)**

3/11/21

With more than one million forklifts operating in the U.S. today, safe operations and effective operator training are top priorities. This workshop introduces participants to OSHA's Powered Industrial Truck standard. This session will help attendees develop an industrial truck training program, and pedestrian safety will also be discussed.

### **Safe Driving**

4/6/21

The training will present safe driving techniques and behaviors in an interesting format designed to motivate attendees to immediately assess their own actions and behaviors.

### **Work Zone Safety**

4/27/21

Major increases in traffic volumes and changing traffic patterns expose personnel to life-threatening situations every day. Basic guidelines for work zone traffic control and the requirements of Part VI of the Manual on Uniform Traffic Control Devices (MUTCD) with particular emphasis on short term work sites on roads and streets in rural and small urban areas will be presented.

### **Fall Prevention**

5/4/21

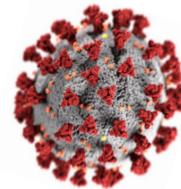
Falls from heights and on the same level (a working surface) are among the leading causes of serious work-related injuries and deaths. OSHA has issued a final rule on Walking-Working Surfaces and Personal Fall Protection Systems to better protect workers in general industry from these hazards by updating and clarifying standards and adding training and inspection requirements. During this training, we will cover the new rule, and how to recognize and minimize fall hazards.

### **Breakfast Roundtable**

*3rd Tuesday of the Month*

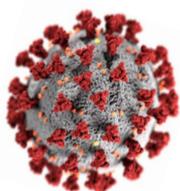
These meetings cover subjects ranging from evacuation plans and fire extinguishers to air quality and ergonomics. The intent of these free 90-minute workshops is to discuss safety and health issues in a supportive and informal environment. The roundtable meetings are held from 8:15 am to 9:45 on the third Tuesday of the month.

[Visit this link for more info and to sign up.](#)



## Hazard Corner: Health Care Workers and COVID Deaths

“Lost on the Front Line,” a partnership between Kaiser Health News and The Guardian, has been counting healthcare workers’ COVID deaths and aims to honor front line workers such as doctors, nurses, social workers, hospital food-service workers and cleaning crews. The project was launched because there is currently no reliable national database to track health care worker COVID deaths. As of 2/5/2021, the Centers for Disease Control and Prevention reported 1,354 COVID-related deaths among health workers – but the agency admits that this is a likely undercount. As of 2/5/2021, the “Lost on the Frontline” project had counted 3,373 healthcare worker deaths. Although the report does not come to any conclusions about where or how these health care workers were infected, the report provides moving portraits of these individuals. The report and its key findings can be found [here](#).



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