

**BILL PURCELL
MAYOR**



**DEPARTMENT OF FINANCE
INTERNAL AUDIT SECTION**

**METROPOLITAN
GOVERNMENT OF NASHVILLE
AND DAVIDSON COUNTY**

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January 17, 2006

Dorothy Shell-Berry, Director
Human Resources Department
222 3rd. Ave. N, Suite 200
Nashville, TN 37201

Report of Internal Audit Section

Dear Ms. Shell-Berry:

We have recently completed a performance audit of the Occupational Health and Safety Services Program. *Government Auditing Standards* issued by the Comptroller General of the United States define performance audits as follows:

Performance audits entail an objective and systematic examination of evidence to provide an independent assessment of the performance and management of a program against objective criteria as well as assessments that provide a prospective focus or that synthesize information on best practices or cross-cutting issues. Performance audits provide information to improve program operations and facilitate decision-making by parties with responsibility to oversee or initiate corrective action, and improve public accountability.

A performance audit is different than a financial statement audit, which is limited to auditing financial statements and controls, without reviewing operations and performance. In performing this audit, we retained Matrix Consulting Group to work under our direction. Their final report dated January 17, 2006, *Performance Audit of the Occupational Health and Safety Services Program*, accompanies this report and is hereby submitted to you.

During fiscal year 2002 the responsibility for the Occupational Health and Safety Program was transferred from the Employee Benefit Board to the Human Resources Department.

The purpose of the Safety Program is to provide Loss and Injury Prevention and Claims Management products to Metro departments and agencies so they can experience a safe, healthy and productive workforce with minimal disruption due to injury and illness.

The Safety Program in the Human Resources Department had 2.6 full-time equivalent positions in fiscal year 2004-05 and a budget of \$200,600.

Objectives, Scope, and Methodology

The primary objectives of this performance audit were as follows:

- Develop a profile of the Occupational Health and Safety Services Program.
- Develop an in-depth understanding of the key issues impacting the Occupational Health and Safety Program.
- Benchmark the performance of Metro's Occupational Health and Safety Program and practices to best management practices.
- Evaluate operations and staffing levels.
- Evaluate the structure used to deliver the occupational health and safety services program.
- Evaluate the effectiveness of the Occupational Health and Safety Services Program.

This audit utilized injured on duty data for 2002, 2003, and the first six months of 2004 for Metro and comparisons of the incident rate for Metro to local governments and the State.

The methodology employed throughout this audit was one of objectively reviewing various forms of documentation, including written policies and procedures, financial information and various other forms of data. Management, administrative and operational personnel, as well as personnel from other Metro departments, and other stakeholders, were interviewed. For departments without a fulltime safety coordinator, a survey was distributed to employees whose collateral duties included serving as their department's safety coordinator. Data obtained from various sources were analyzed, and the practices and performance of the Occupational Health and Safety Program of Metropolitan Nashville and Davidson County were evaluated against the industry best management practices.

We performed the audit procedures in accordance with generally accepted government auditing standards.

Findings and Recommendations

The Matrix Consulting Group report addresses the Occupational Health and Safety Services Program and the resulting findings and recommendations in detail. The following is an overview of some of the more significant findings and recommendations included in their report.

- The central Occupational Health and Safety Program lacks necessary expertise and resources to provide the level of support needed by the departments. Metro should establish a Safety Manager position to serve as the manager of the central Occupational Health and Safety Program. The estimated annual cost of salary and benefits is \$101,900.
- The level of staffing for Occupational Health and Safety in Metro is much lower than the local governments included in the comparative survey. The level of staffing for the central Occupational Health and Safety Program should be increased from 2.6 full-time equivalent positions to 6 full-time equivalent positions. The estimated annual cost for the additional staffing is \$213,400.

- The lost time injury rate for Metro in 2002, the last year that comparable data for other local governments was available, was three times higher than the average for other local governments in Tennessee. If Metro's lost time injury incident rate approached the average of other local governments in Tennessee, it would be able to reduce the number of lost workdays by the equivalent of five staff years.
- The medical costs associated with the injury on duty program approximate \$5.2 million annually. If Metro can enhance the management of its Occupational Health and Safety Program and its lost time injury incident rate approached the average of other local governments in Tennessee, the medical costs associated with the injury on duty program could be reduced in the mid to long-term by approximately \$2 million.

Additional detailed findings and recommendations can be found in the Matrix Consulting Group report in chapters 6 through 10 accompanying this report. A summary of findings and recommendations and the related fiscal impact can be found in Chapter 1 of the Matrix report.

January 17, 2006
Ms. Shell-Berry
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Management's response to the audit recommendations is attached to this report.

We appreciate the cooperation and help provided by all Occupational Health and Safety Services Program staff.

This report is intended for the information of the management of the Metropolitan Government of Nashville and Davidson County. This restriction is not intended to limit the distribution of this report, which is a matter of public record.

Internal Audit Section

Don Dodson
Internal Audit Manager

Copy: Mayor Bill Purcell
Karl F. Dean, Director of Law
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BILL PURCELL
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METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY

CIVIL SERVICE COMMISSION
SUITE 200, 222 BUILDING
3RD AVENUE NORTH
NASHVILLE, TENNESSEE 37201

12 January 2006

Don Dodson
Department of Finance
Internal Audit Division
222 Third Avenue North, Suite 401
Nashville, TN 37201

RE: Performance Audit

Dear Mr. Dodson:

The Department of Human Resources is pleased to have received the performance audit report recently completed by Matrix.

We have reviewed the report and are in basic agreement with its findings. We do feel that some of the findings will require additional research before implementation of the recommendations.

Sincerely,

A handwritten signature in cursive script that reads "Dorothy Shell-Berry".

Dorothy Shell-Berry
Director, Human Resources

**Performance Audit of the
Occupational Health and Safety Services Program**

**METROPOLITAN NASHVILLE AND DAVIDSON
COUNTY, TENNESSEE**

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January 17, 2006

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1. INTRODUCTION AND EXECUTIVE SUMMARY

1. INTRODUCTION AND EXECUTIVE SUMMARY

The report, which follows, presents the results of the performance audit of the occupational safety and health conducted by the Matrix Consulting Group for the Metropolitan Nashville and Davidson County (Metro).

This first chapter introduces the analysis - outlining principal objectives and how the analysis was conducted - and presents an Executive Summary.

1. PROJECT SCOPE OF WORK

The analysis by the Matrix Consulting Group of occupational safety and health involved the following steps.

- **Developed an in-depth understanding of the key issues impacting the occupational safety and health program.** To evaluate the employee occupational health and safety program, Matrix Consulting Group conducted interviews with Human Resources staff, as well as key department staff. Interviews focused on goals and objectives with regard to the delivery of employee health and safety services, key operating issues with the current system, specific concerns, review of current occupational safety and health processes, authority distribution and overall program approach.
- **Developed a Profile of the Occupational Health and Safety Services program.** The Matrix Consulting Group conducted interviews with department safety coordinators and other key staff to document current organization of services, the structure and functions of the occupational safety and health, budgets, review of accident / incident reports and historical data, development of comparative data, etc.
- **Assessed 'customer satisfaction' with delivery of occupational safety and health services.** The project team utilized a safety perception survey to assess employees' perceptions of the Occupational Health and Safety Services program.
- **Conducted a comparison of Metro's occupational safety and health program and practices to 'best management practices.'** The 'best management practices' included comparisons of quantitative and qualitative practices which included topics such as proactive occupational safety and health

program elements, training, funding, management and program delivery. These best practices are based upon guidelines developed by a number of organizations dedicated to improving employee safety such as OSHA and their Voluntary Protection Program (VPP), TOSHA, the National Safety Council, the Public Risk Management Association, the Public Agency Risk Manager's Association, etc.

- **Evaluated the structure used to deliver the occupational safety and health services.** This included interviews with key staff to develop an understanding of the current service delivery model, comparisons to 'best management practices' and the comparative survey.
- **Evaluated the effectiveness of the occupational safety and health Services program.** Based on interviews, data collection, 'best management practices' and the comparative survey, the project team assessed the effectiveness of the occupational safety and health program. This included a review of the adequacy of management controls, data trends, compliance with policies and procedures, levels and type of training, etc.
- **Evaluated the level of staffing in the occupational safety and health program.** Based on several tasks, the project team evaluated the staffing needs of Metro's occupational safety and health program.

The section, which follows, provides a discussion of the project methodologies.

2. PROJECT METHODOLOGIES

The processes utilized in developing this study are described in the points below:

- Interviews were conducted with key staff from Metropolitan Nashville and Davidson County and the Human Resources Department, as well as key staff from operating departments. The purpose of these interviews was to develop an understanding of potential issues with performance and operations of the occupational safety and health program.
- Conducted interviews with safety coordinators in the operating departments. For departments without a fulltime safety coordinator, a survey was distributed to employees whose collateral duties included serving as their department's safety coordinator.
- Through interviews, data collection and discussion with key staff, the consulting team documented the organization, operation, management systems, and staffing of the occupational safety and health program in the Human Resources Department.

- The consulting team utilized data, including workload, best management practices and comparative survey information to assess the organization, operations and staffing of the occupational safety and health program.

The following section provides a discussion of the structure of the report.

3. STRUCTURE OF THE REPORT

The report is organized in the following chapters:

- **Chapter 1** – presents the introduction and executive summary.
- **Chapter 2** – provides a descriptive profile of the occupational safety and health program.
- **Chapter 3** – presents a comparative survey of other local governments and their occupational safety and health programs.
- **Chapter 4** – presents a comparison of best management practices for occupational safety and health to the actual practices utilized by Metro.
- **Chapter 5** – presents the results of the employee survey regarding occupational safety and health practices.
- **Chapter 6** – presents an analysis and recommendations regarding the plan of organization of occupational safety and health program.
- **Chapter 7** – presents an analysis and recommendations regarding management and employee involvement for the occupational safety and health program.
- **Chapter 8** - presents an analysis and recommendations with respect to injury and claim management.
- **Chapter 9** – presents an analysis and recommendations regarding workplace hazard identification and control.
- **Chapter 10** – presents an analysis and recommendations regarding occupational safety and health training.

The section, which follows, presents the executive summary.

4. EXECUTIVE SUMMARY

The Matrix Consulting Group has prepared this summary of the findings, conclusions and key recommendations contained in the attached report. This summary is presented in the table below.

Index	Key Findings and Observations	Recommendation	Cost/(Savings)
6.2	The central Occupational Safety and Health Program is organized as part of the Human Resources Department The practice of risk management has evolved and expanded over the past four decades.	Management should evaluate the current organizational placement of the central Occupational Safety and Health Program.	\$0
6.3	The central Occupational Safety and Health Program lacks necessary expertise and resources to provide the level of support needed by the departments.	Establish a Safety Manager position to serve as the manager of the central Occupational Safety and Health Program.	\$101,900
6.4	The full-time safety coordinators in the Parks and Recreation Department, Fire Department, and the Police Department are classified as a Professional Specialist, Administrative Assistant.	The full-time safety coordinators in the Parks and Recreation Department, Fire Department, and the Police Department should be classified as Safety Coordinator.	\$0
6.5	The roles and responsibilities of the central Occupational Safety and Health Program and the safety coordinators in departments have not been formally defined.	The roles and responsibilities for occupational safety and health should be clarified in a formal written policy.	\$0
6.6	Two written occupational safety and health programs for Metro have been submitted to and approved by TOSHA: one for the Metropolitan Nashville Public Schools (MNPS) and the other for the balance of the Metro government.	The two written occupational safety and health programs that have been submitted to and approved by TOSHA for Metro should be consolidated into a single program. The Safety Manager within the central Occupational Safety and Health Program should be designated as the safety and health official for Metro including MNPS.	\$0
6.7	Metro utilizes a hybrid system for the delivery of occupational safety and health services.	Metro should continue to utilize a hybrid system for delivery of occupational safety and health services.	\$0

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Performance Audit of the
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Index	Key Findings and Observations	Recommendation	Cost/(Savings)
7.1	Conspicuous management commitment to and support of the occupational safety and health program is essential to the visions and leadership for Metro's safety efforts.	The Mayor's office should issue and executive order that outlines Metro's commitment to occupational safety and health for its employees.	\$0
7.2	Most departments have not developed goals, objectives and performance measures for occupational safety and health. The goals, objectives and performance measures developed for the central Occupational Safety and Health Program are limited.	The central Occupational Safety and Health Program should develop goals, objectives and performance measures.	\$0
7.3	Best management practices for occupational safety and health have not been developed to serve as a model for departments.	The central Occupational Safety and Health Program should utilize best practices for occupational safety and health. These best practices should be included in the Metro safety manual.	\$0
7.4	A Metro-wide occupational safety and health manual has not been developed.	The central Occupational Safety and Health Program should develop a Metro-wide safety manual.	\$0
7.5	Independent audits of departments are not conducted to assess the effectiveness of their occupational safety and health programs.	The central Occupational Safety and Health Program should conduct audits of departmental occupational safety and health programs.	\$0
7.6	The Safety Advisory Board is not effectively utilized.	The central Occupational Safety and Health Program should expand the role of the Safety Advisory Board.	\$0
7.7	The role of the safety coordinator committee has not been formally defined.	The central Occupational Safety and Health Program should clarify the role of the safety coordinator committee in writing.	\$0
7.8	Not every department has a safety committee.	Every department should establish an occupational safety and health committee. The central Occupational Safety and Health Program should audit the effectiveness of these committees.	\$0

METROPOLITAN NASHVILLE AND DAVIDSON COUNTY**Performance Audit of the****Occupational Health and Safety Services**

Index	Key Findings and Observations	Recommendation	Cost/(Savings)
7.9	Separate occupational safety and health budgets have not been established within each department. Interviews with safety coordinators indicated that some lacked expenditure authority for safety materials, equipment, etc.	Separate occupational safety and health budgets should be established in each department. Safety coordinators should be provided with expenditure authority to purchase safety equipment, training materials, etc.	\$0
7.10	Systems to hold supervisors and managers in Metro accountable for occupational safety and health have not been fully developed.	The central Occupational Safety and Health Program should develop criteria for inclusion within the performance appraisal system used for managers and supervisors. The central Occupational Safety and Health Program should audit the effectiveness of the use of these criteria in performance appraisals of managers and supervisors.	\$0
7.11	Formal, ongoing communication of Metro's commitment to occupational safety and health is not provided.	The central Occupational Safety and Health Program should publish a Metro-wide safety newsletter.	\$0
7.12	Staff resources for occupational safety and health services vary considerably among departments. Those departments without full-time safety coordinators do not have sufficient time or expertise to fully develop and effective occupational safety and health program.	The central Occupational Safety and Health Program should provide technical assistance to departments without full-time safety coordinators to implement and fully develop their occupational safety and health program	\$0
7.13	The level of staffing for occupational safety and health in Metro is much lower than the local governments included in the comparative survey.	The level of staffing for the central Occupational Safety and Health Program should be increased from 2.6 full-time equivalent positions to 6 full-time equivalent positions.	\$213,400

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Index	Key Findings and Observations	Recommendation	Cost/(Savings)
7.14	The present level of staffing in the central Occupational Safety and Health program and in MNPS precludes development of an effective occupational safety and health program.	The MNPS should be authorized a Safety Coordinator. All of the occupational safety and health staff allocated to MNPS should be assigned to the Employee Relations Office including the Coordinator of Safety and Environmental Health currently assigned to the Facilities Department.	\$84,700
8.1.1	Interviews with safety coordinators indicated that many of these staff did not know what was an OSHA recordable injury and illness.	The central Occupational safety and Health Program should develop a formal written policy and procedure that provides a clear explanation of occupational illnesses and injuries that are OSHA recordable cases.	\$0
8.1.2	Interviews with safety coordinators indicated significant variation in the injury and illness records maintained by departments	The central Occupational safety and Health Program should develop a formal written policy and procedure that provides a clear explanation of the record collection and maintenance of records regarding employee injuries and illnesses.	\$0
8.2	Metro is not in compliance with TOSHA regarding the reporting of OSHA recordable injuries and illnesses.	The central Occupational Safety and Health Program should expand the data reported in quarterly reports to include all OSHA recordable cases and not just lost time incidents.	\$0
8.3	Interviews with safety coordinators indicated that departments use different criteria to determine whether an injury on duty claim is a valid claim.	The central Occupational Safety and Health Program should develop a formal written policy and procedure that defines how to evaluate and determine the validity of an injury on duty claim.	\$0
8.4	The quarterly lost time injury report underreports actual injuries.	The central Occupational Safety and Health Program should take steps to assure the accuracy of the quarterly lost time injury report.	\$0

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Index	Key Findings and Observations	Recommendation	Cost/(Savings)
8.5	<p>The lost time injury rate for Metro in 2002, the last year that comparable data for other local governments was available, was three times higher than the average for other local governments in Tennessee.</p> <p>If Metro's lost time injury incident rate approached the average of other local governments in Tennessee, it would be able to reduce the number of lost workdays by the equivalent of five staff years.</p> <p>The medical costs associated with the injury on duty program approximate \$5.2 million annually. If Metro can enhance the management of its occupational safety and health program and its lost time injury incident rate approached the average of other local governments in Tennessee, the medical costs associated with the injury on duty program could be reduced in the mid to long-term by \$2 million.</p> <p>The practice of accident and injury investigation is inconsistent in departments.</p> <p>The central Occupational Safety and Health Program is not conducting an analysis of trends in accidents and illnesses to develop mitigating measures.</p>	<p>The central Occupational Safety and Health Program should work with departments to reduce the lost time injury rate by such measures as trend analysis of injuries and the development of measures to mitigate injuries, auditing departments to assure compliance with best practices for occupational safety and health, setting clear goals, objectives, and performance measures for occupational safety and health, etc.</p> <p>The central Occupational Safety and Health Program should develop a policy and procedure regarding accident/incident investigation by departments and train supervisors in accident/incident investigation.</p> <p>The central Occupational Safety and Health Program should conduct trend analysis of injuries and illnesses and develop mitigating measures.</p>	(\$2,000,000)
8.6	<p>Metro has a basic return to work program, but its practices vary significantly among departments.</p> <p>Metro is moving in the direction of an intermediate program with its contract with ASC and the claims management and medical treatment process.</p>	<p>The central Occupational Safety and Health Program should develop a comprehensive Metro-wide return to work program.</p> <p>The Metro code should be amended to allow Fire and Police department staff to return to other positions.</p>	\$0

METROPOLITAN NASHVILLE AND DAVIDSON COUNTY**Performance Audit of the****Occupational Health and Safety Services**

Index	Key Findings and Observations	Recommendation	Cost/(Savings)
9.1	Metro lacks a policy requiring ongoing self-inspection of the workplace and work sites by departments to identify and mitigate hazards.	The central Occupational Safety and Health Program should develop a formal written policy and procedure that defines the roles, responsibilities, and procedures for workplace inspections by safety coordinators in departments.	\$0
9.2	Metro lacks a policy regarding reporting by employees of unsafe working conditions or hazards.	The central Occupational Safety and Health Program should develop a policy and procedure regarding reporting by employees of unsafe working conditions or hazards.	\$0
9.3	The Risk Management Division has recently begun to review the safety plans submitted by construction contractors performing work for Metro. The safety record of contractors is not considered in the selection of construction contractors.	Construction contractors submitting bids to Metro should be required to disclose their experience modification rate in their bid submittals.	\$0
9.4	Departments are inconsistent in their development of policies and procedures and in their practices for confined space entry.	The central Occupational Safety and Health Program should develop a policy and procedure for confined space entry.	\$0
9.5	Departments are inconsistent in their development of policies and procedures and in their practices for hazard communication right to know.	The central Occupational Safety and Health Program should develop a policy and procedure for hazard communication right to know.	\$0
9.6	Departments are inconsistent in their development of policies and procedures and in their practices surrounding personal protective equipment.	The central Occupational Safety and Health Program should develop a policy and procedure for personal protective equipment.	\$0
9.7	Metro lacks a comprehensive ergonomics program.	The central Occupational Safety and Health Program should develop an ergonomics program for the Metro.	\$0
9.8	Departments are inconsistent in the extent of training for emergency evacuation of Metro buildings.	The central Occupational Safety and Health Program should develop plans to assure the adequacy of emergency evacuation plans and planning of Metro buildings.	\$0
10.1	The Human Resources Department training course for managers and supervisors, which covers health and safety topics, is optional.	The health and safety training, part of the Metro Management Institute, should be mandatory.	\$0

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Performance Audit of the
Occupational Health and Safety Services

Index	Key Findings and Observations	Recommendation	Cost/(Savings)
10.2	There are opportunities for the central Occupational Safety and Health Program to increase the support it provides to departments for safety and health training.	The central Occupational Safety and Health Program should increase the support it provides departments related to safety and health training.	\$0
10.3	Metro lacks a policy and procedure identifying the requirements for safety and health training for its employees.	The central Occupational Safety and Health Program should develop a policy and procedure regarding the minimum requirements for safety and health training of employees.	\$0

2. PROFILE

2. PROFILE

This chapter presents a descriptive profile of the occupational safety and health program within the Metropolitan Nashville and Davidson County (Metro). The recommendations within this report are presented in chapters 6 through 10. The profile includes the following:

- The requirements of the Tennessee Occupational Safety and Health Administration and Tennessee Code Annotated as it regards administration of occupational safety and health program by local governments;
- The approach to administration of the occupational safety and health program by Metro;
- The changes that have occurred in the Metro occupational safety and health program over the past several years;
- The injured on duty data for the 2002, 2003, and the first six months of 2004 for Metro and comparisons of the incident rate for Metro to local governments and the State; and
- The approach to occupational safety and health utilized by various departments within Metro.

The findings and conclusions within this chapter are based upon interviews and data collected from safety coordinators in thirteen departments by the Matrix Consulting Group, and a questionnaire distributed to safety coordinators in the other departments by the Matrix Consulting Group.

1. TENNESSEE CODE ANNOTATED DEFINES THE ROLES AND RESPONSIBILITIES OF LOCAL GOVERNMENTS IN THE ADMINISTRATION OF AN OCCUPATIONAL SAFETY AND HEALTH PROGRAM.

The Occupational Safety and Health Act of 1970, also known as the Williams-Steiger Act, was signed into law on December 29, 1970. The Act allowed the states to assume responsibility for OSHA activities. Tennessee opted to do so, and TOSHA was

established in 1972. Coverage of the public sector (state and local government) was included in 1974. The provisions of the Occupational Safety and Health Act of 1972 are presented in Tennessee Code Annotated 50-3. State laws regarding occupational safety and health must be as effective as federal laws and may exceed federal requirements. In most cases, but not all, Tennessee adopted standards and regulations identical to the federal ones.

The TOSHA Act specifies certain rights and responsibilities of employers in T.C.A. § 50-3-105. Those responsibilities include:

- The responsibility to provide a workplace free from recognized hazards;
- The responsibility to comply with TOSHA regulations;
- The responsibility to not restrict a TOSHA inspection;
- The right to participate in development of standards;
- The right to a review of citations issued;
- The right to seek a variance to a standard; and
- The right to have trade secrets protected.

The employee rights and responsibilities are specified in T.C.A. § 50-3-106.

These responsibilities include:

- The responsibility to comply with TOSHA regulations;
- The right to file a complaint and request an inspection;
- The right to be afforded appropriate protective measures (labels, control techniques, personal protective equipment, monitoring) to control exposures to biological or physical agents;
- The right to file complaints with TOSHA without being discharged or discriminated against;

- The right to object to a citation or to the result of a TOSHA inspection or investigation; the right to refuse medical treatment on religious grounds.

The Tennessee Code Annotated requires each county, municipal, and other local government to establish and maintain an effective and comprehensive occupational safety and health program, either by developing its own program of voluntary compliance or by electing to be treated as a private employer (T.C.A. § 50-3-910). The Tennessee public sector plan is unique in that all written programs are submitted by local governments and are approved by the Tennessee Occupational Safety and Health Administration (TOSHA). (As will be noted later, two programs have been submitted by Metro: one for Metro Nashville Public Schools and one for the balance of Metro).

The program must commit to voluntary compliance with the law and standards as promulgated by TOSHA. Monitoring visits are scheduled every two years. No penalties are issued in the public sector for government agencies that have submitted programs.

The responsibilities of local governments in the administration of the occupational safety and health program are further defined in rules promulgated by the Tennessee Department of Labor and Workforce Development, Occupational Safety and Health. These rules are promulgated in Chapter 0800-1-5 – Safety and Health Provisions for the Public Sector. Important points to note regarding these rules include the following:

- **Each agency and department head to designate a staff member to serve as the administrator of each department's or agency's safety and health program.** Metro has designated staff in each department to serve as the administrator.
- **Local governments must indicate the official responsible for the local government's occupational safety and health program.** It is the considered judgment of the Commissioner that in most instances within the public sector, the chief executive officer of the state agency or local government should designate or appoint an official to be responsible for the management and administration of

the state agency's or local government's occupational safety and health program. It is also the considered judgment of the Commissioner that such official should have, or have personnel reporting to him who have, necessary training and experience to carry out his functions. If the employer has less than 750 employees, the responsible official should devote up to fifty percent (50%) of his time to the safety and health program; if 750 to 999 employees at least fifty percent (50%); if 1,000 to 1,999 employees at least seventy-five percent (75%); and if 2,000 or more employees all of his time to the program.

- **The designated safety and health official should assist the chief executive officer of the state agency or local government in carrying out all facets of the program** to include, but not be limited to, the following:
 - Setting goals and objectives for reducing and eliminating occupational accidents, injuries and illnesses;
 - Developing plans and procedures for evaluating the program's effectiveness at all operational levels;
 - Setting priorities with respect to the factors which cause occupational accidents, injuries and illnesses so that appropriate corrective action can be taken; and
 - Assisting in budgeting sufficient funds for necessary staff, equipment, material and training required to ensure an effective occupational safety and health program.

The purpose of the Occupational Safety and Health Act of 1972 is to assure so far as possible that every working man and woman in the State of Tennessee has safe and healthful working conditions and to preserve human resources.

2. THE OCCUPATIONAL SAFETY AND HEALTH PROGRAM FOR METROPOLITAN NASHVILLE AND DAVIDSON COUNTY HAS EVOLVED IN THE PAST SEVERAL YEARS.

The occupational safety and health program within Metro has recently evolved in a number of aspects. These aspects are presented below.

- **In 2001-02, the Responsibility For the Safety Program Was Shifted From the Employee Benefit Board to the Human Resources Department.** This included the shifting of employees from the Board to the department.
- **In March 2004, Metro Implemented a Network of Physicians For Employees to Access for Work Related Injuries and Illnesses.** Prior to March 2004, Metro

employees utilized Metro General Hospital. Metro changed its approach due to a number of problems with the previous approach including:

- It was difficult to track injury on duty costs;
- Procedures were not consistent among departments;
- Employees were receiving different time off for the same/similar injuries; and
- There were scheduling issues with Metro General Hospital for some treatment plans.

From January 1, 2004 through December 31, 2005, employees may elect to seek medical treatment outside the Injury-On-Duty (IOD) network of physicians.

- **In March 2004, Metro Retained Alternative Service Concepts (ASC) As Its Third Party Administrator.** The third party administrator determines the eligibility of the employee and recommends approval or denial of the claim. Alternative Service Concepts provides a range of services including the following:
 - Claims administration and adjustment for all existing claims, open and closed, and all new claims;
 - Making initial contact with the claimant and establishing a claim file;
 - Administering the provision of entitlements of workers' compensation under the provisions of the T.C.A. § 50-3;
 - Maintaining accurate and timely OSHA 300 logs for all of Metro;
 - Contacting the Metro department and the injured employee regarding the injury and the injury on duty benefits of the employee and
 - Contacting the physician to coordinate a return-to-work plan for the injured employee.
- **Metro now utilizes a number of tools for workers compensation cost containment.** These include a PPO network and pharmacy card; medical, hospital, and pharmacy bill auditing; pre-authorizations; case management through Eckman Freeman and Associates both through telephone and field case management, and peer reviews.

Metro Nashville is self-insured for its Injury-On-Duty program.

Metro's Injury-On-Duty program is applicable to injuries or illnesses that happen during the scope of employment. The benefits associated with the program include the following:

- All related medical (lifetime);

- Payment of lost wages without a waiting period with 100% of lost wages replaced with workers compensation tax-free for a maximum of 130 days;
- The employee receives the payment for lost wages until released by a doctor to work or maximum medical improvement is reached (based upon an impairment rating); and
- The IOD claim does not affect vacation or sick leave unless the claim is deemed not to be work related. At that time the leave taken by the employee is deducted from their balance.

The IOD payments made by Metro are generous relative to other organizations.

Since Metro pays 100% of lost wages without a waiting period.

3. THE APPROACH USED FOR THE DELIVERY OF OCCUPATIONAL HEALTH AND SAFETY SERVICES WITHIN METROPOLITAN NASHVILLE AND DAVIDSON COUNTY IS A HYBRID SYSTEM.

Within Metropolitan Nashville and Davidson County, two written occupational safety and health programs have been submitted to and approved by TOSHA: one by the Metropolitan Nashville Public Schools and the other by the Human Resources Department. Metropolitan Nashville Public Schools is responsible for voluntary compliance with the law and standards as promulgated by TOSHA for the school system and its employees. The Human Resources Department is responsible for voluntary compliance with the law and standards as promulgated by TOSHA for the remainder of Metro.

Metropolitan Nashville and Davidson County (Metro) has a hybrid approach to occupational safety and health. This hybrid approach is defined within the manual developed by the Human Resources Department: *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee*. (It should be noted that the Metro has not adopted this manual as an official

policy and procedures manual).

The manual states that the “Safety Division” within the Human Resources Department is responsible for the tasks presented below.

- Promote and encourage a safe working environment for Metro employees and to protect Metro property.
- Accurately inform the mayor and each department head of costs resulting from accidents and injuries in each operating department of Metro.
- Develop and implement the safety and loss prevention program for Metro.
- Train departmental safety coordinators in their duties and responsibilities, to monitor their activities and progress, and to coordinate the safety and loss prevention program for each department in terms of:
 - Assisting department heads in minimizing and controlling costs as a result of accidents and injuries;
 - Meeting all regulatory agency standards;
 - Reporting and recording for all injury on duty accidents as required by law;
 - Assisting in the training of supervisory personnel in reporting on-duty employee injuries and vehicle accidents and investigating injury-on-duty accidents for the reduction of recurrence.
 - Assisting in the development and/or revision of each department’s safety rules and regulations.
 - Assisting in the development of all required training programs for each department. Programs that have full-time safety coordinators are required to conduct their own training, after the training programs have been put in place. Smaller departments with part-time safety coordinators shall receive the necessary training from the “Safety Division” within the Human Resources Department.
 - Developing a departmental self-inspection program. Large departments with full-time safety coordinators shall conduct self-inspections quarterly (at a minimum). Smaller departments shall have a self-inspection annually.
 - Surveying periodically all department areas including an evaluation of each department’s documented self-inspection program.
 - Providing a monthly analysis of accidents.
 - Assisting the departmental safety coordinator in the development of an effective safety committee.
 - Providing assistance for conducting industrial hygiene surveys (noise, carbon monoxide, air quality, etc.).

The manual states that the departments are responsible for the tasks presented below.

- The department head is responsible for maintaining safe and healthy work conditions in their departments.
 - The department head shall authorize and sign a written administrative policy supporting the department’s safety program.
 - The department head shall appoint – by name in writing – a departmental safety coordinator.
 - The department head shall be responsible for reducing and minimizing costs from accidents and injuries within their department.

- The duties of the departmental safety coordinator shall include, but are not limited to:
 - Developing, revising, and annually reviewing departmental safety rules and regulations;
 - Assisting supervisors investigating on the job accidents;
 - Training supervisory personnel in reporting and investigating employee injury-on-duty accidents and vehicle accidents for the purpose of reducing the recurrence of such accidents;
 - Analyzing all accident reports for completeness and accuracy;
 - Conducting safety orientations for all new employees;
 - Promoting safety consciousness for all employees through proper job-safety training;
 - Implementing the department’s self-inspection on prescribed forms; and
 - Overseeing all required TOSHA training according to regulations.

It is clear from the manual developed by the Human Resources Department - *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee* – that responsibility for an effective occupational safety and health program is split between the Human Resources Department and the departments within Metro.

4. THE EFFECTIVENESS OF OCCUPATIONAL SAFETY AND HEALTH PRACTICES VARY WIDELY IN DEPARTMENTS

The scope and depth of safety programs vary significantly among departments. This includes the breadth of programs offered as well as the depth (e.g., detailed safety policies and procedures, frequency of training). The points, which follow, provide a brief discussion of the scope and depth of occupational safety and health programs in the departments.

- In departments with full-time safety coordinators, safety programs are not always centralized. In other words, the safety coordinator could handle some aspects of the safety program, but training, Injury-On-Duty processing, record-keeping, or specific programs (e.g., up-dating and posting Materials Safety Data Sheets) are performed elsewhere in the department.
 - For example, General Hospital has a Risk Manager who coordinates the Hospital's safety program. The Facilities Manager is responsible for the hazardous right-to-know program and ensures that the MSDS are up-to-date and posted.
 - Other departments, such as the Police and Health Departments, have staff or whole divisions dedicated to training that provide some aspects of safety training (e.g., bloodborne pathogens, vehicle safety, etc.)
- The Human Resources Department has not developed and assured the adoption of Metro-wide safety policies and procedures, including an employee manual. This has been left to the discretion of the departments. Nine of the thirteen Metro departments that were interviewed by the project team have established some aspects of safety policies and procedures.
- Some departments incorporate safety into their overall department goals and budgets, albeit on a limited basis. For the most part, this is defined as the 'risk management' program in the departmental budgets.
- All of the departments follow Metro's Substance Abuse Policy. The Human Resources Analyst 3 responsible for occupational safety and health within the Human Resources Department provides training monthly to line employees and supervisors. According to Metro's policy, staff is required to take this course every three years.

- Four of the thirteen departments have a Sharps Injury Prevention Program (the OSHA bloodborne pathogen program). This includes the two Hospitals, Health and Fire departments. Although, not all departments will potentially encounter work related situations that require compliance with Sharps, some departments that do not have policies for Sharps injury prevention have exposure. For example, Water Services has a Registered Nurse, who administers first aid (including tetanus shots), but Water Services has not established a Sharps injury prevention program.
- Most departments with a full-time employee dedicated to safety have a hazardous right-to-know program, which includes training, up-dating and maintaining the Materials Safety Data Sheets (MSDS). While most departments ensure that training is provided as part of the yearly in-service training, the scope of the program varies.
 - For example, the Parks and Recreation Department provides general training for this annually, as well as holds facility managers accountable for providing specific chemical training to employees and maintaining the MSDS books. The Safety Coordinator in the Parks and Recreation Department audits the MSDS books to ensure new chemicals are added. This is done for all staff and all facilities in the Parks and Recreation Department.
 - On the other hand, some departments do not have formal procedures, which hold specific staff persons accountable for the maintenance of the MSDS.
- The Human Resources Department has recently created a Metro-wide Safety Committee for the safety coordinators. Additionally, some departments (the Hospitals, Health and Water Services) have safety committees that provide direction for the department's safety policies and procedures, as well as review current practices and incidents to prevent future programs. Other departments, such as the Metro Action Commission, have committees that are responsible for reviewing injured-on-duty claims, but do not provide direction on safety policies and procedures. Other departments, such as the Public Works Department, do not have safety committees.
- Departments are responsible for conducting worksite inspection and analysis to assure safe working conditions. As with other components of the departmental safety programs, the scope and depth of the worksite analyses and inspections vary significantly. For example:
 - The Parks and Recreation Department has a formal document that it requires facility managers to complete monthly. This document requires facility managers to inspect specific items/areas (such as fire

extinguishers, etc.) as well as document any other potential hazard. This is submitted to the Safety Coordinator monthly.

- The Health Department conducts worksite inspections, as well as receives requests for worksite analyses (e.g., ergonomic evaluations, etc.). Different staff perform worksite inspections. For example, the safety coordinator conducts inspections for fire safety hazards, the facility managers conduct inspections for general hazards (e.g., chemical storage/location, faulty equipment, etc.) and safety committee members conduct the worksite analyses for ergonomics.
- The Public Works Department conducts worksite inspections of construction, maintenance and repair sites for its crews.
- The Metropolitan Nashville Public Schools has a Safety and Environmental Health/Plant Maintenance Coordinator who responds to complaints regarding worksites such as air quality, rodents, leaks, etc. Proactive inspections are not conducted.

The scope and depth of safety programs vary significantly by department. However, the primary focus of almost all of these programs is largely post-injury management, and not injury prevention.

5. THE LOST TIME INJURY DATA FOR METRO NASHVILLE IS HIGHER THAN OTHER LOCAL GOVERNMENTS IN TENNESSEE.

Since March of 2004, Metro has contracted with a Third Party Administrator (ASC) to centralize its injured-on-duty cases, record-keeping, case management, etc. Prior to using ASC, each department maintained and reported its injured-on-duty data to the Human Resources Department. The Human Resources Department generated reports regarding the incident rate based upon these data.

These reports and the data contained within these reports should be viewed with caution. These reports define the Incident Rate as the number of lost time injuries per 100 employees. TOSHA defines the incident rate differently than does Metro. TOSHA defines the incident rate as the number of recordable injuries per 100 full-time

equivalents. TOSHA requires that employers record all fatalities, injuries and illnesses that are work-related or that are new cases resulting in the following:

Death	Cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material
Days away from work	Medical removal under OSHA standards
Restricted work or transfer to another job	Hearing loss
Medical treatment beyond first aid	Tuberculosis (TB)
Loss of consciousness	Muscular skeletal disorders (MSD)
Needle stick injuries	A significant injury or illness diagnosed by a physician or other licensed health care professional.

Metro reports contain only lost time injuries. These reports do not fully reflect the data required by TOSHA as noted above. In fact, interviews with the safety coordinators in many of these departments indicated that these coordinators could not define a TOSHA 300 recordable injury.

In addition, the lost time injury data within these reports should be viewed with caution as well. The reports may underreport the actual number of lost time injuries. For example, the 3rd quarter report for 2003 reports 17 lost time injuries for the Fire Department. The Fire Department itself, however, reported that 27 lost time injuries occurred in the third quarter of 2004.

The points, which follow, present a brief discussion of the lost time injury information provided by Metro.

- This data does not include Metropolitan Nashville Public Schools, which reports its data separately. That data was not readily available in a form that would enable inclusion with Metro.
- The average incident rate per 100 employees for calendar year 2002 was 6.6 and the average for calendar year 2003 was 5.1 incidents per 100 employees.
- While the average number of incidents per 100 employees decreased from calendar year 2002 to calendar year 2003 by 23%, the actual incidence rate increased in five departments. The incidence rate per 100 employees increased by the following in each of the listed departments:

- General Sessions Court: 50% (2 lost time injuries in 2002 versus 3 in 2003)
 - Mayor’s Office: 100% (1 lost time injury in 2002 versus 2 in 2003)
 - Metro Action Commission: 47% (12 lost time injuries in 2002 versus 17 in 2003)
 - Public Library: 100% (3 lost time injuries in 2002 versus 6 in 2003)
 - Public Works Department: 5% (78 lost time injuries in 2002 versus 83 in 2003)
- There were several departments that saw a decline in the incidence rate per 100 employees from calendar year 2002 to calendar year 2003. Those departments experiencing a decline by 50% or more included:
 - Assessor of Property: - 63% (3 lost time injuries in 2002 versus 1 in 2003)
 - County Clerk: - 50% (2 lost time injuries in 2002 versus 1 in 2003)
 - General Hospital: - 55% (71 lost time injuries in 2002 versus 31 in 2003)
 - Law Department: - 100% (1 lost time injury in 2002 versus 0 in 2003)
 - Social Services: - 60% (13 lost time injuries in 2002 versus 5 in 2003)
 - There are several departments that have a significantly higher incidence rate per 100 employees. For calendar year 2003, the average incidence rate per 100 employees was 5.1. Departments with above average incidence rates per 100 employees reported for fiscal year 2003 include:
 - Bordeaux Hospital: 12.6
 - Fire Department: 10.9
 - General Services: 8.2
 - Public Works Department: 17.9

While the average incidence rate per 100 employees decreased by 23%, there are significant variances in the incidence rate per 100 employees by department.

While the data should be viewed with caution, the data does not include the MNPS, and the data only includes lost injury data, the lost time injury Incident Rate for Metro is higher than that of the state and other local governments in Tennessee. More specifically:

- In calendar year 2002, the most recent year for which non-fatal occupational injury and illness data is available, the incidence rate per 100 full-time workers for local governments in Tennessee amounted to 2.0. This is not the total recordable

cases and excludes cases with job transfer or restriction and other recordable cases.

- By contrast, the incidence rate per 100 workers for Metro (excluding MNPS) amounted to 6.6 in 2002.
- The incidence rate for local governments in Tennessee for all total recordable cases has been decreasing each year since 1999. In 1999, the incidence rate for total recordable cases was 20% higher than 2002.

The rate for Metro was more than four times greater than other local governments in Tennessee and the State. However, as noted previously, this data should be viewed with caution, but it does suggest that significant improvements are possible.

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The next chapter presents the comparative survey.

3. COMPARATIVE SURVEY

3. COMPARATIVE SURVEY

As part of the performance audit of the occupational health and safety services of Metropolitan Nashville and Davidson County (Metro), the Matrix Consulting Group conducted a comparative survey focusing on the delivery of services.

The selection of public sector agencies used for the comparative survey was based upon a number of factors. These factors are presented below.

- Two of these agencies – the City of Scottsdale, Arizona and the East Bay Municipal Utilities District (Oakland), California were selected because these two agencies participate in the OSHA Volunteer Protection Program (VPP). The Voluntary Protection Programs, established in 1982, are designed to recognize single worksites with exemplary safety and health programs. As of September 30, 2003, there were a total of 1,024 VPP worksites in both federal OSHA and state-plan states.
- Louisville/Jefferson County, Kentucky and Austin, Texas were selected because the population that these agencies serve is comparable to Metropolitan Nashville and Davidson County. Louisville/Jefferson County, Kentucky is a metropolitan form of government with an estimated population of 700,000. Austin, Texas serves a population of 656,000.
- Raleigh, North Carolina was selected because of its effective employee safety program.

The table below presents the public sector agencies that participated in the comparative survey and the number of staff employed by the agency.

Agency	Number of Fulltime Equivalent Employees in the Agency / City
Austin, TX	12,065
East Bay Municipal Utilities District	2,154
Louisville/Jefferson County, KY	5,777
Scottsdale, AZ	2,400
Raleigh, NC	3,241
Metropolitan Nashville and Davidson County	17,134

These other agencies do not include school employees.

1. AGENCY PROFILE INFORMATION WAS COLLECTED FROM THE COMPARATIVE AGENCIES.

Agencies were asked to provide information about whether their employee safety programs are centralized or if other departments had fulltime equivalents dedicated to safety. The points below present a discussion of the results.

- The City of Austin has a centralized Corporate Safety Office, staffed with one Corporate Safety Officer, who is responsible for the general administration of the City safety program. Departments provide department specific safety training and will share resources as necessary. The Corporate Safety Office is responsible for developing and maintaining a Corporate Safety Manual, however, departments develop more stringent and relevant directives. There are 27 fulltime safety coordinators in 9 operating departments; the remaining 31 departments have staff assigned safety as a collateral duty.
- The City of Raleigh's Personnel Department has a Safety Office, which is responsible for developing, distributing and updating safety related policies and procedures. Individual departments have their own safety personnel who are responsible for providing safety functions for their departments.
- Louisville/Jefferson County has three fulltime employees assigned to its Occupational Safety and Health program. This central office provides limited oversight to the large departments with full-time safety coordinators, but serves as the OSHA administrator for the departments without independent safety programs. The office is responsible for developing goals, objectives and performance measures.
- The East Bay Municipal Utilities District (EBMUD) has a central safety office staffed with ten fulltime employees. Seven of these ten staff are directly assigned to act as a department safety director within the departments of the district.
- The City of Scottsdale has a central employee health and safety office. This is organized as a function in the Risk Services Division, which is part of the Finance Department.
- Metropolitan Nashville and Davidson County has a central employee health and safety office in the Human Resources Department that provides limited oversight to departments with full-time safety coordinators. There are a number of departments with their own full-time safety coordinators such as Police, Fire, General Services, Health, General Hospital, Parks and Recreation, Public Works, Water Services, etc.

As this data indicates, the approach utilized by Metropolitan Nashville and Davidson County, splitting responsibility for delivery of employee safety services between a central safety office and operating departments is not unusual. It is the same approach used by Austin, Raleigh, and Louisville/Jefferson County.

2. AGENCIES PROVIDED INFORMATION WITH RESPECT TO MANAGEMENT AND EMPLOYEE INVOLVEMENT.

The survey included a series of question regarding management and employee involvement in the employee safety programs. This included questions regarding the establishment of goals and measurable objectives, written policies and procedures, and employee safety activities. The table, which follows, presents a comparison of the results.

Agency	Does the Agency have clear goals and objectives?	Has the Agency developed formal written policies and procedures?	How does the Agency facilitate employee involvement in the program?
Austin, TX	Yes	Yes	Provided at the department level.
East Bay Municipal Utilities District	Yes	Yes	Safety Committees Safety personnel on Department's Management Team.
Louisville/Jefferson County, KY	No	No	N / A
Raleigh, NC	No	Yes	New Employee Orientation Safety Committees Investigations
Scottsdale, AZ	Yes	Yes	Safety committees, monthly inspections.
Metropolitan Nashville and Davidson County	No	Yes	Metro Safety Committee

The points presented below provide a discussion of the results.

- The Corporate Safety Office in the City of Austin has developed goals and objectives, which departments are expected to meet or exceed. Additionally, the Corporate Safety Office has developed a Safety Manual, which is supplemented

by departments to address departmental specific needs and / or requirements. Employee safety committees are accomplished at the departmental-level particularly the nine departments assigned full-time safety coordinators.

- The East Bay Municipal Utilities District (EBMUD) has developed clear safety related goals, and objectives, as well as a policies and procedures manual. Additionally, EBMUD's central safety office assigns its staff to serve as the safety director for each of the operating departments. In addition to serving as the safety director and being a member of the department's top management team, the safety personnel are responsible for identifying and remedying safety related problems. Safety directors also coordinate departmental safety committees.
- Louisville /Jefferson County are in the process of developing written policies and procedures, as well as goals and objectives. Because the City and the County have recently merged, the Occupational Safety and Health Administration office is in the process of developing a consolidated program. Louisville /Jefferson County does not have a formal process for ensuring employee involvement in the safety program.
- The City of Raleigh has not established clear goals and measurable objectives. The central safety office has developed formal, written policies and procedures. The City of Raleigh uses new employee orientation, as well as safety committees to provide employees with an opportunity to be involved in the safety program and to provide input.
- The City of Scottsdale has developed safety action plans for each operating department in the City, a city-wide safety policies and procedures manual, as well as measurable incident rate goals. The City also facilitates employee involvement in the employee safety program through safety committees, monthly safety inspections, and training.
- Metropolitan Nashville and Davidson County has not developed clear measurable goals and objectives for the safety program, but the Human Resources Department has developed safety policies for Metro. All of the departments that the project team interviewed were unaware of these policies, however. Metro has a central safety committee, but many of the departments interviewed by the project team lack employee safety committees within the department.

There are a number of important findings regarding this data. These findings are presented below.

- Each of these agencies, with the exception of Louisville /Jefferson County, have developed formal written safety policies and procedures,

- Each of these agencies, with the exception of Louisville /Jefferson County, have developed formal mechanisms to involve employees in the development of a safe work place through employee safety committees.
- Each of these agencies, with the exception of Louisville /Jefferson County, have developed clear goals and objectives for their employee safety programs.

3. INFORMATION WAS COLLECTED FROM PARTICIPANTS RELATING TO WORKSITE SAFETY.

Responding agencies were asked to provide information relating to the worksite safety activities. This included worksite and facility inspections, accident investigations and methods for employees to report safety concerns. The table, below, presents the results.

Agency	Does the Agency proactively conduct inspections?	What type of system does the Agency utilize for employee reporting of safety concerns?	Do program staff conduct accident / incident inspections? Does this result in action plans?
Austin, TX	Yes	Varies	Yes
East Bay Municipal Utilities District	Yes	Safety Committee Managers Union Stewards CalOSHA	Yes
Louisville, KY	Yes	Supervisors / Managers OSHA Division	Yes
Raleigh, NC	Yes	Contact Safety Office	Yes
Scottsdale, AZ	Yes	Reporting programs: EYES and STEPS	Yes
Metropolitan Nashville and Davidson County	No	None	No

The points presented below provide a discussion of the information presented in the table.

- In the City of Austin, individual departments are responsible for conducting proactive work site inspections, as well as establishing a system for employees to express concerns regarding safety. Additionally, employees can contact the Corporate Safety Office directly, which will complete an anonymous follow up. All new employees go through an orientation and once at department level will get a safety orientation geared to the unique duties of the departments.

- The East Bay Municipal Utilities District (EBMUD) conducts annual inspections of its 54-staffed facilities. Additionally, the central safety office also proactively conducts field job site inspections. Reports are provided to department Superintendents and Division Managers and all deficiencies must be corrected within 90 days. The central safety office investigates all major incidents; abatement plans are a mandatory component of all investigations. All new hires must attend an 8-hr New Employee Safety Academy within 90 days of hire date regardless of job class. EBMUD conducts 52 Safety Academies annually that consumes about 14,000 production hours. These 4 or 8-hour sessions address any of the 34 topics that EBMUD offers, depending on the job class of the employee. Pre and post-tests are required. Also, many "baseline" courses are conducted each year ranging from 8 hours (flagging and traffic control) to 40 hours (asbestos). In addition, EBMUD or work-groups conduct tail-gates or tool box meetings at least once every 10 days for field construction or maintenance staff.
- In Louisville/Jefferson County, the OSHA Division is still in the process of conducting initial worksite inspections following the merger between the City and the County. There is not an established schedule for proactive worksite inspections. The City does not have a system in place for employees to report safety and health concerns. Employees may contact their supervisors and managers or the OSHA Division directly. The OSHA Division conducts incident / accident investigations. Louisville/Jefferson County only provides safety training as part of new employee orientation.
- The City of Raleigh conducts proactive inspections of worksites to identify and mitigate hazards. Additionally, supervisors are responsible for conducting incident / accident investigations and developing action plans. Employees are able to call or e-mail the safety office if the employee needs to notify appropriate personnel of safety or health related issues.
- The City of Scottsdale conducts proactive inspections of agencies facilities to identify and mitigate safety and health hazards. Additionally, the City of Scottsdale utilizes several programs to enable employees to notify management about safety concerns, including the EYES and STEPS employee hazard reporting and safety suggestion program. Also, employees can e-mail the safety office or utilize the 'open-door' policy to bring up safety concerns with the Risk Services Division. Scottsdale does a safety overview at new employee orientation. The supervisor is then provided with an employee orientation checklist and is required to cover OSHA-specific standards with his/her employee. The centralized safety office tracks these checklists as a means of ensuring the training is covered. In addition, the centralized safety office provides all OSHA required inspections.

- This area is a particular opportunity for improvement in Metropolitan Nashville and Davidson County. The Human Resources Department does not conduct proactive safety inspections. Some of the departments, such as water Services, do conduct such inspections with no oversight by the Human Resources Department. Metro does not have a centralized system, such as the Intranet, that enables employees to anonymously report safety concerns or problems.

There are a number of important findings regarding this data. These findings are presented below.

- All of the agencies, with the exception of Metropolitan Nashville and Davidson County, provide proactive safety inspections. All of the responding agencies provided proactive inspections and conducted safety incident and accident investigations. Additionally all of the surveyed agencies conducted incident and accident investigations.
- All of the responding agencies, with the exception of Metropolitan Nashville and Davidson County, conduct formal safety incident and accident investigations.

4. RESPONDING AGENCIES WERE ASKED TO PROVIDE INFORMATION ABOUT THEIR SAFETY TRAINING.

Agencies were asked to provide information about the safety training provided to employees. This included new employee orientation training as well as ongoing training.

The table below presents the results.

Agency	What type of safety and health training is provided to new employees?	What type of ongoing safety and health training is provided to staff?
Austin, TX	All new employees receive a general orientation, as well as department specific orientation.	Bimonthly safety meetings chaired by the Corporate Safety Office, as well as department unique training.
East Bay Municipal Utilities District	All new employees must attend an eight hour Safety Academy.	A variety of trainings are provided to staff on an ongoing basis. Provides 52 safety academies.
Louisville, KY	New hires are provided with a training needs assessment checklist.	Human Resources provides training.
Raleigh, NC	Employee orientation checklist on all safety policies and procedures. This is provided by supervisors in the operating departments.	Provides a variety of specific safety training, such as bloodborne pathogens, confined space, hazards communication, etc.

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Agency	What type of safety and health training is provided to new employees?	What type of ongoing safety and health training is provided to staff?
Scottsdale, AZ	During new employee orientation, a safety overview is provided, which includes an employee orientation checklist which the supervisors are required to complete. Checklists are tracked by the safety office to ensure they are completed.	All OSHA required on-going and annual training is provided, including forklift, hazardous communications, lock out / tag out, confined space, ladder fall protection, personal protective equipment, driver safety, CPR, etc.
Metropolitan Nashville and Davidson County	Scope and depth of training varied. Some departments, (e.g., Fire, Police, Public Health, and Sheriff's Office) have training divisions with which safety coordinators ensure safety training is incorporated into training for new hire and in-service training sessions.	The Safety Program within the Human Resources Department has offered safety training for managers and supervisors as part of the Metro Management Training Institute. This training was not mandatory. Some departments provide safety training, but many do not.

The points, which follow, provide a discussion of the information contained in the table.

- The City of Austin's Corporate Safety Office provides a general health and safety orientation for new employees. Departments are responsible for providing departmental specific training for safety and health. Departments provide ongoing training for safety and health.
- The East Bay Municipal Utilities District has a Safety Academy. All new employees are required to attend the eight-hour academy within 90 days of employment. Additionally, the safety office provides 52 safety academies annually, which consists of 4 or 8 hour training sessions, covering thirty-two different topics. The safety office also provides a variety of special academies relating to different safety topics as needed.
- The safety office in Louisville provides new employees with a safety training checklist that must be completed. Human Resources Department provides on-going training to staff. Training also includes instructions on how to report workplace injuries.
- The Human Resources Department in Metropolitan Nashville and Davidson County provides limited safety training that is based largely upon efforts of departments, not the Human Resources Department. Some departments, such as Fire, Police, Parks and Recreation, Public Works, as Water Services, provide safety training. Both the Human Resources Department, as well as the departments provide on-going training. The Human Resources Department

provides required safety training such as defensive drivers and substance abuse policy training.

- The City of Raleigh provides new employees with a checklist of the safety and health policies and procedures that is to be completed. Additionally, the safety office provides on-going training. Topics include bloodborne pathogens, confined space, personal protective equipment, etc.
- The City of Scottsdale provides an overview of safety during new employee orientation. At that time, employees are provided with a safety checklist which must be completed by the employee and his / her supervisor. The Risk Services Division follows up with departments to ensure checklists are completed. Additionally, all OSHA required on-going training is provided, including forklift, hazardous communication, lock out / tag out, confined space, ladder fall protection, hearing, personal protective equipment, machine guarding, driver safety, CPR, etc.

All of the surveyed agencies provided some level of training to new employees, ranging from an eight-hour safety academy to a checklist of safety policies and procedures to complete. Additionally, the central safety office, as well as the operating departments provided on-going training.

5. PARTICIPATING AGENCIES PROVIDED INFORMATION REGARDING INJURY ON DUTY MANAGEMENT.

Participating agencies were asked to respond to a series of questions relating to injury on duty management. This includes case management of injured employees, use of a light duty or modified transitional duty program and performance standards, etc. The table, which follows, presents a comparison of the results.

Agency	Does the Agency provide Case Management?	Does the Agency utilize light duty program?	Have performance measures light-duty been developed?	Is there a full-time coordinator for light – duty?	Are claims file reviews conducted?
Austin, TX	Yes	Yes	Yes	Yes	Yes
East Bay Municipal Utilities District	Yes	Yes	No	No	Yes
Louisville, KY	Yes	Varies	No	No	Yes
Raleigh, NC	Yes	Varies	No	No	Yes

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Agency	Does the Agency provide Case Management?	Does the Agency utilize light duty program?	Have performance measures light-duty been developed?	Is there a full-time coordinator for light – duty?	Are claims file reviews conducted?
Scottsdale, AZ	Yes	Yes	No	Yes	Yes
Metropolitan Nashville and Davidson County	Yes	Varies	No	No	Yes

The points, below, provide a further discussion of the information contained in the above table.

- The City of Austin has a number of practices to manage injury on duty. These practices include:
 - The City provides case management to ensure workers are returned to work as soon as possible. This is done by the Corporate Safety Office, as well as Worker’s Compensation personnel and the Third Party Administrator.
 - The City has department liaison and a full-time Corporate Safety position responsible for the return-to-work and transitional duty assignment program.
 - Individual departments are responsible for the development of performance standards for modified transitional duty.
 - The City has a corporate staff member permanently assigned to monitor and administer the City’s light-duty and / or modified transitional duty programs.
 - The City works with its third party administrator to conduct claims file reviews to assure effective and timely claim closure strategies.
- The East Bay Municipal Utilities District works with their third party provider to coordinate and manage claims. The Third Party Administrator has on-site staff in the EBMUD’s Workers’ Compensation Office. Additionally, the Workers’ Compensation Office finds light duty assignments whenever possible. The EBMUD has not developed performance measures for the light-duty / modified transitional work program. Currently, the job classification and descriptions are reviewed to determine appropriate work. The EBMUD does not have a full-time administrator for a light-duty program; this is partly the responsibility of the on-site staff person from Third Party Administrator and the Workers’ Compensation Office. Also of note, the Employee Relations Section of the Human Resources

Division holds bi-weekly case review meetings for all cases in which an employee is absent for 10 or more days.

- In Louisville/Jefferson County, the Risk Management Division handles workers compensation claims, as well as case management for worker's compensation claims. Risk Management is a Division of the Finance Department. Light-duty programs vary by department, depending on the department and the position.
- The City of Raleigh provides case management to all cases in which loss time exceeds one month. Each department has a light-duty policy and is responsible for administer its own policies. The central safety office has not developed performance standards for the light-duty program. The Police Department is the only department that has a full-time employee dedicated to light-duty program.
- The City of Scottsdale provides case management of injury claims and utilizes a light-duty or modified transitional duty program to get injured employees back to work quickly; performance standards for this program have not been developed.

The section, which follows, provides a discussion of the role of the central safety office versus the roles and responsibilities in the operating departments.

- Approaches to case management and light-duty programs varied among the surveyed agencies. All agencies provided some level of case management. Only two of the responding agencies had performance standards for a light-duty program; the remaining three indicated that light-duty programs vary. Only the City of Austin has a fulltime light-duty coordinator for the City. In the City of Raleigh, the Police Department has a fulltime light-duty coordinator.
- All agencies are conducting claims file reviews to assure an effective and timely claim closure strategy.

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The next chapter presents an analysis of the employee survey for occupational safety and health for Metropolitan Nashville and Davidson County.

4. EMPLOYEE SURVEY

4. EMPLOYEE SURVEY

This chapter presents a review of the data contained in the employee survey regarding occupational safety and health. A sample of staff within the Metro completed a questionnaire regarding occupational safety and health. The table below presents the number of responses received.

Department	Number of Questionnaires Received
Codes Administration	9
Finance	7
Fire	22
General Services	26
Health	6
Bordeaux Hospital	2
General Hospital	8
Metro Nashville Public Schools	26
Parks and Recreation	25
Police	26
Library	2
Public Works	25
Sheriff's Office	10
Water Services	26
TOTAL	220

The questionnaire asked employees to select a response to a series of statements regarding the occupational safety and health system. Respondents were asked to select 'strongly agree,' 'agree,' 'neutral,' 'disagree,' or 'strongly disagree' to these statements.

The sections that follow present a discussion of the responses for each of the sections.

1. THE EMPLOYEES VIEW THE OCCUPATIONAL SAFETY AND HEALTH SYSTEM POSITIVELY.

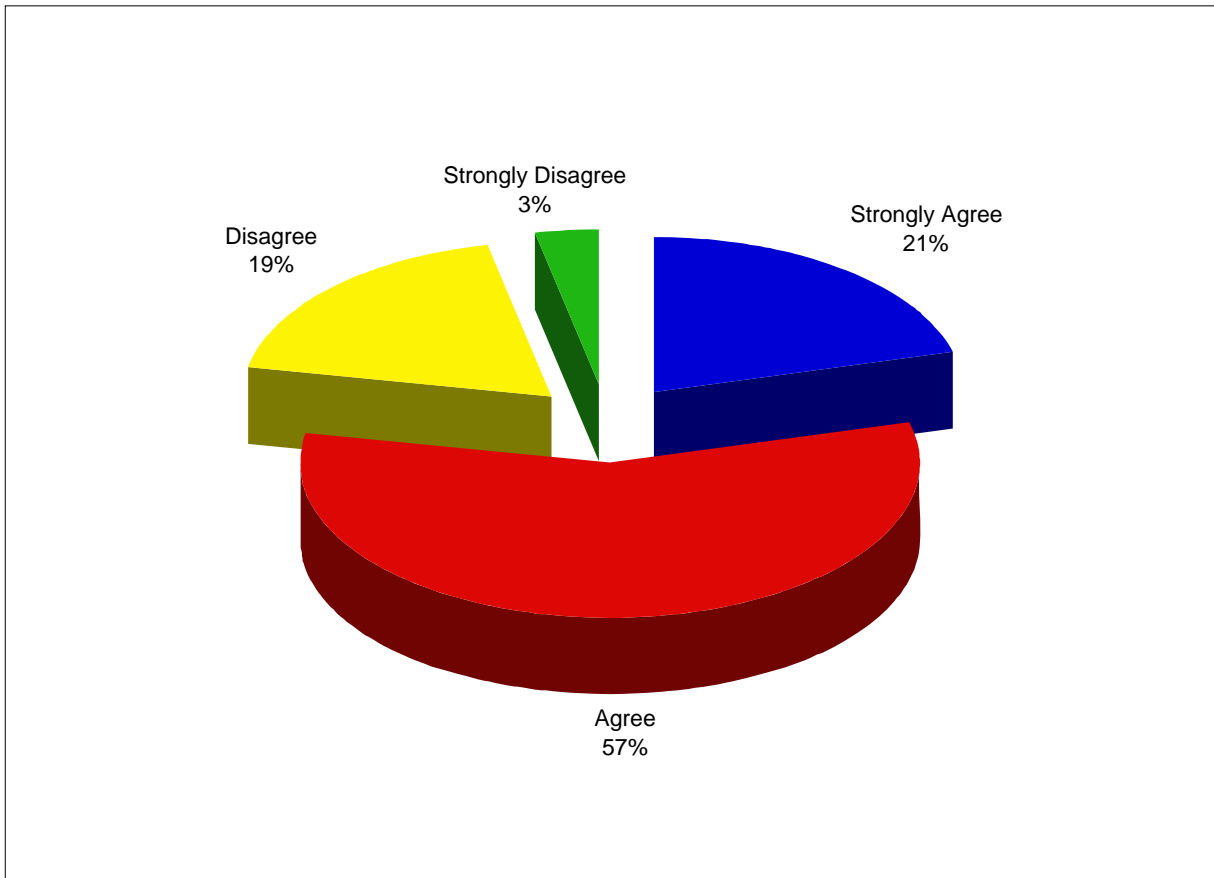
Twenty questions were included within the questionnaire. These twenty questions are presented in the table below.

METROPOLITAN NASHVILLE AND DAVIDSON COUNTY
Performance Audit of the
Occupational Health and Safety Services

1. The safety of employees in my work unit is a priority to the supervisors and managers.
2. Employee safety issues are an ongoing agenda item for discussion during staff meetings in my work unit.
3. Safety hazards are quickly corrected once brought to the attention of supervisors or managers in my work unit.
4. Safety training is a part of ongoing staff development and training in my work unit.
5. I know the safety policies of Metro.
6. Safety training is provided as part of new employee orientation.
7. Employees in my work unit are encouraged to find safety problems and correct them.
8. I know the name of the safety coordinator in my department and their roles and responsibilities.
9. In my work unit, injured employees return to their regular jobs or modified duty as soon as they are able following an injury.
10. The roles and responsibilities for employee safety in my department have been clearly defined.
11. My department has written employee safety guidelines that have been clearly communicated to employees.
12. Employee safety successes are highly publicized in my work unit.
13. My department periodically inspects and corrects safety hazards and unsafe work conditions.
14. I know how to report a work-related injury in Metro.
15. My department has a safety committee that produces solutions to employee safety problems.
16. The supervisors and managers in my work unit enforce the safety rules.
17. In my work unit, employee accidents and injuries are promptly investigated and corrective action taken.
18. Managers and supervisors in my work unit understand the day-to-day safety challenges faced by employees.
19. I have received training on how to avoid repetitive motion injuries such as back strain or carpal tunnel syndrome.
20. I have seen corrective action taken in my department in response to an employee injury or accident investigation.

Responses to these twenty questions were reviewed to determine the overall percentage of positive and negative responses.

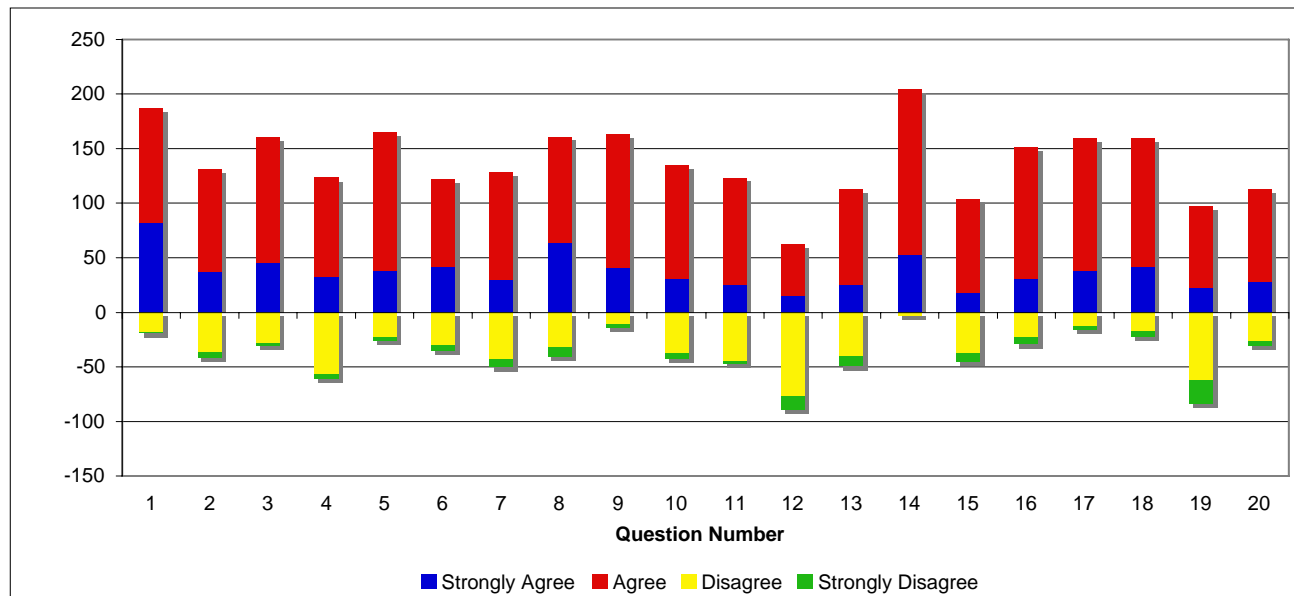
The chart below presents the results for the questionnaire. It should be noted that 'neutral' responses were excluded from the chart below.



The response to the questions in the first part of the customer satisfaction questionnaire indicates a high degree of satisfaction by employees with the occupational safety and health system. As the chart illustrates, 78% of the respondents provided positive responses to the statements by selecting either 'strongly agree' or 'agree.' 22% of respondents provided negative responses by selecting 'disagree' or 'strongly disagree.'

To gain a more detailed sense of the responses from the first section of the employee questionnaire, it is useful to look in more detail at the statements that elicited the strongest positive and negative responses. The chart, found below, plots the actual number of positive and negative responses for each statement. Statement numbers

from the questionnaire are shown along the bottom of the chart. Neutral responses are excluded.



As the chart shows, respondents generally had a positive perspective regarding the occupational safety and health system in Metropolitan Nashville and Davidson County. Those questions that generated the greatest proportion of disagree or strongly disagree include question #4 (Safety training is a part of ongoing staff development and training in my work unit), question #7 (Employees in my work unit are encouraged to find safety problems and correct them), question #11 (My department has written employee safety guidelines that have been clearly communicated to employees), question #12 (Employee safety successes are highly publicized in my work unit), question #13 (My department periodically inspects and corrects safety hazards and unsafe work conditions), question #15 (My department has a safety committee that produces solutions to employee safety problems), and question #19 (I have received

training on how to avoid repetitive motion injuries such as back strain or carpal tunnel syndrome).

The points that follow, present the results for the statements in the first section of the questionnaire.

(1) While Initial Training Was Perceived as Adequate, Concerns Were Expressed Regarding the Adequacy of Ongoing Training and Training Regarding Repetitive Motion Injuries.

Four statements within the questionnaire focused on the adequacy of training: the initial training, and ongoing training. These statements and the responses by the employees to the statements are presented below.

- 76% of the respondents agreed or strongly agreed that employee safety issues were an ongoing agenda item for discussion during staff meetings in their work unit. 24% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, and the Police departments disagreed or strongly disagreed with the statement. (Question #2)
- 78% of the respondents agreed that safety training was provided as part of new employee orientation. 22% of the respondents did not agree. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, and the Parks and Recreation departments disagreed or strongly disagreed with the statement. (Question #6)
- 67% of the respondents indicated that training was part of ongoing staff development. However, 33% of the respondents indicated that safety training was not part of ongoing staff development and training in their work unit. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, Fire, General Services, Police, and the Parks and Recreation departments disagreed or strongly disagreed with the statement. (Question #4)
- 54% of the respondents indicated that they had received such training. However, 46% of the respondents indicated that they did not receive training on how to avoid repetitive motion injuries such as back strain or carpal tunnel syndrome. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, Fire, Police, and the Parks and Recreation departments disagreed or strongly disagreed with the statement. (Question #19)

Overall, a high preponderance of the respondents indicated that employee safety issues were an ongoing agenda item in staff meetings and that safety training was part of employee orientation. However, a significant proportion of respondents indicated that safety training was not part of ongoing staff development and that they had not received training on how to avoid repetitive motion injuries such as back strain or carpal tunnel syndrome.

(2) While Respondents Indicated That Management Was Committed To Employee Safety and Employees Were Involved, Respondents Indicated Concerns Regarding A Number of Management Issues.

Fourteen statements within the questionnaire focused on management commitment and employee involvement in safety. These statements and the responses by the employees to the statements are presented below.

- 91% of the respondents agreed or strongly agreed that the safety of employees in their work unit was a priority to their supervisors and managers. A significant proportion of the respondents in the General Services Department disagreed or strongly disagreed with the statement. (Question #1)
- 84% of the respondents agreed or strongly agreed that safety hazards were quickly corrected once brought to the attention of their supervisors or managers in their work unit. A significant proportion of the respondents in the General Services Department disagreed or strongly disagreed with the statement. (Question# 3)
- 86% of the respondents agreed or strongly agreed that they knew the safety policies of Metro. A significant proportion of the respondents in the General Services Department disagreed or strongly disagreed with the statement. (Question #5)
- 72% of the respondents agreed or strongly agreed that employees in their work unit were encouraged to find safety problems and correct them. 28% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, Fire, and Police departments disagreed or strongly disagreed with the statement. (Question #7)

- 80% of the respondents agreed or strongly agreed that they knew the name of their safety coordinator in their department and their roles and responsibilities. 20% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools and General Services departments disagreed or strongly disagreed with the statement. (Question #8)
- 76% of the respondents agreed or strongly agreed that the roles and responsibilities for employee safety in their department were clearly defined. 24% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, and Police departments disagreed or strongly disagreed with the statement. (Question #10)
- 72% of the respondents agreed or strongly agreed that the written employee safety guidelines have been clearly communicated to employees. 28% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, Police, and the Parks and Recreation departments disagreed or strongly disagreed with the statement. (Question #11)
- 59% of the respondents disagreed or strongly disagreed that employee safety success were highly publicized in their work unit. 41% of the respondents agreed or strongly agreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, Fire, Police, Water Services, Public Works, and the Parks and Recreation departments disagreed or strongly disagreed with the statement. (Question #12)
- 70% of the respondents agreed or strongly agreed that their department periodically inspects and corrects safety hazards and unsafe work conditions. However, 30% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, Fire, and Police departments disagreed or strongly disagreed with the statement. (Question #13)
- 70% of the respondents agreed or strongly agreed their department had a safety committee that produced solutions to employee safety problems. However, 30% of the respondents disagreed or strongly disagreed with the statement. In particular, a significant proportion of the respondents in Metro Nashville Public Schools, General Services, Police, Public Works, and the Parks and Recreation departments disagreed or strongly disagreed with the statement. (Question #15)
- 91% of the respondents agreed or strongly agreed that supervisors and managers in their work unit enforce the safety rules. However, a significant proportion of the respondents in Metro Nashville Public Schools and General

Services departments disagreed or strongly disagreed with the statement. (Question #16)

- 84% of the respondents agreed or strongly agreed that in their work unit, employee accidents and injuries were promptly investigated and corrective action taken. (Question #17)
- 88% of the respondents agreed or strongly agreed that managers and supervisors in their work unit understand the day-to-day safety challenges faced by employees. (Question #18)
- 79% of the respondents agreed or strongly agreed that they had seen corrective action taken in their department in response to an employee injury or accident investigation. However, a significant proportion of the respondents in Fire, General Services, and Police departments disagreed or strongly disagreed with the statement. (Question #20)

Overall, respondents indicated that employees were involved in and management committed to employee safety. However, significant proportions of the respondents indicated that they were not encouraged to find safety problems and correct them, that safety guidelines had not been clearly communicated to employees, that employee safety successes were not highly publicized in their work unit, that their departmental safety committee did not produce solutions to employee safety problems, and that their department did not periodically inspect and correct safety hazards and unsafe work conditions.

(3) Respondents Responded Positively to Injury and Claims Management Practices.

Two statements within the questionnaire focused on injury and claims management. These statements and the responses by the employees to the statements are presented below.

- 92% of the respondents agreed or strongly agreed that in their work unit, injured employees return to their regular jobs or modified duty as soon as they are able following an injury. (Question #9)
- 99% of the respondents agreed or strongly agreed that they know how to report a work-related injury in Metro. (Question #14)

The response patterns for three departments – Metro Nashville Public Schools, General Services, and Police – indicate the most significant opportunities for improvement in occupational safety and health.

* * * * *

The following chapter presents an analysis of how well Metro Nashville meets best practices for delivery of occupational safety and health services.

5. BEST MANAGEMENT PRACTICES

5. BEST MANAGEMENT PRACTICES

This section of the report evaluates the practices and performance of the occupational safety and health practices of Metropolitan Nashville and Davidson County against industry best management practices based upon a variety of methods, including (1) review of documentary material on occupational safety and health policies and procedures; (2) interviews with staff; and (3) analysis of quantitative information on occupational safety and health conditions and performance.

1. ORGANIZATIONAL STRUCTURE.

Metro uses a hybrid approach to the organization of occupational and safety services. While there is a Safety program within the Human Resources Department, the delivery of these services in larger departments has been decentralized. There are a number of advantages to this hybrid approach. There are also a number of challenges that result from the use of this hybrid approach. An effective hybrid approach to the delivery of occupational safety and health services requires a number of features including:

- Clearly defined roles for the centralized and decentralized safety programs within Metro;
- The establishment of minimum best practices for delivery of these services;
- An auditing process in which the centralized Safety Program audits the effectiveness of these decentralized safety programs;
- Benchmarks for occupational safety and health that recognizes occupational differences and an effective reporting system; and
- Systems designed to hold managers and supervisors accountable for achieving the benchmarks.

Considering these best practices, there are a number of strengths in the manner that Metro organizes for delivery of occupational safety and health. These strengths are presented below.

- A central Occupational Safety and Health Program has been established within the Human Resources Department with 2.6 full-time equivalent staff.
- Safety functions in some departments have been allocated full-time staff and either report to a department director, human resources, risk management functions or an administrative division including:
 - Fire Department;
 - General Services Department;
 - Public Health Department;
 - Bordeaux Hospital;
 - General Hospital;
 - Parks and Recreation Department;
 - Public Works Department; and
 - Water Services.

There are, however, opportunities for improvement in the organization structure utilized for occupational safety and health. These opportunities are presented below.

- The roles of the Occupational Safety and Health Program within the Human Resources Department and the departments have not been clearly defined.
- The responsibility for occupational safety and health has been split between the Human Resources Department and the Metropolitan Nashville Public Schools (MNPS). Each has an occupational safety and health program approved by TOSHA, with separate officials designated as responsible for occupational safety and health management and administration.
- The official designated as responsible for the management and administration of the occupational safety and health program for Metro, excluding MNPS, is the Loss Prevention Specialist. This position was vacant.
- Risk Management is assigned to the Law Department, while the centralized occupational safety and health program is assigned to the Human Resources Department.

Metro, under the rules promulgated by the Tennessee Department of Labor and

Workforce Development – Occupational Safety and Health - in Chapter 0800-1-5.05 (2) - has chosen to develop its own program of self-compliance. In accordance with those rules, the Loss Prevention Specialist within the Safety Program was designated as the Metro safety and health official (excluding MNPS) in the plan submitted by Metro to TOSHA. (This position had been vacant for some time). The designated safety and health official is responsible for assisting the chief executive officer of the local government in carrying out all facets of the program to include, but not be limited to, the following:

- Setting goals and objectives for reducing and eliminating occupational accidents, injuries and illnesses;
- Developing plans and procedures for evaluating the program's effectiveness at all operational levels;
- Setting priorities with respect to the factors which cause occupational accidents, injuries and illnesses so that appropriate corrective action can be taken; and
- Assisting in budgeting sufficient funds for necessary staff, equipment, material and training required to ensure an effective occupational safety and health program.

The central Occupational Safety and Health Program within the Human Resources Department has not effectively fulfilled these responsibilities.

2. MANAGEMENT COMMITMENT AND EMPLOYEE INVOLVEMENT.

Management should provide leadership that encourages workers within an organization to participate in the programs offered by the company, in this case, the safety and health program. There are a number of strengths in the management and commitment of Metro to occupational safety and health. These include such strengths as those identified below.

- Metro has elected to develop its own program of compliance, and has prepared a statement in writing of this program, including a description of methods of inspection, and registered the program with the State Commissioner of Labor a written notification.
- The purpose of the Safety Program within the Human Resources Department has been defined as providing “Loss and Injury Prevention and Claims Management products to Metro departments and agencies so they can experience a safe, healthy, and productive workforce with minimal disruption due to injury and illness.” The Parks and Recreation Department and the Water Services Department have developed goals, objectives and performance measures regarding occupational safety and health. Although the safety function is relatively new in the General Services Department, the Safety Coordinator has developed safety related goals and objectives.
- Parks and Recreation and Water Services departments have clearly defined safety and health responsibilities through their safety manuals.
- The Public Works Department and Water Services Department have developed an employee safety handbook for the employees in their department. The Public Works Department handbook has not been up-dated since 1997. The Water Services Department handwork was updated in 2002.
- The Safety Program within the Human Resources Department provides annual Injury On Duty data to TOSHA, as required.
- The Safety Program within the Human Resources Department has an established safety budget.
- The Safety Program in the Human Resources Department has recently established a Safety Committee for departmental safety coordinators. The Safety Committee is supposed to meet every two months. Attendance is optional.
- Metro has developed a substance abuse policy. The Safety Program within the Human Resources Department provides substance abuse training to Metro employees. All employees are required to receive training on this policy once every three years.
- The Water Services Department has 14 safety committees – one for each work site. Additionally, Public Health, Codes Administration, Bordeaux and General Hospitals have established safety committees.

There are also a number of opportunities for improvement in the management and commitment by Metro to occupational safety and health. These opportunities are presented below.

- A Metro-wide policy committing Metro to occupational safety and health has not been developed and adopted.
- The Occupational Safety and Health Program within the Human Resources Department has not developed specific goals, objectives, and performance measures for Metro with the exception of the a performance objective for 'Results Matters' which has identified the "percentage of lost work days due to occupational illness or injury' as the key result for the Safety Program. A number of other departments have not established goals, objectives, and performance measures for occupational safety and health. These include the following:
 - Codes Administration;
 - Fire Department;
 - Public Health Department;
 - Bordeaux Hospital;
 - General Hospital;
 - Metro Action Commission;
 - Police Department;
 - Public Works Department;
 - Davidson County Sheriff's Office; and
 - Metro Nashville Public Schools.
- The Human Resources Department has developed a manual defining roles and responsibilities: *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee*. This manual has not been formally adopted. Additionally, a number of other departments have not developed their own safety manuals identifying roles and responsibilities for occupational safety and health. These include the following:
 - Codes Administration;
 - Fire Department;
 - General Services Department;
 - Public Health Department;
 - Bordeaux Hospital;
 - General Hospital;
 - Metro Action Commission;
 - Police Department;
 - Public Works Department;
 - Davidson County Sheriff's Office; and

- Metro Nashville Public Schools.
- Minimum best practices have not been established for the delivery of occupational safety and health services by operating departments.
- The Safety Program within the Human Resources Department does not audit the effectiveness with which occupational safety and health services are delivered within departments.
- The role and purpose of the Metro Safety Committee, established by the Human Resources Department, has not been clearly defined.
- A number of departments have not established safety committees including:
 - Fire Department;
 - General Services;
 - Metro Action Commission;
 - Parks and Recreation;
 - Public Works;
 - Davidson County Sheriff's Office; and
 - Metro Nashville Public Schools.
- While some departments have identified occupational safety and health or risk management as a program/cost center within their budget, most do not have a separate safety budget for safety coordinators to purchase safety equipment, training materials and to attend safety training, etc.
- While there are a number of departments with full-time safety coordinators that have or are capable of developing effective occupational safety and health programs, those departments without full-time safety coordinators lack the resources and the support from the Human Resources Department to develop such programs.
- Metro Nashville Public Schools does not have a safety program. There is a full-time Coordinator of Safety and Environmental Health/Plant Maintenance, who reports to the Facilities Manager. The position is responsible for environmental health (e.g., air quality) as well as maintaining the Materials Safety Data Sheets. Other than this position, safety functions and responsibilities are fragmented throughout the MNPS.
- The Police Department has one Lieutenant who manages several functions with safety as a collateral duty. The Police Department does not have a full-time safety coordinator.

- Insufficient staff resources are provided and directed to occupational safety and health within the central Occupational safety and Health Program.
- The supervisory and management performance appraisal system does not include features designed to hold supervisors and managers accountable for meeting their occupational safety and health responsibilities through documented performance standards and feedback.
- The Safety Program within the Human Resources Department has not developed a Metro-wide safety newsletter.

The responsibility for occupational safety and health has not been assigned to managers and supervisors in departments, nor have employees in most departments been involved in developing a safe work place. The practice of safety has been delegated to safety coordinators. Any accomplishment in enhancing safety in Metro is the result of efforts by these safety coordinators and not the result of central leadership by the Safety Program in the Human Resources Department. These safety coordinators, with rare exception, are not certified as safety professionals such as CSP. With rare exception, this staff is not provided nor takes advantage of continuing education for occupational safety and health. While the safety coordinators cited good management support and joint decision making, standards for qualifications of these safety coordinators and systems for accountability for safety in the work place have been ill defined. While some departments have developed occupational safety and health policies and procedures, safety coordinators indicated that invoking these policies and procedures for discipline or action was rare.

In addition, TOSHA requires the establishment of a Safety Committee at each primary location of an employer. Few departments are in compliance with this rule.

3. INJURY AND CLAIMS MANAGEMENT.

To manage losses, Metro should accurately record injuries on duty, analyze their causes, identify trends and patterns, initiate corrective action to prevent similar occurrences, measure its effectiveness, and utilize effective return to work practices.

There are a number of strengths in the occupational safety and health injury and claims management by the Metro. These strengths are presented below.

- In March of 2004, Metro contracted with a Third Party Administrator to maintain OSHA 300 recordable injury records.
- The Third Party Administrator is responsible for providing Metro with accurate data for the OSHA 300 Log.
- The Third Party Administrator has established timeframes for reporting. This includes 24 hours from incident to supervisor's report (Form 100s) to be submitted to ASC.
- Some departments have informal return-to-work programs (i.e., will try to accommodate staff with restrictions), which are generally handled by the employee's supervisor and the safety coordinator. Departments with some type of return-to-work, light-duty or modified transitional work programs are:
 - Codes Administration;
 - Bordeaux Hospital;
 - Fire Department;
 - General Services;
 - General Hospital;
 - Parks and Recreation Department;
 - Police Department;
 - Metro Action Commission;
 - Sheriff's Office;
 - Water Services; and
 - Metro Nashville Public Schools.

There are also a number of opportunities for improvement in the occupational safety and health injury and claims management. These opportunities are presented below.

- As noted, Metro has recently changed its OSHA process. Metro currently utilizes a Third Party Administrator. Because this is a relatively new program, there are still problems with the quality of data reported in the quarterly lost time injury reports.
- Metro does not comply with OSHA requirements regarding the reporting of OSHA recordable injuries. Metro only reports lost time injuries.
- The central Occupational Safety and Health Program within the Human Resources Department does not conduct trend analysis of injuries.
- The central Occupational Safety and Health Program within the Human Resources Department does not initiate corrective action to address trends in injuries.
- The Public Health Department does not have a return-to-work program. In fact, the Public Health Department counts light-duty days as Injured-On-Duty days (e.g., subtracts those days from the total annual allotment per body part). In other words, there is a disincentive for injured employees to return to work for modified or light duty assignment.
- Metro has not developed a Metro-wide return to work policy. Metro has not developed a Metro-wide policy regarding medical appointment tracking/intervention including claims and case management strategies.
- Light-duty and return-to-work programs in departments are all informal, meaning that each situation is handled on a case-by-case basis. The development and application of the return to work policies and procedures varies considerably among departments.
- The determination of what is or is not an injury on duty is made by departments. Policy guidance by the Safety Program within the Human Resources Department has not been developed.

Metro is not in compliance with TOSHA requirements regarding the reporting of recordable injuries. Metro's injury and claims management practices have been enhanced with the use of a Third Party Administrator, but the decisions regarding what is and is not an injury on duty is made by departments without policy guidance and the decisions are not made consistently. The return to work programs, in some instances, appears effective, but is not guided by a Metro-wide policy.

4. WORKPLACE HAZARD IDENTIFICATION AND CONTROL

Worksite hazard identification is a combination of systematic actions that provide the employer and the employee with the information necessary to recognize and understand the existing and potential hazards of the workplace. Once the hazards in the workplace have been identified, the prevention and control program can then be designed.

The strengths associated with the hazards identification and control system in the workplace of Metro are presented below.

- The Parks and Recreation Department requires all facility managers to conduct worksite inspections and complete a form, noting requests for service to correct the hazard.
- The Sheriff's Office's Compliance Section conducts monthly facility inspections, which are supplemented by daily and weekly inspections by staff at each facility.
- The Public Works Department conducts inspections of a sample of worksites weekly. Safety related violations are reported to supervisors for correction.
- The Water Services Department conducts job site and facility inspections on a routine, ongoing basis
- A number of departments have developed hazardous chemical communication right-to-know programs in accordance with TOSHA and provide training to their employees in this program including the following:
 - Fire Department
 - General Services
 - Public Health
 - Bordeaux Hospital
 - General Hospital
 - Parks and Recreation
 - Police Department
 - Public Works
 - Sheriff's Office
 - Water Services
 - Metro Nashville Public Schools

- The Parks and Recreation Department has outlined responsibility for maintaining the materials safety data sheet (MSDS) books and periodically audits them.
- All departments followed Metro's Vehicle Safety policy. Water Services' policy also outlined driving procedures and inspections.
- A number of departments have developed a confined space entry policy, which include procedures and training including:
 - Fire Department;
 - Parks and Recreation;
 - Public Works; and
 - Water Services;

A confined space is an enclosed space, which because of its small size and confined nature, can readily create or aggravate an exposure to a hazardous condition. A confined space has limited or restricted openings for entry and exit; has or has potential to contain a hazardous atmosphere, material with the potential for engulfment of the entrant, an internal configuration such that an employee could be trapped or asphyxiated by inwardly converging walls, or a floor which slopes downward and tapers to a smaller cross section or contains other recognized serious safety or health hazards; and is not intended for continuous employee occupancy.

- A number of departments have developed a blood borne pathogen policy, which include procedures and training including:
 - Fire Department;
 - Public Health;
 - Bordeaux Hospital;
 - General Hospital;
 - Parks and Recreation;
 - Police Department;
 - Public Works;
 - Sheriff's Office;
 - Water Services; and
 - Metro Nashville Public Schools.
- A number of departments have developed a personal protective equipment policy, which include procedures and training:
 - Codes Administration;
 - Fire Department;
 - Public Health;
 - Bordeaux Hospital;

- Parks and Recreation;
 - Police Department;
 - Sheriff's Office; and
 - Water Services.
- A number of departments have developed a Sharps Injury Prevention Policy including procedures and training:
 - Public Health;
 - Water Services;
 - Public Works;
 - Fire;
 - Bordeaux Hospital; and
 - General Hospital.
 - All departments follow Metro's Substance Abuse Policy, which includes random drug testing.

There are a number of opportunities for improvement in worksite hazard identification and analysis practices utilized by Metro. These include the practices presented below.

- The central Occupational Safety and Health Program has not developed a policy requiring departments to conduct self-inspections. This is at the discretion of the individual departments and actual practice varies significantly.
- A methodology for employees to anonymously report safety and health risks within Metro has not been developed.
- Systems have not been put in place to ensure that contractors performing work on behalf of Metro provide a safe work place for their employees.
- There are a number of departments that do not conduct routine, ongoing inspections of their job sites and/or facilities to identify and mitigate work place hazards. These include such departments as the following:
 - Codes Administration;
 - General Services;
 - General Hospital;
 - Bordeaux Hospital;
 - Police Department;
 - Fire Department;
 - Metro Action Commission; and

- Metro Nashville Public Schools.
- A number of departments have not developed formal written policies regarding confined space entry including the following:
 - General Services;
 - Codes Administration;
 - Public Health;
 - Bordeaux Hospital;
 - General Hospital;
 - Sheriff's Office;
 - Metro Action Commission; and
 - Metro Nashville Public Schools.

The exposure in some of these departments, such as the Metro Action Commission, to risk associated with confined space entry may be low.

- A number of departments have not developed hazardous chemical communication right-to-know programs in accordance with TOSHA and do not provide training to their employees in this program.
- A number of departments have not developed formal written policies and procedures regarding personal protective equipment including:
 - General Services;
 - General Hospital;
 - Public Works;
 - Metro Action Commission; and
 - Metro Nashville Public Schools.

The exposure in the Metro Action Commission to risk associated with personal protective equipment would appear to be low.

- Metro has not developed an ergonomics standard. Ergonomics is a focus for OSHA. More importantly, musculo-skeletal, repetitive motion, and cumulative trauma typically account for the bulk of injuries on duty.
- The extent of training in emergency evacuation and disaster planning appears to be inconsistent from department to department.

Metro has placed considerably more emphasis on “post-injury controls” than prevention through identification and mitigation.

5. OCCUPATIONAL SAFETY AND HEALTH TRAINING

For an effective occupational safety and health program, it is crucial that everyone at the workplace understands his/her role in the program, actively work to prevent and/or control hazards and potential hazards at the worksite, and the ways they should protect themselves should a hazard occur. A good safety and health program is achievable if the following understand their roles and responsibilities within their group:

- Employees are trained to understand the hazards of their jobs and how to protect themselves;
- Supervisors understand their safety responsibilities; understand how to reinforce and enforce employee training; and
- Managers understand their own responsibilities regarding training.

There are a number of strengths in the occupational safety and health program for Metro. These strengths are presented below.

- A number of departments provide ongoing occupational safety and health training including the following: include:
 - Fire Department;
 - Public Health;
 - Bordeaux Hospital;
 - General Hospital;
 - Parks and Recreation Department;
 - Police Department;
 - Public Works;
 - Sheriff's Office; and
 - Water Services.
- The scope and depth of training varies. Some departments, (e.g., Fire, Police, Public Health, and Sheriff's Office) have training divisions with which safety coordinators ensure safety training is incorporated into training for new hire and in-service training sessions.

There are also a number of opportunities for improvement in occupational safety and health training. These opportunities are presented below.

- Some departments do not provide ongoing training or provide very limited training. These include the following:
 - Codes Administration;
 - General Services;
 - Metro Action Commission; and
 - Metro Nashville Public Schools.
- While some departments provide ongoing occupational safety and health training, there are still opportunities for improvement. For example, while there is a Safety Coordinator position in the Public Health Department, personnel assigned to staff development coordinate training and it is the responsibility of the supervisor to ensure staff receives necessary training.
- None of the departments interviewed utilized formal mechanisms to assess employee comprehension of training and its effectiveness.
- Minimum standards have not been developed for the level of occupational safety and health training that will be provided to the various classes within Metro. For example, for trades classifications, the minimum level of training should include confined space, electrical safety, emergency evacuation, ergonomics, hazard chemical communication, ladder and scaffolding safety, lockout-tagout, personal protective equipment, etc. Other training for trade personnel would be dependent upon their assignment such as blood borne pathogen, hearing conservation, respiratory protection, etc.
- Occupational safety and health training is optional, and not mandatory, for supervisors and managers.

The training provided by Metro does not address the occupational safety and health responsibilities of Metro staff. It is not comprehensively incorporated into other training and performance requirements, although the Police and Fire departments do address safety and health as part of their academy training.

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The next chapter presents an analysis of the organization of occupational safety and health.

**6. ORGANIZATION OF OCCUPATIONAL SAFETY
AND HEALTH SERVICES**

6. ORGANIZATION OF OCCUPATIONAL SAFETY AND HEALTH SERVICES

This chapter presents the analysis of organization of the occupational health and safety services program in Metropolitan Nashville and Davidson County. This analysis includes the following:

- The identification of the current strengths in the organization and management of the current employee safety program.
- The proposed plan of organization of the occupational health and safety services in the overall structure of Metro government.

The chapter begins with a discussion of the strengths in the current organization of the occupational health and safety services.

1. THERE ARE A NUMBER OF STRENGTHS IN THE CURRENT ORGANIZATION OF OCCUPATIONAL HEALTH AND SAFETY SERVICES IN METRO.

The points below highlight the key strengths of the organizational approach used by Metro for occupational health and safety.

- There is a central safety office in the Human Resources Department that is responsible for the administration of Metro's Occupational Health and Safety Services program.
- Metropolitan Nashville and Davidson County, as well as the Metropolitan Nashville Public Schools, have elected to develop their own program of compliance, and have prepared a statement in writing of this program, including a description of methods of inspection, and registered the program with the Commissioner of Labor a written notification.
- Metro has defined the purpose of the safety program: "to provide Loss and Injury Prevention and Claims Management products to Metro departments and agencies so they can experience a safe, healthy, and productive workforce with minimal disruption due to injury and illness."

- The Human Resources Department has recently established a Safety Committee for department Safety Officers. The Safety Committee is supposed to meet every two months and attendance is optional.
- The Human Resources Department has developed some safety related policies and procedures, including substance abuse and vehicle safety policies. The Human Resources Analyst 3 responsible for the employee safety program provides training to Metro employees on the substance abuse policy, as well as an optional course for the Metro Management Institute.

While a comparison to the 'best management practices' for organization and management commitment in the employee safety program identified several key strengths of the current program, there are several opportunities for improvement. The section, which follows, provides a discussion of the overall organization of the Occupational Health and Safety Services program.

2. THE ORGANIZATIONAL LOCATION OF OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD BE EVALUATED.

The Occupational Health and Safety Services program in Metropolitan Nashville and Davidson County is located within a section of the Human Resources Department and reports to a Human Resources Manager. The points, which follow, present a brief discussion of the current Occupational Health and Safety Services Program.

- The Human Resources Manager who supervises staff assigned to employee safety program reports to the Human Resources Director.
- The Occupational Health and Safety Services Program consists of 2.6 fulltime equivalents who report to the Human Resources Manager. These positions are as follows:
 - A Human Resources Analyst 3 who serves as the coordinator for the Metro-wide Occupational Health and Safety Services program.
 - A vacant Loss Prevention Specialist position.
 - A 0.6 full-time equivalent Compliance Inspection 3, who provides support to the Human Resources Analyst 3.

- The Human Resources Department has an authorized budget of \$162,100 for 'risk management' (safety) for Fiscal Year 2004 – 2005.
- The purpose of the Occupational Health and Safety Services program is “to provide loss and injury prevention and claims management products to Metro departments and agencies so they can experience a safe, healthy, and productive workforce with minimal disruption due to injury and illness.”

The Risk Management Division is currently part of the Law Department. The powers and duties of the Law Department in Metro, as set out in the Charter or by ordinance, are:

- Supervise, direct and control all the law work of the Metropolitan Government;
- Furnish legal advice to the Mayor, the Council, all officers, departments, boards and commissions concerning matters related to their official powers and duties;
- Represent Metro in all litigation;
- Collect all debts, taxes, and accounts due the government;
- Prepare or approve all written instruments including contracts, bonds, deeds, and leases;
- Prepare or assist with the preparation of all ordinances;
- Investigate and handle all claims, and
- Handle all insurance and risk management.

As a division of the Law Department, the Risk Management Division is responsible for handling all insurance and risk management for Metro. According to the budget, the Risk Management Division administers the risk management and insurance program to identify, analyze, evaluate, and make recommendations for the control of risks (and thus control of costs associated with risk).

The practice of risk management has evolved over the past four decades. The practice has begun expanding its role to address risk on a comprehensive basis. The Public Risk Management Association identified this evolution in the table below.

1970's	1980's	1990's	2000's
Insurance procurement Policy administration	Risk planning Loss control Organizational risk management focus Claims management Regulatory compliance Public safety risk management Employee benefits	Risk planning Cost allocation Loss control Contractual risk transfer Claims/litigation management Outcome orientation/benchmarking Integrated disability management Employee benefits	Chief risk officer Enterprise risk management Consultancy Risk financing Multi-jurisdictional/regional integration Loss control Claims and litigation management Cost allocation Business and government partnerships Employee benefits

As the table indicates, the role of risk management has been continually expanding as the definition of local government risk has expanded. The role of the Risk Manager has evolved to that of a chief risk officer for local government. The focus of the Risk Manager has expanded to include loss control. Loss control now considers a broad range of losses including fleet accidents, general liability, property losses, injury-on-duty, contractual liability, fiduciary and crime (theft, larceny), public officials and other professionals (errors and omissions), law enforcement, emergency medical services, and health care, cyber crime, etc. Employee safety is an essential element to an effective loss control program within the Risk Management Division. The injury-on-duty program is one of a myriad of risk transfer products and financial strategies used by risk

management that includes such other products as property insurance, liability insurance, health insurance, difference in conditions coverage, etc.

The goals and objectives of the Risk Management Division and the Occupational safety and Health Program overlap. These overlapping goals and objectives include:

- To manage risk effectively to meet performance objectives and to provide improved services cost effectively;
- To maintain a successful relationship with employees and contractors by managing risks competently and communicating risk information effectively;
- To develop processes to identify, assess, address and review and report on risks; and
- To develop strategies and approaches to mitigate risks.

Both Risk Management and the Occupational Safety and Health Program seek to identify and control risk in order for Metro to reduce costs associated with risk by identifying and developing strategies and programs to minimize the potential risk.

6.2 Recommendation: Management should evaluate the current organizational placement of the central Occupational Safety and Health Program.

3. MANAGEMENT OF THE CENTRAL OCCUPATIONAL AND SAFETY PROGRAM SHOULD BE UPGRADED.

A Human Resources Analyst 3 supervises the Occupational Health and Safety Services program. The job objective of a Human Resources Analyst 3 is to 'coordinate and participate in the activities of a Personnel Section of a medium or large Metro Department or specialized section within the central Personnel Department and performs related duties as required. Key elements of the job description for a Human Resources Analyst 3 in Metro include:

- In an operating department, manages all personnel operations, including:

- Oversees preparation of employee profiles, justification forms, and related documents, maintenance of all departmental personnel records;
 - Assists in the preparation of job descriptions and in budget preparation as it relates to department personnel;
 - Investigates grievances and complaints;
 - Drafts departmental personnel rules, policies and procedures; and
 - Conducts disciplinary proceedings.
- In the central Personnel Department, coordinates the activities of specialized sections and serves as staff specialist, in areas such as classification / compensation, benefits administration, training or recruitment, including:
 - Writes and interprets policies in specialty area;
 - Meets with management, departments, labor, and other groups on topics related to specialty area;
 - Prepares and presents topics at meetings and seminars, as well as reports involving data analysis, and makes recommendations to management;
 - Monitors and implements the administrative, regulatory and operational activities involved in maintaining compliance with OSHA rules and regulations; and
 - Handles and resolves complex management and / or employee issues.
 - Leads and performs various analytical duties requiring a detailed knowledge of Benefits Services or Disability Management, depending on position location.
 - Works directly with Metropolitan Government employees, retired employees, employee's survivors, depending upon position location, who are enrolled in or are applying for enrolment into the Metropolitan Employee Benefits system.
 - Oversees and prepares recruiting strategies, qualifying guidelines and selection tools.
 - May organize and conduct Metro-wide training programs in support of government policies and procedures.
 - Enrolls employees in specialized training classes.
 - May oversee the operations and lead the employees of a section.

A review of the key elements of the Human Resources Analyst 3 shows that the position is a generalist human resources classification, which does not require a

background or technical knowledge in safety. There are only two references to occupational health and safety in the description for this classification, which includes:

- As a major job responsibilities: ‘monitors and implements the administrative, regulatory, and operational activities involved in maintaining compliance with OSHA rules and regulations.’
- As a performance standard: ‘knowledge of laws and regulations affecting personnel operations, including EEO, wages and hours, and OSHA.’

Knowledge and skills required for the classification are specifically related to human resources functions (e.g., personnel, benefits, compensation, budgeting, disability management, etc.).

The points below illustrate sample elements of job description for a Safety Manager.

- Characteristics of the work include:
 - As Safety Manager for Metro, perform manage and direct the Occupational Health and Safety Services program;
 - Responsible for managing the functions of the central Occupational Safety and Health Program;
 - Exercises general supervision over subordinate personnel;
 - Serves as Metro’s representative and director of occupational health and safety; and
 - Performs related duties, as required.
- Examples of job functions and responsibilities include:
 - Manage the occupational safety and health programs for Metropolitan Nashville and Davidson County, including hazard identification and assessment, hazard prevention and control, OSHA information and training, evaluation and program effectiveness;
 - Develop and recommend occupational safety and health policy;
 - Develop occupational safety and health programs, practices and procedures to eliminate or control potential hazards;
 - Prepare and recommend program budget;
 - Represents Metro of matters concerning employee occupational safety and health;

- Promotes occupational safety and health programs for instructing and motivating managers, supervisors and employees in the prevention, as well as correction of hazards through training, workshops, safety talks and newsletters;
 - Develop training program for OSHA mandated training and technical assistance;
 - Conduct needs assessment of training, equipment and written program; and
 - Manage and direct safety staff.
- Examples of desired knowledge and ability for the Safety Manager would include the Occupational Safety Health Act, OSHA regulations, standards, procedures and principles, including Federal, State and local laws, regulations and ordinances. The incumbent should also have the ability to:
 - Maintain effective working relationships;
 - Apply OSHA laws and to advise and / or resolve technical matters;
 - Interpret technical materials;
 - Motivate, train and work effectively with employees to maintain morale and productivity;
 - Make operational policies and decisions;
 - Delegate tasks;
 - Supervise subordinates;
 - Exercise tact and diplomacy;
 - Prepare reports and correspondence;
 - Give oral presentations; and
 - Plan and organize the work of subordinates;
 - The classification should require certification as a certified safety professional or equivalent.

The Occupational Health and Safety Services program should be supervised by a position that has specific occupational health and safety skills, knowledge, and abilities.

6.3 Recommendation: A Safety Manager classification should be established to manage and direct the Occupational Health and Safety Services program. The Human Resources Analyst 3 is a SR12, with a salary range for an SR12 of \$46,580 to \$60,557. The Safety Manager should be compensated at the SR13 level, which has a salary range of \$55,827 to \$78,388.15. Including fringe benefits, the total cost of this position would approximate \$101,900 at top step.

4. FULL-TIME SAFETY COORDINATORS IN THE PARKS AND RECREATION, FIRE, AND POLICE DEPARTMENTS SHOULD BE CLASSIFIED AS SAFETY COORDINATORS.

The Matrix Consulting Group interviewed full-time staff dedicated to occupational safety and health in the operating departments. While staffing levels and scope of department safety program varied, there were several key elements of the functions of staff that meet the job duties and requirements of the Safety Coordinator classification.

Elements included:

- Development and implementation of safety policies and procedures.
- Coordination of training.
- Incident and accident investigations.

While responsibilities for dedicated safety personnel in the operating departments met the job description of Safety Coordinator, not all positions were classified appropriately. The table, below, presents the class titles for full-time safety personnel in the operating departments.

Position	Minimum	Maximum	Median
Safety Coordinator	\$46,580	\$60,557	\$53,569
Professional Specialist	\$42,393	\$55,113	\$48,753
Lieutenant	\$52,505	\$68,102	\$60,304
Administrative Assistant	\$34,855	\$45,313	\$40,084
Minimum	\$34,855	\$45,313	
Maximum	\$52,505	\$68,102	
Median	\$44,487	\$57,835	

The points, which follow, present a brief discussion of the information presented in the table:

- The salary range for a Safety Coordinator is \$46,580 (minimum) to a maximum of \$60,557. The midpoint is \$53,569.

- The General Services Department recently (October 2004) created the position of Safety Coordinator.
- The Water Services Department has also classified its position as a Safety Coordinator.
- The Fire Department has a full-time safety coordinator whose position classification is Administrative Assistant. The salary range for this position is \$34,855 to \$45,313. The median salary for this range is \$40,084; the median salary range for a Safety Coordinator is 34% higher.
- In the Parks and Recreation Department, the staff person functioning as the safety coordinator is classified as a Professional Specialist. The salary range for a Professional Specialist is \$42,396 to \$55,113. The midpoint is \$48,753, which is 10% lower than the midpoint for a Safety Coordinator.
- The Police Department has assigned responsibility for the Department's safety program to a Lieutenant, who is also responsible for the Inspections and Court Appearance Divisions. The salary range for a Police Lieutenant is \$52,505 to \$68,102. The median salary for this position is \$60,304, which is 12% higher than the median salary for the Safety Coordinator.
- The Public Works Department has 2.2 authorized staff assigned to the safety program. The Administrative Services Officer 4 serves as the safety and training program manager. The Safety Inspector conducts worksite inspections, incident / accident investigations, etc. The two current positions are appropriate given the plan of organization and the safety program in the Public Works Department.
- The Public Health Department's Fiscal Year 2004 – 2005 budget shows the safety coordinator's classification as a Medical Administrative Assistant II. The salary schedules for non-public safety positions did not include this position.

Employees functioning as full-time safety coordinators, excluding the hospitals and Public Health given their unique working environment, should be classified as Safety Coordinators. Additionally, Metro needs to standardize the qualification and skill sets of safety coordinators to meet the classifications requirements. Safety Coordinator responsibilities include:

- Oversee and implement a comprehensive departmental safety program:
 - Maintains and updates departmental safety records;

- Prepares daily, monthly and annual reports concerning accidents;
 - Keeps the departmental safety manuals, library and related materials up-to-date;
 - Maintains departmental safety equipment;
 - Implements and monitors safety rules and work practices for department;
 - Conducts safety training / program for employees;
 - Assists in the investigations of accident;
 - Analyzes vehicular and employee accident data; and
 - Compiles statistics to determine trends and causes of accidents and recommends corrective actions to management as needed.
- Conduct safety inspections, including:
 - Routinely inspects work areas, equipment, vehicles and other areas of high accident risk or unsafe work conditions;
 - Consults with all levels of management on practices and techniques to eliminate accidents; and
 - Investigates complaints of hazardous working conditions and forwards reports to department head.
 - Consults and assists other Metro departments, including:
 - Assists the Insurance Division and Human Resources Department in coordinating and conducting employee safety education and training programs; and
 - Consults with the Law Department concerning insurance claims.
 - Supervises employees, including:
 - Assigns duties to employees;
 - Ensures employees perform work in a correct and efficient manner;
 - Counsels with and corrects employees as needed; and
 - Trains employees.

The Human Resources Department should work with the operating departments to reclassify those employees assigned full-time to occupational safety and health as Safety Coordinators (excluding the hospitals and public health given their unique operating environment). More specifically:

- The Professional Specialist in the Parks and Recreation Department should be reclassified as a Safety Coordinator;

- The Administrative Assistant in the Fire Department should be reclassified as Safety Coordinator.
- The Police Department, when it fills the position of safety coordinator, should civilianize the position as a Safety Coordinator. The department has historically filled this position with a sworn position, but the complexities of the position require professionally, trained expertise.

Additionally, the Human Resources Department and the operating departments should ensure that qualifications and skill sets are standardized for the position of Safety Coordinator.

6.4 Recommendation: Full-time Safety Coordinators in the Parks and Recreation, Fire, and Police departments should be classified as Safety Coordinators and requirements for the classification should be standardized.

5. THE ROLES AND RESPONSIBILITIES FOR OCCUPATIONAL SAFETY AND HEALTH SHOULD BE CLARIFIED IN A FORMAL, WRITTEN POLICY ADOPTED BY METRO.

At present, the role of the central Occupational Safety and Health Program and the role of operating departments in delivery of occupational safety and health services has not been adopted as a formal policy by Metro. Equally as important, the responsibilities of employees, supervisors and managers for occupational safety and health have not been defined.

Metro should develop and adopt a formal, written policy that clearly defines these responsibilities. An example of possible policy is presented below.

1. Policy: Good occupational safety and health practices are a responsibility of all Metro employees. The participation and cooperation of each employee is essential to a smooth and effective program.

2. Employees Responsibilities:

Your responsibilities as a Metro employee include:

- Following all health and safety rules and procedures;
- Reporting hazardous conditions to your supervisor;

- Wearing or using prescribed protective equipment;
- Reporting any job-related injury or illness to your supervisor and seeking treatment promptly; and
- Refraining from the operation of any equipment without both proper instructions and authorization.

3. Supervisor's Responsibilities

Each supervisor in Metro is responsible for providing a working environment free from recognized occupational safety and health hazards. Specific safety responsibilities of supervisors include:

- Informing new employees of their occupational safety and health responsibilities, procedures, rules and regulations;
- Assuring that required equipment and personal protective devices are provided, maintained, and used;
- Taking prompt action when unsafe acts or conditions are reported or noted;
- Providing for occupational safety and health training and education on a continuing basis;
- Investigating and reporting all on-the-job accidents promptly and requesting medical treatment if necessary;
- Investigating and reporting all job-related health or safety problems promptly;
- Coordinating or conducting internal inspections to assure safe and healthful working conditions;
- Requesting the assistance of the next higher level of supervision regarding budget requests for any health and safety improvements needed; and
- Ensuring their employees are made aware of their rights under the Tennessee Occupational Safety and Health Act of 1972. The State of Tennessee Public Employee, Safety and Health Protection on the Job poster is the authorized means of providing this information. The poster, available from Occupational Health and Safety, should be posted in each Metro department.

3. Manager's Responsibilities

Each manager in Metro has primary responsibility for:

- The occupational safety and health of their staff;
- Compliance with all applicable occupational safety and health laws and regulations; and
- Obtaining and providing funds needed for occupational safety and health improvements and for making those improvements;

4. Central Occupational Safety and Health Program

Centralized Occupational Safety and Health is responsible for development, oversight, and management of occupational safety and health programs that provide safe and healthy conditions for work, and comply with applicable occupational safety and health laws and regulations. Central Occupational Safety and Health:

- Provides training programs, technical assistance to departments;
- Audits compliance with TOSHA and Metro policies and procedures;
- Initiates periodic and follow-up inspections or monitoring of Metro establishments facilities and/or work sites, make recommendations to correct any hazard(s) or exposure(s) observed, initiates any investigation(s) required by complaints/concerns submitted by employees or investigations requested by employees;
- Manages the development, issuance, and maintenance of the Metro Occupational Safety and Health Policies and Procedures Manual;
- Ensure that periodic evaluations are conducted of the effectiveness of the occupational safety and health program within departments and issue recommendations to departments to enhance the effectiveness of the program;
- Chairs the Metro Safety Advisory Board; and
- Provides consulting services to managers, supervisors, and employees in all areas of occupational safety and health.

5. Departmental Occupational Safety and Health Programs

The departmental occupational safety and health programs are responsible for the implementation of the Metro occupational safety and health plan within their respective department. As such, each department head will:

- Designate an employee as Safety Coordinator for the department.
- Review and respond to the recommendations of the central Occupational Safety and Health Program.

- Ensure that a reasonable effort is made to comply recommendation(s) issued central Occupational Safety and Health Program or request a review of the recommendation(s) with the Director within the abatement period specified by the recommendation.
- Ensure that periodic safety inspections are conducted in the areas within his/her responsibility in order to become aware of hazards or standards violations that may exist and to correct or address such hazards or violations within a reasonable period of time.
- Ensure that occupational accidents, injuries, or illnesses are reported in accordance with TOSHA, that these occupational accidents, injuries, or illnesses are reviewed and investigated, and that the findings and recommendations are forwarded to the central Occupational Safety and Health Program.
- Submit within thirty days (30) after the end of each fiscal year an annual report providing the status of his/her safety and health program to the central Occupational Safety and Health Program.

6.5 Recommendation: Metro should develop and adopt a formal, written policy that clarifies roles and responsibilities for occupational safety and health program.

6. THE SAFETY MANAGER WITHIN THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD BE DESIGNATED AS THE SAFETY AND HEALTH OFFICIAL FOR METRO INCLUDING MNPS.

Within Metropolitan Nashville and Davidson County, two written occupational safety and health programs have been submitted to and approved by TOSHA: one by the Metropolitan Nashville Public Schools (MNPS) and the other by the Human Resources Department. Metropolitan Nashville Public Schools is responsible for voluntary compliance with the law and standards as promulgated by TOSHA for the school system and its employees. The Human Resources Department is responsible for voluntary compliance with the law and standards as promulgated by TOSHA for the remainder of Metro.

The centralized Occupational safety and Health Program in Metro government should be responsible for the monitoring of the MNPS employee safety program, just like it currently is for all of Metro excluding MNPS. Responsibility should include:

- Filing the Occupational Health and Safety Services program with TOSHA;
- Submitting annual data as required by TOSHA to TOSHA annually;
- Ensuring MNPS is in compliance with the Occupational Health and Safety Services program; and
- Monitoring and auditing the MNPS safety program.

6.6 Recommendation: The two written occupational safety and health programs that have been submitted to and approved by TOSHA should be consolidated into a single program.

The Safety Manager within central Occupational Safety and Health Program should be designated as the safety and health official for all of Metro, including MNPS.

7. METRO'S OCCUPATIONAL HEALTH AND SAFETY SERVICES SHOULD CONTINUE TO BE A HYBRID SYSTEM.

Metropolitan Nashville and Davidson County (Metro) has a hybrid approach to occupational safety and health. This hybrid approach is defined within the manual developed by the Human Resources Department: *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee*. This manual outlines responsibilities for the Human Resources Department's 'Safety Division,' as well as the role and responsibilities of the operating departments. The points below provide a brief summary of the information contained in the manual.

- The central "Safety Division' is responsible for providing direction and supervision of the Metro-wide Occupational Health and Safety Services program. This includes a wide-range of responsibilities, such as:

- Promoting and encouraging a safe and healthy work environment;
 - Informing the Mayor and department heads of costs resulting from accidents and injuries in each operating department of Metro;
 - Developing and implementing safety and loss prevention programs for Metro; and
 - Training departmental safety coordinators in their duties and responsibilities, to monitor their activities and progress, and to coordinate the safety and loss prevention program for each department.
- Operating departments are responsible for the development, direction and implementation of department specific safety and health programs. Responsibilities of departments include:
 - Developing, revising, and annually reviewing departmental safety rules and regulations;
 - Assisting supervisors investigating on the job accidents;
 - Training supervisory personnel in reporting and investigating employee injury-on-duty accidents and vehicle accidents for the purpose of reducing the recurrence of such accidents;
 - Analyzing all accident reports for completeness and accuracy;
 - Conducting safety orientations for all new employees;
 - Promoting safety consciousness for all employees through proper job-safety training;
 - Implementing the department’s self-inspection on prescribed forms; and
 - Overseeing all required TOSHA training according to regulations.

Similar to Metropolitan Nashville and Davidson County, there are several other local governments that have a comparable system.

- The City of Austin, Texas has one central Occupational Health and Safety Services program staff organized as part of the Risk Management Division. This employee, the Corporate Safety Officer, is responsible for developing City-wide safety manual, establishing goals and objectives, new employee training, chairing the City-wide Safety Committee, managing the return-to-work program, and providing assistance to departments as needed, such as incident / accident investigations, etc. Departments are responsible for developing departmental specific safety policies and procedures, providing safety training as it relates to the department, conduct worksite inspections, incident and accident investigations, and developing performance standards for department’s return-to-work program.
- In the City of Raleigh, North Carolina, the central safety office is responsible for the development of safety policies and procedures, conduct training, worksite

inspections, and new employee orientation. Departments are responsible for developing department specific policies and procedures as well as provide training, conduct worksite inspections, identify hazards corrections for incidents / accidents, develop and administer the department's light-duty program.

- The East Bay Municipal Utility District has a centralized safety office that decentralizes its safety staff in the operating departments. Central safety office personnel are assigned to act as safety director for that organization and sits as a member on that group's management team. The central safety officer staff forms, maintains and facilitation a 'local safety committee' to address and resolve local safety issues. The central safety office is responsible for establishing goals and objectives, developing writing policies and procedures, conducting worksite inspections, incident and accident investigations.
- While Metropolitan Louisville and Jefferson County is in the process of developing a consolidated Occupational Health and Safety Program. There is a central safety office. The central safety office is responsible for developing and revising goals, objectives and specific safety programs, as well as a formal, written program and conducting worksite inspections and accident / incident investigations. The operating departments are responsible for developing and implementing departmental specific safety and health policies and procedures, conduct safety related training, as well incident / accident investigations.

Most of these local governments have a hybrid occupational safety and health program with responsibilities are for implementation are shared between the central safety staff and the operating departments.

6.7 Recommendation: Metropolitan Nashville and Davidson County should continue its hybrid approach to delivering its Occupational Health and Safety Services.

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The next chapter presents an analysis of management commitment and employee involvement in occupational safety and health.

7. MANAGEMENT COMMITMENT AND EMPLOYEE INVOLVEMENT

7. MANAGEMENT COMMITMENT AND EMPLOYEE INVOLVEMENT

This chapter presents an analysis of management commitment and employee involvement in occupational safety and health. The chapter includes the analysis of the following issues:

- A Metro-wide policy committing Metro to occupational safety and health has not been developed and adopted.
- The Occupational Safety and Health Program within the Human Resources Department has not developed specific goals, objectives, and performance measures. A number of other departments have not established goals, objectives, and performance measures for occupational safety and health.
- Minimum best practices have not been established for the delivery of occupational safety and health services by operating departments.
- The Occupational Safety and Health Program within the Human Resources Department does not audit the effectiveness with which occupational safety and health services are delivered within departments.
- The role and purpose of the Metro Safety Committee, established by the Human Resources Department, has not been clearly defined.
- A number of departments have not established safety committees.
- While some departments have identified occupational safety and health or risk management as a program/cost center within their budget, most do not have a separate safety budget for safety coordinators to purchase safety equipment, training materials and to attend safety training, etc.
- The supervisory and management performance appraisal system does not include features designed to hold supervisors and managers accountable for meeting their occupational safety and health responsibilities through documented performance standards and feedback.
- The Occupational Safety and Health Safety Program within the Human Resources Department has not developed a Metro-wide Employee Safety Manual. Additionally, almost all departments with the exception of Water

Services and Public Works have not developed safety handbooks to address the unique hazards of their departments.

- The Safety Program within the Human Resources Department has not developed a Metro-wide safety newsletter.
- Those departments without full-time safety coordinators lack the resources and the support from the Human Resources Department to develop effective occupational safety and health programs.
- Metro Nashville Public Schools does not have an occupational safety and health program.
- The Police Department has one Lieutenant who manages several functions with safety as a collateral duty. The Police Department does not have a full-time safety coordinator.
- Insufficient staff resources are provided and directed to occupational safety and health within the central Occupational safety and Health Program.

The sections that follow present an analysis of these issues.

1. AN EXECUTIVE ORDER SHOULD BE ISSUED COMMITTING METRO TO THE OCCUPATIONAL SAFETY AND HEALTH OF ITS EMPLOYEES AND ESTABLISHING METRO-WIDE RESPONSIBILITY.

National safety organizations including Occupational Safety and Health Administration (OSHA) and the Nation Safety Council (NSC) point out that establishing an effective safety program, which reduces the frequency and severity of workplace injuries, is in the best interest of the employer. Both the OSHA and the NSC reason that a safe work environment can be expected to help minimize workers' compensation costs and enhance worker morale and productivity. For Metro, the most obvious and direct effects of employee injuries are the human costs of employee pain and suffering and the financial costs resulting from workers' compensation claims, including medical and indemnity expenses.

The importance of conspicuous executive management commitment to, and

support of, occupational safety programs cannot be overstated. Safety industry sources suggest that top management should provide the vision and leadership for an organization's safety efforts.

The Mayor's Office should issue an executive order, which clearly states that:

- The occupational health and safety of all Metro employees is a priority in Metro;
- Department heads will be held accountable for the occupational health and safety performance of their departments;
- Sets the vision and broad goals of the Metro-wide safety performance;
- Designates the administrator of Metro's Occupational Health and Safety Services program.

7.1 Recommendation: The Mayor's Office should issue an executive order that outlines Metro's commitment to occupational safety and health for its employees.

2. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP SPECIFIC GOALS, OBJECTIVES AND PERFORMANCE MEASURES.

The Human Resources Department has developed a goal for its 'Occupational Health and Safety Services' program. Other departments have developed goals for their occupational safety and health program as well. These goals are presented below:

- For the Occupational Safety and Health Program in the Human Resources Department's budget, the goal is to reduce the "percentage of lost workdays due to occupational illness and injury."
- Some operating departments have developed goals for 'risk management' programs in their budgets. Those departments are as follows:
 - Human Resources
 - Metro Water Services
 - General Services
 - Police Department
 - Public Health
 - Sheriff's Office

- Additionally, the Water Services and the General Services departments developed department specific goals and objectives. Samples are provided in the table below:

Metro Water Services
<ul style="list-style-type: none">• Enhance Metro Water Services Safety Program by continuing to partner with inside and outside government agencies on various safety related projects.• 100% compliance with TOSHA training requirements.• Seek zero TOSHA violations.• Help reduce Preventable Vehicle Accidents (PVA) by 10%.• Help reduce TOSHA recordable persona injuries by 10%.• Increase weekly job-site inspections from 40 to 50.• Maintain weekly vehicle inspections of 30 – 35.• Continue to work as the Chairman of the KY / TN AWWA Safety / Security.• Remain on National AWWA Safety Committee as long as needed.• Continue to maintain present professional / training safety credentials.• Continue to monitor “best practices” methods inside and outside government to enhance the MWS Safety Program.• Continue to work more closely with the MWS Security Section.
General Services Department
<p>To provide a safe and healthy environment for the General Services employees and visitors by developing and implementing safety policies, procedures and programs that meet or exceed TOSHA standards. This will include:</p> <ul style="list-style-type: none">• Comprehensive safety policies, procedures and programs to provide employees with direction to ensure their safety and to provide supervisors with a guide to evaluating performance of their employees in the area of safety.• Implement a safety training program that addresses training, injury trend-specific training, employee / supervisor requested training, etc.• Develop a safety inspection program to identify potential worksite hazards. This includes the assistance of supervisors.• Develop an accident investigation program to determine cause-effect and process for developing corrective action plan.• Develop and implement a return-to-work program, which includes the identification of light-duty assignments.

While most departments did not have department specific safety goals and objectives, the scope and depth varied for those departments that did. Metro should ensure that there are clear, measurable goals and objectives for the occupational safety and health programs, including all operating departments to provide metrics to evaluate actual performance.

Measurable goals and objectives should provide a clear linkage between the departmental performance and the Metro mission, goals and objectives. This should serve to link departmental safety performance to Metro’s overall safety goals.

As a first step, the central Occupational Safety and Health program should develop comprehensive goals, objectives and performance measures for its program. This should be based upon the Results Matter budgeting process. The table, below, presents samples of goals, objectives and measures for the Occupational Health and Safety Services program.

Goals
<ul style="list-style-type: none"> • To ensure that Metro departments and agencies to maintain a safe, healthy and productive workforce. • To manage threats and opportunities to meet performance objectives and provide improved services cost effectively.
Objectives
<ul style="list-style-type: none"> • To reduce the number of employee absences due to work related injury or illness. • To identify and reduce preventable injuries and illnesses. • To increase productivity and reduce costs to Metro. • To ensure compliance with all TOSHA laws and regulations • To provide a positive and easy transition for injured or ill employees to return to work.
Measures
<ul style="list-style-type: none"> • Number of work related injuries or illnesses • Number of injuries by type of injury • Number of employees trained in injury prevention by type of training and targeted injury prevention • Number of worksite inspections • Number of worksite violations found • Number of worksite hazards corrections completed • Number of follow-up worksite inspections and number of uncorrected or new hazards found • Total cost incurred for injured-on-duty claims • Severity of injured-on-duty claims (e.g., lost days, light-duty, incident only) • Percentage of employees receiving 100% of required annual training • Number of vehicle collision • Ratio of preventable to non-preventable collisions by Metro drivers • Etc.

As the above table illustrates, there are numerous goals and objectives that can be measured to ensure that Metro: (a) achieves its overall goals and objectives; (b)

improves performance and productivity; (c) reduces costs; (d) holds departments and programs accountable for performance; and (e) links budget to program outcomes.

As a second step, the central Occupational Safety and Health Program should work with the safety coordinators in the operating departments to enhance the substance of their goals, objectives, and performance measures for occupational safety and health that reflect the unique circumstances of these departments.

7.2 Recommendation: The central Occupational Safety and Health Program should develop additional goals, objectives, and performance measures.

The central Occupational safety and Health Program should work with operating departments to enhance the substance of their goals, objectives, and performance measures for occupational safety and health.

3. BEST PRACTICES SHOULD BE ADOPTED BY THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM TO PROVIDE A GUIDE TO OPERATING DEPARTMENTS.

Best practices are simply the best way to perform a business process. They are the means by which leading local governments have achieved top performance, and they can serve as goals for departments striving for excellence in occupational safety and health.

Best practices are not the definitive answer to an occupational safety and health problem. Instead, they are a source for improvement. Adapting best practices to specific occupational safety and health needs can dramatically affect performance -- leading to breakthroughs that reduce job related employee illnesses and injuries, save time, improve quality, lower costs, and increase occupational safety and health for Metro.

As an example, best practices suggest that employee involvement could include the following:

- A definition what employee involvement means and communicated that decision to the employees.
- Employee involvement in the safety program, i.e., do employees participate in safety committees or other advisory groups (developing job hazard analysis, developing safety rules, training other employees, conducting site inspections or investigating accidents).
- Management and employees evenly divided on committees.
- Committees/advisory groups meet on a regular basis and the results are documented.
- Committees/advisory groups have written objectives and responsibilities.
- Employees should receive special training in the activities if they are involved.
- Employees feel that management is interested and involved in safety and health.

OSHA has developed best practices for its Voluntary Protection Program (VPP) that could serve as a model for these best practices. These best practices should be included the Metro Safety manual developed by the central Occupational safety and Health Program, and should also be published to the central Occupational safety and Health Program web site.

7.3 Recommendation: The central Occupational Safety and Health Program should adopt best practices for occupational safety and health.

The occupational safety and health best practices should be included in the Metro Safety Manual and published to the central Occupational safety and Health Program web site.

4. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A METRO-WIDE SAFETY MANUAL.

As mentioned previously, the Human Resources Department has already developed a safety manual entitled *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee*. This manual

outlines responsibilities for the Human Resources Department's 'Safety Division,' as well as the role and responsibilities of the operating departments. Safety coordinators that were interviewed by the project team were unaware of this manual.

The central Occupational safety and Health Program should utilize this manual as a starting point. It should review this manual with departmental safety coordinators, the Safety Advisory Board, and the Risk Manager for their input and suggested modifications. After receiving this input and making modifications as necessary, Metro should formally adopt this safety manual and publish it to the web site of the central Occupational Safety and Health Program.

7.4 Recommendation: The manual developed by the Human Resources Department - *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee* should be reviewed with departmental safety coordinators, the Safety Advisory Board, and the Risk Manager and modified as necessary.

Upon review and modification of this manual, Metro should formally adopt this safety manual and publish it to the web site of the central Occupational Safety and Health Program.

5. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD CONDUCT AUDITS OF THE EFFECTIVENESS OF DEPARTMENTAL SAFETY PROGRAMS.

According to the safety manual entitled *Occupational Health and Safety Program for the Metropolitan Government of Nashville and Davidson County, Tennessee*, the operating departments are responsible for developing and implementing a department specific occupational safety and health program. Currently, the Human Resources Department does not conduct audits of the operating departments' programs to ensure that operating departments are in compliance with safety policies and procedures as

well as meeting requirements established by the Tennessee Department of Labor and Workforce Development, Occupational Health and Safety Administration (TOSHA).

As noted in previous sections of this report, there are several departments with full-time, dedicated safety coordinators that are responsible for occupational safety and health program for their departments. Metro departments that do not have a fulltime employee dedicated to the safety programs have assigned safety as collateral duties.

Although the full-time, dedicated safety coordinators were interviewed as part of this audit, the project team also sought input from departments without fulltime safety coordinators with respect to the scope and depth of their safety program. The project team developed and distributed a survey to all safety coordinators with whom interviews were not conducted. Seven departments returned the completed survey. Additionally, the project team interviewed the safety coordinators in two departments. The points, which follow, provide a brief discussion about the survey.

- A total of nine departments without fulltime safety coordinators provided input. Those departments are as follows:
 - Arts Commission
 - Code Department
 - Metro Action Commission
 - Election Commission
 - Historical Commission
 - Nashville Career Advancement Center (NCAC)
 - Social Services Department
 - Nashville Municipal Auditorium
 - Public Library
- The survey included questions regarding departmental safety programs, goals, objectives and performance measures, safety training, communications and record keeping, safety committees, incident rates, return-to-work / light duty programs, and performance reviews and evaluations.

- The survey was distributed to the departmental safety coordinators for completion. Responsibility for these departmental safety programs varied and included positions such as Human Resources Analysts, Security Coordinator, Office Manager, MIS Director, Director of Operations, Administrative Services Officer etc.

While only nine departments provided input, a review of the responses from the nine departments highlight some issues with respect to the adequacy of safety programs in departments without full-time, dedicated safety coordinators. The points, which follow, provide a brief discussion of the survey results.

- Respondents were asked to provide information regarding their safety program.
 - Of the nine departments, only three had a written safety program. This included the Metro Action Commission, the Public Library and the Social Services Department.
 - Similarly, only two of the responding departments have an employee safety manual. The Social Services Department updated its manual in February 2004 and the Public Library update its manual in January 2004.
 - The table, below, shows the number of responding departments that have formal written policies for certain safety topics.

Formal Written Policy for:	Percentage of Responding Departments with Policy
Contactors Compliance with Safety Policies	10%
Vehicle Safety	30%
Hazardous Communication / Right-to-Know	20%
Permitted Confined Space Entry	10%
Lock-out / Tag Out	10%
Exposure Control	20%
Sharps Injury Prevention	0%
Bloodborne Pathogens	20%
Worksite Hazard Analysis and Hazard Correction	30%
Substance Abuse	30%

- As the above table shows, between 70% and 100% of respondents did not have formal, written policies and procedures. Because the Human Resources Department does not conduct audits of the departmental safety programs, it is unknown the extent of policies and procedures departments lack, as well as the quality of policies and procedures.

- Two of the responding departments indicated that they conduct worksite inspections. The Public Library conducts quarterly inspections, while the Social Services' safety coordinator conducts annual worksite inspections.
- Respondents were also asked to provide information regarding the type of support they received from the Human Resources Department with respect to safety. For the most part, respondents indicated that the Human Resources Department answers questions and provides support over the phone.
- The Public Library was the only responding department that had developed safety related goals and objectives. A sample of the safety related objectives for the Public Library include:
 - Begin quarterly tracking and establish a baseline of liability claims made and paid in Fiscal Year 2004 – 2005.
 - Through diligence in employee safety program follow-up with injured-on-duty injuries, the Public Library will improve IOD days by 5% or no more than 125 days.
- None of the responding departments had a separate safety budget.
- Departments were asked to provide information relating to the safety training. The points, which follow, provide a brief discussion of the results relating to safety training.
 - Three departments provide safety training to new employees, while an additional two provide safety training to department employees at least once per year. Four departments indicated that they do not regularly provide safety related training.
 - In four of the departments the safety coordinators have partial or full responsibility for conducting safety related training. Responsibility was not designated in three of the departments.
 - Additionally, four of departments indicated that safety coordinators were responsible for maintaining safety, while it was the responsibility of the Training Coordinators / Human Resources staff in two of the departments. Two departments did not designate responsibility for the maintenance of training records.
 - None of the departments participated in joint training with other departments and agencies.
 - Only one of the nine departments responding surveyed employees in their departments to assess training needs and effectiveness of training.
- Respondents were asked to provide answers to a series of statements relating to communication and record-keeping.

- In response to the question, ‘who maintains the OSHA 300 Logs for the department, the following answers were given: Metro Human Resources, Human Resources Division of the Department, the Third Party Provider and the Safety Coordinator. Two departments did not know who was responsible.
 - With the exception of the Nashville Career Advancement Center, none of the departments reported directly to TOSHA their incident rates.
 - For the most part, respondents indicated that the reporting by the third party administrator was accurate.
 - Only one department, Social Services, has a monthly newsletter in which there is a section that addresses safety.
 - Three departments indicated that they had a formal procedure through which employees could express concerns regarding safety confidentially.
- Departments were asked to provide information about safety committees in their department.
 - Six of the nine departments did not have a safety committee in their department.
 - The Social Services Department has a safety committee that is responsible for establishing and updating policy, as well as identifying any potential safety issues and correcting them.
 - Two of the departments had safety committees that were responsible for reviewing injury-on-duty claim.
 - Only one of the surveyed departments had a written, formal policy for a return-to-work / light-duty program.
 - Departments provided information relating to performance reviews and evaluations of their department with respect to Occupational Health and Safety Services program.

Performance Reviews and Evaluations	Percentage of Departments with a ‘Yes’ Response
Do you conduct audits of the divisions within your department to ensure compliance with the safety program?	0%
Does the department have a procedure in place to identify supervisors whose subordinates have a high rate of lost time incidents?	22%
Does the Department have a policy and procedure in place to identify employees who fail to follow safety procedures?	22%

- As the above table shows, none of the surveyed departments conducted audits of their divisions compliance with the safety program. Additionally, only two of

the responding departments had a procedure in place to identify supervisors with a high lost time rate for their subordinates.

The central Occupational Safety and Health Program does not review the policies and procedures of the operating departments as they relate to safety. Also, the central Occupational Safety and Health Program does not conduct audits of programs to ensure departments are meeting requirements. The central Occupational safety and Health Program should enhance its role in ensuring that all Metro departments are in compliance with Metro's occupational safety and health policies, issuing recommendations for corrective action, and follow-up to monitor implementation. This would include conducting a:

- Review of policies and procedures to ensure they address safety needs of department;
- The adherence by these departments to best practices for occupational safety and health;
- Review of training records to ensure employees are receiving training required by TOSHA, as well as other job specific safety training as needed;
- Review of safety coordinator records to ensure incident / accident investigations are investigated and documented as needed, hazards corrections and action plans are developed and OSHA 300 logs are accurate and maintained; and
- Random audit of the employee safety program, including worksite analysis and inspections, review of safety equipment, proper posting of hazardous materials information, review of safety training materials and records, etc.

The central Occupational Safety and Health Program should ensure that standards for the employee safety program are met and followed in all operating departments and agencies.

7.5 Recommendation: The central Occupational Safety and Health Program should conduct audits of departmental occupational safety and health programs,

including reviews of policies and procedures as well as accident records, department safety performance and worksite inspections.

6. THE SAFETY ADVISORY BOARD SHOULD BE MORE EFFECTIVELY UTILIZED BY THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM.

Metropolitan Nashville and Davidson County's Charter includes the establishment and authorization of a Metro-wide Safety Board. Title 2 Administration, chapter 2.96 Metropolitan Safety Advisory Board outlines the creation, composition, meetings, and powers and duties of the Safety Board. The points, which follow, present a discussion of the Safety Board.

- 2.96.020: Composition – Vacancy filling, states:
 - ‘The safety advisory board shall consist of seven members who shall be appointed by the Metropolitan County Mayor for terms of two years, and who shall serve at the pleasure of the Metropolitan County Mayor. Three members of the board shall be appointed for terms of one year, and the remaining four members shall be appointed for terms of two years, with the Metropolitan County Mayor designating the length of the term of the members when they are appointed.
 - Any vacancy in the board, for any reason, shall be filled in the same manner as the original appointment, and the person filling the vacancy shall be appointed to fill out the remainder of the original term.’
- 2.96.030 Officers, states that ‘the safety advisory board shall elect from its own membership a chairman and vice chairman, who shall serve in such capacities for one year or until a successor shall have been chosen.’
- 2.96.040 Meetings, states that ‘the safety advisory board shall meet at least once each three months at such time and place as established by the board, and may call more frequent meetings as necessary.’
- 2.96.050 Powers and Duties, states that ‘the advisory board shall have the following powers and duties:
 - Formulate and project the goals and objectives of the Metropolitan employee safety program;

- Review the progress of the Metropolitan employee safety program and recommend changes in such program as they see desirable;
- Require information from departments and agencies of the Metropolitan government as such information relates to the safety program of the Metropolitan government; and
- Forward all of its findings and recommendations to the executive secretary of the Metropolitan employee benefit board.

Metro's Charter has created the structure for the Safety Advisory Board.

The central Occupational Safety and Health Program should utilize this Board to improve the effectiveness of the Occupational Health and Safety Services program. The Safety Advisory Board's function should review the overall occupational health and safety program of Metro and provide direction and advice with respect to goals, objectives and expectations. This could, for example, include review of the audits of departmental occupational safety and health programs, review of trend analysis conducted by the central Occupational Safety and Health Program, adoption of policies and procedures, etc. The central Occupational Safety and Health Program should provide the staff support for the Safety Advisory Board.

7.6 Recommendation: The central Occupational Safety and Health Program should utilize the Safety Advisory Board to provide direction to the Metro-wide Occupational Health and Safety Services program.

7. THE ROLE OF THE SAFETY COORDINATOR COMMITTEE SHOULD BE CLARIFIED

The central Occupational Safety and Health Program recently established a safety coordinator committee. Attendance is not mandatory. A clear purpose and role of the safety committee has not been defined or established.

A safety coordinator committee is a useful tool in establishing a permanent forum for communication between safety coordinators regarding occupational

safety and health issues. The role of the safety coordinator committee should be clearly defined and attendance should be mandatory. A possible role for the safety coordinator committee is presented below.

- The structure of the safety coordinator committee should be defined. This would include committee members as well as organization (e.g., chair, co-chair, secretary, etc.)
- The function and role of the safety coordinator committee should be defined as follows:
 - Develop a general health and safety policies for the workplace;
 - Evaluate aggregate accident and illness statistics for the workplace to identify problem areas and make recommendations for corrective action;
 - Consider results of all worksite inspections carried out at the workplace and make recommendations for corrective action;
 - Evaluate the causes for high accident risks or repetitive injuries and make recommendations for their elimination or reduction of hazards;
 - Evaluate the effectiveness of return-to-work programs in the various operating departments and make recommendations to enhance the effectiveness of these programs;
 - Monitor and review compliance with requirements imposed on the employer under TOSHA;
 - Identify opportunities to share resource; and
 - Consider of all matters raised by any member of the Committee.
- Operating procedures should be outlined for the safety coordinator committee. This should include:
 - Frequency of meeting (e.g., monthly, quarterly, etc.);
 - Appointments for chair, co-chair, secretary, etc. and related responsibilities (e.g., take notes, draw up agenda, etc.);
 - Rotation of appointments; and
 - Procedure for communicating decisions and implementation to departments.

The central Occupational Safety and Health program should utilize the safety coordinator committee more effectively by ensuring that departments recognize its value of the committee.

7.7 Recommendation: The central Occupational Safety and Health Program should clarify the purpose and role of the safety coordinator committee.

8. SAFETY COMMITTEES SHOULD BE ESTABLISHED IN EACH LARGE DEPARTMENT IN METRO, AND CROSS DEPARTMENT COMMITTEES FOR SMALL DEPARTMENTS.

Occupational Safety and Health Committees serve as sounding boards for multiple viewpoints and interests of employees on matters relating to the department's occupational safety and health program. Their purpose should be to assist departmental management in identifying, defining, and assessing occupational safety and health problem areas, and by recommending corrective measures. Actions can then be initiated to first, improve the effectiveness of the department's occupational safety and health program, and second, to meet specific needs of the units within the department.

Occupational safety and health committees have three basic functions:

- Create and maintain an active interest in occupational safety and health;
- Serve as a means of communications regarding occupational safety and health; and
- Provide assistance to managers and supervisors in enhancing the effectiveness of departmental occupational safety and health programs, including proposing policy and program objectives.

A number of departments have not established safety committees. These include such departments as the following including:

- Fire Department;
- General Services;
- Metro Action Commission;
- Parks and Recreation;
- Public Works;

- Davidson County Sheriff's Office; and
- Metro Nashville Public Schools.

Departments should be required to establish occupational safety and health committees to foster employee involvement in the development of a safe work place. The central Occupational Safety and Health Program should audit the effectiveness of these committees, and recommend improvements as necessary.

7.8 Recommendation: Departments should be required within the Metro safety manual to establish occupational safety and health committees that include line employees, supervisors, and managers.

The central Occupational Safety and Health Program should audit the effectiveness of these committees, and recommend improvements to department directors as necessary

9. SEPARATE OCCUPATIONAL SAFETY AND HEALTH BUDGETS SHOULD BE ESTABLISHED IN EACH DEPARTMENT.

While some departments have identified occupational safety and health or risk management as a cost center within their budget, most do not have a separate safety budget for safety coordinators to purchase safety equipment, training materials and to attend safety training, etc. This places these safety coordinators in a difficult position of having expenditure authority to address work place hazards and safety requirements.

Separate cost centers should be established within departmental budgets for occupational safety and health. In both cases, the safety coordinators should be provided with expenditure authority to purchase safety equipment, training materials and to attend safety training, etc.

7.9 Recommendation: Separate occupational safety and health cost centers should be established in each department.

Safety coordinators should be provided with expenditure authority to purchase safety equipment, training materials and to attend safety training, etc.

10. RESPONSIBILITY FOR OCCUPATIONAL SAFETY AND HEALTH SHOULD BE INTEGRATED INTO SUPERVISORY AND MANAGERIAL PERFORMANCE APPRAISAL SYSTEMS.

There should be a system and written procedures in place to include occupational safety and health as an integral part of the annual performance evaluations of supervisors and managers. The annual evaluation must be a critical review and assessment of the effectiveness of all elements of safety and health management

- The performance evaluation for supervisors and managers must identify the strengths and weaknesses of the safety and health management system in place in their unit and should contain specific recommendations, time lines, and assignment of responsibility for making improvements. It must also document actions taken to satisfy the recommendations.
- The performance evaluation should be based upon specific criteria that are measurable and actionable by these supervisors and managers.
- These criteria should consider the best practices developed by the central Occupational Safety and Health Program.

The central Occupational safety and Health Program should develop specific criteria for inclusion within the performance appraisal system used for managers and supervisors. As part of the audit of the effectiveness of departmental occupational safety and health programs, the central Occupational Safety and Health Program should sample these performance evaluations to assure the effective and meaningful use of these criteria in these performance evaluations.

7.10 Recommendation: The central Occupational Safety and Health Program should develop specific criteria for inclusion within the performance appraisal system used for managers and supervisors for consideration by the Human Resources Department.

As part of the audit of the effectiveness of departmental occupational safety and health programs, the central Occupational Safety and Health Program should sample these performance evaluations to assure the effective and meaningful use of these criteria in these performance evaluations.

11. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD PERIODICALLY PUBLISH A METRO-WIDE SAFETY NEWSLETTER.

The central Occupational Safety and Health Program should increase the visibility of Metro's commitment to safety, as well as communicate with employees the importance of taking workplace health and safety seriously through periodic publication of safety newsletter for employees. A Metro-wide safety newsletter can accomplish a number of goals, including:

- Communicate Metro's commitment to employee health and safety;
- Keep employees informed of:
 - Changes in the safety program;
 - Training sessions;
 - Tips on accident / incident prevention;
 - Rules and regulations regarding safety and employee rights;
 - Methods to report worksite hazardous and unsafe conditions;
- Provide a means for recognizing employees committed to safety and departments with good safety records;
- Present Metro's incident / accident trends;
- Communicate Metro's goals and objectives for the Occupational Health and Safety Program and its accomplishments;
- Present employees information and tips for maintaining a healthy and safe work environment;
- Provide wellness information;
- Identify resources for employees; and

- Encourage employees to be active participants in Metro’s employee safety program.

Because the current Occupational Health and Safety Program is a hybrid system and departmental programs vary significantly, there is not a clear Metro-wide policy communicated to employees regarding workplace health and safety. The central Occupational Safety and Health Program should utilize a Metro-wide safety newsletter to communicate to employees the importance and priority of workplace health and safety.

7.11 Recommendation: The central Occupational Safety and Health Program should periodically publish a Metro-wide safety newsletter.

The newsletter should also be published to the web site of the central Occupational Safety and Health Program.

12. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD PROVIDE TECHNICAL ASSISTANCE TO DEPARTMENTS WITHOUT FULL-TIME SAFETY COORDINATORS.

Resources for safety vary significantly among departments. The table, below, shows the departments with dedicated full-time safety personnel. It should be noted that while the General Services Department has one full-time employee dedicated to safety, this employee also serves as the safety coordinator for the following departments: Finance, Information Technology, and the Mayor’s Office.

Department	Number of Full-Time Equivalents	Number of Staff Dedicated to Safety Program
General Services	190	
• Finance Department	143	
• Information Technology	113	
• Mayor’s Office	46	
Sub—Total	569.5	
Fire Department	1,178	3.7
Public Health Department	521.9	1
Metro Nashville Public Schools	8,284	2

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Department	Number of Full-Time Equivalents	Number of Staff Dedicated to Safety Program
Parks and Recreation	409.4	1
Police	1,865.90	1
Public Works	481.1	2.2
Sheriff	810.5	1
Water Services	745.5	3
Total	14,866	15.9

There are also smaller departments that have assigned occupational safety and health as a collateral duty to employees. These employees do not have sufficient time or the expertise to develop an occupational safety and health program of the depth and breadth required to meet best practices.

The central Occupational Safety and Health Program should be charged with responsibility for providing technical assistance to these departments without full-time safety coordinators in the development of their occupational safety and health programs. This technical assistance would include a number of duties and include such assistance as the following:

- Development of goals, objectives, and performance measures ;
- Development of occupational safety and health policies;
- Establishment of occupational safety and health committees and assistance in conducting the initial meetings;
- Worksite analysis to identify hazards and the identification of methods to mitigate these hazards; and
- Accident and incident investigations and the identification of methods to mitigate the occurrence of similar accidents and incidents in the future.

7.12 Recommendation: The central Occupational Safety and Health Program should provide technical assistance to departments without full-time safety coordinators in the development of their occupational safety and health programs

13. THE OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD BE ALLOCATED ADDITIONAL STAFF RESOURCES.

The Occupational Safety and Health program operates as a hybrid system with staff in a central office (Human Resources) and in operating departments. Departments vary in their approaches to staffing. Some departments have full-time personnel serving as the safety coordinator, while other departments assign safety responsibilities as collateral duties. This staffing is presented in the table below.

Department	Number of Staff Dedicated to Safety Program
General Services	
• Finance Department	
• Information Technology	
• Mayor's Office	
Sub—Total – General Services	1
Fire Department	3.7
Public Health Department	1
Metro Nashville Public Schools	2
Parks and Recreation	1
Police	1
Public Works	2.2
Sheriff	1
Water Services	3
Total	15.9

(1) The Level of Staffing for Occupational Safety and Health in Metro Was Much Less Than The Agencies Included in the Comparative Survey.

Overall, the level of staffing in Metro for occupational safety and health was lower than the level of staffing for those other local governments included in the comparative survey. More specifically:

- The City of Austin, Texas has a centralized Corporate Safety Office, staffed with one Corporate Safety Officer, who is responsible for the general administration of the City safety program. There are 27 full-time safety coordinators in 9 operating departments; the remaining 31 departments have staff assigned safety as a collateral duty. Overall, Austin has one full-time safety employee for every 430 employees on a city-wide basis.

- The East Bay Municipal Utilities District (EBMUD) in Oakland, California allocates ten (10) full-time staff to its centralized workers' health and safety division. This staff is assigned to serve as safety coordinators in outlying departments. This agency has one full-time safety employee for every 215 employees. This lower ratio in comparison to Metro and these other local governments is not unusual for a utility. In fact, this ratio is comparable to Water Services.
- The City of Raleigh, North Carolina allocates six (6) full-time employees dedicated to the employee safety program in the central safety office. The central safety office is responsible for the implementation of the safety program in all departments. The City has one full-time safety employee for every 517 city-wide employees.
- The City Scottsdale, AZ has three full-time employees dedicated to the employee safety program. These employees are assigned to a central safety office and are responsible for implementation of the safety program on a city-wide basis. The City has one full-time safety employee for every 800 city-wide employees.
- Louisville/Jefferson County, Kentucky recently consolidated as a metropolitan government. This metropolitan government is in the process of developing a strong central safety office. Currently the safety office is allocated three staff and is responsible for the implementation of the safety program in all departments. This is a ratio of one full-time safety employee for every 1,925 metro-wide employees.

Overall. These five public sector agencies have a total fifty (50) full-time safety employees, serve a total of 25,496 agency-wide employees, for a ratio of one full-time safety employee for every 510 employees. The ratio in these five agencies of full-time safety employees to agency-wide employees ranges from a low of 215 to a high of 1,925 with a median of 517. However, if one excludes the EBMUD since it is a utility and should be expected to have a lower ratio of employees, the median would approximate one full-time safety employee for every 660 agency-wide employees.

In comparison, Metro has a total of 18.5 safety employees for 17,134 full-time equivalent Metro-wide employees or a ratio of one full-time employee for every 926 Metro-wide employees. This excludes two employees in MNPS that reported to be

allocated to occupational safety and health, since the assignment of safety to these employees is actually a collateral duty. The level of staffing allocated to occupational safety and health is clearly less than these other agencies.

More importantly, however, Metro clearly needs to enhance the depth and breadth of its occupational safety and health program. That will not be possible with the existing level of staffing.

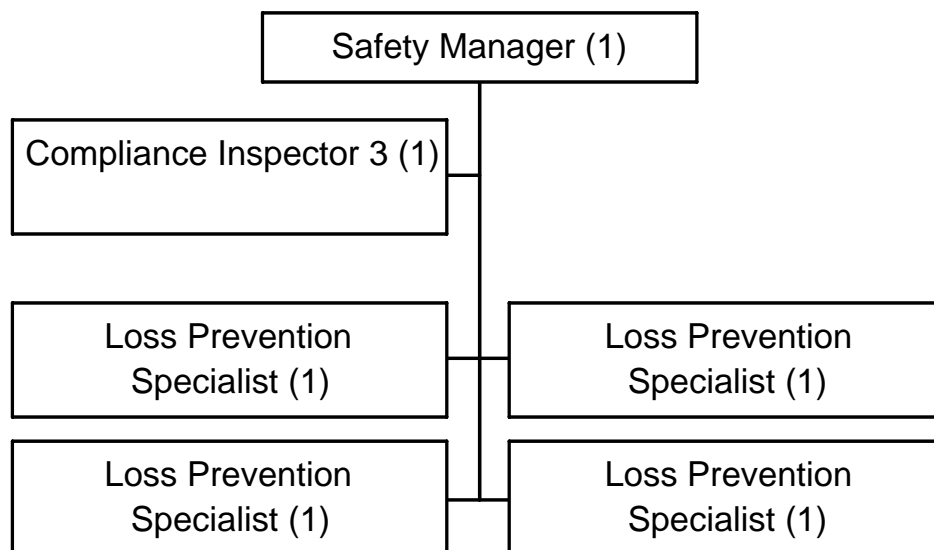
(2) The Level of Staffing in the Central Occupational Safety and Health Program Should Be Increased.

There are 2.6 fulltime equivalent positions assigned to the Occupational Health and Safety Services program in the Human Resources Division. The number of authorized staff allocated to this program is presented below:

- Human Resources Analyst 3: Responsible for the administering of the Occupational Health and Safety program as filed with the State of Tennessee. This position reports to a Human Resources Manager.
- Loss Prevention Specialist: This position is vacant.
- Compliance Inspector 3: This position provides support to the Human Resources Analyst 3 as needed. This position is a 0.6 fulltime equivalent.

These 2.6 staff are responsible for implementing an occupational health and safety plan for 17,134 employees and ensuring compliance with TOSHA regulations.

The full-time staff authorized the central Occupational Safety and Health Program should increase from 2.6 fulltime equivalents to 6 full-time equivalents. Presented below is the recommended table of organization.



The points, which follow, present the recommended organization and staffing for the central Occupational Safety and Health Program in the Risk Management Division.

- The central Occupational Safety and Health Program should be assigned to the Risk Management Division. The proposed Safety Manager should report directly to the Risk Manager.
- Currently, the Human Resources Departments allocates a Human Resources Analyst 3 to the central Occupational Safety and Health Program. It is recommended that new position of Safety Manager be created to administer central Occupational Safety and Health Program.
- The central Occupational Safety and Health Program should be allocated 4 full-time Loss Prevention Specialists. These positions should report to the Safety Manager and should be responsible for the following:
 - Reviewing departmental safety policies and procedures to ensure they conform to the Metro-wide safety goals and objectives;
 - Assisting departments without full-time safety coordinators in establishing occupational safety and health programs;
 - Identifying gaps or additional needs in safety department safety program, and making recommendations for improvements to department directors;
 - Conducting worksite inspections and hazards analysis;

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- Assisting departments with incident and accident investigations and review resulting hazard correction plans;
 - Reviewing injured-on-duty data, including trend and cost analysis, as well as claim file reviews; and
 - Assisting departments in the development of effective and consistent return-to-work programs, etc.
- The Compliance Inspector 3 position, currently budgeted in the Human Resources Department should be transferred to the central Occupational Safety and Health Program. The position is currently budgeted at 0.6 full-time equivalent in the occupational safety and health program in the Human Resources Department. The position should be increased to full-time for the central Occupational Safety and Health Program within the Risk management Division.

The table below presents the estimated salary costs for the increase from 2.6 full-time equivalent positions to 6 full-time equivalent positions.

7.13 Recommendation: The authorized staffing for the central Occupational Safety and Health Program should be increased from 2.6 full-time equivalent employees to 6 full-time equivalent employees. The proposed increase in 3.4 positions would increase salary and fringe benefit costs by approximately \$213,400 annually.

Position	Current				Proposed			
	# of Positions	Salary	Benefits	Total	# of Positions	Salary	Benefits	Total
Safety Manager	0	\$0	\$0	\$0	1	\$67,108	\$20,132	\$87,240
Human Resources Analyst 3	1	\$53,310	\$15,993	\$69,303	0	\$0	\$-	\$0
Loss Prevention Specialist	1	\$44,274	\$13,282	\$57,556	4	\$177,096	\$53,129	\$230,225
Compliance Inspector 3	0.6	\$26,564	\$7,969	\$34,533	1	\$44,274	\$13,282	\$57,556
Total	2.6	\$124,148	\$37,244	\$161,392	6	\$288,278	\$86,483	\$374,761

(3) The Metropolitan Nashville Public School Should Be Authorized A Safety Coordinator Within the Employee Relations Office and All Staff Assigned to Occupational Safety and Health Should Be Centralized in That Office.

The Metropolitan Nashville Public Schools (MNPS) has 8,238 full-time equivalents. MNPS allocates 2 full-time equivalent employees to the occupational safety and health program. The points below present a summary of the key elements of the MNPS employee safety program.

- The Employee Relations Office has one staff person assigned to managing the injured-on-duty claims. This Office also provides some minimal safety related training. This function is responsible for:
 - Receiving completed Form 101s.
 - Investigating claims and working with other Employee Relations staff to investigate claims and approve / deny claims.
 - Coordinate claims with the third party provider.
 - Assign case management to appropriate claims.
 - Maintain IOD records and reporting.

- The Facilities Management Department is responsible for the operation and maintenance of MNPS' facilities. Within this Department, there is a Coordinator of Safety and Environmental Health / Plant Maintenance, who is responsible for the following:
 - Identify and address environmental health problems in all Metro Nashville Public Schools facilities, including indoor air quality, pest control, hazardous communication and chemical hazards right-to-know program, etc.
 - Respond to staff complaints regarding safety and environmental health.

This employee allocates the largest proportion of her time to environmental health problems related to facilities.

- The MNPS occupational safety and health program functions independently of the Metro government. The MNPS filed a separate safety program and plan with the State of Tennessee Department of Labor and Workforce Development Tennessee Division of Occupational Health and Safety (TOSHA). It was previously recommended that the two separate programs be consolidated and that the centralized Occupational Safety and Health Program assume responsibility as the designated safety and health official for Metro including MNPS.

- The occupational safety and health in Metropolitan Nashville Public Schools is decentralized with staff organized in different departments. Staff are responsible for specific, limited elements of the employee safety program (e.g., processing injured-on-duty claims and environmental health); the MNPS does not have an employee safety program which focuses on the MNPS and its needs relating to occupational health and safety as a whole.

There are several opportunities for improvement with respect to the employee safety and health program for the Metropolitan Nashville Public Schools. The following points present a discussion of the improvement opportunities.

- The central Occupational Safety and Health Program in the Risk Management Division should be responsible for the Metropolitan Nashville Public Schools occupational safety and health. Responsibility should include:
 - Filing the Occupational Health and Safety Services program with TOSHA;
 - Submitting annual data as required by TOSHA to TOSHA annually;
 - Ensuring MNPS is in compliance with the Occupational Health and Safety Services program; and
 - Monitoring and auditing the MNPS safety program.
- Responsibility for the MNPS Occupational Health and Safety program should be assigned to the Employee Relations Office. The MNPS Occupational Health and Safety program should be organized as part of the Office of Employee Relations. This Office currently processes the injured-on-duty claims and provides some limited safety related training (e.g., bloodborne pathogens). This office should develop an enhanced occupational safety and health program for the MNPS. The proposed enhancements are presented below.
 - Occupational safety and health policies and procedures should be developed for MNPS.
 - Worksite inspections should be conducted, hazards identified and analyzed, and corrections recommended.
 - Effectiveness of the implementation of occupational safety and health program by managers and supervisors should be monitored and audited.
 - Safety related training should be provided and safety training records maintained.
 - An early return-to-work program should be developed and technical assistance provided to departments in its implementation.
- All staff allocated to occupational safety and health should be assigned to the Employee Relations Program. Staffing for this program would include:

- The Program Assistant assigned to the Office of Employee Relations would continue to be responsible for the processing of injured-on-duty claims and recordkeeping for the department. This is a full-time equivalent position. This position currently exists.
- Coordinator of Safety and Environmental Health and Plant Maintenance would continue to be responsible for addressing environmental health issues relating to MNPS facilities and worksites. This is a full-time equivalent position. This position currently exists.
- A Safety Coordinator should be authorized for MNPS. This position should be responsible for developing the MNPS safety program, auditing compliance, as well as conducting trend analysis of injuries and costs. The Safety Coordinator should also be responsible for conducting health and safety related training. The annual cost of salary and fringe benefits for the Safety Coordinator (excluding benefits) approximates \$69,600 at the median.

The Metropolitan Nashville Public Schools should centralize responsibility for occupational safety and health within the MNPS in the Employee Relations Office to create authority and accountability for a successful employee health and safety program. The Employee Relations Office in MNPS should work with the central Occupational safety and Health Program in the Risk Management Division to develop and implement a comprehensive safety program.

7.14 Recommendation: The MNPS should centralize staffing for its occupational safety and health program within the Employee Relations Office. This should include the current staff assigned to processing injured-on-duty claims, the Coordinator of Safety and Environmental Health / Plant Maintenance

Recommendation: A full-time Safety Coordinator should be authorized for the MNPS. The annual cost of this position in salary and fringe benefits would approximate \$84,700 at the control point.

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The next chapter presents an analysis of injury and claim management.

8. INJURY AND CLAIM MANAGEMENT

8. INJURY AND CLAIM MANAGEMENT

This chapter presents an analysis of injury and claim management in occupational safety and health. The chapter includes the analysis of the following issues:

- Metro has recently changed its OSHA process. Metro currently utilizes a Third Party Administrator. Because this is a relatively new program, there are still problems with the quality of data reported in the quarterly lost time injury reports.
- Metro does not comply with OSHA requirements regarding the reporting of OSHA recordable injuries. Metro only reports lost time injuries.
- The central Occupational Safety and Health Program within the Human Resources Department does not conduct trend analysis of injuries.
- The central Occupational Safety and Health Program within the Human Resources Department does not initiate corrective action to address trends in injuries.
- The Public Health Department does not have a return-to-work program. In fact, the Public Health Department counts light-duty days as Injured-On-Duty days (e.g., subtracts those days from the total annual allotment per body part). In other words, there is a disincentive for injured employees to return to work for modified or light duty assignment.
- Metro has not developed a Metro-wide return to work policy. Metro has not developed a Metro-wide policy regarding medical appointment tracking/intervention including claims and case management strategies.
- Light-duty and return-to-work programs in departments are all informal, meaning that each situation is handled on a case-by-case basis. The development and application of the return to work policies and procedures varies considerably among departments.
- The determination of what is or is not an injury on duty is made by departments. Policy guidance by the central Occupational Safety and Health Program within the Human Resources Department has not been developed.

The sections that follow present an analysis of these issues.

1. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD ENSURE DEPARTMENTS ARE ACCURATELY MAINTAINING AND REPORTING OSHA RECORDABLE INJURIES.

Currently, operating departments are responsible for maintaining all records and documentation as it relates to safety within their departments. This includes training records, incident and accident records, OSHA recordable cases, etc. The following points present a discussion based on interviews with departmental safety coordinators a review of data, as well as a review of the safety coordinator survey.

- According to the *Occupational Health and Safety Services Program* manual, departments are responsible for maintaining records, as well as reporting to the Human Resources Department OSHA recordable data.
- Interviews with departmental safety coordinators revealed that record keeping varied significantly. Depending on the department, safety training records were maintained by: supervisors, training coordinators, human resources personnel, safety coordinator or not at all.
- Metro does not accurately capture OSHA recordable data. The *Occupational Health and Safety Services Program* manual identifies departments as being responsible for reporting incident and accidents to the third party provider, as well as providing the Human Resources Department with incidents. The points below discuss data collection as it relates to OSHA reporting.
 - The *Occupational Health and Safety Services Program* manual does not present clear definitions and examples of OSHA recordable incidents, accidents and illnesses.
 - The Human Resources Department does not provide training for departmental employees with respect to OSHA recordable incidents, accidents and illnesses. This affects the consistency of data reported to the Human Resources Department by the operating departments, as well as to TOSHA.
 - The safety coordinator survey results indicated that some departments did not know they were responsible for maintaining OSHA recordable injuries and illnesses for their department.
 - The Human Resources Department maintains a record of lost time injuries and illnesses and not all OSHA recordable incidents.
 - It should be noted that Metro reports **lost time incidents rate** and not OSHA recordable incidents. Metro is under-reporting based on the standards established by Metro.

- In March 2004, Metro contracted with a third party administrator to administer its injured-on-duty claims. The third party administrator (TPA) generates some reports regarding claims for Metro, however, this is not OSHA recordable injuries and illnesses, rather it is all incidents reported to the TPA.

The sections, which follow, provide a discussion of the recommendations with respect to improving the quality and accuracy of the data and records maintained by Metro.

(1) The Central Occupational Safety and Health Program Should Develop A Policy and Procedure for OSHA Recordable Injuries.

Operating departments are not consistently or accurately capturing OSHA recordable cases, and similarly, are not consistently determining what is and is not an injury on duty. Standards for determining if a case is OSHA recordable or a legitimate injury on duty are established at the department level. The central Occupational Safety and Health Program has not provided departments with policies and procedures that define OSHA recordable cases and how to record, maintain records, and report these OSHA recordable cases. The central Occupational Safety and Health Program should provide operating departments with a formal written policy and procedure to ensure all departments are consistently and accurately reporting OSHA recordable cases. The Bureau of Labor Statistics, United States Department of Labor provides several definitions that would be useful to the operating department.

8.1.1 Recommendation: The central Occupational Safety and Health Program should develop a formal written policy and procedure that provides a clear explanation of occupational illnesses and injuries that are OSHA recordable cases.

(2) The Central Occupational Safety and Health Program Should Develop a Policy and Procedure Regarding Collection and Reporting of Required OSHA Data.

As noted, the *Occupational Health and Safety Program* manual does not provide a clear policy and procedure for departmental safety coordinators with respect to the maintenance of documents and records, as well as to require proper OSHA recording. Additionally, policies, procedures and practices in the departments vary with respect to record keeping and maintenance of records. The central Occupational Safety and Health Program should take the following steps to improve the quality and consistency of records and data kept at the department level:

- **Clearly define the record-keeping and maintenance required of the safety coordinators.** The *Occupational Health and Safety Services Program* manual should be expanded to include a policy and procedure outlining the responsibility of the safety coordinators. With respect to record-keeping, the safety coordinators in the operating department should be responsible for the following:
 - Maintaining all safety related training records for employees;
 - Ensuring that employee training records are up-to-date and accurate;
 - Monitoring safety training to ensure employees are in compliance with the Metro safety program; and
 - Maintaining records of all incident and accidents, including investigations and correction plans.
- **Conduct audits of occupational health and safety training records.** As part of an annual audit program, the Human Resources Department should conduct audits of departments to ensure safety programs are compliant with the Metro-wide safety plan. This annual audit should include an audit of training records. A sample should be taken to ensure records for employees are up-to-date and accurate.
- **Provide clear guidance and direction to departmental safety coordinators with respect to documenting OSHA recordable incidents and illnesses.** As noted, Metro is inaccurately (under) reporting its OSHA recordable incidents and illnesses. This includes:

- Defining what is and is not an OSHA recordable case (e.g., type of injury, lost time, light / restricted duty, etc.). See previous section;
- Providing operating departments with proper documentation to report incidents, accidents and illnesses; and
- Establishing reporting requirements for the operating departments in terms of submittals to the Human Resources Department; and
- Conducting audits of incident / accident reports to ensure departments are categorizing them correctly.

The central Occupational Safety and Health Program should expand the *Occupational Health and Safety Services* program manual to ensure that operating departments are provided sufficient information regarding their roles and responsibilities as it relates to record keeping and maintenance of documents.

8.1.2 Recommendation: The central Occupational Safety and Health Program should develop a formal written policy and procedure that defines the methods to be used by departments to collect and maintain records required by TOSHA.

2. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD PROVIDE TOSHA COMPLIANT WORK-RELATED INJURY AND ILLNESS INFORMATION INCLUDING THE METRO NASHVILLE PUBLIC SCHOOLS.

As previously noted, the central Occupational Safety and Health Program is responsible for reporting to TOSHA the incident and injury rates. The central Occupational Safety and Health Program has also developed a spreadsheet, which is provided to the Mayor's Office quarterly. The spreadsheet includes the following information by department:

- Number of lost time incidents (excluding restricted duty)
- Lost time incident rate (per 100 workers)
- Number of hours lost
- Lost wages
- Average cost per employee

The incident rate captured by the central Occupational Safety and Health Program reflects only lost time incidents and not OSHA-recordable incidents. In other words, Metro is under reporting the number of OSHA recordable incidents because it is only capturing incidents in which time was lost. The above information is compiled on a quarterly basis.

The central Occupational Safety and Health Program should provide the Mayor, the Safety Advisory Board and department heads with reports that will provide them with sufficient and accurate data to make decisions. These reports should capture the following information:

- Number of OSHA recordable cases;
- OSHA recordable cases incident rate per 100 employees;
- History of OSHA recordable incidents for Metro;
- Analysis of trends in incidents and injuries;
- Comparison to incident rates for local government provided by TOSHA;
- Lost time rate; and
- Costs incurred by Metro as a result of work-related injuries and illnesses.

The central Occupational Safety and Health Program should develop a quarterly report and provide it to the Mayor, Safety Board and department directors. This should include information for all departments and agencies, including the Metro Nashville Public Schools.

8.2 Recommendation: The central Occupational Safety and Health Program should expand the data developed for quarterly reports to include OSHA recordable cases in addition to lost time injury data.

The quarterly reports should include OSHA-recordable incidents for the Metropolitan Nashville Public Schools.

3. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE REGARDING DEPARTMENTAL EVALUATION OF INJURY ON DUTY CLAIMS

Interviews with departmental safety coordinators indicated that there was inconsistent knowledge and awareness regarding what was and was not an OSHA recordable injury and illness. Similarly, departments had different approaches to evaluating the validity of an injury on duty claim.

8.3 Recommendation: The central Occupational Safety and Health Program should develop a formal written policy and procedure that defines an OSHA recordable injury and illness and the process that departments are to utilize in evaluating the validity of injury on duty claims.

4. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD ASSURE THE ACCURACY OF THE QUARTERLY OSHA 300 REPORT.

During this performance audit, the project team was informed by two different departments that the Metro 300 report underreported the actual OSHA 300 lost time injury incidents.

While other steps need to be taken, as mentioned previously, to bring the OSHA 300 reporting of Metro illness and injury data into compliance with the reporting requirements of TOSHA, a more basic requirement is to make sure that the data reported in the quarterly report is accurate. The central Occupational Safety and Health Program should take a number of steps to correct these reporting errors. These steps include the following:

- Departments should be required to submit copies of OSHA 300: Log of Work-Related Injuries and Illnesses on a quarterly basis to the central Occupational

Safety and Health Program, in addition to the copies already submitted to ASC, the third party administrator;

- The central Occupational Safety and Health Program should audit the OSHA 300 reports prepared by ASC against these departmental reports to identify variances;
- Where variances exist, the central Occupational Safety and Health Program should work with ASC and the department to identify the source of the variance and correct any errors; and
- The central Occupational Safety and Health Program should audit the injury and illness records of departments, including the OSHA 300, the OSHA 300-A, and the OSHA 301 records, to assure these records are being maintained in compliance with TOSHA requirements; and
- The central Occupational Safety and Health Program should develop a policy and procedure regarding the reporting of OSHA recordable cases by departments.

8.4 Recommendation: The central Occupational Safety and Health Program should take a number of steps to minimize reporting errors in the quarterly lost time injury report.

5. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD WORK WITH METRO DEPARTMENTS TO REDUCE INJURY-ON-DUTY CLAIMS.

Metro does not comply with TOSHA regarding the reporting and recording of OSHA recordable injuries and illnesses. Equally as important, central Occupational Safety and Health Program is not utilizing data to identify trends in accidents and employee injuries to develop measures to mitigate these trends on a Metro-wide basis.

The incidence rate for cases with days away from work per 100 full-time employees of non-fatal occupational injuries and illnesses in 2002 for local governments in Tennessee was 2.0. (2002 was the last year for which this data was available).

In comparison, the incidence rate per 100 full-time employees for Metro, excluding the Metropolitan Nashville Public Schools, was 6.6. The amount of lost wages

amounted to \$1,709,194. The medical costs could not be defined given the system that Metro had in place. Data from calendar year 2004 indicates that the incidence rate for Metro is decreasing (although it should be recognized that there could be errors in this data). However, the incidence rate still exceeds that of local governments in Tennessee. If Metro was able to achieve the average for other local governments in Tennessee, it would be able to reduce the number of lost days by an equivalent of five staff years based upon the data from 2004. More importantly, it would be able to impact the medical costs associated with the injury on duty program. In the third quarter, medical costs associated with the injury on duty program were a little more than \$1.4 million. On an annual basis, these costs approximate \$5.2 million (based upon the data from the second and third quarter of calendar year 2004). There are significant opportunities to reduce the costs associated with injury on duty claims.

The central Occupational Safety and Health Program should work with Metro departments and agencies to reduce the lost time day, OSHA recordable injuries and illnesses and improve the overall safety performance of Metro. The Human Resources Department should take several steps to improve the employee health safety program, including:

- **Set clear goals and objectives for Metro-wide employee health and safety.** As discussed in previous chapters of this report, the central Occupational Safety and Health Program should develop goals and objectives for the Occupational Health and Safety Services program in Metro. This would include working with the Mayor's Office, Safety Board and other key management in Metro.
- **Establish measurable performance objectives for occupational safety and health.** Metro should establish clear and specific performance objectives for its employee health and safety program. Developing measurable performance objectives and monitoring them will assist Metro in making decisions regarding the Occupational Health and Safety Services program.

- **Communicate goals, objectives and performance expectations to employees.** An important part of a successful employee health and safety program is the employees. The central Occupational Safety and Health Program should communicate with employees Metro's commitment to a healthy and safe workplace, as well as the goals, objectives and achievements of the central Occupational Safety and Health Program.
- **Ensure departments have safety programs, which are aligned with the overall Metro safety program.** The central Occupational Safety and Health Program should review the employee health and safety programs in each of the operating departments to ensure that department goals and objectives are aligned with Metro's goals and that everyone is working towards the same end.
- **Audit department safety programs to ensure compliance with best practices.** The central Occupational Safety and Health Program should also monitor departmental safety programs to ensure that departments are achieving best practices for occupational safety and health.
- **The Central Occupational Safety and Health Program should develop a policy and procedure regarding accident/incident investigation and train first-line supervisors in these investigations.** Unfortunately accidents and employee injuries can happen. Accidents must be investigated and analyzed in a timely manner while the facts are still fresh and allows for accident reenactment. Prompt investigation also indicates management's concern. Metro should use accidents as learning tools by investigating them to determine the causes and then developing ways to avoid similar situations in the future. Once the first-line supervisor determines what caused the accident, the first line supervisor can take steps to keep it from happening again and minimize time loss. Because the immediate supervisor is usually first on the scene, the supervisor should be trained in accident investigation.
- **The Central Occupational Safety and Health Program should conduct trend analysis regarding accidents and employee injuries and develop programs and measures to mitigate these trends.** A good record keeping system can help management by providing them with the means to objectively evaluate the magnitude of accident problems. Tracking injuries and illnesses over periods of time can be useful information in devising measures to mitigate trends in accidents and employee injuries.

The central Occupational Safety and Health Program should work with departments, using those measures recommended above, to reduce the lost time injury rate.

8.5 Recommendation: The central Occupational Safety and Health Program should work with departments to reduce injured-on-duty claims.

Central Occupational Safety and Health Program should develop a policy and procedure regarding accident/incident investigation and train first-line supervisors in these investigations.

The Central Occupational Safety and Health Program should conduct trend analysis regarding accidents and employee injuries and develop programs and measures to mitigate these trends

6. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A COMPREHENSIVE METRO-WIDE RETURN-TO-WORK PROGRAM.

Many organizations after implementing RTW programs have experienced significant reductions – 25% to 50% -- in indemnity/time loss payments and lost days due to workplace injuries. This level of cost reduction, if sustained over 3 to 5 years, will drastically alter the organization's workers' compensation/reinsurance costs and the development factor associated with long-term case exposures.

Metro has a basic RTW program that is largely dependent on departments. The *Occupational Health and Safety Services* program manual does not provide a formal, written policy and procedure for a light-duty and early return-to-work (RTW) program for Metro. Currently, the scope and depth of light-duty and early return-to-work programs vary significantly among the operating departments. For the most part, departments interviewed indicated that they did not have a formal policy. In other words, departments handled early return-to-work or light-duty assignments on a case-by-case basis. Usually, placement in a light duty assignment is left to the discretion of the employee's supervisor.

However, Metro is moving in the direction of an intermediate RTW program with its contract with ASC and the claims management and medical treatment process.

As a next step in this evolving RTW program, central Occupational Safety and Health Program should take a number of steps to further enhance the effectiveness of the program. These steps are presented below.

- **Develop a RTW policy and procedure for Metro.** This policy and procedure should contain such elements as a policy statement, definitions, the roles of the injured employee, the supervisor of the injured employee, the departmental RTW coordinator, and the central Occupational Safety and Health Program, how RTW assignments are determined, procedures for communicating with the treating physician, case manager, and ASC and how to provide them all the necessary information to assist in returning the employee back to work, how to maintain a continuous communication between the injured or ill employee and the department to preserve a good working relationship and avoid any possible rift, and how to develop transitional employment duties, which address the employees' abilities and treats returning to work as part of the healing process etc.
- **Provide training in the RTW program to managers and supervisors regarding how to proactively respond to injuries and illnesses.** Early RTW is more successful when all parties realize its value. Management, supervisors and employees will benefit from training that shows how this program works. The training should cover such aspects as the RTW policy and procedure, how to develop transitional employment duties, how to coordinate the case with ASC, the physician, and the case manager, adapting to employee work restrictions, etc.
- **The role of the safety coordinator in each department should be expanded as the RTW coordinator for the department.** The role of the safety coordinator as the RTW program coordinator in each department could include:
 - Assists workers to remain at work wherever practicable or return workers to suitable employment as soon as possible following injury or illness;
 - Liaises with parties involved in the rehabilitation and treatment of injured workers;
 - May refer an injured worker where appropriate to an approved occupational rehabilitation provider for assistance with returning to suitable work or remaining at work;
 - Monitors the progress of individual rehabilitation plans, maintain communication and provide relevant information for injured workers,

- managers, physicians and other health professionals and occupational rehabilitation providers;
 - Works with the supervisors of injured employees to develop return to work strategy and plans;
 - Develops strategies to reduce the risk of further injury in the workplace by identifying and as far as practicable reducing the risk of subsequent injury of that kind in conjunction with the relevant manager and supervisor.
- **The Central Occupational Safety and Health program should work with departments to develop pre-identified modified duty options.** It is helpful to have a number of pre-identified alternate work tasks available for injured employees. The central Occupational Safety and Health Program should work with the departmental return-to-work coordinators to develop a set of 6 to 8 return-to-work task options for each division or identify organization-wide tasks or projects that can be accomplished by injured workers. This would require that tasks be identified, classified by importance, and the required skills, physical demands, availability and duration be identified.

8.6 Recommendation: The central Occupational Safety and Health Program should develop a Metro-wide comprehensive return-to-work program.

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The next chapter presents an analysis of systems, policies and procedures regarding identification workplace hazards and their prevention and control once these hazards have been identified.

9. WORKPLACE HAZARD IDENTIFICATION AND CONTROL

9. WORKPLACE HAZARD IDENTIFICATION AND CONTROL

The Matrix Consulting Group reviewed the current practice in Metropolitan Nashville and Davidson County with respect to workplace hazard identification, prevention, and control. There are a number of opportunities for improvement in workplace hazard identification, prevention and control. These opportunities are presented below.

- The Safety Program has not developed a policy requiring departments to conduct self-inspections. This is at the discretion of the individual departments and actual practice varies significantly.
- A methodology for employees to anonymously report safety and health risks within Metro has not been developed.
- Systems have not been put in place to ensure that contractors performing work on behalf of Metro provide a safe work place for their employees.
- There are a number of departments that do not conduct routine, ongoing inspections of their job sites and/or facilities to identify and mitigate work place hazards. These include such departments as the following:
 - Codes Administration;
 - General Services;
 - General Hospital;
 - Bordeaux Hospital;
 - Police Department;
 - Fire Department;
 - Metro Action Commission; and
 - Metro Nashville Public Schools.
- A number of departments have not developed formal written policies regarding confined space entry including the following:
 - General Services;
 - Codes Administration;
 - Public Health;
 - Bordeaux Hospital;

- General Hospital;
- Sheriff's Office;
- Metro Action Commission; and
- Metro Nashville Public Schools.

The exposure in some of these departments, such as the Metro Action Commission, to risk associated with confined space entry may be low.

- A number of departments have not developed hazardous chemical communication right-to-know programs in accordance with TOSHA and do not provide training to their employees.
- A number of departments have not developed formal written policies and procedures regarding personal protective equipment including:
 - General Services;
 - General Hospital;
 - Public Works;
 - Metro Action Commission; and
 - Metro Nashville Public Schools.

The exposure in the Metro Action Commission to risk associated with personal protective equipment would appear to be low.

- Metro has not developed an ergonomics standard. Ergonomics is a focus for OSHA. More importantly, musculo-skeletal, repetitive motion, and cumulative trauma typically account for the bulk of injuries on duty.
- The extent of training in emergency evacuation and disaster planning appears to be inconsistent from department to department.

The sections that follow present an analysis of these issues.

1. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE REQUIRING FORMAL ONGOING SELF-INSPECTION OF THE WORKPLACE BY DEPARTMENTS.

Workplace inspections are necessary to ensure a safe and healthful work place for all Metro employees. The inspection program is designed to identify deficiencies that must be corrected to achieve the objectives of Metro and to meet the criteria established by TOSHA. Of the 25 most cited public sector standard violations by

TOSHA in 2003, 16 should have been detected with an effective self-inspection program. These 16 include such violations as no visual monthly inspection of fire extinguishers, no covers on junction boxes, pull boxes, and fittings, no permanent or continuous electrical path to ground, no MSDS for hazardous chemicals, etc.

The central Occupational Safety and Health Program has not developed clear policies and procedures with respect to the identification of hazards at Metro worksites through self-inspection by departments. As a consequence, the breadth and depth of the programs to identify workplace hazards varied depending on the department. For example, the Parks and Recreation Department utilized a monthly form, which facility managers were required to complete. This form is submitted to the Professional Specialist in charge of safety in the Parks and Recreation Department. The form captured a variety of information, including:

- General Information, such as:
 - Location
 - Date of inspection
 - Facility manager
 - Email and telephone address
 - Inspection completed by and title
- Specific information about discovered hazards, including:
 - Item / hazard
 - Location
 - Description of unsafe condition
 - To whom the item was referred to for action (e.g., Safety Coordinator, Maintenance, Facility Manager, Division Assistant Director, and Other)
- A checklist of required monthly inspections, including:
 - First Aid Kits
 - Flashlights and Lanterns
 - Weather Alert Radio

- Fire Extinguisher
- Instructions for referring unsafe conditions found during the building / area inspections, including instructions to:
 - Fix situations that are easily fixable
 - Identify those issues that are part of regular building maintenance and resolve the issue by submitting a Service Request
 - Instructions on what type of safety issues could be addressed by the custodial staff
 - Items that should be reported to the Safety Coordinator or Assistant Director

The Parks and Recreation Department has developed a workplace inspection policy and procedure that requires each facility to be inspected monthly for potential hazards. Also, as part of this process, the method for correction is identified. While the Parks and Recreation Department has formalized the process for inspection of the workplace, the scope and depth of workplace inspections for other departments varies. Other departments interviewed indicated that workplaces are not inspected and they did not have any formal policies or procedures in place to ensure worksite inspections were conducted. The Public Works Department, for example, conducts workplace inspections of its crews, however, it does not conduct workplace inspections of contractor worksites to ensure that they are in compliance with Metro's safety policies.

The central Occupational Safety and Health Program should develop a formal written policy and procedure regarding workplace inspections by departments. This should include the following:

- The objective workplace inspections (e.g., to ensure the Metro minimizes employees' exposure to risks by proactively conducting worksite inspections, identifying and correcting worksite hazards);
- The frequency of inspection (e.g., weekly, monthly, quarterly, yearly);

- The responsibility for inspection (e.g., site supervisor, safety coordinator, facilities manager, etc.);
- The items to be inspected (e.g., work sites vary depending on the type of service provided, each department should develop worksite inspections checklists to ensure unique aspects of worksites are reviewed).
- The required record-keeping for workplace inspections (e.g., required information and documentation, responsibility designated for maintenance of records); and
- The accountability and follow-up required to correct deficiencies (e.g., responsibility for developing and implementing the action plan, responsibility for follow-up designated).

The policy and procedure should clearly place responsibility for workplace safety is the responsibility of each supervisor. To ensure that employees are free from safety or health hazards, each supervisor should be required to inspect his/her workplace at least once each quarter; more frequently if the work performed involves risk (e.g., use of chemicals, radioactive materials, gases, etc.).

The central Occupational Safety and Health Program should develop a written policy with respect to workplace inspections. Development and implementation of a department specific program should be the responsibility of the department safety coordinator.

9.1 Recommendation: The central Occupational Safety and Health Program should develop a formal written policy and procedure that defines the roles, responsibilities, and procedures for workplace inspections by safety coordinators in departments.

2. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE FOR REPORTING OF WORKPLACE HAZARDS BY EMPLOYEES.

The central Occupational and Safety Program should develop systems and procedures to enable employees to report any unsafe working conditions or hazards.

This policy and procedure should contain the following elements:

- Employees are expected to report safety hazards and safety-related information to one of the following:
 - Their supervisor;
 - The departmental safety coordinator; and
 - The central Occupational Safety and Health Program.
- Safety hazards may be reported anonymously via the central Occupational Safety and Health Program web site or interoffice mail.
- There will be no reprisals or other discrimination for expressing any concern, comment, suggestion, or complaint about a safety-related matter.

9.2 Recommendation: The central Occupational and Safety Program should develop systems and procedures to enable employees to report any unsafe working conditions or hazards.

3. THE SAFETY RECORD OF CONSTRUCTION CONTRACTORS SHOULD BE CONSIDERED IN SELECTION FOR METRO CONSTRUCTION PROJECTS.

The role of local governments in construction management has evolved. It now includes the direction of the work of the construction contractor, the construction inspection and management of the work performed by the contractor, the design of the construction by Metro employees (or the supervision of the design by Metro employees).

The performance of these tasks by Metro results in the assumption of liability by Metro. In response, the Risk Management Division has recently begun to review the safety plans submitted by construction contractors.

The Matrix Consulting Group recommends that the safety record of construction contractors should be an essential part of the selection process for construction contracts for Metro, beyond the review of the safety plan. There are two areas that should be checked in the consideration of the safety record of a construction contractor.

- **The first step would be to check the experience modification rate (EMR) of the construction contractors.** The insurance industry has developed this experience rating system as an equitable means of determining premiums for workers compensation insurance. The rating system considers the average workers compensation losses for a given firm's type of work and amount of payroll and predicts the amount of expected losses to be paid by that employer over a designated period, usually three years. The rating is based upon a comparison of firm's doing similar work. The employer rated against the average expected performance in each work classification. The actual accidents experienced by this employer for the rating period are then compared to the expected accidents; the result is the experience rating. The contractor's experience modification rate is adjusted annually. Contractor's experience modification rates can range from 50% to 205%. This rating provides a good indicator of contractors with good versus poor accident experience. Many local governments now require an EMR of 1.0 or better to be qualified to bid.
- **The second step would be to check the occupational injuries annual survey form no. 200 for construction contractors.** This form is required to be utilized to record work-related injuries. The contractor must retain it for five years. This form can be utilized to obtain information regarding work related fatalities, injuries and illnesses, days away from work, etc.

Safety should be an important consideration in the selection of construction contractors for Metro construction contracts. This consideration should include the evaluation of the contractors' past safety performance, and present safety programs and practices as disclosed in the safety plan.

9.3 Recommendation: Construction contractors submitting construction bids to Metro should be required to disclose their experience modification rate in their bid documents.

4. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE FOR CONFINED SPACE ENTRY.

A confined space is an enclosed space, which because of its small size and confined nature, can readily create or aggravate an exposure to a hazardous condition. A confined space is large enough that an employee can enter and perform work; has limited or restricted openings for entry and exit; contains or has potential to contain a hazardous atmosphere, material with the potential to overwhelm the employee, has an internal configuration such that an employee entering this confined space could be trapped or asphyxiated by inwardly converging walls, or a floor which slopes downward and tapers to a smaller cross section or contains other recognized serious safety or health hazards; and is not intended for continuous employee occupancy. Examples of confined space include manholes, boilers, tanks, vats, sewer pipelines, vaults without existing general ventilation.

While some departments have developed confined space entry policy and procedures, others have not including the following:

- General Services;
- Codes Administration;
- Public Health;
- Bordeaux Hospital;
- General Hospital;
- Sheriff's Office;
- Metro Action Commission; and
- Metro Nashville Public Schools.

Some of these departments are not likely to have exposure to risks associated with confined space or confined spaces, but some of these departments clearly have exposure to these risks.

The central Occupational Safety and Health Program should develop a policy and procedure for Metro for confined space entry. Key elements of this policy should include the following:

- The minimum number of employees required for confined space entry.
- Ventilation required for confined space entry.
- Pre-entry procedures for confined space entry and pre-entry testing requirements.
- Special precautions in confined space entry.
- Emergency rescue procedures.
- Equipment and materials to be utilized in confined space entry.
- Employee training.

While some of the departments that have not developed a confined space entry policy have little if any exposure, such as the Metro Action Commission, others, such as the General Services Department, likely have significant exposure in some units of the department.

9.4 Recommendation: The central Occupational Safety and Health Program should develop a confined space entry policy and procedure for the Metro.

5. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE REGARDING THE HAZARD COMMUNICATION RIGHT TO KNOW PROGRAM.

Of the 25 most cited public sector standard violations by TOSHA in 2003, 2 are violations of the hazard communication program. These include no written hazard communication program, and inadequate training on hazardous chemicals. A number of departments have not developed hazardous chemical communication right-to-know programs in accordance with TOSHA and do not provide training to their employees in this program.

The central Occupational Safety and Health Program should develop a policy and procedure for the hazardous chemical right-to-know program for Metro. Key elements of this policy should include the following:

- The responsibility of departments to develop a chemical inventory list and obtain copies of Material Safety Data Sheets for each chemical on the list, and annually update the inventory.
- The MSDS shall be posted in a work area accessible to staff 24/7.
- The training to be provided to staff both at orientation and as an annual refresher.
- The labeling required for hazardous chemicals.

9.5 Recommendation: The central Occupational Safety and Health Program should develop a policy and procedure regarding the hazardous chemical right-to-know program for Metro.

6. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE FOR PERSONAL PROTECTIVE EQUIPMENT (PPE).

Of the 25 most cited public sector standard violations by TOSHA in 203, 1 was a personal protection equipment violation: no written certification of PPE hazard assessment.

Metro has a number of departments that have not developed a personal protective equipment policy and procedure, developed a written PPE hazard assessment.

The central Occupational Safety and Health program should develop a PPE policy and procedure. This policy and procedure should be developed by the central Occupational Safety and Health Program and include such elements as the following:

- First-line supervisors should inspect personal protective equipment annually for its adequacy including proper maintenance and sanitation;
- The completion of a written certification of workplace hazards and the types of PPE that will protect affected employees;
- The provision of training to employees in the use of PPE including initial and refresher training;
- Maintenance of employee training records regarding PPE; and
- Posting of entrances that require the use of PPE with a sign indicating the requirement for this equipment.

9.6 Recommendation: The central Occupational Safety and Health Program should develop a policy and procedure regarding the PPE program for Metro.

7. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP AN ERGONOMICS PROGRAM FOR METRO.

The lack of proper workplace and job design results in significant work-related health problems. Musculoskeletal disorders (MSDs) caused by ergonomic hazards are the biggest job safety problem workers face today, accounting for an estimated 1.8 million injuries every year. According to the Bureau of Labor Statistics (BLS), each year 600,000 workers suffer serious workplace injuries caused by repetitive motion and overexertion that require them to miss time from work. According to the National Academy of Sciences, these injuries cost the country \$45 - \$54 billion annually. For

1998 to 1999, BLS reported increases in the rate of lost workday injuries and illness involving musculoskeletal disorders in about half of the industry sectors, including building services, computer and data processing services and hospitals. The 2001 National Academy of Sciences and Institute of Medicine report on Musculoskeletal Disorders and the Workplace found strong scientific evidence showing that exposure to ergonomic hazards in the workplace causes musculoskeletal disorders.

As the employee questionnaire regarding occupational safety and health indicated, employees perceive a significant need for the development of an ergonomics program by Metro. The lead in the development of this program should be taken by the central Occupational Safety and Health Program. The development of this program should consider such elements as the following:

- The development of an ergonomics policy and procedure for Metro including roles and responsibilities, training requirements, record keeping requirements, the requirements of management to provide reasonable equipment that meets employee needs, etc.;
- Ergonomics guidelines for computer terminals, office furniture, back injury prevention, etc.;
- The provision of training to expand management, supervisor, and employee ability to evaluate and redress potential musculoskeletal problems;
- Gathering data to identify jobs or work conditions that are problematic, using sources such as injury and illness logs, medical records, and job analyses; and
- Identifying effective controls for jobs or work conditions that pose a risk of musculoskeletal injury and evaluating these controls once they have been instituted to see if they have reduced or eliminated the problem.

Both interviews with safety coordinators and the employee survey indicate that the development of an ergonomics program for Metro represents a significant opportunity for improvement.

9.7 Recommendation: The central Occupational Safety and Health program should develop an ergonomics program for Metro.

8. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD TAKE A NUMBER OF STEPS TO ASSURE THE ADEQUACY OF EMERGENCY EVACUATION PLANS AND TRAINING.

It was the understanding of the Matrix Consulting Group that the General Services Department was conducting a study of emergency evacuation plans for Metro buildings. This is a good step given the comments by a number of safety coordinators regarding the status of emergency evacuation plans and the extent of training and drills in emergency evacuation of Metro buildings.

The central Occupational Safety and Health Program should take a number of steps to assure the adequacy of emergency evacuation plans for Metro buildings.

9.8 Recommendation: The central Occupational Safety and Health Program should develop a policy for development of emergency evacuation plans for Metro buildings and the training of Metro employees.

The central Occupational Safety and Health Program should develop a template for emergency evacuation plans.

The central Occupational Safety and Health Program should provide technical assistance to departments in the development of these emergency evacuation plans.

The central Occupational Safety and Health Program should monitor the adequacy of training of Metro employees in emergency evacuation, the adequacy of alarm maintenance and availability, etc., and provide formal, written feedback to the department directors.

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The next chapter presents an analysis of training for occupational safety and health.

10. OCCUPATIONAL SAFETY AND HEALTH TRAINING

10. OCCUPATIONAL SAFETY AND HEALTH TRAINING

The safety and health training provided by Metropolitan Nashville and Davidson County as part of its Occupational Health and Safety Services programs was reviewed and compared to a series of best practices. The points, which follow, provide a discussion of the opportunities for improvement in the current safety and health training in Metro.

- Some departments do not provide ongoing training or provide very limited training. These include such departments as the following:
 - Codes Administration;
 - General Services;
 - Metro Action Commission; and
 - Metro Nashville Public Schools.
- While some departments provide ongoing occupational safety and health training, there are still opportunities for improvement. For example, while there is a Safety Coordinator position in the Public Health Department, personnel assigned to staff development coordinate training and it is the responsibility of the supervisor to ensure staff receives necessary training.
- None of the departments interviewed utilized formal mechanisms to assess employee comprehension of training and its effectiveness.
- Minimum standards have not been developed for the level of occupational safety and health training that will be provided to the various classes within Metro. For example, for trades classifications, the minimum level of training should include confined space, electrical safety, emergency evacuation, ergonomics, hazard chemical communication, ladder and scaffolding safety, lockout-tagout, personal protective equipment, etc.. Other training for trades personnel would be dependent upon their assignment such as blood borne pathogen, hearing conservation, respiratory protection, etc.
- Occupational safety and health training is optional, and not mandatory, for supervisors and managers.

The sections, which follow, provide a discussion of these opportunities for improvement.

1. THE TRAINING COURSE FOR MANAGERS AND SUPERVISORS, WHICH COVERS HEALTH AND SAFETY TOPICS, SHOULD BE MANDATORY.

The Human Resources Department provides safety and health training to managers and supervisors as part of the Metro Management Institute. This training includes a variety of topics, such as:

- Importance of accident prevention
- Role as a supervisor or manager
- Motivation of safe behavior
- Effective training techniques
- Accident investigation
- TOSHA requirements

Managers and supervisors are not required to participate in this training session. Metropolitan Nashville and Davidson County should require managers, supervisors, and safety coordinators to participate in formal safety and health related training sessions. Providing manager and supervisor safety and health training is important for several reasons. For example:

- Ensure managers and supervisors are aware of changes in TOSHA regulations and requirements;
- Reinforce Metro's commitment to occupational health and safety and ensure managers and supervisors share that commitment;
- Review safety and health related policies and procedures;
- Discuss safety performance, methods for meeting performance objectives and improving workplace health and safety; and
- Provide an overview of fiscal implications of occupational health and safety.

Providing safety and health related training to managers and supervisors reinforces the importance of occupational health and safety, as well as ensure that managers and supervisors are provided the tools and resources to make a commitment to health and safety in their departments.

10.1 Recommendation: The occupational safety and health training provided as part of the Metro Management Institute should be mandatory.

2. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD INCREASE THE EXTENT OF SUPPORT FOR OCCUPATIONAL SAFETY AND HEALTH TRAINING.

The central Occupational Safety and Health Program should provide department with greater support as it relates to safety and health training. This should include the following:

- **Review departmental safety training programs.** As part of its proposed auditing functions, the central Occupational Safety and Health Program should review departmental training programs to ensure that they:
 - Meet OSHA standards and regulations'
 - Meet the occupational health and safety program guidelines established by the central Occupational Safety and Health Program in its *Occupational Health and Safety Services* program manual; and
 - Cover all necessary topics that are relevant to the department, in addition to OSHA requirements.
- **Ensure proper documentation is maintained.** When auditing the operating departments, the central Occupational Safety and Health Program should review training records for individual employees to ensure that employees are receiving required training and safety coordinator is maintaining accurate and up-to-date records.
- **Assess training effectiveness.** The central Occupational Safety and Health Program should review departmental training programs to assess their effectiveness, such as through surveys.
- **Review injury and illness trend data.** The central Occupational Safety and Health Program should work with departmental training coordinators to ensure that they have reviewed injury and illness trends in their departments and have

developed training courses to address issues or areas in which training could reduce work-related injuries or illnesses.

- **Identify opportunities to conduct joint training sessions and share resources.** The central Occupational Safety and Health Program should also identify opportunities for joint training among the operating departments. OSHA and Metro's rules and regulations with respect to health and safety training overlap departments. There are opportunities among the operating departments to share resources (e.g., bloodborne pathogen, etc.) and training.

10.2 Recommendation: The central Occupational Safety and Health Program should increase the support it provides departments related to safety and health training.

3. THE CENTRAL OCCUPATIONAL SAFETY AND HEALTH PROGRAM SHOULD DEVELOP A POLICY AND PROCEDURE REGARDING OCCUPATIONAL SAFETY AND HEALTH TRAINING.

Some departments do not provide ongoing occupational safety and health training or provide limited training. This problem needs to be addressed in part through the development of a policy regarding occupational safety and health training. The policy should include the following elements:

- Department directors are responsible for ensuring their employees are properly trained to comply with federal, state and local occupational safety and health laws and regulations.
- Departments, in determining training requirements for their employees, should review the department's job functions and responsibilities to determine if occupational safety and health training may be required.
- The central Occupational Safety and Health Program should develop a matrix that identifies the training requirements for each job or work classification category. For example, the possible training requirements for trade employees such as plumbers, electricians, etc., and food service employees is presented below.

Training Requirements	Trades	Food Services
Asbestos	X	
Bloodborne Pathogen	X*	
Confined Space	X	
Electrical Safety	X	X
Emergency Evacuation	X	X
Ergonomics	X	X
Hazard Communication	X	X
Hazardous Waste	X	X
Hearing Conservation	X*	
Ladders and Scaffolding Safety	X	
Lead	X	
Lockout-Tagout	X	
Machine Guarding	X	X
Personal Protective Equipment	X	X
Power Tool Safety	X	
Respiratory Protection	X*	X*
Spill Protection, Control and Countermeasures	X	x
Vehicle Safety	X	
Welding, Brazing, and Cutting Safety	X*	

X* This training may not be required for all employees in this category, but rather for those with a function that may put them at risk for a specific exposure. Contact central Occupational safety and Health for assistance.

- Departments are responsible for maintaining training records for their employees. The policy and procedure should specify how these records should be maintained.
- Supervisors and managers in the departments are responsible for the annual review of their departments occupational safety and health training needs to ensure that changes in operations and functions are addressed.
- Supervisors are responsible for tracking the employee's training status versus the training requirements identified for the various job or classification categories and ensuring their employee is in compliance.

10.3 Recommendation: The central Occupational Safety and Health Program should develop a policy and procedure regarding occupational safety and health training for employees.