Objectives

1. Describe various types of occupational injuries & illnesses that must be recorded according to MIOSHA Part 11.
2. Evaluate incidents to determine if it meets the criteria for recording & reporting.

Scope

- These rules provide for recordkeeping & reporting by PUBLIC & PRIVATE employers covered under the act as necessary & appropriate:
  - for developing information regarding the causes & prevention of occupational injuries & illnesses,
  - for maintaining a program of collection, compilation, & analysis of occupational safety & health statistics
Who Must Keep MIOSHA Records?

- All employers with more than 10 employees at any given time during the previous calendar year.
- Employers notified in advance that they have been selected to participate in the mandatory Bureau of Labor Statistics (BLS) annual survey.
- Partially exempt employers:
  - Employers who had no more than 10 employees during the previous calendar year.
  - Employers who conduct business in designated North American Industrial Classification System (NAICS).

What Records Must Be Kept?

- Required Forms
  - MIOSHA Form 300
  - Log of work-related injuries & illnesses
  - MIOSHA Form 301
  - Injury & illness incident report
  - MIOSHA Form 300A
  - Summary of work-related injuries & illnesses

- Where to order forms:
  Management Information Systems Section
  (517) 322-1851
Recording Criteria

- All covered employers must record each fatality, injury or illness that:
  - Is work-related &
  - Is a new case &
  - Meets one or more of the criteria contained in rules 1110 through 1120

MIOSHA-Recording Criteria

1. Did the employee experience an injury or illness?
   - NO
   - YES

2. Is the injury or illness work-related?
   - NO
   - YES

3. Is the injury or illness a new case?
   - NO
   - YES

4. Does the injury or illness meet the general recording criteria or the additional criteria?
   - NO
   - YES

5. Update the previously recorded injury or illness entry if necessary.

6. Record the injury or illness.

7. Do not record the injury or illness.
General Recording Criteria

• An injury or illness is recordable if it results in one or more of the following:
  • Death
  • Days away from work
  • Restricted work activity
  • Transfer to another job
  • Medical treatment beyond first aid
  • Loss of consciousness
  • Significant injury or illness diagnosed by a physician or other Licensed Health Care Professional (LHCP)

Deaths

• Must Be Reported Within 8 Hours
  Regardless of Basic Recording Criteria

REPORT WITHIN 8 HOURS ALL
1-800-858-0397

Days Away From Work

• Begin Counting Day After Injury

• Calculated on Calendar Days

• 180 Day Cap
**Restricted Work Activity**

- An employee is unable to perform all routine job tasks or cannot work for a complete day.
- Stop counting the day the employee is permanently transferred to another job.

**Transfer to Another Job**

- An injured or ill employee is assigned to another job for all or part of the day.
- At least one day must be reported.
- Restriction must be recorded if a Licensed Health Care Provider (LHCP) opinion exists.
- Restriction must be recorded if required by the employer but not a LHCP.

**Medical Treatment**

- All treatment that is not defined as first aid. (Form #: Miosa-MISS-1, effective date: 01/01/02)
- The management & care of a patient/resident to combat a disease or disorder.
- Nonprescription medication at prescription strength.
**Loss of Consciousness**

- Must be recorded regardless of treatment or lack of treatment.
- If not treated, then record as “other recordable.”

**Significant Diagnosed Injury/Illness**

- Cancer
- Chronic irreversible disease
- Fractured or cracked bone
- Punctured ear drum

**Recording Cases**

- Enter each recordable case on the Form 300 within 7 calendar days & complete Form 301.
- An equivalent form which has the same information, is as readable, understandable, & uses the same instructions as the MIOSHA forms may be used as a replacement.
- Forms can be kept on a computer or at another location as long as they can be produced when they are needed.

1st Aid should not be recorded anywhere on the Log 300
Work-relatedness...

• If an event or exposure in the work environment either caused or contributed to the resulting condition.
• If an event or exposure in the work environment significantly aggravated a pre-existing injury or illness.
• Is presumed for injuries & illnesses resulting from exposures occurring in the work environment.

Injuries & illnesses that occur in the work environment are presumed to be work-related unless they fall under the exceptions.

Table of Work-Relatedness Exceptions Include

1. At the time of injury or illness, the employee was present in the work environment as a member of the general public.
2. The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment.
3. The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity.
4. The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption whether bought on the employer's premises or brought in.

Table of Work-Relatedness Exceptions Include

5. The injury or illness is solely the result of an employee doing personal tasks, unrelated to his or her employment at the establishment outside of the employee's assigned working hours.
6. The injury or illness is solely the result of personal grooming, self medication for a non-work-related condition, or is intentionally self-inflicted.
7. The injury or illness is caused by a motor vehicle accident & occurs on a company parking lot or company access road while the employee is commuting to or from work.
8. The illness is the common cold or flu.
9. The illness is a mental illness (not work-related).
**Significant Aggravation**

A pre-existing injury or illness is significantly aggravated when an event or exposure in the work environment results in any of the following (which would not have occurred but for the occupational event or exposure):

- Death
- Loss of consciousness
- Days away from work
- Days of restricted or job transfer
- Medical treatment

**Parking Lots & Access Roads**

- Considered part of the employer's premises.
- Injuries & illnesses occurring in the parking lots & access roads are considered work related. Employee does not have to be "clocked in."
- Vehicle accidents are not considered recordable.

**Travel Status**

- Work activities "in the interest of the employer"
- Home away from home
- Detour for personal reasons are not work related
Working @ Home

Cases will be considered work-related if the injury or illness occurs:

- while the employee is performing work for pay or compensation,
- & the injury or illness is directly related to the performance of work rather than the home environment.

New Case

You must consider an injury or illness to be a "new case" if any of the following apply:

- The employee has not previously experienced a recordable injury or illness of the same type that affects the same part of body;
  or
- The employee previously experienced a recordable injury or illness of the same type that affects the same part of body but had recovered completely & an event or exposure in the work environment caused the signs & symptoms to reappear.

Musculoskeletal Disorders (MSDs)

Injuries & disorders of the muscles, nerves, tendons, ligaments, joints, cartilage & spinal discs.
Musculoskeletal Disorders

• Applies the same recording criteria to musculoskeletal disorders (MSDs) as to all other injuries & illnesses.
• Employer retains flexibility to determine whether an event or exposure in the work environment caused or contributed to MSD.
• May record as injury or all other illness.

How many musculoskeletal disorder (MSD) cases involved health care patient/resident handling?

• In 2010, there were 40,030 occupational musculoskeletal disorder (MSD) cases in private industry where the source of injury or illness was a health care patient/resident or resident of a health care facility.
• This accounted for 14 percent of the 284,340 total cases of MSDs that resulted in at least one lost day from work in 2010.
• Almost all (97 percent) of the cases involving patient/resident handling occurred within the health care & social assistance industry, composing 58 percent of the 67,700 total MSD cases in that industry.

MSD Information

• For MSD cases involving patient/resident handling, almost all (99 percent) were the result of overexertion. Sprain, strain, or tear was the type of injury incurred in 83 percent of the MSD cases involving patient/resident handling.
**MSD Information**

- Nursing aides, orderlies & attendants incurred occupational injuries or illnesses in 49 percent of the MSD cases involving health care patient/residents.
- Registered nurses accounted for 17 percent & home health aides for another 6 percent.
- Other occupations with MSD cases involving health care patient/residents included licensed practical & licensed vocational nurses; emergency medical technicians & paramedics; personal & home care aids; health care support workers; radiologic technologists & technicians; & medical & health services managers.

**Last Modified Date:** April 25, 2013

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**National Emphasis Program for Nursing & Residential Care**

- Based on employee days away, restricted work activity & job transfer (DART) injury & illness rates.
- 2011 National DART rates (all industries) = 1.8

**Care Facilities 2011 DART rates:**

- NAICS 6231 = 5.3
- NAICS 6232 = 3.6
- NAICS 6233 = 4.4

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**OSHA National Emphasis Program Policy & Procedure (continued)**

- MIOSHA Staff will look at three years of injury & illness recordkeeping data.
- Focus on identified NAICS facilities with (DART) rate exceeding 10.0 in any of 3 years.
- Will conduct at least six (6) inspections per year (MIOSHA = about 20-30 facilities/year).
- No expectation of any significant increase in MIOSHA activity at such facilities (NAICS 623 is already a targeted industry sector by MIOSHA).
OSHA National Emphasis Program
Policy & Procedure

• DART rate calculation:
  • \( (N \div 200,000) / EH \)
  • Where:
  • \( N \) = number of cases involving days away and/or restricted work activity.
  • \( EH \) = total number of hours worked by all employees during the calendar year.

300A Summary Page: \((G + H + I) \times 200,000 / EH\)

Injury Data Resources

• State of MI Rates- www.mi.gov/miosha

• Federal Rates- www.bls.gov

Total Case Incident Rate (TCIR)

300A Summary Page: \((G + H + I + J) \times 200,000 / EH\)

Privacy Concern Cases

• An injury or illness to an intimate body part or reproductive system
• An injury or illness resulting from sexual assault
• Mental illness
• HIV infection, hepatitis, tuberculosis
• Needlestick & sharps injuries
Privacy Protection

• Do not enter the name of an employee on the MIOSHA Form 300 for “privacy concern cases”
• Write “privacy case” in the name column
• Keep a separate confidential list of the case numbers & employee names

Annual Summary Posting

• Certification
• A company executive must certify the summary:
  • An owner of the company
  • An officer of the corporation
  • The highest ranking company official working at the establishment
  • The immediate supervisor of the highest ranking company official

Post between February 1 through April 30 of the year following the year covered by the summary

Retention & Updating

• Retain forms for 5 years following the year that they cover.
• Update the MIOSHA Form 300 during that period.
• Do not need to update the MIOSHA Form 300A or MIOSHA Form 301.
Employee Involvement

- Requires employers to establish a procedure for employees to report injuries & illnesses & tell their employees to report.
- Employers are prohibited from discriminating against employees who do report.
- Employee representatives will now have access to those parts of the OSHA 301 form relevant to workplace safety & health.

Needle Stick & Sharps Injuries

- Record all needle stick & sharps injuries involving contamination by another person's blood or other potentially infectious material.
- Record splashes or other exposures to blood or other potentially infectious material if it results in a diagnosis of a bloodborne illness or meets the general recording criteria.

Sharps Injury Log

Amendment to Bloodborne Infectious Diseases Standard Part 554:

- Establish & maintain a sharps injury log for recording of percutaneous injuries from contaminated sharps.
- This applies to employers who are required to maintain a 300 log.
- Information must protect confidentiality.
  1. Type & brand of device involved
  2. Dept. or work area of incident
  3. Description of how it happened
Multiple Business Establishments

• Keep a separate MIOSHA Form 300 for each establishment that is expected to be in operation for a year or longer.
• May keep one MIOSHA Form 300 for all short-term establishments.
• Each employee must be linked with an establishment.

Change of Ownership

• Each employer is responsible for recording & reporting only for the period of the year during which he or she owned the establishment.
• Old owner must transfer records to new owner.
• New owner must retain records. New owner does not have to correct the records.

Occupational Disease Reporting

Public Health Code Act 368 of 1978, as amended:
• "Occupational disease" definition – a human illness resulting from employment with one or more of the following characteristics:
  • Repeated or continuous exposure
  • Acute exposure to hazardous substance
  • Presents symptoms of a disease known to be associated with specific exposures

Examples: Silicosis, Asbestosis, abnormal concentrations of toxics in the blood, urine or body such as: lead, cadmium.
**Occupational Disease Reporting**

- **Who must report:**
  Physician, Hospital, Clinic or Employer

- **When:**
  Within 10 days after discovery of the occupational disease or condition

**Fatality/Catastrophe Reporting**

- **REPORT WITHIN 8 HOURS ALL**
  - Fatalities
  - Catastrophes
  - Incident involving 3 or more inpatient/resident hospitalizations from a work-related incident.

  1-800-858-0397

**3 Extremely Important Things to Remember**


2. Documentation is essential.

3. When in doubt, record.
Recordkeeping Questions?

✓ General Assistance
✓ Forms
✓ Posters
✓ Information
✓ Website: www.michigan.gov/recordkeeping

Management Information Systems Section
Michigan Department of Licensing & Regulatory Affairs
7150 Harris Drive
Lansing, MI 48913
(517) 322-1851

Thank You for Attending this Presentation

Michigan Occupational Safety & Health Administration
Consultation Education & Training Division
7150 Harris Drive, P.O. Box 30643
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To request consultation, education & training services, call (517) 322-1809, or visit us at www.michigan.gov/miosha

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