

## CHAPTER 2

### RESPONSIBILITIES

#### **0201. Discussion**

a. The maintenance of a safe and healthful workplace is a responsibility of commands throughout the Navy. A successful Navy Occupational Safety and Health (NAVOSH) program, one that truly reduces work-related risks and mishaps, results only when support and commitment to the program permeate every level of an organization. Within the Navy, the Chief of Naval Operations (CNO) has overall responsibility for the NAVOSH program and implements the program through the chain of command. Line management is responsible for the maintenance of safe and healthful working conditions.

b. This chapter describes the responsibilities at each command level for implementing the NAVOSH program.

#### **0202. Assistant Secretary of the Navy (Installations and Environment (ASN (I&E))**

ASN(I&E) is the designated safety and occupational health official for the Department of the Navy (DON) which includes the Navy and Marine Corps.

#### **0203. Chief of Naval Operations (CNO)**

Under reference 2-1, the CNO, in coordination with the Commandant of the Marine Corps (CMC) (concerning safety and occupational health matters of mutual interest), shall:

a. Issue appropriate directives and policies for the NAVOSH program per references 2-1 through 2-3. The Director, Environmental Protection, Safety and Occupational Health Division (N45) is responsible for developing NAVOSH program policy and guidance and issuing NAVOSH standards under references 2-1 through 2-6.

b. Establish, manage and maintain appropriate planning, programming, staffing and budgeting for NAVOSH program implementation.

c. Issue criteria for records maintenance and provide to the Secretary of the Navy (SECNAV) all reports required by references 2-3 through 2-9.

d. Conduct appropriate research and development to preclude occupational exposures degrading an employee's health status or work performance.

e. Ensure acquisition managers comply with the requirements of reference 2-9 and other applicable Federal agency safety and health standards or criteria in the procurement of military systems, subsystems, equipment and related facilities.

f. Maintain the NAVOSH Quality Council.

g. Adopt, develop and issue, as necessary, NAVOSH standards (see chapter 16 on Standards). Coordinate Navy review and input for new and revised occupational safety and health regulations and national consensus standards.

h. Ensure commands comply with applicable Navy regulations and Federal statutes governing the control of classified and sensitive unclassified information. (Refer to chapter 11, section 1106).

#### **0204. Headquarters Commands**

Headquarters commands are responsible for establishing a comprehensive safety and health program. Section 0302 delineates these duties and responsibilities.

#### **0205. Policy Formulation and Implementation**

The administration and management of the NAVOSH program is detailed in reference 2-10. Major responsibilities and technical support areas are summarized below.

a. Policy Formulation. The NAVOSH program includes a number of important elements. Responsibilities for policy formulation, program development and direction in each of these are as follows:

(1) NAVOSH Program. The NAVOSH program addresses the maintenance of safe and healthful conditions in the workplace or the occupational environment. It applies to all Navy civilian and military personnel and to operations ashore and afloat. The Director, Environmental Protection, Safety and Occupational Health Division (CNO(N45)) is responsible for developing NAVOSH program policy and guidance and issuing NAVOSH standards under references 2-2 through 2-7. Additionally, CNO(N45) is responsible for program sponsorship of occupational health Navy-wide

(2) Operational Unit Safety

(a) The Director, Submarine Warfare Division (CNO(N77)) is responsible for the safety of submarines, assigned surface ships, deep submergence systems and diving.

(b) The Director, Surface Warfare Division (CNO(N76)) is responsible for the safety of assigned surface ships.

(c) The Director, Air Warfare Division (CNO(N78)) is responsible for naval aviation safety and the safety of assigned surface ships.

(3) Nuclear Propulsion Program Safety. The Director of Naval Nuclear Propulsion program (CNO(N00N)) is responsible for the safety of reactors and associated naval nuclear propulsion plants, and the control of radiation and radioactivity associated with naval nuclear propulsion plant activities per reference 2-11.

(4) Shore Safety. CNO(N45) is responsible for those functional areas of the shore safety program assigned in reference 2-10.

(5) Explosives Safety. CNO(N41) is responsible for the Navy Explosives Safety program including nuclear and conventional weapons.

b. Implementation. Because safety is an inherent responsibility of command, activities shall implement all aspects of the Navy Safety and NAVOSH programs through the chain of command. Echelon Two commanders are responsible for ensuring that the commanders, commanding officers, directors, officers in charge and supervisors at their activities:

- (1) Conduct an aggressive mishap prevention program.
- (2) Assign safety and health responsibilities to qualified personnel.

**0206. Specified Support Areas**

Reference 2-10 defines programs that support the NAVOSH program. The commanders of the Systems Commands (SYSCOMS), the Chief, Bureau of Medicine and Surgery (BUMED), the Commander, Naval Safety Center (COMNAVSAFECEN) and the Chief of Naval Education and Training (CNET) in coordination with, or at the direction of the respective Office of the Chief of Naval Operations (OPNAV) major program sponsor, shall develop specific procedures and provide instructions for the specified support areas assigned to them in reference 2-10.

a. The Commanders of Headquarters Commands. Reference 2-12 directs the SYSCOM Commanders to provide support consistent with required military capabilities and to ensure that safety and occupational health aspects are considered, designed and engineered into all ships and aircraft, weapons or weapon systems, equipment, materials, supplies and facilities which are acquired, constructed or provided through the SYSCOMs. In so doing, SYSCOM commands shall ensure they apply and comply with system safety engineering and management principles and the provisions in reference 2-9. They shall emphasize the engineering control of known significant occupational health problems, such as noise, asbestos and hazardous chemicals and materials in the overall objective of this effort.

b. BUMED shall:

(1) Provide support to CNO and CMC in all aspects of occupational health, which include occupational medicine (medical treatment and surveillance), industrial hygiene and environmental health, including field support.

(2) Coordinate occupational health actions with cognizant headquarters commands as required.

(3) Assist the headquarters commands, including CNET, in coordinating occupational health training in response to needs and requirements developed in the areas set forth in enclosure (1) of reference 2-13.

(4) Perform appropriate research, development, test and evaluation (RDT&E) in occupational health to determine criteria necessary for establishing personnel exposure limits in naval operational environments.

(5) Maintain a register of personnel occupationally exposed to chemical substances and other hazardous physical or biological stressors.

(6) Act as a clearinghouse for reviewing and disseminating occupational health information and technical guidance for such groups as the American National Standards Institute (ANSI) and the American Conference of Governmental Industrial Hygienists (ACGIH).

(7) Process personnel medical records upon termination of employment, per references 2-5 and 2-6.

(8) Develop a program providing for the periodic occupational health surveillance of both personnel and their working environments, as required by reference 2-4.

(9) Provide for job-related medical support, such as immunizations and emergency medical treatment, per reference 2-4 guidance.

c. COMNAVSAFECEN is responsible for those functional areas of the safety program listed in enclosure (1) to reference 2-10 and shall:

(1) Recommend program objectives, develop procedural guides and prepare supporting implementing directives.

(2) Develop and maintain reporting and recording procedures and systems to provide meaningful statistics concerning accidents, injuries and occupational illnesses for use in evaluating the effectiveness of the programs.

(3) Collect reports and analyze data with special emphasis on cause and trend analysis, and provide results to cognizant commands.

(4) Conduct surveys and investigations as requested by CNO (N45).

(5) Promote the safety program

(6) Maintain a repository of accident, injury, illness and claims data.

(7) Sponsor and coordinate the SECNAV and CNO safety awards.

(8) Provide lessons learned through the accident, injury and illness recordkeeping and reporting systems.

(9) Maintain liaison with the Office of the Judge Advocate General (Navy JAG) in all matters pertaining to the privileged status of accident reports.

(10) Provide management information system (MIS) and automated data processing (ADP) assistance and support to the Naval Inspector General (NAVINSGEN) and the Naval Inspector General Oversight Inspection Unit (NOIU).

(11) Act as a clearinghouse for reviewing and disseminating occupational safety and health information and technical guidance from such groups as ANSI and the National Fire Protection Association (NFPA).

d. CNET. Occupational safety and health (OSH) training and education is an inherent element in each primary and specified program element area. CNET, in coordination with COMNAVSAFECEN and BUMED, shall:

(1) Incorporate OSH educational materials, including applicable provisions of this manual, into the curricula of all appropriate training courses.

(2) Provide specialized OSH training and education to military and civilian personnel as required to support the overall program per reference 2-13.

(3) Prepare and distribute audiovisual aids and other training materials for use in local command OSH training programs.

(4) Serve as the central source for delivery and dissemination of information on OSH training courses.

e. The Naval Inspector General (NAVINGEN). NAVINGEN coordinates the oversight inspection program aspects of the NAVOSH program and conducts oversight inspections of Navy shore activities. NAVINGEN shall apprise higher authorities of program effectiveness determined by the oversight inspection program. NAVINGEN shall maintain close liaison with the NAVOSH Program Manager, who is the Director, Environmental Protection, Safety and Occupational Health Division (N45). NAVINGEN will support the NAVOSH Quality Council's implementation of the NAVOSH Strategic Plan. This effort will include use of the Process Review and Measurement System (PR&MS) to determine NAVOSH program continuous improvement actions and cost avoidance initiatives at the activity level. NAVINGEN shall also maintain close liaison with the President, Board of Inspection and Survey (PRESINSURV) and with cognizant OPNAV sponsors (N4, N45, N76, N77 and N78).

f. President, Board of Inspection and Survey (PRESINSURV). President, Board of Inspection and Survey (PRESINSURV) is responsible for oversight inspections for forces afloat. The effectiveness of the afloat NAVOSH program shall be assessed, as well as the status of corrective actions recommended in prior NAVOSH-related surveys and/or reports. PRESINSURV will maintain close liaison with NAVINGEN for matters of common interest and with the cognizant OPNAV sponsors (N4, N45, N76, N77, and N78).

## **0207. Activity Programs**

For shore activities and commands, commanders, commanding officers, directors and officers in charge shall:

a. Implement PR&MS developed by the CNO NAVOSH Quality Council and contained in appendix 2-B. Conduct an aggressive, continuing OSH program that is integrated throughout the activity and post and disseminate program information to all personnel.

- b. Issue an OSH policy statement adopting and enhancing/expanding the NAVOSH policy established in Section 0104. Issue a new policy statement within 3 months after assumption of command, disseminated to all personnel. Activities shall accomplish this by posting the policy statement on all official bulletin boards and by other means as appropriate, such as publication in base newspapers, new employee indoctrination, safety videotapes, etc. The policy statement shall reflect the commander's commitment to OSH and to programs that prevent or minimize occupational mishaps.
- c. Organize, staff, and maintain an OSH office as required by chapter 3. Regional OSH offices shall be established in accordance with paragraph 0304.
- d. Ensure all personnel are fully aware of their obligations and personal responsibilities to the OSH program. Establish clear lines of accountability.
- e. Establish OSH councils and committees at appropriate command levels per chapter 4 of this manual. Chair the council, or ensure it is chaired by the executive officer or equivalent, and ensure minutes are issued and maintained.
- f. Establish and maintain liaison between the local OSH office and other DoD activities for coordination of specialty functions such as medical, fire, security, etc.
- g. Ensure compliance with the mishap investigation reporting procedures of chapter 14. Review lost time mishaps or ensure they are reviewed as stated in section 1411. Fully investigate all mishaps and take appropriate corrective action. Provide timely reports of findings and actions to NAVSAFECEN.
- h. Ensure that all workplaces are inspected at least annually or more frequently based on the level of risk (see chapter 9).
- i. Establish a hazard abatement program as required by chapter 12.
- j. Establish procedures to protect all Navy personnel from coercion, discrimination, or reprisals for participation in the NAVOSH program. Ensure that employees are aware that they may file, through their appropriate grievance processes, allegations of reprisals for having filed a complaint of unsafe or unhealthy working conditions.
- k. Provide employees and their representatives with access to exposure and medical records per chapter 8.
- l. Develop procedures consistent with Office of Personnel Management (OPM), Naval Personnel Command and PR&MS directives to measure and recognize superior and deficient OSH performance. Performance evaluations shall include personal accountability consistent with the duties of the position and the PR&MS. Include recognition of superior performance or conversely deficient performance, as appropriate.
- m. Establish NAVOSH education and training programs per chapter 6.
- n. Coordinate occupational health and industrial hygiene field support with the cognizant

medical command per chapter 8.

o. Ensure compliance with applicable Navy regulations and Federal statutes governing the control of classified and sensitive unclassified information (refer to section 1106).

p. Establish a comprehensive NAVOSH self-assessment program for the command per chapter 5.

q. Ensure that senior management, middle management and first line supervision support the OSH program to the extent of their authority and responsibility by:

(1) Setting the example for subordinates

(2) Promptly correcting recognized hazards

(3) Clearly defining and assigning individual OSH responsibilities to subordinates

(4) Documenting OSH performance in evaluation of subordinates in consonance with section 0207.I

(5) Ensuring employees receive appropriate OSH training, participating in OSH committees or meetings, and conducting stand up OSH meetings where required

(6) Conducting or participating in worksite inspections, including those made by the activity OSH personnel

(7) Encouraging safety awareness through incentives and awards programs

(8) Receiving training appropriate to their level of responsibility and authority, per chapter 6. NAVOSH orientation training does not need to be repeated with subsequent assignments to other levels of management unless significant OSH-related changes have occurred.

(9) Acquiring, maintaining and requiring the use of approved personal protective equipment, approved safety equipment and other devices necessary to protect employees

(10) Encouraging a free flow of information and ideas from employees on methods of improving the safety of their workplaces, work practices and work processes. Developing a reward process for outstanding safety contributions.

r. Review all OSH citations and findings from external authorities (i.e., Occupational Safety and Health Administration (OSHA), NAVINSGEN and internal sources), as warranted, to ensure the underlying causes of the problems are identified and that corrective actions address the underlying causes and not merely the symptoms

s. Develop and implement cross-reference linkage among employment records, medical records and industrial hygiene surveillance data.

t. Ensure that personnel are aware of the formal procedure for processing written reports of unsafe or unhealthy working conditions per chapter 10. Commands shall include provisions to preserve the individual anonymity of those reporting unsafe conditions when requested. The reporting procedures should encourage employees to make beneficial suggestions as a positive means of correcting potential hazards.

u. Ensure support of Field Federal Safety and Health Councils and coordinate mutually beneficial accident prevention and safety programs with local communities to the maximum extent feasible and per applicable laws and regulations.

v. Designate appropriate officials to consult with representatives of labor organizations recognized under reference 2-14 with respect to the OSH program.

w. State the location(s) where personnel can review copies of the NAVOSH standards, records of safety and health committees and their actions and recommendations, the activity hazard communication plan, and documentation on the command/activity/unit OSH program (shore only).

x. Make available a copy of the activity's annual summary report of occupational injuries and illnesses for the preceding year. Post this summary no later than 45 days after close of the fiscal year, for at least 30 days. In addition to posting, activities may publish it in appropriate written media, such as the activity's newspaper.

y. Post form DD 2272, Department of Defense Occupational Safety and Health Protection Program (appendix 2-A) in prominent locations such as all official bulletin boards (shore only).

z. Establish local agreements to clearly define the respective roles and responsibilities of the BUMED/non-BUMED industrial hygienists, when, where appropriate, due to the nature and complexity of local operations, non-medical activities have established industrial hygiene staffs to assist in implementation of the activity's OSH program.

#### **0208. Individual Civilian and Military Personnel**

Commands can only achieve safe and healthful workplaces through the full participation and cooperation of all employees. Accordingly, each employee shall:

a. Comply with NAVOSH standards and all applicable rules, regulations and orders issued under this manual. Violators of NAVOSH regulations or instructions are subject to disciplinary action prescribed in Civilian Personnel Instruction (CPI) 752 (NOTAL) or the Uniform Code of Military Justice. The command shall also consider such actions in personnel performance evaluations (refer to section 0207.I).

b. Report observed workplace hazards following procedures outlined in chapter 10.

c. Immediately report to his/her supervisor injuries or occupational illnesses or property damage resulting from an accident.

## Chapter 2

### References

- 2-1. SECNAVINST 5100.10H of 15 June 99, Department of the Navy Policy for Safety, Mishap Prevention, and Occupational Health and Fire Protection Programs (NOTAL)
- 2-2. DoD Instruction 6055.1 of 19 Aug 98, DoD Safety and Occupational Health (SOH) Program (NOTAL)
- 2-3. DoD Directive 1000.3 of 29 Mar 79, Safety and Occupational Health Policy for the Department of Defense (NOTAL)
- 2-4. DoD Instruction 6055.5 of 10 Jan 89, Industrial Hygiene and Occupational Health (NOTAL)
- 2-5. SECNAVINST 5212.5D of 22 Apr 98, Navy and Marine Corps Records Disposal Manual
- 2-6. DOD Instruction 6055.7 of 3 Oct 00, Accident Investigation, Reporting and Record Keeping (NOTAL)
- 2-7. SECNAVINST 5211.5D of 17 Jul 92, Department of the Navy Privacy Act (PA) Program
- 2-8. SECNAVINST 5720.42F of 6 Jan 99, Department of the Navy Freedom of Information Act (FOIA) Program (NOTAL)
- 2-9. DOD Military Standard 882C of 19 January 93, System Safety Program Requirements (NOTAL)
- 2-10. OPNAVINST 5100.8G of 2 July 86, Navy Safety and Occupational Safety and Health Program
- 2-11. Executive Order 12344 of 1 Feb 82, Naval Nuclear Propulsion Program (NOTAL)
- 2-12. OPNAVINST 3500.39A of 26 Apr 00, Operational Risk Management (ORM) (NOTAL)
- 2-13. Navy Occupational Safety and Health and Hazardous Material Control and Management Navy Training Plan (NTP S-40-8603D) (NOTAL)
- 2-14. Title 5, United States Code, Chapter 71 (Supp.11 1979) (NOTAL)



**Appendix 2-A  
DOD Occupational Safety and Health Program**

 <p><b>DEPARTMENT OF DEFENSE SAFETY AND OCCUPATIONAL HEALTH PROTECTION PROGRAM</b></p> <p>The Occupational Safety and Health Act of 1970, Executive Order 12196 and 29 CFR 1960 require the heads of Federal agencies to establish programs to protect their personnel from job safety and occupational health hazards.</p>	
<p>1. The Department of Defense (DoD) designated agency safety and occupational health official is the Assistant Secretary of Defense (Force Management and Personnel).</p> <p>2. The _____ designated safety and occupational health official is: (DoD Component) _____</p> <p>_____ (Title) _____ (Address)</p> <p>3. The _____ safety and occupational health designee is: (Name of Installation/Facility) _____</p> <p>_____ (Name) _____ (Title)</p> <p>4. The _____ safety point of contact is: (Name of Installation/Facility) _____</p> <p>_____ (Name) _____ Telephone Number</p> <p>5. The _____ occupational health point of contact is: (Name of Installation/Facility) _____</p> <p>_____ (Name) _____ Telephone Number</p>	
<b>HAS THE RESPONSIBILITY TO:</b>	
(Name of Installation/Facility)	
<p>1. COMPLY with the applicable Occupational Safety and Health Administration (OSHA)/DoD/DoD Component safety and occupational health standards.</p> <p>2. SET UP PROCEDURES for submitting and responding to employee reports of unsafe and unhealthful working conditions.</p> <p>3. ACQUIRE, MAINTAIN, AND REQUIRE the use of approved personal protective equipment and safety equipment.</p> <p>4. INSPECT ALL WORKPLACES with participation by civilian employee representatives to identify potential hazards.</p> <p>5. ESTABLISH PROCEDURES to assure that no worker is subject to restraint, interference, coercion, discrimination, or reprisal for exercising his/her rights under the DoD safety and occupational health program.</p>	<p>6. POST NOTICES of unsafe or unhealthful working conditions found during inspections.</p> <p>7. ASSURE PROMPT ABATEMENT of hazardous conditions. Workers exposed to the conditions shall be informed of the abatement plan. Imminent danger corrections must be made immediately.</p> <p>8. SET UP A MANAGEMENT INFORMATION SYSTEM to keep records of occupational accidents, injuries, illnesses and their causes; and to post annual summaries of injuries and illnesses for a minimum of 30 days at each installation/facility.</p> <p>9. CONDUCT SAFETY AND OCCUPATIONAL HEALTH TRAINING for management, supervisors, workers and worker representatives.</p>
<b>DOD PERSONNEL HAVE THE RESPONSIBILITY TO:</b>	
<p>1. COMPLY with all applicable OSHA/DoD/DoD Component safety and occupational health standards</p> <p>2. COMPLY with _____ (Name of Installation/Facility) policies and directives relative to the safety and occupational health program.</p>	<p>3. USE personal protective equipment and safety equipment provided by your installation/facility.</p> <p>4. REPORT hazardous conditions, injuries, illnesses, or other mishaps promptly to your supervisor or to the safety or occupational health point of contact for your installation/facility.</p>
<b>DOD PERSONNEL AND CIVILIAN EMPLOYEE REPRESENTATIVES HAVE THE RIGHT TO:</b>	
<p>1. HAVE ACCESS to applicable OSHA/DoD/DoD Component standards, installation/facility injury and illness statistics, and safety and occupational health program procedures.</p> <p>2. COMMENT on alternate standards proposed by DoD/DoD Component.</p> <p>3. REPORT AND REQUEST INSPECTIONS OF UNSAFE AND UNHEALTHFUL WORKING CONDITIONS to appropriate officials who include, in order of preference, the immediate supervisor, the safety or occupational health point of contact, the safety and occupational designee for your installation/facility,</p>	<p>3. (Continued) for your DoD component, the safety and occupational designee for DoD, and the Secretary of Labor. However, the Secretary of Labor encourages personnel to use DoD procedures for reporting hazardous conditions as the most expeditious means to achieve abatement. The hazard report form provided by your installation/facility should be used for this purpose. Anonymity, when requested, is assured.</p> <p>4. PARTICIPATE in the installation/facility safety and occupational health program. Civilian workers shall be authorized official time to participate in the activities provided by the DoD safety and occupa-</p>

OPNAVINST 5100.23F

15 July 2002

the installation/ facility commander, the safety and occupational health designee	tional health program.
<b>OTHER INFORMATION:</b> 1. When the safety or occupational health point of contact for your installation/facility is notified by a worker of a hazardous worksite condition, he/she will ensure an inspection of the worksite and he/she will report the results of the inspection in writing to the worker making the report. 2. Inspector General channels may be used to investigate complaints from either DoD civilian or military personnel concerning alleged acts of discrimination or reprisal due to participation in safety and occupational health activities. For DoD civilian personnel, allegations of reprisal may also be initiated by them 2. (Continued) in accordance with applicable appeal procedures, or administrative or negotiated grievance procedures. 3. For further information about the installation/facility safety and occupational health program, procedures, standards, committees, Federal laws, or other related matters, contact the safety or occupational health point of contact for your installation/facility as noted on this poster. 4. How well you carry out your safety and occupational health responsibilities will be an important factor in the success of the program.	

DD FORM 2272, NOV 2000

PREVIOUS EDITION MAY BE USED.

Appendix 2-B

**NAVY PROCESS REVIEW AND MEASUREMENT SYSTEM**

**#1 THE MISHAP PREVENTION PROCESS MODEL**  
(30% OF OVERALL RATING)

**Mishap Prevention** - actions taken to identify and control unacceptable risks.

1. Compile/Report Mishap and Hazard Data

- Mishap reports
- FECA data
- Exposure assessments
- Medical surveillance
- Reported hazards
  - Workers
  - Management
  - OSH staff
  - External agents
  - Literature

2. Analyze Mishap/Hazard Data

- Frequency
- Severity (human costs, dollar costs, mission impact)
- Exposure potential
- Location
- Responsibility
- Type
- Trends
- Patterns
- Any anomaly

3. Analyze Significant Processes/Areas (Various approaches may be employed - Preliminary Hazard Analysis, Systems Safety Review, Job Safety Analysis, Process Safety Analysis, less formal approaches, etc., as appropriate for processes analyzed)

- Hazards
- Causes
- Responsibilities
- Control alternatives

4. Report Key Data/Analysis to Process Owner

5. Process Owners Review Reports

**The Mishap Prevention Process Model** - (continued)

6. Identify/Consider Potential Controls
  - Administrative/Programmatic
  - Engineering
  - Process
  - Training
  - PPE
  - Procedural
  - Product substitution
  
7. Conduct Relative Value Assessment
  - Loss potential
  - Cost
  - Expected benefit
  - Morale implications
  - Feasibility
  - Customer acceptance
  - Public image
  - Labor/management implications
  
8. Select Alternative(s)
  - Select control(s)
  - Do nothing
  - Prioritize implementing actions
  
9. Implement Control (s)
  - Issue policy
  - Issue procedures
  - Install barriers
  - Modify facilities/equipment
  - Modify procedures
  - Conduct training
  - Utilize new product
  
10. Assess Impact of Controls
  - Review data
  - Inspect process/worksite
  - Solicit customer feedback
  - Compare results to expected benefits
  
11. Modify Control(s) As Needed
  - Select alternative control(s)
  - Modify existing control(s)
  - Eliminate control(s)

## **Performance Measures for the Mishap Prevention Process**

1. Mishap Rates - the mishap rate chosen to measure Mishap Prevention performance is the Injury/illness Incidence Rate (IIR), defined as follows:

- $IIR = (A \times 200,000) / M + C$ 
  - A = total injuries/occupational illnesses including fatalities, lost/no-lost time cases, first aid cases reported on Form OPNAV 5102/7 (Log of Navy Injuries and Occupational Illnesses)
  - M = the command's military personnel and strength for the reporting period multiplied by 2,000 (Note: 2,000 is the appropriate multiplier only when an annual IIR is being calculated. This multiplier should be adjusted up or down in proportion to the time period in question for any IIR calculations for time periods other than annual. For example, use 1,000 for a 6-month IIR, use 10,000 for a 5-year IIR)
  - C = civilian staffing multiplied by 2000 or the total man hours worked by civilian employees of the command during the reporting period, as provided by the Comptroller
- The IIR score is derived as follows:  
 $0.3(100-IIR)=IIR \text{ Score}$

## 2. Quality Assessment of Command Mishap Prevention Program

Evaluate the command's Mishap Prevention performance by assessing its implementation of specific elements of the Mishap Prevention process model. The process model elements recommended for evaluation, and proposed evaluation methods, are provided below:

- Compile/Report Mishap and Hazard Data -
  1. Is appropriate mishap and hazard data compiled?
    - Injuries/illnesses
    - Property damage cases
    - Stressor exposure
    - Safety hazards
    - Near misses
- A list of possible sources from which the evaluator may gather actual mishap and hazard data for comparison purposes includes:
  1. Clinic logs
  2. Material property damage reports (OSH office)
  3. FECA tables
  4. JAG reports

5. NAVFAC property loss reports
6. Property accountability reports (Controller)
7. Crane accident reports
8. Ships' CAS reports
9. Inspection Reports
10. Employee Hazard Reports (EHR)
11. Abatement logs
12. Industrial hygiene reports

(Evaluate by taking a sample of mishaps/hazards from the above data sources and then confirming the consideration of those mishaps/hazards in the mishap prevention process. Numerical values should then be assigned to this element, based on the number of sample mishap and hazard items actually included in command mishap prevention analysis databases.)

- Analyze Mishap/Hazard Data and Significant Process Areas

1. Do the analyses:

- Occur at an appropriate frequency?
- Provide data at appropriate levels of management responsibility?
- Identify the most frequent and/or severe risks?
- Provide a valid comparison of current performance versus expected/historical performance?
- Provide useful recommendations for performance improvement?
- Provide other useful analysis not listed above?

- Process Owner Response to Analyses

1. Characterize process owner response to reports of mishap analyses as one of the following:

- Unsatisfactory awareness of/response to analyses reports
- Satisfactory awareness of/response to analyses reports
- Takes additional internal analysis/action beyond that suggested by analyses reports

(Evaluate by personal interview with selected process owners, review of process owner documentation, and field confirmation of actions claimed (where appropriate)).

**#2 THE REGULATORY COMPLIANCE PROCESS MODEL**  
(20% OF OVERALL RATING)

**Regulatory Compliance** - conformance to NAVOSH requirements

1. Determine Regulatory Requirement
  - Review regulations
  - DoD/Navy directives
  - Military exclusions
  - Review, determine if changes needed
  - Legal considerations
  - Regulatory interface
  - Community relations
2. Develop Compliance Strategies
  - Training requirements
  - Feasibility
  - Medical impact
  - Prioritization
  - Time frame for implementation
  - Consequences on non-compliance
  - Difference between new and current requirements
  - System safety review
3. Identify and Provide Resources
  - Organizational structure
  - Cost determination
  - Budgeting
    - Internal
    - Customer cost
  - Facility requirements
4. Execute Compliance Strategy
  - Communicate requirements
    - Training
5. Monitoring
  - Documentation
  - Data analysis
  - Report compliance status
  - Feedback
  - Initiate improvement efforts
  - Confirmation of corrective action

**Performance Measures for the Regulatory Compliance Process**

- NOIU/NAVOSH Inspection results

**#3 THE SUPERVISION PROCESS MODEL**  
(20% OF OVERALL RATING)

**Supervision** - those actions taken to plan, organize, direct, oversee and evaluate the activities of subordinates and Command personnel to safely accomplish work

The Supervision Process Model incorporates three different but complementary/interrelated components.

**Component #1** - Sequential actions/steps associated with the accomplishment of specific jobs/tasks by subordinates.

1. Analyze Tasks

- Identify hazards
  - Physical (mechanical, heat, vibration, noise, location, radiation, etc.)
  - Chemical (hazardous materials)
  - Biological (disease)
- Evaluate hazards
  - Identify personnel at risk
  - Consult involved employees
  - Consult peers/managers
  - Review technical documentation
  - Consult professional staff
  - Draw upon personal knowledge/experience
- Identify measures needed to control/eliminate hazards
  - Engineering
  - Administrative
  - PPE
- Identify OSH compliance requirements
  - Navy
  - OSHA
  - Local documents
  - NAVOSH
- Determine required personal qualifications
  - Training
  - Physical/medical
  - Experience

2. Organize to Safely Accomplish Tasks

- Select qualified personnel
- Determine work sequence
- Coordinate with support organizations

3. Direct the Accomplishment of Tasks

- Communicate objectives to assigned personnel
  - Schedule
  - Interface with other operations

- Location
- Problem reporting
- Assign jobs within the task
- Provide job training
  - Verbal
  - Written
  - Discuss potential hazards
  - Discuss compliance

4. Evaluate Task Performance

- Observe workers
- Identify process variance
- Enforce proper implementation of controls
- Receive feedback
  - From employees
  - From related organizations
  - From customers (internal/external)
- Assess efficiency of controls

5. Adjust Process As Required

**Component #2** - Continuing actions to evaluate the overall performance of personnel over time.

1. Determine General Expectations For Work Unit

- Injury/illness prevention
- Process improvement
- Cost avoidance initiatives

2. Set Performance Standards Both Verbally and In Writing

- Objective/quantifiable
- Measure behavior, not results, at lower levels in the
- Organization
- Use subordinates' performance as factor for supervisors
- Measure positives as well as negatives

3. Acquire Information Needed To Assess Performance

- Inspections
  - Supervisor
  - OSH staff
  - IH surveys
- Process reviews
- Mishap data/information
- Employee self-assessment

4. Assess Performance Against Standards

5. Discuss With Employee

- Strengths
- Weaknesses
- Improvement strategy

6. Document Final Assessment

7. Initiative Reward/Remedial Actions as Appropriate

**Component #3** Integration of OSH throughout the Command assess how proactively Command HQ, Command, upper management, supervisors and employees integrate and involve OSH into core business processes.

1. Review requirements

2. Scope of involvement

- meetings/councils/training/strategic planning

3. Level of interface CO has with

- upper management, middle mgmt., workforce and unions
- Assess if Command has an informal CO/Upper Mgt. walk-through of workspaces

4. Command awareness of compensation costs, property damage assessments, mishap rate reductions, etc.

5. Assess upper Echelon strengths, and support/guidance

6. Determine command climate and philosophy related to OSH

7. Evaluate customer/command feedback systems

8. Reduction in accidents due to awareness or improved procedures

9. Determine ownership of processes

**Performance Measures for The Supervision Process**

1. Presence of OSH Elements in Performance Standards (% coverage and quality of standards) - the following should be used to evaluate the presence of OSH elements in performance standards.

- Is OSH addressed?
- Do the standards address communication of OSH information and expectations to members of the work unit?
- Is performance monitored to determine if OSH requirements and expectations are met?
- Do the standards address actions to be taken to improve the OSH performance of the work unit?
- Do the standards require the establishment of OSH standards for all members of the work unit?

(Where commands utilize self-directed work teams in lieu of traditional supervisors, performance standards adopted by self-directed work teams will be evaluated)

2. Assessment of Employee Understanding of OSH Expectations

- Is employee properly using appropriate PPE for the work?
- Can the employee demonstrate an awareness of hazards in the work area, and hazard control measures?
- Is the employee using OSH resources available to report/address hazards (e.g. supervisor, OSH staff, safety committee, EHR, etc.)?

(Evaluate by field observation and interviews of randomly selected employees who perform work operations which expose them to significant potential hazards.)

2. Assessment of OSH Integration Initiatives or Improved Outcome Measures:

- Is higher echelon providing OSH guidance?
- Has the activity asked the next Echelon for guidance (on PR&MS)?
- Is there active OSH interchange of information within the chain (both above and below)?
- Does CO's immediate staff show knowledge of OSH issues?
- Does CO review OSH related reports (i.e., program costs, incident rates, compensation costs)?
- Has Cmd. suite attended OSH training with subordinates or peers?
- Has Cmd. and upper mgt. shown buy-in and open support of the OSH program?

**#4 THE TRAINING PROCESS MODEL**  
(15% OF OVERALL RATING)

**Training** - conveyance of information to enable personnel to carry out their personal responsibilities safely and in compliance with applicable NAVOSH regulations.

1. Identify Requirements and Needs

- Explicit
  - Required by regulations
  - Required by directives
  - Individual development plan
- Implicit
  - Lessons learned
  - Process improvements
  - Process changes
  - Needed to execute work
  - Labor/management/customer relations
- Type
  - Initial
  - Refresher
  - Job qualification
  - Awareness
- Timing/frequency
  - Before assignment
  - Annual
  - Monthly
  - Other
- Recordkeeping

2. Identify Audience

- Upper-level management
- Mid-level management
- Supervisor
- Worker
  - New
  - Journeyman
  - New assignment
- Customer
  - Tenants
  - Contractors
  - Visitors
- Labor organizations

3. Develop Specific Information to be Delivered
  - Relate to each target audience
  - Limit to applicable requirements for each target audience
  
4. Identify Media
  - Lesson plans
  - Classroom
  - On-the-job training
  - Programmed instructions
  - Videotape
  - Correspondence courses
  - Interactive computer assisted
  - Stand-up/tailgate meetings
  - Other
  
5. Assemble Resources Needed to Provide Training
  - Funding
  - Time
  - Media
  - Facilities
  - Qualified instructor
  
6. Deliver Training
  - Schedule
  - Provide
    - NSETC
    - OSHA
    - College
    - On-the-Job training
    - On-Site training
    - Job training
    - Rate training
    - Correspondence courses
    - Stand-up/tailgate meetings
  - Track completion
  
7. Evaluate Effectiveness
  - Work site observations
  - Retention testing
    - Short-term
    - Long-term
  - Mishap rate for target accident type
  - Student critique
  
  - Other feedback
    - OSH office

- Labor organizations
- Managers

## 8. Modify Training as Required

### **Performance Measures for the Training Process**

#### 1. Matrix Match Against Requirements

- Compile Data Sources
  - Industrial hygiene surveys
  - Military manning documents
  - Command mission/function statements
  - Command mishap experience
  - Command occupation physical qualification statements
  - Etc.
- Determine the following:
  - Does a formal OSH Training Plan exist?
  - Would execution of the plan ensure delivery of all required training?
  - Would execution of the plan ensure delivery of appropriate specific hazard recognition and control training?
  - Is course content documented by formal lesson plans that are approved by appropriate OSH/technical personnel?
  - Is training executed in accordance with the plan?
  - Is the training provided evaluated in terms of:
    1. Appropriateness of course content?
    2. Instructor effectiveness?
    3. Behavior of trainees in the workplace?
    4. Are evaluation results used to improve training?

#### 2. Employee Interface/Challenges

- Compile Data Sources
  - Industrial hygiene surveys
  - Military manning documents
  - Command mission/function statements
  - Command mishap experience
  - Command occupation physical qualification statements
  - Etc.
- For Target Processes/Occupations, Determine if:
  - Employees are accomplishing their work in a safe manner.
  - Employees are aware of job hazards and OSH requirements.
  - Employees are complying with regulatory requirements pertinent to their job assignment.
  - Employee failures are due to: \*\*\*
    1. Inadequate training.

2. Employee failure to comply with known requirements.
  3. Other factors. (Lack of tools, time, etc., needed to perform work)
- Employee successes are due to: \*\*\*
1. Effective training.
  2. Knowledge/experience not attributable to the command's training program.
  3. Other factors. (Close supervision, reward system, peer pressure, etc).

\*\*\* NOTE: For these items, if the failure/success is due to training, utilize the employee observation/interview results to evaluate the TRAINING key process. If the failure/success is due to other (non-training) factors, utilize the employee observation/interview results to support the evaluation of another appropriate key process.

(Evaluate by identifying several appropriate occupations within the command, then observing/interviewing randomly selected employees within each identified occupation or process.)

**#5 THE SELF-ASSESSMENT PROCESS MODEL**  
(15% OF OVERALL RATING)

**Self-Assessment** - a comprehensive internal evaluation of how an OSH program meets the requirements of its internal/external customers.

1. Identify Program Elements to be Evaluated

- Mishap Prevention
  - Mishap investigation
  - Risk assessment
  - Hazard abatement
- Adequacy of resources (internal/external)
  - OSH staff
  - Funding
  - Medical/HRO support
  - PWC support
  - FISC support
  - Other
- Supervision
  - Management involvement/example
  - Performance evaluation
- Personnel participation
  - Worker input mechanisms
  - Union involvement
  - PPE use
- Training
  - Formal
  - Informal
  - Communication
- Regulatory Compliance
  - All applicable regulations
  - Deficiency abatement
- Injury Cost Control
- Customer Focused Support (OSH support commands only)

2. Develop Assessment Plan for Each Element

- Develop assessment strategy
- Identify element customers and customers needs
- Identify element performance criteria and indicators
- Develop assessment tools/procedures
- Develop assessment schedule
- Determine reporting mechanisms and who receives reports

**The Self-Assessment Process Model** – (continued)

- Identify and provide for resources needed to assess
    - People
    - Data
    - Time
    - Technical competence
3. **Conduct Assessment of Each Element**
- Conduct/Compile information
  - Analyze
    - Trends
    - Patterns
    - Causes
    - Priorities
    - Actual observed performance vs. desired performance
  - Develop conclusions/recommendations
  - Prepare/submit reports
    - Documentation as required by regulations
    - Reports to appropriate responsible persons
4. **Adjust/Improve Self-Assessments**
- Obtain/Evaluate customer feedback
  - Develop improvements
  - Implement Improvements
  - Advise customers of change

**Performance Measures for the Self-Assessment Process**

1. **Quality assessment of Command Self-Assessment Program**
- Has the command established a formal self-assessment process?
  - Is a self-assessment of each key NAVOSH process, adequacy of resources, and personnel participation conducted annually
  - Does the self-assessment include a data-driven analysis of key NAVOSH process trends/patterns?
  - Does the self-assessment identify/quantify the actions and resources needed to correct process deficiencies?
  - Does the self-assessment drive process improvements?
  - Does the self-assessment identify further process improvement opportunities for programs that already meet basic requirements?

(Evaluate by review of current self-assessment documentation.)

**#6 THE CUSTOMER-FOCUSED SUPPORT PROCESS MODEL (OSH SUPPORT)**  
(0-100% - TO BE SCORED SEPARATELY, AS APPLICABLE)

**Customer-Focused Support** - providing OSH support, services, and guidance that meet customer needs.

1. Identify Your Customers

- Commands receiving service
- Students
- Patients
- Managers within commands
- Workers/employees
- Laboratories
- Contractors
- Your boss

2. Identify Your Customer's Needs (As Perceived by the Servicing Command)

- Requirements (mandated programs)
- Non-disruptive service
- Schedule and frequency
- Reports and documentation
- Usefulness and reliability of products/services
- Cost vs. value
- Consultation with command management
- Responsiveness
- Policy/guidance
- Anticipation of unexpressed customer needs
- Communication of available services

3. Evaluate Current Product/Services

- Policy/guidance
- Schedule and frequency
- Reports and documentation
- Usefulness and reliability of products/services
- Requirements (mandated programs)
- Non-disruptive service
- Cost vs. value
- Consultation with command management
- Responsiveness
- Communication of services available

4. Determine Resources Required to Provide Product/Services
  - People
  - Funding
  - Time
  - Consumables
  - Facilities
  - Contracts
  - Support organizations
  - Procedures and policies
  - Training and education
  - Communication and Information Technology
  - Equipment
5. Develop Customer Survey
  - Assess knowledge level of people being surveyed
  - Tailor questions accordingly
  - Develop questions around the following:
    - What do you need from me?
    - What do you do with what I give you?
    - Do gaps exist between what I give you and what you need?
6. Develop Survey Implementation Plan
  - Determine survey format and delivery method
  - Identify forms and checklists
  - Develop schedules
  - Train surveyors/conduct dry run
  - Refine survey
7. Conduct Survey
8. Evaluate Survey Results
  - Determine gaps between product/services provided and the customer's needs/requirements/expectations
9. Improve Delivery of Products/Services to Better Meet Customer Needs
  - Develop partnership with customer to eliminate problems
  - Provide new services
  - Eliminate Unneeded services
  - Re-prioritize efforts
  - Improve efficiency/effectiveness of current product/service
  - Adjust customer/supplier expectations
  - Identify alternative provider of service
10. Identify Potential Improvements
  - Customer feedback
  - Data
  - Field Observations

- Follow-up Survey

11. Pursue Continuous Improvement of Process

- Ensure customer satisfaction

**Performance Measures for the Customer-Focused Support Process**

- Has the command established a formal process for determining customer needs?
- Has the command determined customer needs (as perceived by the servicing command) and evaluated current service?
- Are customer needs surveyed:
  - At least triennially?
  - At least annually?
  - Significantly more often than annually?
  - By written surveys?
  - By meetings/workshops?
- Do customer surveys/workshops/etc. result in the development of initiatives to improve the products or services being delivered?
- Are customers advised of survey results and improvement initiatives planned/undertaken in response to surveys
- Are customers involved in the development of improvement initiatives?
- Are improvement initiatives tracked and making progress toward implementation?
- Is customer feedback solicited concerning the effectiveness of changes implemented in response to customer surveys?

**#7 THE INJURY COST CONTROL PROCESS MODEL**

*(Under development.)*