SECTION 1:
SAFETY PROGRAM MANAGEMENT

Introduction

The Director's Order #50B mandates specific employee safety and health related activities to be conducted within National Park Service worksites. The Reference Manual 50B is intended to provide information, guidance, or direction on how to carry out the activities mandated within Director's Order #50B.

This reference manual will be updated and disseminated as frequently as necessary to adequately address both long-standing and emerging safety and health issues, and to provide the most updated technical guidance available from regulatory agencies, industry consensus standards and the Department of the Interior.

Due to the complexity of National Park Service operations, this manual may refer to other Director's Orders or reference manuals as appropriate.

References

2. Executive Order (EO) 12196, “Occupational Safety and Health Programs for Federal Employees.”

Program Objectives

The objective of the National Park Service’s (NPS) Occupational Safety and Health Program is to improve the management and cost-effectiveness of operations by:

1. Reducing the frequency and severity of accidents and losses for employees and visitors.
2. Providing a safe and healthful work environment for employees.
3. Providing for the safety and health of the public (visitors) from recognized hazards in NPS operations, on NPS lands and in NPS facilities.
4. Protecting NPS and private property from accidental damage or loss associated with NPS activities.
5. Including safety and health as an integral part of every operation.
Program Requirements

Managers and supervisors are accountable for implementation and management of the Service’s Occupational Safety and Health Program within their scope of authority and responsibility. This includes the following mandatory requirements:

1. Establish and maintain a staff of safety and health professionals in the Washington and Regional Offices and at major operating units, as well as appropriate collateral-duty personnel at all other sites, to advise management in the development and implementation of an effective safety and health program.

2. Require that no employee be subjected to restraint, interference, coercion, discrimination or reprisal for filing a report of an alleged unsafe or unhealthy working condition, or otherwise participating in the program.

3. Provide employees the supervision, knowledge, skills and abilities necessary to perform their assigned tasks in a safe manner.

4. Train employees and supervisors to recognize unsafe and unhealthy work practices and conditions, take appropriate corrective actions and know and follow safety work rules and procedures.

5. Evaluate the safety and health performance of every NPS manager, supervisor and employee, making it a critical element of their job duties and responsibilities.

6. Incorporate and enforce appropriate safety and health performance clauses in contracts, licenses and permits with concessionaires and contractors.

7. Acquire only those items which meet established national consensus and/or General Services Administration approved safety and health standards.

Management should encourage the use of safety and health committees to enhance effective communications between employees and management. This should include promoting off-the-job safety and health of employees through on-the-job safety and health activities.

In this and every other way, management and supervision of the NPS should comply with the applicable program elements of EO 12196, 29 CFR, part 1960, DM 485 and the provisions of this guideline.
References


Requirements

1. Each operating unit must prepare a basic “Documented Occupational Safety and Health Plan,” applicable to the unit.

2. An all-inclusive copy of the operating unit’s Occupational Safety and Health Plan shall be made available to all site employees, including employee representatives.

3. The operating unit’s Occupational Safety and Health Plan should be updated annually and signed by the site manager.

4. The operating unit’s Occupational Safety and Health Plan should include the following chapters as appropriate for the individual unit. Chapters in Director’s Order/Reference Manual 50b contain more detailed information on many of the following topics.

5. OCCUPATIONAL SAFETY AND HEALTH PLAN CHAPTERS
   
a. Operating Unit’s Management Policy, Principles and Responsibilities for Occupational Safety and Health.

b. The operating unit’s Annual Goals and Action Plans.

c. Applicable Safety Standards to be used in the operating unit. This is necessary when there may be choices, such as in the selection of a building code or other national consensus standards. There is no choice in the application of all OSHA standards. Copies of the standards should be available in the operating unit for use by NPS employees in the performance of their work.

d. Program Evaluation/Management Audits including types of evaluation audits, frequency, documentation, information flow, responsibility, tracking and follow-up.

e. Site Inspections and Abatement plan for work-site inspections, including abatement procedures to be utilized when deficiencies are discovered as a result of the inspections.

f. Hazard Control Planning, including JHA procedures, documentation, use of information, updating/review, process auditing, organizing and managing.
g. The Safety Committee(s) including makeup, activities, duties, meeting schedules, documentation of committee meetings, recommendations and management responses.

h. Incident Investigation, Review, Analysis and Reporting, including the following:
   - Investigative procedures
   - Root Cause Analysis process
   - Purpose of reviews
   - SMIS System use

i. Employee Training, including orientation, general park-wide training, specific worksite activity training, frequency, tailgate systems and incorporation of JHAs.

j. Safety Resources, including Professional Resources (contact names and phone numbers), the Safety Contact (including role, training, time allocation), Internet resources and safety library maintenance.

k. Occupational Health and Medical Surveillance program, detailing baseline surveys and periodic updates, personnel/work activities included in the operating unit’s program, support and resources needed, monitoring programs and documentation.

l. Recognition/Awards Program, including frequency, criteria, types of recognition and size.

m. Motor Vehicle Program, including proper selection, training and management of vehicle operators, local laws and regulations, operator restrictions, operation of any unit special equipment, proper operation of vehicles and operating unit response in case of motor vehicle/equipment accidents/incidents.

n. Contractor Safety Program administration, including contract language, safety monitoring, safety briefings, site-specific safety and health plans, and hazard analyses.

o. Contracting and Procurement procedures, including materials used (which meet applicable safety standards), and Material Safety Data Sheets (MSDSs).

p. Employee Involvement including hazard reporting, reprisal policy and stop-work authority and criteria. Procedures should be in effect to handle employee reports of unsafe conditions, including follow-up activities.
q. **General Park Safety Rules** — all operating unit general safety rules and regulations.

r. **Safety Communications** including what to communicate, to whom, how often and the methods to use.

s. Operational Plans/SOPs, as appropriate.

- ATV Policy
- Crane/Derrick Operation Procedures
- Aviation/Helicopter Operations
- Work-site Fire Safety, Fire Prevention and Protection Program
- Emergency Preparedness Plans
- Watercraft Operation Procedures
- Snowplowing and Snow Removal Operations
- Museum and Artifact Preservation Operations
- Back-Country Operations
- Other Plans/SOPs as appropriate

t. Regulatory Compliance (OSHA and Others) as appropriate.

- Respiratory Protection Program
- Blood-borne Pathogen Program
- Hearing Conservation Program
- Confined Space Entry Program
- Lockout/Tagout Program
- Hazard Communication Program
- Personal Protective Equipment Program
- Fall Protection Program
- Blasting/Explosives Program
- Diving Safety Program
- Telecommunications Program
- Ladders and Scaffolds
- Other Programs as appropriate

u. Off-the-Job Safety Program.

v. Public Safety
References


Requirements

1. NPS (Bureau) Annual Occupational Safety and Health Action Plan

   a. The National Park Service, Risk Management Program Office will develop an Annual (fiscal year) Action Plan, specifying annual goals for the enhancement of Program performance, and will provide a copy to the Departmental DASHO by the end of August prior to the new fiscal year. By November 15 of each year, the NPS will provide the Departmental DASHO a status report of Program accomplishments for the previous year.

2. Operating Unit’s Annual Occupational Safety and Health Action Plan

   a. Each operating unit shall establish occupational safety and health activity and outcome goals.

   b. Working from the operating unit’s Occupational Safety and Health Goals, an Annual Action Plan for each NPS operating unit will be developed for both employee and public safety. Goals must be specific, programmatic and measurable, with responsibility and timelines for implementation clearly defined. The Annual Action Plan will be developed to achieve goals for the coming year or years, and will relate to the Occupational Safety and Health Program Elements as defined below.

   c. Ensure that the operating unit’s Occupational Safety and Health Action Plan is communicated to employees to get their support and participation.

National Park Service Occupational Safety And Health Program Elements

1. Management leadership and program evaluations.

   Examples of items under this element may include, but are not limited to, the following:

   • Management routinely demonstrates personal commitment to, and involvement in, worker safety and health protection.

   • Safety and health protection are integrated into the overall planning cycle.

   • Written safety and health program is appropriate for size of work site that addresses all elements in this list.
• Results-oriented safety and health policy.

• Clearly assigned safety and health responsibilities with documented accountability from top management to line supervisors.

• Annual safety and health written program evaluations with recommendations, action plans and verification procedures.

• Adequate authority to carry out assigned responsibilities.

• Necessary resources to meet all responsibilities.

• Quality protection for all contract employees equal to that provided for own employees.

2. Worksite analysis.

Examples of items under this element may include, but are not limited to, the following:

• Methods such as comprehensive safety and industrial hygiene surveys to identify existing or potential hazards in the workplace.

• Pre-use analysis procedure such as a Job Hazard Analysis (JHA) for new processes, material, or equipment to determine potential hazards.

• Routine industrial hygiene monitoring of toxic substances and noise.

• Monthly self-inspections (weekly for construction) with written documentation and hazard correction tracking.

• Routine hazard analysis procedures, such as a Job Hazard Analysis (JHA), that result in improved work practices and/or training for employees.

• Written hazard reporting system enabling employees to pass on observations or concerns to management without fear of reprisal.

• Accident investigations with written documentation.

• Method of documenting all identified hazards until controlled or eliminated.

• Analysis of trends in injury/illness experience and in hazards found, to identify patterns of problems and to implement program adjustments.
3. **Mitigation of identified hazardous conditions and unsafe work practices.**

Examples of items under this element may include, but are not limited to, the following:

- Access to certified safety and health professionals.
- Engineering and administrative controls adequate for hazards at the work site.
- Written safety rules and practices that are understood and followed by all employees.
- Written rules for use and maintenance of personal protective equipment.
- Written plans to cover emergency situations.
- Hazard-correction tracking procedures.
- Onsite or nearby medical and emergency services.
- First aid and CPR-trained personnel available onsite during all shifts.
- Use of occupational health professionals in hazard analysis as appropriate.
- Documented ongoing monitoring and maintenance of workplace equipment.

4. **Provision for employees and employee union involvement and support.**

Employee and employee union involvement in all activities that have a major effect on the safety and health program.

5. **Effective and appropriate Occupational Safety and Health training.**

Examples of items under this element may include, but are not limited to, the following:

- Manager, supervisor and employee training with emphasis on safe behaviors and safety and health responsibilities.
- Training in the use and maintenance of personal protective equipment.
- Emergency preparedness drills, including annual evacuations.
- Documentation of all training received, including assessment procedures.
(All Goals and Action Items are taken from actual park safety planning documents.)

Park A:

1. Goal: All employees will be active participants in our safety program.

2. Action Items and Dates:
   - Include safety program materials in all employees’ hiring packets. (Spring, 02)
   - Safety message included in seasonal orientation. (June, 01)
   - Supervisors hold monthly tailgate sessions to reinforce park safety values. (Summer, 01)
   - Regular group safety meetings are held. (Summer, 01)


2. Action Items and Dates:
   - Identify tasks utilizing employee involvement. (Fall, 01)
     --Prioritize tasks.
     --Review appropriate compliance standards.
   - Assign responsibilities for preparation. (Winter, 01-02)
   - Provide JHA preparation training. (Winter-02)
   - Review and approve JHAs. (Fall, 02)
   - Disseminate JHAs. (Spring, 03)
**Park B:**

1. **Goal:** Involve and engage all employees in the park’s safety policy.

2. **Action Items and Dates:**
   - All-employee meeting on Safety. (April, 01)
   - Have employees identify high-hazard tasks in their work units. (January, 02)
   - Conduct an annual employee survey to seek a measurable result of safety policy. (October, 01)
   - Request employees to identify and prioritize safety issues park-wide and propose solutions. (January, 02)

1. **Goal:** Closer communication on safety activities with park concessionaire.

2. **Action Items and Dates:**
   - Park invites concession representatives to Central Safety Committee Meetings. Entire park is invited to all-employee safety meetings. (April, 01)
   - Park representatives will attend concession safety meetings. (April, 01)
**Purpose**

To specify the minimum Occupational Safety and Health Program requirements for the conduct of program evaluations by the WASO Risk Management Office, NPS Regional and Support Offices, and Operating Units.

**References**


**Policy**

1. The WASO Risk Management Office will conduct Risk Management program evaluations of all regional/support offices at least once every three years.

2. Regional/support offices will conduct Risk Management program evaluations at every operating unit at least once every three years.

3. Operating units will conduct program evaluations on an annual basis.

**Requirements**

1. WASO Risk Management Office Evaluations.

   a. Evaluations will include visits to regional offices and will consist of document reviews and interviews with employees at the management level.

   b. Evaluations will involve, at a minimum, an analysis of the following:

      - Extent and effectiveness of management involvement.

      - Structure and effectiveness of the safety and health program in regard to responsibility, authority and accountability.

      - Adequacy of information indicating that management has control over safety and health.

      - Adequacy of program information flow within the organization.
• Safety and health input to the budget formulation and adequacy of resources to administer the program and abate hazardous conditions.

• Effectiveness of accident investigations and reporting.

• Effectiveness of safety and health training.

• Adequacy of inspections and abatement procedures.

• Frequency, effectiveness and records of program evaluations, including recommendations and follow-up systems.

• Size and technical skill of staff.

c. WASO Risk Management Office evaluation reports will be written and transmitted to the affected Regional Director. The report will include positive findings as well as program deficiencies. When appropriate, the report will include recommendations for corrective and/or enhancement actions of program deficiencies.

d. The affected Regional Director will respond to the report within 60 calendar days, identifying actions to be taken and their expected time of completion on all WASO Risk Management Office recommendations.

e. Follow-up visits and status reports will be used as necessary to ensure that program deficiencies are resolved. Recommendations for correcting hazards and program deficiencies shall be documented and tracked until completed.

f. WASO Risk Management Office will develop and publish an annual evaluation schedule.

2. Regional Risk Management Office Evaluations.

a. Evaluations will include visits to field operations/activities and will consist of document reviews, interviews with employees at the management, supervisory and worker levels, and a review of worksite conditions.

b. Evaluations will involve an analysis of the following areas:

• Management leadership and employee involvement.
• Work-site analysis.
• Hazard prevention and control.
• Safety and health training.
NOTE: Non-mandatory appendix X-1 can be used to evaluate these four major program areas. Checklists for evaluating specific OSHA programs can be obtained from the WASO Risk Management Office, Regional Risk Management Offices and from the Occupational Safety and Health Administration at www.osha.gov.

c. The evaluation report will be written and transmitted to the affected Superintendent/Manager. The report will include positive findings as well as program deficiencies. When appropriate, the report will include recommendations for corrective and/or enhancement actions of program deficiencies.

d. The affected Superintendent/Manager will respond to the report within 60 calendar days, identifying actions to be taken and their expected time of completion.

e. Follow-up visits and status reports will be used as necessary to ensure that program deficiencies are resolved. Recommendations for correcting hazards and program deficiencies shall be documented and tracked until completed.

f. The Regional Risk Management Office will develop and publish an annual evaluation schedule.

3. Operating Unit Evaluations.

a. Operating Unit will conduct a program self-evaluation on an annual basis.

b. Evaluations will involve an analysis of the following areas:

- Management leadership and employee involvement.
- Work-site analysis.
- Hazard prevention and control.
- Safety and health training.

NOTE: Non-mandatory appendix X-1 can be used to evaluate these four major program areas. Checklists for evaluating specific OSHA programs can be obtained from the WASO Risk Management Office, Regional Risk Management Offices and from the Occupational Safety and Health Administration at www.osha.gov.
Appendix X-1
Management Leadership and Employee Involvement

Safety and Health Policy

Has management developed a written safety and health policy reflecting their commitment to safety and health?

Has management communicated the policy in writing to all employees?

Are employees familiar with management’s safety and health policy statement?

Goals and Objectives

Has management established results-oriented (measurable) written safety and health goals?

Is a member of management identified in writing as responsible and accountable for the fulfillment of each safety and health goal?

Has management developed a written annual safety and health action plan?

Written Safety and Health Plan

Has a written site-specific safety and health management plan been developed?

Management Leadership and Accountability

Does the safety manager report directly to the Superintendent or Deputy Superintendent?

Has a budget been provided to support the safety and health program?

Have line-management walk-around audits been conducted and documented?

Do managers, supervisors and employees have measurable safety and health criteria in their annual performance standards?

Employee Involvement

Can the site demonstrate at least three different ways that employees are involved in the Safety and Health program? (Examples include safety committee, job hazard analysis, safety and health training, safety and health evaluation participation, hazard analysis and performance standards.)
Has the site established a safety and health committee(s) or similar bodies that allow for employees from different levels in the organization to participate?

Does the site have written procedures (or a role and functions statement) that addresses the role of the safety and health committee(s)?

**Contractor Safety & Health**

Does the Contracting Officer verify in writing that contractor safety qualifications, safety programs and past performance have been evaluated prior to contractor selection?

Does the site document in writing that contractors receive written information pertaining to specific park-imposed operating requirements (if any), notification of known hazards associated with the physical environment in which they will be working, and how to activate park emergency response systems prior to on-site activities?

Does the site assign a Contracting Officer’s Technical Representative (COTR) for all contracted projects in the park?

Has the site documented that COTRs have been provided with OSHA construction and general industry safety and health training?

**Work-Site Analysis**

**Safety Inspections**

Has a baseline comprehensive safety and health inspection been conducted?

Are all workplaces inspected for safety and health at least annually?

Is the correction of unsafe conditions/actions identified through safety inspections documented in writing to ensure closure?

**Industrial Hygiene**

Has an exposure assessment been conducted and documented in writing to determine physical and chemical agents that present exposures to employees including chemical and biological hazards, noise and vibration hazards, temperature hazards and radiation hazards (ionizing and non-ionizing)?

Are personnel who are trained in industrial hygiene sampling techniques and control measures utilized to perform exposure assessment activities?
Hazard Analysis

Has the site implemented a written job hazard analysis program (or similar assessment technique) to identify and control hazards associated with individual job tasks?

Are employees provided with training and information in writing on the job hazard analyses applicable to their job tasks?

Hazard Reporting and Tracking System

Is there a formal, written hazard reporting process that allows employees to bring safety and health concerns to management?

Does the site track hazards to closure through a hazard report log (or similar tool)?

Are employees notified in writing regarding the status of their hazard reports?

Accident/Incident Investigation and Analysis

Does the site have written incident investigation procedures to determine the root cause(s) of personal injuries/illnesses, property damage, near misses and visitor incidents?

Are all incidents investigated and documented?

Does the site document and track corrective actions recommended in incident investigations until they are implemented?

Reporting and Record Keeping

Are accidents/incidents reported via the DOI Safety Management Information System (SMIS) or current departmental incident reporting system?

Is the annual summary of occupational injuries and illnesses posted not later than 45 calendar days after the close of the fiscal year and posted for a minimum of 30 consecutive days?

Is incident data tracked and analyzed to show trends and to identify specific safety and health problem areas?
Safety Program Evaluation

Are written procedures in place for evaluating the effectiveness of the safety and health management program?

Is the evaluation conducted at least annually and documented in writing?

Hazard Prevention and Control

Occupational Health Care Program and Record Keeping

Are there qualified personnel, such as physicians, nurses and medical responders available to support the medical needs of the site?

Have medical and first-aid equipment and supplies, including Automatic External Defibrillators (as applicable), been provided and maintained?

Worker’s Compensation Case Management

Has management established a written Worker’s Compensation program that complies with DO-50A?

Have alternative work assignments been identified in writing and made available to employees during the medical recovery period?

Safety and Health Training

Is safety and health training for new employees provided and documented?

Is ongoing safety and health training to employees on the workplace hazards they are exposed to provided and documented?

Is safety and health training for management necessary to effectively implement and manage the safety and health program provided and documented?
References


2. 29 CFR 1960, Subpart D, “Inspection and Abatement.”


Requirements

Every National Park Service facility, operation and/or workplace will be formally inspected at least annually. More frequent inspections will be conducted when there is an increased risk of accident, injury or illness due to the nature of the workplace.

Workplace Technical Inspections

1. Formal technical inspections will be conducted by persons who are trained in hazard recognition and safety and health inspection procedures. The inspections may be conducted by NPS personnel, contractors or volunteers as long as they are appropriately qualified.

2. Risk assessment codes will be assigned to facility findings and deficiencies for management use in prioritizing corrective actions (Appendix A).

3. If an imminent danger condition is found, the management official in charge will initiate corrective/protective action immediately and, if necessary, stop the operation and/or evacuate the area (except for those needed to abate the condition).

4. Preoccupancy building inspections for safety and health considerations will be conducted by safety and health professionals or other qualified person(s).

5. Written reports of workplace inspections shall be provided to the management official in charge of the operation within a reasonable time, but not later than 20 working days after the inspection. The report will cite hazards and safety management deficiencies and will recommend corrective actions. The inspection report shall contain, at a minimum, the date and time of the inspection, a description of the site inspected, a description of each deficiency, and whether corrective action is required. Inspection reports shall be maintained on file for a period of five years.
6. Deficiencies discovered during inspections will be tracked until corrected using a hazard tracking system or similar process. See Appendix B for a sample hazard-tracking log.

7. If abatement of a hazardous condition is not within the authority and resources of the organization, management will:
   
   a. Request assistance from the next higher management level in the organization.
   
   b. Coordinate, when necessary, with the federal lessor agency, if applicable (for example: General Services Administration), to secure abatement as specified in 29 CFR Part 1960, Subpart E and 41 CFR Parts 101-21.

Management Safety Walk-Arounds

1. Walk-arounds are a self-assessment tool used by managers to assess the overall condition of the safety program, engage employees in conversation about safety, identify programmatic issues and recognize safe practices. Normally management personnel above the first-line supervisor level should perform walk-arounds. Walk-arounds are not intended to be comprehensive, site-wide inspections. They should focus on performance of specific safety activities and are not directed toward compliance goals. They are cooperative, no-fault efforts between managers and workers.

2. A successful walk-around program will include the following elements:
   
   a. Communication between line managers and workers during walk-arounds is essential. Managers should solicit worker observations, concerns and suggestions.
   
   b. Unsafe work practices or conditions identified during walk-arounds with the potential to cause serious injury must be corrected immediately, or work must be stopped.
   
   c. Walk-arounds should recognize and reinforce good performance.
   
   d. The frequency of walk-arounds will be established (a graded approach – with higher risk operations being evaluated more frequently – is preferred). A rule of thumb is a minimum expectation of three walk-arounds per manager per quarter. (Preferably one per month for managers with low-risk operations such as office environments. A higher number is expected for managers with higher risk operations.)
   
   e. Personnel responsible for conducting walk-arounds will be identified
f. Documentation requirements for the results of the walk arounds will be established.

g. Walk-arounds are followed up on to ensure that program deficiencies have been prioritized and corrected and that safe practices are recognized as soon as possible.

**OSHA Inspections**

1. Officials from the Occupational Safety & Health Administration (OSHA) have the right to conduct inspections at any NPS site or operation. They also have the right to question any employee, supervisor, visitor or manager associated with the site (29 CFR 1960.31).

2. OSHA cannot issue monetary fines against federal agencies as they can against private industry. However, they can (and do) issue citations. All citations must be corrected.

3. If OSHA arrives to conduct an inspection at an NPS site:
   
a. Cooperate with the OSHA inspector in a cordial manner while on-site. This sets the tone for the rest of the process, both during and after the inspection.

   b. The Superintendent, Assistant Superintendent or Manager should take an active interest in the inspection. This will send a message that you are serious about safety and correcting any identified deficiencies.

   c. If your site receives OSHA citations:

      - Carefully review the citations for accuracy before you respond to OSHA.

      - Provide proper documentation of your corrective action (pictures, copies of work orders, copies of finalized written plans, etc).

      - Do a “quality control” check to make sure all corrective actions have in fact been implemented.

      - Notify the Regional Risk Manager.

      - Provide a copy of inspection findings, recommendations and abatement schedules to the Regional Risk Manager.
Agency Technical Assistance Request (ATAR)

Any NPS site may ask OSHA for help through an Agency Technical Assistance Request (ATAR). The on-site visit may be triggered by a need for hazard abatement advice, training, a partial or comprehensive inspection, and/or program assistance. ATARs are scheduled at the discretion of OSHA’s Area Office Directors.

Depending on the needs of each particular site, there are several types of ATARs. They may be phoned in; however, agencies normally request them in writing. On-site and off-site ATARs are conducted. An on-site ATAR may consist of a limited or comprehensive walk-through, complete with opening conference. An off-site ATAR may consist of a review of program documents. Whenever you request an ATAR, you have the right to limit the scope. Where other types of OSHA visits (i.e., inspections) may result in citations or notices of findings, the final product of an ATAR will be either a written or verbal report suggesting program or facility improvements.

1. Any serious or imminent danger condition identified by the OSHA Compliance Safety and Health Officer (CSHO) during an ATAR must be abated. All violations will be discussed with agency officials at the closing conference. For serious, unabated violations prior to the closing conference, abatement dates and an abatement plan will be discussed.

2. After the visit, the OSHA Area Director will send the site director a letter that summarizes results of the ATAR and, if appropriate, documents uncorrected violations and sets abatement dates as discussed with the agency. If an agency does not act in good faith to correct these deficiencies, OSHA will issue a Notice of Unsafe or Unhealthful Working Conditions.
Appendix A

Risk Assessment

Risk assessment is an essential element of effective risk management. The assignment of risk levels provides a relatively simple and consistent method of expressing the risk associated with worker exposures to identified hazards.

Methodology

The level of risk associated with a workplace hazard is expressed in terms of an assigned risk level of high, medium or low, based on the Risk Assessment Code (RAC) calculated for the hazard. The RAC is assessed through the determination of the severity of the injury or illness that could result from the hazard and probability that such an injury or illness could occur.

Severity Code

The severity code is a classification of the severity of the most serious type of injury or illness that could reasonably be expected as a result of exposure to a specified workplace hazard.

Severity Code Criteria

Determination of the severity code is the first step in assessing the risk associated with a workplace hazard. The code is assigned in accordance with the following criteria:

<table>
<thead>
<tr>
<th>HAZARD SEVERITY</th>
<th>SEVERITY CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Castastrophic</strong>—Injuries/illnesses involving permanent total disability, chronic or irreversible illnesses, or death.</td>
<td>I</td>
</tr>
<tr>
<td><strong>Critical</strong>—Injuries/illnesses resulting in permanent partial disability or temporary total disability in excess of 3 months.</td>
<td>II</td>
</tr>
<tr>
<td><strong>Marginal</strong>—Injuries/illnesses resulting in hospitalization or temporary, reversible illnesses with a variable, but limited, period of disability of less than 3 months.</td>
<td>III</td>
</tr>
<tr>
<td><strong>Negligible</strong>—Injuries/illnesses not resulting in hospitalization or temporary, reversible illnesses requiring only minor supportive treatment.</td>
<td>IV</td>
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</tbody>
</table>
Severity Codes for Health Hazards

The hazard severity code for health hazards is assigned based on the severity of the primary health effect that could result from an employee’s exposure to a chemical or physical agent above a prescribed exposure limit. The primary health effect is the health effect providing the basis for the prescribed exposure limit (e.g., cancer, liver damage, sensory irritation). Sources of this information include the American Conference of Governmental Industrial Hygienists (ACGIH) Documentation of the Threshold Limit Values and Biological Exposure Indices, OSHA standards, and National Council on Radiation Protection and Measurement (NCRP) reports. For chemical and physical agents for which no prescribed exposure limit exists, the assigned probability code is based on the primary health effect (as documented in MSDSs), toxicology references and other appropriate sources.

Probability Code

The probability code is an expression of the likelihood that a hazard will result in an injury or illness based on an assessment of applicable safety or health factors.

Relevant Factors

In the determination of probability codes, all relevant factors that may influence the likelihood that an injury or illness will occur should be identified, evaluated and considered. Potential considerations in the assignment of probability codes include:

Safety Factors

The following factors should be considered when evaluating the probability that a safety hazard will result in an injury or illness:

Number of employees potentially exposed, both concurrently and sequentially.

- Frequency of exposure, including the full range of possible frequencies, from one-time, short-duration exposures to continuous daily exposure.

- Employee proximity to the hazard (e.g., from a location at the fringe of the danger zone up to the point of danger).

- Working conditions that may distract the employee or cause employee stress (e.g., complexity of the operation, proximity to other ongoing activities or workplace hazards, extended work hours and fatigue, workplace lighting or noise levels, etc.) and thereby increase the likelihood of an accident.
Health Factors

The probability code for health hazards is a statement of the probability that an employee will be exposed to a chemical or physical agent above a prescribed exposure limit. The probability code is determined as follows:

- Where established through monitoring (e.g., breathing zone monitoring, dosimetry, biological monitoring, noise measurements, wet bulb globe temperature measurements, etc.) that an exposure above the prescribed exposure limit exists, the probability code is “A”.

- Where no overexposures have been documented, the probability code is assigned based on the likelihood that an overexposure will occur. Factors to consider include employee proximity (frequency and duration) to areas with potential hazardous agent exposure; documented exposures above established action levels; chemical and physical characteristics of the hazardous agent; nature of the operation (e.g., storage, materials transfer); reliability or redundancy of controls; and number of employees potentially exposed to the hazardous agent.

Hazard Probability

The probability code is assigned in accordance with the following criteria:

<table>
<thead>
<tr>
<th>CRITERIA</th>
<th>PROBABILITY CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequent</td>
<td>Likely to occur immediately</td>
</tr>
<tr>
<td>Probable</td>
<td>Probably will occur in time</td>
</tr>
<tr>
<td>Occasional</td>
<td>Possible to occur in time</td>
</tr>
<tr>
<td>Remote</td>
<td>Unlikely to occur</td>
</tr>
</tbody>
</table>
**Risk Assessment Code (RAC) and Risk Level**

The RAC assigned to each hazard is an expression of risk, which combines the severity code and the probability code. Using the matrix below, the RAC for a given hazard is assigned by (1) determining the severity code of the hazard (I, II, III or IV) and entering the matrix along the corresponding row; (2) determining the probability code of the hazard (A, B, C or D); and (3) moving across the row until arriving at the corresponding column. The Arabic number at the intersection of the appropriate row and column is the RAC for that hazard. The RAC relates directly to a risk level that can be used as a tool to determine priorities among, and required oversight for, hazard abatement activities.

<table>
<thead>
<tr>
<th>Probability Code</th>
<th>Risk Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Hazard RAC</td>
</tr>
<tr>
<td>A</td>
<td>1 &amp; 2</td>
</tr>
<tr>
<td>B</td>
<td>3</td>
</tr>
<tr>
<td>C</td>
<td>4 &amp; 5</td>
</tr>
<tr>
<td>D</td>
<td></td>
</tr>
</tbody>
</table>

**Risk Assessment Codes and Risk Levels for Similar Hazards**

When similar hazards exist (e.g., no guarding on similar types of power presses in the same workplace with comparable exposures), the RAC and risk level determined for one of the hazards may be assigned to the other similar hazards.
Appendix B

Safety Inspection Checklist

Inspected By: _________________________________ Date: __________

(Mark N/A as appropriate)

1. WORK SITE INFORMATION:
   a. Posting OSHA and other work site warning posters       _____
   b. Are Safety Meetings conducted periodically?
       When was the last meeting?       _____
   c. First aid equipment properly stocked      _____
   d. Are work site injury records being kept?      _____
   e. Are emergency telephone numbers conspicuously posted?   _____
   f. Is the EMERGENCY INFORMATION form posted?           _____

Describe Violation – Location – Remedy Taken
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

2. HOUSEKEEPING AND SANITATION:
   a. Are emergency lights fully operational?               _____
   b. General neatness of working areas                   _____
   c. Regular disposal of waste and trash                  _____
   d. Passageways and walkways clear                      _____
   e. Waste containers provided and used                   _____
   f. Sanitary facilities adequate and clean               _____
   g. Adequate supply of water                            _____
   h. Adequate lighting                                  _____
   i. Trash receptacle for drinking cups                  _____
   j. Are handrails and stair treads in good repair?     _____
   k. Is smoking restricted to certain locations?         _____
   l. Are electrical cords and plugs in good condition?  _____
   m. Is a clearance of 3’ maintained around hot water heaters
       electric breaker panels, heating units, and fire sprinkler riser?  _____
   n. Are electric circuit breakers free of obstructions?  _____
3. **FIRE PREVENTION:**
   a. Fire instruction to personnel
   b. Fire extinguishers identified, accessible, and fully charged
   c. “No Smoking” signs posted and enforced where needed
   d. Good housekeeping
   e. Storage, use and handling of flammable liquids properly done
   f. Fire hazards checked
   g. Is gasoline contained only in UL listed containers?

4. **HANDLING AND STORAGE OF MATERIALS:**
   a. Are materials properly stored and stacked?
   b. Are passageways clear?
   c. Shelves in stockrooms in good repair and properly anchored
   d. Stacks on firm footing, not too high
   e. Are employees lifting loads correctly?
   f. Are materials protected from weather conditions?
   g. Flammable liquids not stored in areas used for exits or stairways

5. **HAND TOOLS:**
   a. Proper tool being used for each job
   b. Neat storage, safe carrying
   c. Inspection and maintenance
   d. Electric tools are grounded
6. PERSONAL PROTECTIVE EQUIPMENT

a. Eye protection
b. Respirators and masks
c. Helmets, hoods, head protection
d. Gloves, aprons, sleeves
e. Safety belts and lifelines
f. Shirts are to be worn
g. Back support belts

7. HAZARDOUS MATERIALS:

a. Is a binder containing MSDS for supplies containing hazardous chemicals available to employees before using?  

b. Are “Material Safety Data Sheets are Available on Request” signs posted in conspicuous locations?

c. Is the hazardous waste inventory log maintained?

d. Are hazardous waste storage areas inspected weekly?

e. Is the hazardous material disposition log maintained?

f. All containers clearly identified

g. Proper storage practices observed

h. Proper storage temperatures and protection

i. Proper type and number of extinguishers nearby
### APPENDIX C

#### HAZARD TRACKING LOG

**ORGANIZATION:** ___________________

**SITE:** __________________________

**DATE SUBMITTED:** _______________

**INSPECTOR:** ____________________

<table>
<thead>
<tr>
<th>Hazard Description:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date Identified:</td>
</tr>
<tr>
<td>Corrective Action Planned:</td>
</tr>
<tr>
<td>Follow-Up Date(s):</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
</tr>
<tr>
<td>Final Abatement Action:</td>
</tr>
<tr>
<td>Supervisor Abatement Certification/Date:</td>
</tr>
<tr>
<td>Program Coordinator Review/Date:</td>
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</tbody>
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</tbody>
</table>
Introduction

Accident/Incident reporting and investigation is a fundamental aspect of the National Park Service management system for safety excellence, and one of the cornerstones of effective park safety programs. The overall objective of Accident/Incident reporting and investigation is to eliminate recurrence of accidents and “incidents with potential” for employee injuries and occupational illnesses, and other damage to government property.

The following appendices contain information to assist the user who is reporting, classifying or investigating accidents.

Appendix A: Park/Work Unit Accident/Incident Investigation & Reporting Process Overview provides a concise overview of the park level processes pertinent to accident reporting and investigation and information, guidance and a field worksheet that will assist a first-line supervisor in gathering the information necessary to fully complete an accident report in the DOI Safety Management Information System (SMIS).

Appendix B: Recommended Procedures for Accident Review Committees Unit Accident Investigation Committee contains information on the recommended procedures for Accident Review Committees conducted for non-SAIT investigations at the Park organizational level.

Appendix C: OSHA Recordkeeping contains the list of medical treatments considered “FIRST-AID ONLY”, by the OSHA, regardless of who provided the medical attention. This is important in order to properly classify accidents in the Safety Management Information System to prevent inflated or inaccurate accident rates at the park level.

Appendix D: SAI Delegation Letters contains templates used for Delegation of Authority by the NPS Designated Safety and Health Official (DASHO), the National Fire Director (NFD), and the Associate Regional Director-Operations (ARD-O) when calling out a Serious Accident Investigation Team (SAIT).

Appendix E: SAI Procedures contains the Serious Accident Investigation Team (SAIT) Procedures and forms to document accident scene evidence, photographs and interviews, including sample Communications Plan.

Appendix F: Serious Accident Investigation Reports contains templates for the SAI 24-Hour Preliminary Report, the SAIT 72-Hour Expanded Report, the SAIT Factual Report, the SAI/BOR Management Report, and the Corrective Actions Document.

Appendix G: Serious Accident Board of Review (BOR) contains the Board of Review
makeup and procedures, and Lessons Learned Abstract Template.

Appendix H: Line of Duty Death Protocols contains NPS procedures relevant to occupational fatalities.

**Purpose**

To specify requirements for the reporting and investigation of National Park Service work related accidents, and “incidents with potential”, and the additional requirements for the reporting and investigation of “serious accidents”, including those involving wildland fire-fighting activities and aviation mishaps.

When conducted properly, the investigation process reveals the chain of events that have led to an accident or “incident with potential”; analyzes the direct and indirect causes of the event, and identifies correctable opportunities. The investigation process also provides information to National Park Service management to help prioritize park, regional or nationally implemented corrective actions and Risk Management program activities.

The reporting phase of this process supports park’s safety management programs by providing notification of previously unrecognized hazards to park management for evaluation and development of corrective actions, identification of trends in workplace accidents, and communication of hazards and recommended corrective actions to employees and supervisors in the park and within the National Park Service.

**References**


2. 29 CFR, Part 1904, Recording and Reporting Occupational Injuries and Illnesses


4. Title 33, Code of Federal Regulations (CFR), Part 173.55. (Vessel Accident Reporting)


6. Title 60, Statute 842, "Federal Tort Claims Act."

7. Title 5, United States Code (USC) 8101, et seq., "Federal Employee's Compensation Act."
Definitions

*DART Case*: A recordable injury/illness incident that specifically results in Days Away from work, job Restrictions, and/or job Transfer.

*DASHO*: The designated agency safety and health official is the senior manager identified by the agency with the specific authority and responsibility for management of the occupational safety and health program per Reference A above.

*Incident*: An event involving National Park Service employees or other personnel directly supervised by the NPS, that results in a near-hit, injury, illness, fatality, damage to government property, or damage to other property being used for government business.

*Chief Investigator*: The person with the necessary skills to conduct the investigation aspect (ascertaining the facts and collection/preservation of evidence) of the accident/incident investigation. The skills needed vary with the complexity/severity of the incident.

*Minor Incident/Accident*: An event involving National Park Service employees, or other personnel directly supervised by the NPS, that results in: 1) injury or illness requiring only first-aid treatment (per OSHA definition) and is not otherwise a recordable injury/illness; and/or 2) property damage of less than $2,500.

*Incidents with potential (Near-hit)*: An unplanned/undesirable event involving National Park Service employees, or other personnel directly supervised by the NPS, which could have resulted in injury, illness, or property damage, but did not.

*NPS Employee*: All NPS employees, or other Federal, State, or local agency employees under NPS supervision/jurisdiction, and/or contractors and volunteers directly supervised by NPS or under NPS jurisdiction.

*Recordable Injury/Illness Incident*: Incidents that result in work-related injuries and occupational illnesses involving one or more of the following (as defined by OSHA). These incidents must be investigated by the Park Unit:

1. Medical treatment beyond first-aid
2. Loss of consciousness
3. Days away from work
4. Restricted work activity
5. Job transfer
6. Fractured or cracked bones or teeth
7. Punctured ear drum
8. Chronic irreversible disease
9. Occupational cancer
10. Needlestick and sharps injuries
11. Medical removal (as specified in specific OSHA standards)
12. Hearing loss
13. Tuberculosis
**Significant Property Damage/Operating Loss Incident**: Incidents that result in property damage or operating loss from $2,500 up to, but less than $250,000.

**Serious Accident**: An incident involving National Park Service employees, or other Federal, State, or local agency employees under NPS supervision/jurisdiction, and/or contractors and volunteers directly supervised by NPS (e.g. volunteers, SCA, emergency workers, etc.), that results in:

1. One or more work-related fatalities, or imminently fatal injuries or illnesses;
2. Hospitalization of three or more employees from a single occurrence;
3. Property damage under Departmental/NPS control, and/or operating loss of $250,000 or more; and/or consequences that the NPS Designated Agency Safety and Health Official (DASHO) or the Regional Designated Safety and Health Official (RDSHO) judges to warrant investigation under the serious accident investigation procedures.

**Accident/Incident Reporting Requirements**

A. National Park Service (NPS) employees are required to immediately report to their supervisor (verbally or in writing), all work-related accidents or “incidents with potential” that they become aware of involving National Park Service employees or other Federal, State, or local agency employees under NPS supervision/jurisdiction, and contractors or volunteers directly supervised by NPS, which could have resulted in an injury, illness, or property loss. An “incident with potential” is defined as an unplanned event with undesirable consequences (frequently referred to as a “nearmiss”, “near-hit” or “close call”). If there is a resultant injury, illness or loss of property, the incident is reported as an “accident”.

Accident/incident classification determines which notification, investigation, and reporting policies and procedures apply to each case. When an incident occurs, it is the first-line supervisor’s responsibility to determine the initial incident classification as a minor incident, recordable injury/illness incident, significant property damage/ operating loss incident, or serious accident according to the definitions in section 5.4 above.

As circumstances warrant, the incident’s classification may change.
B. Accidents and “incidents with potential” are classified and reported as follows:

1. **Minor accident/incident**: An event without injury or with first-aid treatment only (per OSHA definition) without any subsequent lost-days from work, job transfer, restriction work activity, or loss of consciousness. It also includes property damage less than $2,500.

2. **Recordable accidents**: Injuries and occupational illnesses that are defined in OSHA recordkeeping requirements as medical treatment beyond first-aid, including loss of consciousness, lost-days away from work, and restricted work activity, or transfer (DART).

3. **Significant Property Damage/Operating Loss Incidents**: Incidents that result in property damage, or operating loss from $2,500 up to, but less than $250,000.

4. **Serious accidents**: A work related fatality of an employee (NPS, other agency under NPS jurisdiction, or contractors and volunteers directly supervised by NPS), overnight hospitalization of three or more employees from a single occurrence; and/or incidental damage to NPS property of $250,000 or more.

C. Supervisory Requirements: Supervisors are required to follow the notification procedures below:

1. For recordable injury/illness incidents not involving a DART case, the supervisor, or their acting must notify his/her direct supervisor and the unit Safety Manager/Contact within 48 hours of awareness of the incident.

2. For DART cases, significant property damage and serious incidents, the supervisor, or their acting, must immediately notify his/her direct supervisor, the Safety Manager/Contact, and senior manager of the unit.

D. Senior Management Requirements: The senior manager of the unit, or their acting or delegate(s), are required to follow the notification procedures below:

1. For serious accidents the unit must:
   a. Immediately notify their Associate Regional Director for Operations (or equivalent). Units must also follow any region-specific notification procedures.
   b. Notify the Shenandoah ICC (540) 999-3422. SHEN ICC will make notification to the DOI Emergency Reporting System (877-246-1373) and the NPS DASHO (202) 513-7218.
c. Notify the nearest OSHA Area Office (800-321-6742) within 8 hours. Do not contact OSHA concerning property damage only incidents.

2. For all employee on-duty heart attacks, work related or not, the unit must:

   a. Immediately notify their Associate Regional Director for Operations (or equivalent).
   b. Notify the nearest OSHA Area Office (800-321-6742) within 8 hours.

3. Units must also provide notification according to any region or unit-specific policies currently in effect.

E. In addition to the above incident/accident reporting requirements, other accidents also require reporting as follows:

1. **GSA Motor Vehicle Accident Reports.** Operator's Report of Motor Vehicle Accident, Standard Form (SF) - 91, and Statement of Witness, SF-94, (if applicable) will be prepared by the operator/supervisor and forwarded to the appropriate safety office when a GSA motor vehicle is involved in a park accident. The SF-91 and SF-94 Forms are also required if the vehicle is Interior-owned, leased or rented, and involves public injury or damage.

2. **Boat or Vessel Accident Reports.** A Boating Accident Report, U.S. Coast Guard (USCG) Form 3865 will be completed whenever an accident involving a park vessel occurs in U.S. or territorial waters and results in the loss of life, injury causing incapacitation in excess of 72 hours, or property damage in excess of $500. (Reference: 33 CFR Part 173.55 - Report of Casualty or Accident.)

3. **Aircraft Accident Reports.** The OAS Aviation Safety Office will coordinate the investigation of NPS aircraft accidents/incidents with the National Transportation Safety Board. Incidents with potential for causing an aviation mishap will be identified, investigated and documented as appropriate by the OAS Aviation Safety Office. (Reference: 352 DM 6 for additional information.) This does not eliminate the requirement for the bureau to submit a SMIS Accident/Incident Report.

4. **Aviation Mishap Information System (AMIS) Reports.** The AMIS is an electronic data (files) storage based system encompassing all aspects of aviation mishap reporting within the Department. Categories of reports include aircraft mishaps, aviation hazards, aircraft maintenance deficiencies, and airspace intrusions. (Reference 352 DM 1 for additional information.)
F. Identified below are reporting requirements, in addition to those previously described, for wildland fire (including prescribed fire) related accidents/incidents with potential.

1. **Entrapments and shelter deployments.** Entrapments are defined as situations where personnel are unexpectedly caught in a fire behavior. The initial report related, life threatening position where planned escape routes and safety zones are absent, inadequate, or have been compromised. Entrapments may or may not include deployment of a fire shelter for its intended purpose, and they may or may not result in injury. A shelter deployment is defined as any time a shelter is deployed, other than for training purposes, regardless of the circumstances. For any entrapment and/or shelter deployment, telephonic notification to the NPS Fire Management Program Center (208) 387-5200) needs to occur as soon as possible. The initial report of shelter deployments and/or entrapments, in accordance with instructions listed in the National Wildfire Coordinating Group (NWCG) Wildland Fire Entrapment/Fatality Report (NFES form NO. 0869) will be submitted to the National Interagency Fire Center and the NPS Fire Management Program Center within 24 hours.

2. **Incidents with Potential.** Wildland fire-related mishaps or non-fire incidents involving fire personnel that result in serious or non-serious injuries, near-miss/close calls, substantial property loss (less than $250,000), or an incident so complex or fraught with operational discrepancies that it has the potential to produce an accident, injury, or fatality given similar circumstances, must be reported the NPS Fire Management Program Center within 48 hours of the incident.

3. **Wildland Fire Serious Accident.** For any serious accident as defined in section 5.4, that is wildland fire related, telephonic notification to the NPS Fire Management Program Center must occur as soon as possible. The 24-hour Preliminary Report, utilizing the Wildland Fire Entrapment/Fatality Report (NFES form NO. 0869) will be submitted to the National Interagency Fire Center and the NPS Fire Management Program Center within 24 hours.

G. Safety Management Information System (SMIS) Reporting Requirements

1. All NPS accidents and “near-miss” incidents must be entered completely into the Safety Management Information System by the supervisor as soon as possible, and never later than six days after the accident/incident. After the investigation is completed, the SMIS case must be updated to reflect all known facts and corrective actions.
2. All employee injury compensation forms CA-1, (Federal Employee’s Notice of Traumatic Injury and Claim for Continuation of Pay/Compensation), or CA-2, (Notice of Occupational Disease and Claim for Compensation) will be filed electronically by the involved employee or his/her representative and submitted to their immediate supervisor. The supervisor will complete their sections of the form and submit them electronically to the unit Worker’s Compensation coordinator for action and submission to the appropriate Department of Labor claims office.

Accident/Incident Investigation Requirements

A. The Associate Director for Visitor and Resource Protection is responsible for the investigation of all serious accidents, and delegates that authority to the Chief of Risk Management, WASO Risk Management Program Office, who is the NPS Designated Agency Safety and Health Official (DASHO). The NPS DASHO will ensure that serious accidents are fully investigated in accordance with DM 485, Chapter 7.

B. Except for serious accidents, immediate supervisors or other appropriate person (s) will investigate all accidents and incidents that occur under their jurisdiction and file all required reports, including the investigation results into the Safety Management Information System (SMIS).

C. The Superintendent/Center Director/Operating Unit Manager has overall responsibility for ensuring that all non-serious accidents/incidents are adequately investigated.

D. The supervisor is responsible for classifying the accident/incident as “minor”, “recordable” or “serious”, according to the definitions in section 5.4.B, to establish the appropriate level of investigation and review:

1. Minor accident/ incident. The first-line supervisor personally conducts a full investigation of the accident/incident; completes a CA-1 and/or CA-2, if necessary; and provides initial data entry into SMIS. Depending on the potential severity of a minor incident, the supervisor may be required to present the findings from their investigation to an Accident Review Committee (ARC) at the park unit level.

2. Recordable accidents. Accidents/incidents will be investigated as follows:

   a. All reported “near miss” incidents and all accidents that result in first aid or injuries beyond first-aid, but not involving loss of consciousness, lost-days away from work, restricted work activity, will be investigated by the First-line supervisor.
b. Accidents that result in injuries involving loss of consciousness, lost-days away from work, restricted work activity or transfer from the victim’s normal job, will be investigated by that organization’s Division Chief equivalent, or other Division Chief as may be assigned by the unit superintendent.

c. Investigations of all recordable accidents are required to be reviewed and evaluated by the park unit Accident Review Committee or equivalent process and reported to the Superintendent’s office.

3. **Significant Property Damage/Operating Loss Incident.** Accidents that incur property damage but do not involve employee injuries or fatalities are not reportable to OSHA. However, all accidents with property damage of more that $2,500 but less than $250,000 shall also be investigated by that organization’s Division Chief equivalent or other Division Chief as may be assigned by the unit superintendent. The accident report shall be reviewed and evaluated by the park unit Accident Review Committee or equivalent process and reported in to the Superintendent’s office.

4. **Serious accidents.** Serious Accidents will be investigated by a Serious Accident Investigation Team (SAIT) or Trained Investigator (TI) as required by DM 485, Chapter 7 and addressed in section 5.8 of this document. The immediate supervisor remains responsible for entering the accident case into SMIS, even though the accident will be investigated by a SAIT or TI and reviewed at the Park, Regional and National level. Wildland fire(s)-related serious accidents will be conducted in accordance with joint investigative obligations established in the "Interdepartmental Memorandum of Understanding between the USDI and the USDA, October 26, 1995," and the Letter of Direction received 1/29/97 from both Departmental DASHOS.

E. After the accidents classified, the investigation will be conducted by the immediate supervisor, Division Chief, or SAIT/TI.

1. **Purpose:** The purpose of the investigation is to:

   - Identify the factual events leading to the incident,
   - Identify the direct, contributory, and root causes, and
   - Provide recommended corrective actions to prevent recurrence.
2. **Fault-finding**: Per DM 485, Chapter 7, safety and health incident investigations and the Accident Review Committee process as described in Directors Order and RM50B are not to be used to fix blame or find fault for disciplinary purposes. Inquiries for the purpose of disciplinary proceedings shall be conducted separately by another investigatory body. Only physical evidence or physical evidence documentation may be shared, witness statements may not be shared. The differences in purpose shall be clearly explained to the involved employees.

3. **Boards of Survey**: Property damage incident investigations for safety have different and potentially conflicting purposes with Boards of Survey guided under the property management regulations. For this reason, property damage accident investigations will be conducted separately from Boards of Survey, and involve separate investigatory bodies.

4. **Internal Investigations/Criminal Activity**: Any incident investigation will be sensitive to other internal and/or criminal investigations, and will avoid interference and/or conflict at all times. The Superintendent/Center Director/Work Unit Manage, Chief Ranger (or equivalent), and ARD-O will be notified immediately if evidence of criminal activity is discovered relevant to the incident or event.

5. **Investigation Teams**: Depending on the severity and complexity of the incident, lead investigators may need, and are encouraged to utilize, the assistance of other individuals, or a team, with subject matter or professional expertise, including the unit’s Safety Manager/Contact, when conducting investigations.

6. **Timeliness of Investigations**: Investigations into all incidents, no matter their severity, will begin immediately upon line-management knowledge of the event. If there is a person/position indicated as responsible for something in this policy, and that person is not at the unit (e.g. on vacation, travel, etc.), then their acting, or an equivalent person/position, will be appointed by management to assume their responsibilities. Investigations and Accident Review Committee processes should be completed within 14 calendar days of the incident. Exceptions to this timeline must be approved by the Superintendent (or equivalent unit manager).

7. **Documentation**: Supervisors, division chiefs (and accident investigation teams) are encouraged to use the Accident/Incident Investigation worksheet as presented in Appendix B or other similar process to document the findings of their investigations.
8. **Analysis**: The supervisor, or the lead investigator, will determine and implement corrective actions aimed at preventing the incident, or similar incidents, from occurring again. Casual factors leading to the incident will be considered when developing corrective actions.

9. **Written Report**: Results of the investigation and corrective actions are to be shared with line management and reported in SMIS (Appendix A). Reports in SMIS will contain enough detail so that a person unfamiliar with the incident or worksite would be able to understand what happened and how to prevent similar incidents in the future.

10. **Review**: When completed, the investigation report for accidents resulting in recordable injuries (or property damage of $2,500 or more) must be presented to an Accident Review Committee for review and concurrence and then reported to the superintendent’s office.

**F. Additional Guidance for Serious Accidents.**

1. For serious accidents, or other incidents for which outside resources will be utilized, the Superintendent/Center Director/Work Unit Manager will, unless otherwise directed, prepare and forward the 24-hour Preliminary Report to the ARD-O (See Appendix F), and shall be prepared to present that information when the assigned investigator(s) or teams arrive.

2. **Scene Preservation**: Except to isolate on-going hazards, and provide care to injured/ill persons, incident scenes and locations will be kept the way they were at the time of the incident until released by the SAI Team Leader. In the case of incidents that result in, or have the potential for a recordable or serious injury/illness, scenes may need to be preserved for days or weeks. **The need for scene preservation takes precedence over conducting non-essential NPS functions in the incident area.**

**G. Additional Guidance for Wildland Fire Accidents.**

1. For wildland fire-related serious accidents, the NPS will follow the procedures in this Director’s Order, but will assure that the investigation satisfies the terms of the agreement established for such events in the "Interdepartmental Memorandum of Understanding between the USDI and the USDA, October 26, 1995," and the **Letter of Direction** received 1/29/97 from both Departments. These requirements are summarized in the Interagency Standards for Fire and Fire Aviation Operations.

2. **Wildland Fire Entrapments and Shelter Deployments**: All entrapments and deployments will be investigated. The level of investigation required will be determined by the National Fire Director (NFD), and may include a SAIT.
3. **Non-serious wildland fire accidents**: A non-serious wildland fire accident occurring to personnel and/or property that may or may not result in serious injuries or substantial loss/damage of property but given similar environment and a set of circumstances could have resulted in serious injury or fatality or total property loss (example: engine roll-over with minor injuries). Investigations are required and normally conducted at the state/region or local level. However, a national level investigation may be conducted at the discretion of the Fire Management Program Center.

H. **Near-Hit Incidents**

1. Near-hits are incidents that could have injured someone, or done so more severely, but fortunately did not. It is important that we respond to these incidents according to what could have happened if circumstances had been slightly different. Therefore:

   a. Near-hit incidents will be evaluated and classified by the supervisor as to their full potential – minor, recordable injury/illness, significant property damage/operating loss incidents, or a serious accident.
   b. Once classified, near-hits will be investigated accordingly as outlined in this Part.

**Accident/Incident Review Requirements**

A. The Superintendent/Center Director/Operating Unit Manager will convene an Accident Review Committee (ARC) as soon as possible to review the investigation and causal factors of any accidents that have resulted in employee medical treatment beyond first-aid or, as a result of an employee action or NPS condition or activity, property damage of $2,500 or more, but less than $250,000.

B. Other personal injuries, property damage accidents, or incidents with potential of severe outcomes are subject to examination by an Accident Review Committee, based on the potential risk and/or potential of re-occurrence. Appendix B provides additional instructions for conducting Accident Review Committee processes.
C. Procedures: The ARC will:

1. Review and examine the facts discovered by the incident investigation, and identify the root cause(s) of the incident, if this hasn’t been done by the investigation team.
2. Make decisions on what corrective actions the organization will commit to and implement.
3. Evaluate the incident response process itself to determine the quality and adequacy of the unit’s response to the incident. Based on the evaluation, the ARC will identify, recommend, and/or implement opportunities for improvement in the unit’s incident response policies or procedures as needed.
4. The Accident Review Committee does not reinvestigate the incident (e.g. conduct interviews with the involved employee(s), etc.), rather it reviews the results of the investigation, the investigator(s) recommendations, and determines what actions will be taken. If the ARC has questions that have not been answered by the investigation, the investigator(s) will be tasked to get those answers, and will reconvene with the ARC when ready.

D. Convening the Committee: The Superintendent (or equivalent unit manager) is responsible for convening an Accident Review Committee. The Committee will convene as soon as possible after the completion of the incident investigation, but in no case longer than 30 days after the incident.

E. Committee Members: As a minimum, the Committee will include:

- The Chairperson (Superintendent or Division Chief from a Division other than that experiencing the incident/accident);
- The Division Chief of the employee involved in the incident;
- A unit safety committee member or injured employee work peer if no safety committee exists;
- The unit Safety Manager/Contact;
- An employee representative if required by local collective bargaining agreements.

Management is also encouraged to include the employee(s) directly involved in the incident whenever possible.
The Superintendent may designate other members to the Committee when deemed appropriate as additional expertise is required, or to replace core members in such instances where a conflict of interest is perceived.

F. **Committee Chairperson:** The Chairperson will either be the Superintendent (or equivalent unit manager), or will be selected by the Superintendent and vested with the full authority to make decisions on the actions the unit will take as a result of the incident. The Chairperson, or designate, is responsible for:

- Organizing the committee.
- Notifying all participants as to date, time, and place.
- Compiling incident information and making it available to other members.
- Preparing the final written report and submitting it to the Superintendent.

G. **Final Written Report:** The Committee Chairperson, or designate, is responsible for completing the final incident report. The report will include the following:

- A detailed accident/incident description.
- The root cause analysis.
- The corrective action(s), individual(s) designated to implement corrective actions, and target dates to complete actions.
- Supporting materials (e.g. photographs, diagrams, witness statements, etc.)

The final incident report is due within two weeks of convening the Committee, and no later than 30 days from the date of the incident. Exceptions are to be approved by the Superintendent.

The Chairperson will notify the involved employee(s) and line management of Committee decisions within five days of the final recommendations being approved.

The final report will be forwarded to the first-line supervisor, and s/he will update the SMIS report.

H. **Collective Bargaining Agreements:** Where local collective bargaining agreements exist, employees have the right to representation by a union representative during the proceedings of an Accident Review Committee or Serious Accident Investigation (see Weingarten Right below).
WEINGARTEN RIGHT. Under § 7114(a)(2)(B), an employee being examined in an investigation (an investigatory examination or interview) is entitled to union representation if the examination is conducted by a representative of the agency, the employee reasonably believes that the examination may result in disciplinary action, and the employees asks for representation. Such examinations are called Weingarten examinations as a result of a private sector case establishing such a right. Congress specifically referred to the case when it drafted § 7114(a)(2)(B) (a similar provision did not exist under the EO 11491 program).

**Accident/Exposure Recordkeeping Requirements (SMIS)**

Immediate supervisors, with the oversight of the unit’s Safety Officer, will review and record job-related SMIS Accident/Incident Reports, including first-aid cases and “near-misses”, into SMIS within six calendar days following the date appropriate management was notified of the occurrence. The six calendar day requirement is required to meet mandatory federal reporting timelines from the Occupational Safety and Health Administration under authority of Title 29 CFR, Part 1904 and Title 29 CFR, Part 1960.

The Superintendent/Center Director/Operating Unit Manager ensures that, as a minimum, the OSHA 300 Summary is certified by the unit superintendent and posted in each park unit by February 1st of each year, and that the summary must remain posted through the last day of April of that year.

**Serious Accident Investigations**

A. The investigation of all serious accidents, as defined in Section 5.4 of this document, must follow the procedures and guidance presented in Directors Order 50B and Reference Manual 50B. Specifically, per Department of the Interior Departmental Manual 485 (DM 485, Chapter 7), and NPS Director’s Order 50B, serious accidents must be investigated using the Serious Accident Investigation Team (SAIT) and Serious Accident Board of Review (BOR) processes described in this Part. The use of a Trained Investigator (TI) in lieu of a SAIT may be approved by the NPS DASHO after conferring with the ARD-O/NFD.

B. The Associate Director for Visitor and Resource Protection is responsible for the investigation of all serious accidents, and delegates that responsibility to the Chief of Risk Management, WASO Risk Management Program Office, who is the NPS Designated Agency Safety and Health Official (DASHO). The NPS DASHO will ensure that serious accidents are fully investigated in accordance with DM 485, Chapter 7, and this part of DO-50B.

C. The NPS DASHO, National Fire Director, or Regional Designated Safety and Health Official (RDSHO) may also require that Serious Accident Investigations be conducted using the procedures outlined in this chapter when the incident/accident warrants further investigative procedures, or serious tort implications are indicated.
D. Investigation of Specific Types of Accidents:

1. **Aircraft Accidents**: All aviation accidents will be investigated by the Office of Aircraft Services in accordance with 352 DM-6. However, a SMIS accident report still needs to be filed for aircraft accidents.

2. **Wildland Fire-Related Accidents**: For wildland fire-related serious accidents, the NPS will follow the procedures in this Director's Order, but will assure that the investigation satisfies the terms of the agreement established for such events in the "Interdepartmental Memorandum of Understanding between the USDI and the USDA, October 26, 1995," and the Letter of Direction received 1/29/97 from both Departments. These requirements are summarized in the Interagency Standards for Fire and Fire Aviation Operations.

3. **Wildland Fire Entrapments and Shelter Deployments**: All entrapments and deployments will be investigated. The level of investigation required will be determined by the National Fire Director (NFD), and may include a SAIT.

4. **Concession Accidents/Incidents**: Concessionaire employee accidents on Concession-owned and/or controlled facilities will be the responsibility of the concessionaire to investigate and report to OSHA as required by 29 CFR 1904. However, a SAIT/TI may be convened if deemed necessary by the NPS DASHO, Regional Director, or as requested by the affected unit Superintendent.

5. **Regulatory Agency Investigations**: Occasionally, the NPS may be involved in investigations that include other agencies, such as the National Transportation Safety Board, the Occupational Safety and Health Administration, the US Coast Guard, the Chemical Safety Investigation Board, etc. In these instances, the ARD-O/NFD and SAI Team Leader shall confer with the NPS DASHO on team composition, jurisdiction, procedures and timelines.

E. ACTIONS AND NOTIFICATIONS TIMELINE (Calendar days from date of incident)

1. **Immediately**
   i. **Park**
      1. Dispatch initial response personnel to scene- Site manager ensures aid to injured persons and secures scene to prevent further injuries.
      2. Preserve the scene and evidence that may reveal the direct and contributory causes of the event-or take photographs and identify witnesses to the event if the scene cannot be preserved intact.
4. Notify the Shenandoah ICC (540) 999-3422 so that SHEN can make notification to the DOI Emergency Reporting System (877-246-1373) and the NPS DASHO (202)513-7218.

5. Notify the appropriate OSHA Area Office directly by dialing the OSHA hotline (800-321-OSHA [6742]) if there are one or more employee work-related fatalities, or three or more employees hospitalized from the same event. (Note: Caller must have the 5-digit postal zip code closest to the accident scene, the name(s) of the victim(s), and park, region or national office point of contact name and telephone number before calling the OSHA hotline).

6. For Wildland Fire related serious accidents, telephone notification to the NPS Fire Program Management Center (208 387-5200) must occur as soon as possible.

ii. **NPS DASHO**

   1. Contacts the ARD-O or National Fire Director (NFD), depending on type of incident.

   2. Provides Delegation of Authority (template in Appendix D).

iii. **ARD-O or NFD**

   1. Appoint qualified personnel for positions on Serious Accident Investigation Team.

   2. Provide Delegation of Authority to SAI Team Leader (template in Appendix D).

   3. Appoints or identifies a Communications Coordinator; Communications coordinator drafts a Communications Plan (Appendix E) and assists the Superintendent in the release of information on the incident.

   4. Make decisions on any immediate safety hazards or concerns, and/or determine if a safety stand-down is needed.

2. **Within 8 hours:**

   i. **NPS DASHO** notifies NPS Director and DOI DASHO of incident.

   ii. **SAIT** notified, Team Leader communicates with site manager, coordinates activities and provides additional guidance as may be necessary to facilitate the investigation.
3. **Within 24 hours:**

   i. The Superintendent/Center Director/Operating Unit Manager completes and forwards the 24-hour Preliminary Report to the ARD-O or NFD (See template in Appendix F).
   
   ii. ARD-O or NFD review and forward the 24-hour Preliminary Report to the NPS DASHO.
   
   iii. SAIT Lead Investigator and team members begin arriving at park/site; meets with site manager and commences investigation.
   
   iv. NPS DASHO contacts the OSHA Area Office and coordinates SAIT/OSHA investigation procedures where applicable.

4. **Within 48 hours:**

   i. NPS DASHO forwards the 24-hour Preliminary Report as preliminary notice to the DOI DASHO.

5. **Within 72 hours:**

   i. Team Leader completes and distributes the 72-hour Expanded Report (Appendix F) to ARD-O (or NFD for Wildland Fire event), who forward it to NPS DASHO.

6. **Within 45 Days:**

   i. SAIT submits completed Factual Report and Draft Management Report to the convening authority (See template in Appendix F).
   
   ii. The SAI Team Leader may request time extensions for report submissions through the convening authority, ARD-O or NFD. Requests should be made in writing, including the rationale for the extension, and must be submitted at least five days prior to the due date. Final approval for all time extensions will be made by the NPS DASHO.
   
   iii. ARD-O/NFD provides for park unit review of Factual Report for accuracy of facts.

7. **Upon Receipt of Factual Report and draft Management Report:**

   i. BOR convenes (Appendix G) at park or site near incident to deliberate on the SAIT findings and Root Cause analysis, and to finalize the BOR Management Report (Appendix F).
   
   ii. BOR finalizes Communications Plan (Appendix E) to address public distribution of the final report, and develops concise one page NPS “Lessons Learned” abstract for future release.

8. **Within 60 Days:**

   i. BOR Chair forwards BOR Management Report and Communications Plan to regional solicitor and briefs Regional Director.
ii. BOR Chair provides draft Corrective Actions Plan (Appendix F) for review and comment by appropriate personnel at the park, region and national level.

9. Within 75 Days:

i. BOR Chair receives comments on the draft Corrective Action plan and finalizes the plan.
ii. BOR Chair forwards BOR Management Report, Communications Plan, Corrective Action Plan and “Lessons Learned” abstract (Appendix H) to NPS DASHO.
iii. NPS DASHO briefs NPS Director and forwards Management Report and Corrective Action Plan to DOI DASHO.

10. Within 90 Days:

i. Regional Director briefs NPS Director, with emphasis on identifying and correcting any management deficiencies contributing to the accident.
ii. DASHO forwards “Lessons Learned” abstract to DOI for interagency distribution as applicable.
iii. Responsible units and offices, as identified in the corrective actions plan, provide corrective actions update through ARD-O or NFD to NPS DASHO until all actions are completed.

11. Within 120 Days:

i. DASHO issues memo to field with "lessons learned" and appropriate national corrective actions.

12. Within one year:

i. NPS DASHO submits a report to the DOI DASHO summarizing progress and/or completion of action items in the Corrective Action Plan as reported through the ARD-O/NFD.

F. RESPONSIBILITIES

1. NPS DASHO:

i. Delegates responsibilities for the investigation of all serious accidents.
ii. Notifies the NPS Director and DOI DASHO of the event.
iii. Notifies the ARD-O in the region where the incident occurred, or in the event of a wildland fire related incident, the NFD, to set up a Serious Accident Investigation Team (SAIT).
iv. Provides a Delegation of Authority to the ARD-O or NFD.
v. Forwards the 24-hour Preliminary Report and 72-hour Expanded Report to the DOI DASHO.
vi. Briefs the Director and submits BOR Management Report and Corrective Actions to DOI DASHO.
vii. Notifies the Department on the completion of the Corrective Action Plan.

2. The NPS Risk Management Division

i. Coordinates with regional risk managers and ARD-O/NFD to make contact with OSHA area office after initial notification by the park unit through the (800) 321-OSHA hotline.

ii. Maintains a current list of qualified serious accident investigation team members with assistance from the Fire Program Management Center.

iii. Is the designated office of record for all serious accident investigation reports and for tracking corrective actions. After the final management report is submitted to the DASHO, controls accident/incident report information in accordance with Privacy Act and Freedom of Information Act requirements.

3. Associate Regional Director, Operations (ARD-O), or National Fire Director (NFD)

i. Serves as Coordinator for the serious accident investigation (in the event of a wildland fire incident, the NFD will serve as the Coordinator but will maintain close communications with the ARD-O throughout the process).

ii. Appoints SAIT Team Leader and assembles other team members.

iii. Forwards 24-hour and 72-hour report to DASHO.

iv. Appoints a Communications Coordinator who drafts and is responsible for implementing a Communications plan. (Appendix E).

v. Receives the completed SAIT Factual Report and draft Management Report.

vi. Establishes the Board of Review (BOR).

vii. Finalizes and forwards the Management Report and Communication Plan to the Regional Solicitor and then to DASHO.

viii. Tasks the BOR with developing a “Lesson’s Learned” abstract.

ix. Keeps the Regional Director informed on progress.

x. Forwards the Factual Report, Management Report, Communications Plan, Corrective Actions Plan and “Lessons Learned” Abstract to the NPS DASHO.

xi. Tracks all costs associated with the Serious Accident Investigation.

4. Serious Accident Investigation Team (SAIT)

i. Identifies the facts and the sequence of events related to a serious accident.

ii. Members: Members can be from other bureaus, agencies, departments, or from local and state governments. The Team Leader, Chief Investigator, Safety and Health Advisor, and any technical specialists/subject matter experts are signatory on the Factual Report.

   1. Team Leader: Generally is a Regional ARD-O or other NPS senior management official from another region who has attended the DOI/USDA Serious Accident Investigation course. Receives the delegation of authority from the Regional ARD-O/NFD and is responsible for all activities required to accomplish the objectives of the investigation. Signatory on the SAIT reports.
2. Chief Investigator: Must have completed the DOI/USDA Serious Accident Investigation Course. Trainee assignment is desirable. Must have the ability to manage a complex investigation. Responsible for the direct management of all the investigative activities. Signatory on the SAIT reports.

3. Safety and Health Advisor: Must be a safety professional in daily job. Is responsible to the Team Leader for the safety and health issues confronting or affecting the team. Must have attended the DOI/USDA Serious Accident Investigation course or equivalent. Trainee assignment is desirable. Signatory on the SAIT reports.

4. Subject Matter Expert(s): A subject-matter expert who is familiar with the duties, equipment or operations of the individuals involved, or is a SAIT-trained investigator as appropriate. For wildland fire related serious accidents, must be from another agency. Signatory on the SAIT reports.

5. Management Liaison: Selected by the ARD-O (or NFD) and Park Superintendent/Center Director/Operating Unit Manager. Acts as liaison from Work Unit to facilitate SAI Team activities. Not a signatory on the SAIT reports and should be excluded from employee interviews and other team deliberations.

6. Additional Supporting Members as Needed
   a. Technical Specialists (Subject matter experts)
   b. Documentation Specialists
   c. Writer / Editor
   d. Root Cause Analysis Facilitator (can be contractor).

iii. OSHA or other Regulatory Agencies: In consultation with the ARD-O/NFD and DASHO, may be offered the opportunity to participate with the SAIT in conduct of the investigation. Regulatory agencies may choose to do a separate investigation, but all factual information and evidence will be made available when requested. Agencies may also request to conduct confidential employee interviews and this request must be granted. Upon completion of the NPS investigation and report, Agencies (upon request), will be provided appropriate accident investigation information as identified in 29 CFR 1960.29 or other Codes of Federal Regulations.

iv. SAIT Procedures
   1. Upon arrival at the general accident location, and as soon as possible after the event, the Team Leader and Chief Investigator will assemble the team and meet with unit Superintendent (or equivalent unit manager) and staff to begin the SAI. Specific procedures are listed in Appendix F.
   2. The SAIT is responsible to:
      a. Finalize the SAI Factual Report;
      b. Begin Communications Plan;
      c. Begin draft the SAI Management Report;
      d. Provide recommended corrective actions;
3. Forward the Factual Report to the Chair of the Board of Review.

5. BOARD OF REVIEW

i. The purpose of the Board of Review (BOR) is to examine and evaluate the SAIT Factual Report and Root Cause Analysis to validate the direct and indirect cause(s) of the accident as identified by the SAIT, and to identify any management systems that failed to prevent the occurrence of the event, or any behaviors or conditions that continue to present hazards, or corrective actions that are required to prevent accident recurrence.

ii. The BOR is not a disciplinary board. If the findings of the investigation report indicate that employee misconduct or grossly negligent performance were contributory factors in the accident, the BOR can recommend that further investigations per applicable OPM and NPS policy be convened in collaboration with the Human Resources Officer or other appropriate office. The witness statements, Management Report, and Corrective Actions shall not be used for disciplinary investigations.

iii. The BOR is not an investigative group. If additional information or investigation is required, the BOR will ask the SAIT to provide that information.

iv. Specifically, the BOR will:
   1. Finalize the BOR Management Report;
   2. Approve the Communication Plan;
   3. Draft the Corrective Actions Plan after reviewing the recommended corrective actions submitted by the SAIT.
   4. Forward the Corrective Actions Plan to the unit superintendent for development, concurrence and implementation.

v. Members (signatory):

   1. ARD-O (Board Chair) of region experiencing event requiring SAI.
   2. Park Superintendent/site manager.
   3. Designee, NPS Risk Management Division.
   4. SAIT Team Leader.
   5. National program manager for the functional area associated with the incident (if appropriate).
   6. For wildland fire events, an interagency representative from an agency that is a member of the National Wildland Fire Coordinating Group (NWCG).

vi. Additional Supporting Members as Needed:

   1. Regional or work unit Public Information Officer.
   2. Recorder / Staff Support
   3. Ad hoc members– Collective Bargaining Unit Representative, subject matter experts, regional safety manager, etc.
G. ACTIONS FOLLOWING THE BOR (Days from receiving the Management Report)

1. Within 21 working days:
   
i. The NPS DASHO, on behalf of the Director, will transmit the draft Management Report to the Departmental DASHO, or send it back to the BOR Chair to address additional issues identified by the NPS DASHO or the Director.
   
ii. No parts of the Management Report may be removed after it is signed by BOR members, but expanded information may be added by the BOR upon request by the DASHO or the Director.
   
iii. A transmittal memorandum will be prepared by the NPS DASHO and included when s/he sends the draft Management Report to the Departmental DASHO. The transmittal memorandum will include, based on management input, concurrence or non-concurrence for each recommendation in the report. If non-concurring, the memorandum will include an explanation of the decision. The transmittal will also note corrective actions already taken or proposed and recommendations for actions by higher management and/or other agencies.
   
iv. The Departmental DASHO may request bureau heads to review their operations in light of the Management Report findings and recommendations, asking that they ensure appropriate safeguards are in place to prevent similar accidents.
   
2. Within 30 working days:
   
i. Without identifying the specifics of the accident, the NPS DASHO will transmit a Lessons Learned abstract to the Departmental DASHO. The abstract provides a summary of the accident event, discusses direct, contributing, and root causes for the accident, and recommends actions for preventing similar accidents.
   
ii. The Departmental DASHO may distribute the abstract to other Federal, State or local government sources as appropriate.
   
iii. The NPS DASHO will submit the bureau’s final complete serious accident report package to the Departmental DASHO. The report package, will nominally include the:
   1. Factual Report;
   
   2. Management Report;
   
   3. Transmittal of NPS DASHO and Director’s concurrence/nonconcurrence with the Management Report findings;
   
   4. Corrective Action Plan;
   
   5. The Lessons Learned Abstract.
   
iv. The complete report is subject to Departmental DASHO review with possible feedback to the bureau.
3. Every 90 days from the date of the accident:
   i. Responsible units and offices, as identified in the Corrective Actions Plan, will submit a status report through the ARD-O/NFD to the NPS DASHO at least every 90 days until all corrective actions have been implemented.

4. Other Management Actions as requested:
   i. Upon request by OSHA, a formal presentation on the accident will be provided by the requested bureau individual(s) and/or the SAIT, detailing the factual findings of the investigation.
   ii. Upon completion of the investigation, the Director may be requested to personally brief the Secretary to explain the accident and corrective actions put in place to prevent similar accidents.

H. SERIOUS ACCIDENT INVESTIGATION CLOSING

1. When all corrective actions have been implemented, the NPS Director, in conjunction with the NPS DASHO, will notify the Departmental DASHO, the Office of the Solicitor, and others as appropriate.

2. The SAIT will itemize the collection of evidence and all supporting documentation and turn it over to the Chief of the Risk Management Division, as the Office of Record, for retention unless determined otherwise by the Office of the Solicitor.

Appendix A

Park/Work Unit Accident/Incident Investigation and Reporting Process Overview

The following overview of the Accident/Incident Investigation and Reporting process provides a consolidation of OSHA requirements, and Departmental and NPS directives and policies into a narrative/flow chart format that illustrates the events, processes, and responsibilities of people involved in an incident/accident. The narrative and flowchart are generic in nature and may not fully represent individual park requirements.

Once an accident/incident has occurred, a series of actions must take place. The following narrative of this process is designed to provide details to the accident/incident investigation and reporting flow chart on the last page of this appendix. (A# blocks indicate Actions and D# diamonds are Decisions.)

A1- An employee observes an accident/incident (includes occupational injury and illness, motor vehicle accident, government property damage and near-miss incidents).

A2- The involved employee immediately reports the occurrence to their supervisor; and/ or other officials to handle appropriate emergency responses related to the accident/ incident, if needed (motor vehicle accident, fire, personal injury, traffic control, etc.). If the employee is injured, they are required to complete their section of the electronic CA-1 form and submit it to their supervisor.
**A3-** If the accident/incident involves personal injury; the initial responsibility of the supervisor is to ensure that those injured receive prompt emergency medical attention. Other initial response actions that may be required are: 1) adequately control residual hazards resulting from the accident/incident (equipment failure, fires, fall potentials, hazardous materials, etc.); 2) secure the accident scene to the extent possible, to protect people and property from unsafe conditions resulting from the accident; and 3) safeguard the scene to minimize disturbance and facilitate investigation of causal factor evidence.

**A4** – As soon as practicable, injured employees complete the electronic CA-1 or CA-2 forms and the supervisors complete the supervisor section of the electronic CA-1/CA-2 form and other forms as required by the unit’s Worker’s Compensation coordinator and/or the Human Resources Office. Depending on the severity of the accident/incident, initial notification is provided to the next level of supervision, the unit Safety Officer, Division Chief, and/or the Superintendent.

The supervisor is responsible for making the initial entry of data into the SMIS program within 6 days of the occurrence. It is the responsibility of the supervisor to update SMIS as investigation uncovers additional information.

**A4a** - The unit’s Worker’s Compensation coordinator insures electronic CA-1/CA-2 (other) forms are correct and submitted to the Department of Labor Worker Compensation Program Office, and initiates proactive case management procedures to bring employees back to work as soon as possible. The coordinator also provides assistance to the injured employee in obtaining worker’s compensation benefits. The unit Safety Officer may assist the supervisor in initial SMIS entry; and ensures that inputted SMIS data meets the minimum information requirements of the OSHA 300 form within the 6 work-day submission period.

**D1** - The supervisor is responsible for classifying the incident according to criteria below to establish the appropriate level of investigation and formal notification. Assistance from the unit Safety Officer and/or Regional Safety staff may be required to accurately classify the accident/incident.

- Minor accident/incident involves a non-injury or first-aid treatment only with no lost-days from work, and/or property damage of $1000 or less. Notification of next level supervisor and unit Safety Officer is required.
GUIDELINES FOR COMPLETING ACCIDENT INVESTIGATION WORKSHEET

The following document is provided for operating unit level use to establish written procedures for completing the Accident Investigation Worksheet. This document is intended to be a general guideline and operating units are encouraged to make adjustments to fit the particular needs and special requirements that may be unique to their operations.

The Accident Investigation Worksheet is a supervisor’s tool to document the investigation of accidents that have occurred with one of their employees and/or damage to government property. The worksheet has seven sections that include core accident information, root cause analysis and recommendations for corrective actions. Specific attention should be given to provide adequate documentation of the investigation of the accident with expanded narratives, along with accurate coding of injury data.

The worksheet is intended to be used as the preliminary documentation for the supervisor’s and/or Accident Investigation Team presentation to an Accident Review Committee and can be included in the Findings of Facts package. The completed worksheet is required to be reviewed by the next higher level of supervision and/or by the Superintendent.

Additionally, the worksheet can be used for reference when the supervisor provides initial entry of data into the Safety Management Information System (SMIS) and other updates of the original SMIS entry. Each numbered item on the worksheet has a specific purpose for identifying data/information that can be used to transfer data to the Safety Management Information System.

Accident Section

1. **DATE OF ACCIDENT** - Enter date of accident or discovery of occupational illness; use month-day-year format. If the exact date is unknown, estimate with notation (est.) behind the date block.

2. **TIME OF ACCIDENT** - Enter time of accident or discovery of occupational illness; check appropriate AM/PM block. If the exact time is unknown, leave blank.

3. **EXACT LOCATION OF ACCIDENT** - Enter the location of the accident by general area (district) and more specific location within the area/district (use accepted map names and GPS coordinates for backcountry accident sites).

4. **ZIP CODE** - Enter zip code of the accident scene, or the postal zip code assigned to the nearest location close to the accident.

5. **TYPE OF ACCIDENT** - Check the appropriate box.

6. **RESULTS OF ACCIDENT** - Check the appropriate box.
Personal Information Section

7. **NAME and ADDRESS OF INVOLVED PERSON** - Enter name of person who had accident, was injured, or became ill. When more than one person is injured in the same accident or occupational illness, complete separate report forms for each person injured. The ADDRESS is not required for employees. When reporting accidents involving persons other than employees, enter the complete home address of individual.

8. **AGE** - Enter age of person involved. If unknown, give best estimate.

9. **SEX** - Check appropriate box.

10. **SOCIAL SECURITY NUMBER** - Enter number of the involved employee. Ensure compliance with federal privacy requirements. Not required for non-employee.

11. **EMPLOYMENT STATUS** - Check the appropriate box which identifies the person involved in the accident or illness.

12. **JOB TITLE & SERIES** - Enter pay plan and occupational series code (employees only). This is a coding plan which identifies government jobs that is a combination of two letters and four numbers to identify job families and occupations. Include grade/step in the block.

13. **DIVISION** - Enter the appropriate division and branch (and home park if on detail) that the employee was working in when the accident or illness occurred.

14. **TOUR OF DUTY** - Enter the official work schedule of the employee noting the regular work hours and work days. Do not use for non-employees.

Injury/Property Damage Data

15. **SEVERITY OF INJURY** - Insert code numbers from lists (page C-6) for the most appropriate value.

16. **PART OF BODY AFFECTED** - Insert code letters from lists (page C-6) for the specific body part that was injured as a result of the accident.

17. **NATURE OF INJURY** - Insert code letters from lists (page C-6/7) for the specific nature of injury/illness resulting from the accident.

18. **TYPE OF INJURY/ILLNESS** - Insert code numbers from lists (page C-7) for the specific injury/illness resulting from the accident.

19. **ACTIVITY** - Insert code numbers from lists (page C-8) for the specific action or pursuit which best describes the activity the person named in # 6 was engaged in at the time of the accident.
20. **CAUSE** - Insert code numbers from lists (page C-8) for the most appropriate cause of the injury/illness resulting from the accident.

21. **SOURCE** - Insert code numbers from lists (page C-9/10) for the most appropriate source of the injury/illness resulting from the accident.

22. **TYPE OF PROPERTY** - Insert code numbers from lists (page C-10) which describe the property that was damaged.

23. **DESCRIPTION** - Enter appropriate information to identify property involved in the accident. More complete description, including license number(s) of vehicles, serial numbers, etc. can be included in Description of Accident section.

24. **PROPERTY OWNER** - Insert code numbers from lists (page C-10) which describe the owner of the property that was damaged.

25. **CAUSE OF DAMAGE** - Insert code numbers from lists (page C-9/10) that indicates the thing which precipitated the event causing the property damage.

26. **SOURCE OF DAMAGE** - Insert code numbers from lists (page C-9/10) that indicates the thing which inflicted the physical damage.

27. **ESTIMATE COSTS** - Enter the estimated cost of the damage.

28. **DATE WORK STOPPED** - Enter the date that employee stopped work, if classified as a lost-day accident.

29. **DATE RETURNED TO WORK** - Enter the date that employee returned to full-time duty, including restricted (light) duty work.

**Description of Accident (Narrative)**

30. **EVENTS LEADING UP TO AND DESCRIPTION OF ACCIDENT** - Describe in detail the events that lead up to the accident and the specifics of the actual accident. Use the back of form or additional sheet (s) to fully document this section.

**Root Cause Analysis**

Describe in detail the root cause(s) of the incident based on the supervisory investigation. Use the back of form or additional sheet(s) to fully document this section.

31. Insert code numbers from lists (page C-10) for appropriate human factor that contributed to the incident. 1) for primary unsafe act and 2) for secondary unsafe act.

32. Insert code numbers from lists (page C-10) for appropriate environmental factor that precipitated the incident. 1) for primary unsafe condition and 2) for secondary unsafe condition.
33. Insert code numbers from lists (page C-11) for appropriate organizational system factor precipitating the incident.

**Corrective Actions**

34. Provide a detailed description of the action(s) taken or planned to prevent similar accidents in the future. Indicate when actions were or will be taken and by whom. If there are no interim corrective actions, identify under the Final section. Use the back of worksheet or additional sheet(s) to fully document this section.

**Signature Section**

The investigating supervisor is responsible for signing the worksheet as the reporting official. The next level of park unit supervision will review and sign the worksheet as the reviewing management official. The completed form should be routed to the Division Chief for review and notification. The Division Chief should initial the report by the reviewer’s signature and forward to the unit Safety Officer.
ACCIDENT INVESTIGATION WORKSHEET

<table>
<thead>
<tr>
<th>ACCIDENT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. DATE OF ACCIDENT (MM/DD/YYYY) 1/1/2023</td>
</tr>
<tr>
<td>2. TIME OF ACCIDENT 09:00 AM</td>
</tr>
<tr>
<td>3. EXACT LOCATION OF ACCIDENT 123 Main St.</td>
</tr>
<tr>
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<td>5. TYPE OF ACCIDENT</td>
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<tr>
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<tr>
<td>□ Property Damage</td>
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<tr>
<td>□ Fire</td>
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<tr>
<td>□ Injury Only</td>
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<td>6. RESULT OF ACCIDENT</td>
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<td>7. NAME OF INVOLVED PERSON (Last, First, Mi)</td>
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<td>9. SEX M</td>
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<td>□ Perm</td>
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<td>□ Contractor</td>
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<td>16. Nature of Injury</td>
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<td>21. Source</td>
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<td>23. Description</td>
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<tr>
<td>26. Source of Damage</td>
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<tr>
<td>27. Estimate Costs</td>
</tr>
<tr>
<td>28. DATE WORK STOPPED 1/1/2023</td>
</tr>
<tr>
<td>29. DATE RETURNED TO WORK 1/2/2023</td>
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</table>

DESCRIPTION OF ACCIDENT (NARRATIVE)

30. EVENTS LEADING UP TO AND DESCRIPTION OF ACCIDENT Include description of damage and losses. (FACTS ARE IMPORTANT - FAULT FINDING IS NOT)

ROOT CAUSE ANALYSIS

31. Unsafe Acts 1) 2) 32. Unsafe Condition 1) 2) 33. Management Causal Factor
Describe the root cause(s) of the incident.

RECOMMENDED CORRECTIVE ACTIONS

34. What corrective actions should be taken to prevent reoccurrence?
Appendix B

The following document is provided for operating unit level use to establish written procedures for Accident Review Committee activities. This document is intended to be a general guideline and operating units are encouraged to make adjustments to fit the particular needs and special requirements that may be unique to their operations.

Recommended Procedures for Accident Review Committees

An Accident Review Committee (ARC) will be convened for employee accidents/incidents resulting in recordable injuries or government property damage greater than $2,500 but less than $250,000. An Accident Review Committee will also be convened for visitor accidents resulting in death that was directly related to NPS employee actions if a Serious Accident Investigation has not been convened by higher authority. Park Superintendents are encouraged to convene Accident Review Committees for other events or near-miss incidents that have the potential for severe outcomes and/or recurrence.

Purpose

It is the responsibility of the Accident Review Committee to examine and evaluate the incident investigation conducted by the supervisor, Division Chief and/or Investigation Team with the purpose of determining the root cause(s) of the accident/incident, establishing findings of fact, and making recommendations for a corrective action plan. The findings of the Accident Review Committee are submitted to the Operating Unit Manager for review and final approval. The purpose of the evaluation is not to fix blame or find fault, but rather to seek corrective actions to prevent further occurrences.

Convening the Committee

The Operating Unit Manager is responsible for convening an Accident Review Committee for the accidents/incidents listed above. The Committee should convene as soon as possible after the incident, but in no case longer than 30 days after the accident/incident.

Committee Membership

The Operating Unit Manager will make assignments for Committee membership based on the type and severity of the accident/incident, with at least four members as the core Committee - a Division Chief from a division other than the employee involved in the incident, the Division Chief of the employee involved in the incident, a park safety committee member, and the unit Safety Officer. The Operating Unit Manager may designate other members to the Committee when deemed appropriate as additional expertise is required or to replace core members in such instances where a conflict of interest is perceived. The immediate supervisor of, or persons related to the employee involved in the incident should not sit on the Committee.
The employee involved in the incident/accident may have the right to representation during the proceedings of the Accident Review Committee by an attorney or a Union representative, as appropriate. Check with the Human Resources office or Park Administrative Officer for specific information.

**Chairperson**

The Chairperson is responsible for organizing the committee; notifying all participants as to date, time, and place; compiling information and making it available to members; and preparing the Committees findings and submitting them to the Operating Unit Manager. The Division Chief from a division other than the employee involved in the incident of the involved employee should, whenever possible, serve as the Chairperson of the Committee to ensure that management is represented in an unbiased manner.

The Chief Ranger is responsible for assisting the Chairperson in organizing the Committee for government motor vehicle accidents, structural fire incidents and visitor injuries resulting in death.

The unit Safety Officer is responsible for assisting the Chairperson in organizing the Committee for all other accidents/incidents.

**Accident Review Committee Procedures**

The accident/incident evaluation should take place as soon after the incident as possible while memory and evidence of the events are still fresh. It is not intended that the Committee’s findings and recommendations replace the supervisor’s recommendations for corrective action, but rather to validate and supplement them.

General procedures should include:

1. The Committee reviews the supervisor and/or accident investigation team’s investigative report and other documentation; and develops a listing of issues and questions that need resolution.
2. The involved employee describes what happened and answers questions from the Committee.
3. Eyewitnesses, if applicable, describe the incident and answer questions from the Committee.
4. The investigating Ranger, if applicable, provides investigating reports and answers questions from the Committee.
5. The supervisor describes their accident/incident investigation and findings of causal factors; and presents their recommendations of corrective actions.
6. The Committee, apart from the presence of the employee and supervisor, considers all information presented to confirm the chain of events that resulted in the accident, determine the root causes and establish effective corrective actions to prevent reoccurrence.
7. The Chairperson is responsible for completing the final Findings that should include the following: accident/incident summary, root cause analysis, corrective action(s), individual(s) designated to implement corrective actions, and target dates to complete actions.

8. Within two weeks of convening, the Chairperson submits the final Findings and recommended Corrective Actions to the Operating Unit Manager for implementation approval and signature.

9. The Chairperson will provide a Lessons Learned abstract for distribution to affected employees, and will forward one copy to the Regional Risk Manager for regional or national distribution.

The Committee’s findings will be documented using the “ACCIDENT REVIEW COMMITTEE REPORT” form below. This form will be used for all employee incidents not investigated by an SAIT, and/or visitor injuries resulting in death that was directly related to NPS employee actions but not investigated by an SAIT.
# ACCIDENT REVIEW COMMITTEE REPORT

<table>
<thead>
<tr>
<th>Accident Review Board #</th>
<th>Case Incident #</th>
<th>Date of Committee Meeting</th>
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<tbody>
<tr>
<td></td>
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</table>

## Type of Accident
- ○ Lost Time Injury
- ○ Structural Fire
- ○ Govt Motor Vehicle Accident
- ○ Visitor Injury Resulting in Death
- ○ Govt Property Damage > $1,000
- ○ Other

## Committee Members

<table>
<thead>
<tr>
<th>Role</th>
<th>Name:</th>
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<th>Job Title</th>
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<tr>
<td>Div Chf</td>
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<tr>
<td>Safety Officer</td>
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<tr>
<td>Additional Member</td>
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<tr>
<td>Additional Member</td>
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</table>

## Individuals Interviewed

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## Accident Summary

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66
Root Cause Analysis

Corrective Actions
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**Submitted**

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<td>Unit Safety Officer</td>
<td>Date</td>
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**Approval**

<table>
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<th>Date</th>
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Appendix C

OSHA List of Medical Treatments Considered “First-Air Only,” Regardless of Who Approved the Medical Attention

The following list of medical aid constitutes OSHA’s definition of non-recordable “First-Aid Only” treatments. These injuries will not be reflected on the OSHA 300 Log generated by the Park, but accidents that do include injuries requiring the following treatments must be investigated by the First-line supervisor and a complete SMIS Accident Report entry must be made:

- Using nonprescription medication at nonprescription strength
- Tetanus immunizations
- Cleaning, flushing, or soaking surface wounds
- Wound coverings, butterfly bandages, Steri-Strips
- Hot or cold therapy
- Non-rigid means of support
- Temporary immobilization device used to transport accident victims
- Drilling of fingernail or toenail, draining fluid from blister
- Eye patches
- Removing foreign bodies from eye using irrigation or cotton swab
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
- Finger guards
- Massages
- Drinking fluids for relief of heat stress
Appendix D

Delegations of Authority (3 Templates)
Memorandum

To: Associate Regional Director, Operations, ______ Region

From: NPS Designated Agency Safety and Health Official

Subject: Limited Delegation of Authority – Serious Accident Investigations

As the National Park Service Designated Agency Safety and Health Official (DASHO), I am hereby delegating you, or your designated acting, authority for the following.

Upon initial notification of a serious accident, excluding those that are wildland fire related, involving NPS personnel and/or NPS jurisdiction within your region, you will:

1. Immediately appoint and authorize, through a delegation of authority, a qualified Team Leader for the Serious Accident Investigation Team (SAIT). The Team Leader needs to be from outside the region experiencing the accident. This appointment should have the concurrence of the Risk Management Division.
2. Appoint a qualified Chief Investigator and a qualified Safety and Health Official. You may also use any Interagency Representatives deemed necessary to serve as core members of the SAIT.
3. Coordinate with the Park Superintendent from the unit experiencing the accident to identify a Management Liaison for the SAIT.
4. Identify key Technical Specialists that will be required for the investigation and initiate mobilization.
5. Ensure that an account number is authorized for use, the SAIT is promptly mobilized, and that resources and procedures are adequate to meet the team’s needs.
6. Receive the Factual Report from the SAIT.
7. Serve as Chair of the Board of Review (BOR) and fulfill all responsibilities of BOR Chair as identified in RM-50.
8. Prepare and submit a BOR Management Report to this office as identified in RM-50B, Section 5.3.

cc: Chief, Division of Risk Management, WASO
Regional Director [for each ARD-O receiving the delegation]
Memorandum

To: National Fire Director

From: NPS Designated Agency Safety and Health Official

Subject: Limited Delegation of Authority – Serious Accident Investigations

As the National Park Service Designated Agency Safety and Health Official (DASHO) and pursuant to the interagency agreement and policy on the investigation of serious wildland fire related accidents, I am hereby delegating you, or your designated acting, authority for the following.

**NPS Involvement Only**

Upon initial notification of a NPS serious wildland fire related accident where only the NPS is responsible for managing the fire and where the only affected personnel are NPS, you will:

1. Immediately appoint and authorize, through a delegation of authority, a qualified Team Leader for the Serious Accident Investigation Team (SAIT). The Team Leader needs to be from outside the region experiencing the accident. This appointment should have the concurrence of the Chief, Division of Risk Management.
2. Appoint a qualified Chief Investigator, a qualified Accident Investigation Advisor and at least one Interagency Representative to serve as core members of the SAIT.
3. Coordinate with the Associate Regional Director (ARD)-Operations for the region experiencing the accident and the Park Superintendent to identify a Management Liaison for the SAIT.
4. Identify key Technical Specialists that will be required for the investigation and initiate mobilization.
5. Ensure that an account number is authorized for use, the SAIT is promptly mobilized through the interagency coordination system and that resources are adequate to meet the team’s needs.
6. Receive the Factual Report from the SAIT, and deliver the report to the Board of Review Chair (ARD-Operations for the region experiencing the accident), and participate as a member of the Board of Review.
Multiple Agencies Involved

Upon initial notification of a NPS serious wildland fire related accident where multiple agencies are managing the fire, where the affected personnel are from multiple agencies or where the affected personnel are not from the same agency that is managing the fire, you will:

1. Consult with the Fire Directors of the involved agencies and determine whether to conduct a co-lead or a single agency lead investigation. In the instance where the involved agencies or personnel are from the Department of the Interior and the Department of Agriculture, the investigation will always be co-lead.
   a. If it is determined to be a co-lead investigation or if it is determined that the NPS will lead the investigation, immediately appoint and authorize, through a delegation of authority, a qualified Team Leader for the SAIT. The Team Leader needs to be from outside the region experiencing the accident. This appointment should have the concurrence of the NPS Chief, Division of Risk Management and the other involved Fire Director(s).
   b. If it is determined that another agency will lead the investigation, promptly provide concurrence or non-concurrence of the proposed Team Leader and assist with the development of the delegation of authority.
2. Appoint a qualified Chief Investigator, a qualified Safety and Health Official and Interagency Representatives in accordance with interagency decisions made regarding the staffing of the SAIT.
3. Coordinate with the ARD-Operations for the region experiencing the accident and the Park Superintendent to identify a Management Liaison for the SAIT.
4. In consultation with the other involved agencies, identify key Technical Specialists that will be required for the investigation and initiate mobilization.
5. In concert with the other involved agencies ensure that account numbers/cost codes are authorized, the SAIT is promptly mobilized and that resources are adequate to meet the team’s needs.
6. Receive the SAIT Factual Report.
7. Coordinate with the ARD-Operations (for the region experiencing the accident) regarding the Board of Review process in collaboration with other agencies involved.

I will retain all other responsibilities of the bureau DASHO, as outlined in Departmental Manual 485 Chapter 7.

cc: Chief, Division of Risk Management, WASO
    Chief, Division of Fire and Aviation Management, WASO
To: [Team Leader- identify by name and regular job title]

From: Associate Regional Director, Operations, XXX Region or National Fire Management Officer [include signature]

Subject: Delegation of Authority – Serious Accident Investigation

This memorandum formalizes your appointment as Team Leader for the Serious Accident Investigation Team (SAIT) assigned to the accident that occurred [insert park name/location and date]. Your duties include but are not limited to:

1. Organizing, managing and conducting the accident investigation in accordance with Departmental Manual 485 Chapter 7 and National Park Service Reference Manual 50. [When a wildland fire related accident is being investigated also include the Interagency Standards for Fire and Fire Aviation Operations].
2. Providing for in-briefings and out-briefings with affected personnel and agency officials including the Park Superintendent.
3. Coordinating information exchange between team members, local law enforcement, the coroner’s office and other entities involved with investigating the serious accident.
4. Maintaining liaison with the affected park and regional office.
5. Approving requests and allocating funding for resources to assist with the investigation.
6. Requesting technical, logistical or other support as required to conduct the investigation.
7. Providing briefings to myself and others. Initially, briefings will be conducted daily; however, the frequency may be reduced at a later time.
8. Coordinating the scheduling of interviews and other appropriate activities with other line of duty death entities such as critical incident stress management teams, funeral/memorial arrangements, etc.
9. Providing the following formal briefings/reports to me within the identified time frames:
   a. Preliminary Report (24 hours)
   b. Expanded Report (72 hours)
   c. Factual Report (45days)
10. Briefing the Board of Review (BOR) in regards to the investigation and findings
11. Conducting additional investigations and performing additional follow-up actions as requested by the BOR.
Requests for time extensions for report submittals must be made through me. Requests should be made in writing, include the rationale for the extension and be submitted at least five days prior to the due date. Final approval of all time extensions will be made by the NPS DASHO.

The Factual Report will be prepared in accordance with Departmental Manual 485 Chapter 7 and National Park Service Reference Manual 50B Chapter 5. The Report will be delivered to the Board of Review chairperson. Once the Factual Report is accepted by the delegating official, no changes will be made. However, addendums to the report may be necessary as a result of the BOR and any subsequent follow-up investigations, and will be reflected in the BOR Management Report. All reports (other than the Preliminary and Expanded Reports) will be considered draft until they are accepted by the NPS DASHO.

You will be provided a charge code to pay for all travel and associated costs.

cc:  Associate Director, Visitor and Resource Protection (DASHO)  
     Chief, Risk Management, WASO  
     Park Superintendent [where the serious accident occurred]  
     Associate Regional Director, Operations, xxx Region [when the Delegation of Authority is issued by the National Fire Management Officer] National  
     Program Lead(s) for the program area(s) involved in the serious accident
Appendix E

Serious Accident Investigation Team Procedures

a. SAIT Procedures

i. **Upon Arrival:** Upon arrival at the general accident location, and as soon as possible after the event, the Team Leader and Chief Investigator will meet with unit Superintendent (or equivalent unit manager) and staff to:
   1. Present the delegation of authority;
   2. Discuss the investigation process;
   3. Arrange for administrative support and lockable office or meeting space; and,
   4. Secure access to files and transportation.
   5. As soon as possible after the event, Team Leader (or Lead Investigator if necessary) will expedite the collection of causal factor evidence.

ii. **SAIT Briefing:** The unit management team will provide an incident briefing to the SAIT covering all that is known about the incident at that point.

iii. **SAIT Team Meeting:** The SAIT will meet to:
   1. Review RM-50B SAI procedures and timelines, and Just-In-Time SAIT refresher material;
   2. Review case facts as known and identify additional expertise that may be needed;
   3. Establish procedures and assignments;
   4. Develop an action plan including time, resources, and responsibilities.

iv. **Initiate the Investigation**

v. **Review the 24-hour Preliminary Report and draft the 72-Hour Expanded Report**

vi. **Develop Factual Report:** The factual report will be drafted by the SAIT (see template in Appendix G).
   1. The Factual Report, without the root cause analysis, will be signed by all signatory members of the SAIT. If consensus cannot be achieved, the majority will rule with dissenting opinions recorded allowing all members to sign the reports.
   2. Once the final signed Factual Report is submitted to the Chair of the Board of Review by the SAIT Team Leader, the integrity of the Factual Report will be maintained with the facts and findings. Nothing may be removed and changes will not be made unless agreed upon by all those who signed the Factual Report. The Board Chair, NFD, or NPS DASHO can request that the SAIT reconvene to address issues not previously addressed in the Factual Report, or to expand information reported in the Factual Report.
   3. Information that may be considered confidential, such as medical records, autopsy and toxicology results, and other personal information should not be included in the body of the factual report, but will be conveyed to the Chair of the Board of Review as sealed documents or secure electronic format for inclusion in the Management Report.
vii. **Conduct Root Cause Analysis**: Root cause analysis processes, as taught in NPS training classes, will be used to analyze the facts and determine incident causation during serious accident investigations. The root cause analysis should be based on supportable facts revealed during the investigation. Subjectivity should not enter the analysis process. Requests for exceptions to these requirements must be approved by the NPS DASHO, and will be granted only upon exceptional circumstance when another approach would be more appropriate.

viii. **Develop Corrective Action Recommendations**: Corrective actions should be based on the direct, contributory, and root causes identified in the root cause analysis process.

ix. **Develop Management Report**: The Management Report is composed of the:
1. Factual report;
2. Root cause analysis;
3. Accident Causal Factors; and,
4. Recommendations for proposed corrective actions.
5. The Management Report is conveyed in draft form to be completed by the Board of Review.
6. **NOTE**: Often when investigating incidents, the SAIT members obtain information concerning unit operations, procedures, personnel issues, etc. that have no casual relationship to the incident being investigated, but, in the opinion of the SAI team need to be brought to management’s attention. These findings will be provided separately to management by other means, or will be included in the management report in a distinct section that clearly states there is no casual relationship between the information presented and the incident being investigated.

**Other Guidance**

Witness statements and other findings are not to be used as the basis for disciplinary action and are generally considered confidential.

Any accident investigation will be sensitive to internal and/or criminal investigations and will avoid interference and/or conflict at all times. The ARD-O/NFD and NPS DASHO will be notified immediately if evidence of criminal activity is discovered relevant to the accident or event; however, the SAIT will continue investigations until relieved by the ARD-O after discussion with the DASHO.

1. At accident Processing and issues to consider:
   - Secure scene (if not done previously)
   - Become familiar with area
   - Identify hazards, correct and/or secure
   - Document physical evidence
   - Photograph and sketch accident scene
   - Release scene when possible
   - Arrange for critical incident debriefings for involved personnel.
2. Obtain additional information as needed:
   • Compliance w/applicable standards
   • Operating procedures
   • Training records
   • Inspections
   • Maintenance records
   • Building/site plans/schematics
   • How performance is measured
   • How are hazards identified and communicated
   • Recordkeeping/implementation
   • Safety meetings (tailgate, park)
   • Management inconsistencies
   • Accountability mgmt./employee
   • Management priorities
   • Standard Operating Procedures
   • Supervisory effectiveness
   • Work conditions
   • Were there system failures, and where
   • Chain of responsibility
   • Organizational charts/Flow diagrams
   • Safety committee meetings
   • Personnel records
   • Employee orientation
EVIDENCE LOG
(for Non-Photographic Evidence)

Incident Identification: _________________________________

Evidence Custodian: _________________________________

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<th>Date Collected</th>
<th>Name of individual who Collected the Evidence</th>
<th>Name of Person Logging the Evidence</th>
<th>Description of Evidence</th>
<th>Remarks (location found, etc.)</th>
<th>Evidence Identification Number</th>
<th>Sign In (Signature Required)</th>
<th>Date Signed-In</th>
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### Photographic Evidence Documentation Form

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MOUNT PHOTOGRAPH HERE
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Appendix F

Serious Accident Investigation Reports Templates

SAI 24-Hour Preliminary Report,
SAIT 72-Hour Expanded Report,
SAIT Factual Report,
SAI/BOR Management Report,
Corrective Actions Document.

For wildland fire related reports, refer to:
http://www.nps.gov/fire/fire/fir_wil_fatality_investigation.html
Appendix G

Serious Accident Board of Review Procedures

1. Visit site (where practical).
2. BOR Briefing: The SAIT Team Leader will give a briefing on the SAIT process, the Factual Report, and draft Management Report, then clarify any questions.
3. Factual Report: The final signed Factual Report is submitted to the BOR by the SAIT Team Leader. The integrity of the Factual Report will be maintained with the facts and findings. Nothing may be removed and changes will not be made unless agreed upon by all those who signed the Factual Report. If the BOR disagrees with, or seeks to clarify any portion of the Factual Report, that issue will be addressed in the Management Report. If additional investigation is required to complete the BOR tasks, the SAIT may be asked to conduct this investigatory work by the BOR Chair.
4. Root Cause Analysis: Review the root cause analysis conducted by the SAIT. If not done, conduct a root cause analysis based on the facts ascertained by the SAIT investigation. Root cause analysis processes, as taught in NPS training classes, will be used to analyze the facts and determine incident causation during serious accident investigations. The root cause analysis should be based on supportable facts revealed during the investigation. Subjectivity should not enter the analysis process. Requests for exceptions to this requirement must be approved by the NPS DASHO, and will be granted only when another approach would be more appropriate.
5. Finalize Corrective Actions: Review the corrective actions recommended by the SAIT, or developed by the BOR root cause analysis, and finalize the recommendations.
6. Regional Solicitor Review: In cases of employee fatality, or as deemed necessary by the ARD-O or NPS DASHO, a draft Management Report will be submitted to the Regional Solicitor for review.
7. Finalize BOR Management Report (Appendix F): The Management Report will be signed by all signatory members of the BOR. If consensus cannot be achieved, the majority will rule with dissenting opinions recorded allowing all members to sign the reports. All Reports are considered “draft” until they are accepted by the NPS DASHO. The Management Report includes the Factual Report as an appendix.
8. Develop Communication Plan: Require the creation of a Communications Plan meeting the complexity of the incident. Criteria that might indicate the need for a more complex Communications Plan include: controversial findings, an unusual finding, extreme media interest, NPS relationship with the family, political interest or internal/external confusion over incident.
9. Develop Lessons Learned Abstract: Create a concise NPS Lessons Learned abstract to be included in the serious accident investigation report package sent to the NPS DASHO.
10. Brief the Regional Director and Submit Management Report to NPS DASHO: The BOR Chair briefs the Regional Director and submits the Management Report to NPS DASHO. The SAIT or BOR may be requested by the NPS Director to make oral presentations to Departmental management on the opinions and recommendations included in the management report.

11. Evaluate SAIT and BOR Process: Evaluate the SAIT and BOR process itself to determine the quality and adequacy of the NPS’s response to the accident. Based on the evaluation, the BOR will identify, recommend, and/or implement opportunities for improvement in the NPS’s Serious Accident Investigation policies or procedures as needed. Any recommendations concerning the SAIT and BOR processes will be made separately to the NPS DASHO and not included in the management report.
Appendix H

Line of Duty Death Protocols

(insert document)
References


Requirements

1. All operating units will establish and maintain formal and informal processes for employees or their representatives to report unsafe and unhealthful conditions and work practices in the workplace. They must request an inspection of the condition(s) and/or actions(s).

2. The formal process will be in writing and will provide employees or their representatives the opportunity to remain anonymous and still be informed of the resolution of their concerns. It will also include provisions on how employees or their representatives may appeal to higher authorities, including the National Park Service DASHO and the Secretary of Labor. Employees have the right to report allegations of reprisal directly to OSHA.

Written procedures should include the following information:

- Name of employee submitting report (employee is not required to provide name).
- Date and time report is submitted.
- Date and time report is received.
- Name of Supervisor.
- Description of unsafe/unhealthful condition or work practice.
- Classification of the hazard believed to be caused by condition (imminent, serious or other hazard).
- Location (specific).
- Date condition is investigated.
- Name of supervisor investigating condition.
- Supervisor’s classification of hazard created by conditions.
- Abatement date assigned.
- Date of abatement.
- Requirements for written responses to the employee, which should include action taken, date and safety and health standards involved.
3. The informal process will be one that encourages employees to verbally report unsafe and unhealthful conditions/work practices to their supervisors. It will also encourage supervisors to act promptly and appropriately on employees’ reports.

4. In the case of imminent danger conditions, employees or their representatives will be able to make reports by the most expeditious means available and follow up with written reports.

5. A log of reports of unsafe or unhealthful conditions/work practices will be maintained by the appropriate safety office or operating unit. The conditions will be tracked until resolved.

   As a minimum, the log should consist of:

   - Date.
   - Time.
   - File number.
   - Location of condition.
   - Brief description.
   - Classification.
   - Date and nature of action.

6. Reports of imminent danger conditions, as defined by OSHA in 29 CFR 1903.13 ("imminent danger"), will be investigated immediately. Potentially serious conditions will be investigated within three working days, and other hazardous conditions will be investigated within 20 working days.

7. Employees or their representatives who submit reports shall be notified in writing by the official in charge of the operating unit within 15 calendar days if the official does not plan to make an investigation.

8. A copy of the operating unit’s notice of inspection (made as a result of an employee’s formal report of an unsafe or unhealthful condition) will be provided to the employee or his/her representative. Copies will be issued within 15 calendar days after completion of a safety-concern investigation and within 30 calendar days after a health concern investigation. If additional time is required, the employee or representative will be notified of the expected due date.

9. There should be prompt abatement of unsafe and unhealthful conditions/work practices.
Requirements for Handling Employee Allegations of Reprisal Reports

1. Employee allegations of reprisal related to participation in the program will be handled through the departmental administrative grievance procedures (370 DM 771, 3) or the appropriate bargaining agreement. Technical assistance from the appropriate Risk Management Office will be provided as needed. The specific procedures will be documented by the National Park Service and provided to its employees.

2. Copies of investigation findings will be provided to the Program Manager, NPS Risk Management Program Office. A copy will also be provided to the Secretary of Labor upon request.
References


Requirements

Each operating unit shall establish an employee council or similar body to participate in the development, promotion and implementation of occupational safety and health programs. These groups will also serve the site manager in an advisory capacity regarding occupational safety and health issues. Groups shall comprise both management and non-management employees, and shall be primarily driven by constituent employees representing at-risk workgroups.

Procedures

1. The council’s/committee’s scope of responsibility will be established in a role and function statement and approved by management.

2. Meeting minutes, recommendations and management responses will be in writing, retained for at least two years, and be readily available for examination by employees, supervisors and managers.

3. Members should receive appropriate training within six months of their appointment to the committee to acquire knowledge of policy, regulations, standards, rules and procedures necessary to carry out their duties.

4. Council/committee shall comprise no fewer than three members, but should equally represent management and non-management.

5. Membership shall revolve among the park employees, so that only half the membership will change at any one time. This is to ensure experience and continuity. Membership should be a two-year assignment.

6. Regular meeting dates shall be established with advance notice of meetings furnished to employees. Each meeting should be conducted according to a prepared agenda.

7. Committee members should be allowed sufficient work-time release to participate in safety committee activities, including site inspections, training and meetings.
Introduction

The level and quality of safety services required to provide employees a safe work environment at small- to medium-sized operating units are just the same as they are for the employees at larger operating units. The knowledge and skills necessary to manage a comprehensive safety program that complies with the ever-increasing complexities and sophistication of OSHA regulations, other legal requirements and societal expectations dictate that the NPS provide professional-level safety services to all employees.

Currently less than 10 percent of park units have immediate access to a full-time safety professional, while the vast majority of parks generally assign safety program responsibilities to a single individual as a collateral-duty. The regular positions of the Collateral-Duty Safety Officers cover a wide variety of job classifications, such as maintenance worker, LE patrol ranger or administrative office worker. They typically have limited experience or educational background in the occupational safety and health field.

Purpose

To specify the minimum Occupational Safety and Health Program requirements for establishing appropriate staffing levels for full-time professional and collateral-duty safety and health positions within the National Park Service. To develop and administer a formal professional development plan for full-time safety and health professionals.

References


Definitions

Safety Manager

Professional Safety Managers engage in the prevention of accidents, incidents and events that harm people, property or the environment. They use qualitative and quantitative analysis of simple and complex products, systems, operations and activities to identify hazards. They evaluate the hazards to identify what events can occur and the likelihood of occurrence, severity of results, risk (a combination of probability and severity) and cost. They identify what controls are appropriate and their cost and effectiveness. Professional Safety Managers make recommendations to senior
managers, supervisors, employers and others. Controls may involve administrative controls (such as plans, policies, procedures, training, etc.) and engineering controls (such as safety features and systems, fail-safe features, barriers and other forms of protection). Safety professionals may manage and implement controls.

Besides knowledge of a wide range of hazards, controls and safety assessment methods, safety professionals must have knowledge of physical, chemical, biological and behavioral sciences, mathematics, business, training and educational techniques, engineering concepts, and particular kinds of operations (construction, manufacturing, transportation, etc.).

**Industrial Hygienist**

An Industrial Hygienist provides professional and scientific work in occupational health matters. This includes the identification and evaluation of conditions affecting the health and efficiency of employees or the citizens of the adjacent community, the formulation and recommendation of measures to eliminate or control occupational health hazards, and the promotion of occupational health programs for instructing and motivating managers and employees in the prevention and correction of potential health hazards.

Industrial hygiene is concerned with the recognition, evaluation, and control of those environmental conditions or stresses arising in or from the workplace, which may cause sickness, impaired health, significant discomfort or inefficiency. Industrial hygiene brings together a variety of scientific disciplines to prevent, eliminate or reduce chemical, physical and biological risks to the well being of employees. Generally, these disciplines are physiology, chemistry, physics, engineering, medicine and biochemistry.

**Requirements**

1. **Service-Wide Program** – The NPS DASHO appoints and supervises the NPS Risk Management Program Manager who meets, as a minimum, the OPM qualifications for the GM-018/690/803 series. The NPS DASHO ensures that the Risk Management Program Manager is supported by sufficient qualified professional, technical and clerical staff in such fields as industrial hygiene, occupational health, occupational medicine, public safety, administration, inspection and investigation, to properly discharge of those duties outlined in 29 CFR Part 1960, Part 485 of the Departmental Manual, and Director's Order 50B.

   a. The NPS Risk Management Program Manager serves as a professional advisor and consultant to assist the NPS DASHO and other senior level managers (including the NLC) in their leadership responsibilities by developing long-term strategic plans, service-wide policy and effective safety management systems to continuously improve NPS safety performance.

   b. The NPS Safety and Health Manager, or his qualified desig-née, will serve as the subject matter expert to review all applicants for full-time professional
safety and health position vacancies within NPS. The NPS Safety and Health Manager should provide management with advice and guidance on selection criteria for collateral-duty safety and health positions at the operating unit level.

2. **Regional Programs** – Each Regional Director appoints a professional Safety Manager who meets, as a minimum, the OPM qualifications for the GM-018/690/803 series. The Regional Safety Manager provides technical support, assistance and advice to the Regional Directorates, and Site Managers, reflecting modern safety management practices, trends and philosophies.

3. **Denver Service Center (DSC)** – Because of the scope, scale, complexity and exposure of the DSC operations, a full-time professional Safety and Health Engineer and/or a professional safety manager who meets, as a minimum, the OPM qualifications for the GM-018/803 series should be appointed by the DSC Director.

4. **Operating Unit Programs** – All NPS operating units should be staffed with full-time professional safety specialists or technicians, or industrial hygienists meeting the minimum OPM qualifications for the GM-018-019-690 where the complexity, scope, scale and exposure to employees have been found to warrant such assignment.

   One of the primary considerations for establishing a full-time safety position is based on the safety services necessary for a minimum of 250-300 employees (combined totals of permanent and temporary plus a percentage factor of volunteers) at an individual operating unit.

   a. Medium- to smaller-sized operating units that are in close proximity to each other should consider establishing a shared full-time safety position that would provide professional support and assistance to mini-clusters of four to eight parks that cumulatively have 250 or more employees. The shared safety positions would “circuit-ride” to the other mini-cluster parks and coordinate the activities of individual collateral-duty safety officers.

   b. In all other cases, the operating unit should have a minimum of one Collateral-Duty Safety Officer appointed, trained and empowered to act in that capacity, at all times. Given the depth and sophistication of federal safety and health regulations today, an allocation of a minimum of 20 percent of the Collateral-Duty Safety Officer’s time must be dedicated to this function. Management should allow adequate time and provide sufficient staff support (clerical, technical, etc.) to ensure the proper discharge of those duties outlined in Appendix A of this section. This collateral-duty should be reflected in the employee’s position description as well as his or her performance standards.
The Collateral-Duty Safety Officer will be adequately equipped and competent to recognize and evaluate hazards of the working environment and to suggest general abatement procedures. Competent, in this case, is defined as possessing the skills, knowledge, experience and judgment to perform assigned tasks or activities satisfactorily as determined by the organization. Experience and/or up-to-date training in occupational safety and health hazard recognition and evaluation should be considered in meeting this requirement.

Within six months of appointment, the Collateral-Duty Safety Officers will be provided training that includes: The Departmental and bureau safety and health program; section 19 of the OSHA Act; Executive Order 12196; 29 CFR 1960; procedures for reporting, evaluation and abatement of hazards; procedures for reporting and investigating allegations of reprisal; the recognition of hazardous conditions and environments; identification and use of occupational safety and health standards; and other appropriate rules and regulations.

Collateral-Duty Safety Officers will also be trained through courses in the basic elements of organizing, planning and managing an effective safety and health program. An exception is when the Collateral-Duty Safety Officer has had the required training/experience within the previous three years.

Professional Development

1. The NPS has established a professional development program to identify specific/special knowledge, skills and abilities required for safety and health positions as addressed in the NPS essential competencies for risk management.

2. Each operating unit that has a full-time safety professional will:
   a. Provide the resources necessary to equip the safety and health professionals with the training needed to fulfill their responsibilities.
   b. Prepare and maintain employee development plans for safety and health professionals and maintain records of their training.
   c. Encourage its safety and health professionals to obtain certification in a professional organization(s) and to participate in local field Federal Safety Council activities.
Appendix A

POSITION DESCRIPTION ATTACHMENT: Collateral-Duty Safety Officer

Serves as the point-of-contact for occupational safety and health issues and other matters relating to employee safety and health programs for the Superintendent and line management of the operating unit. A minimum of 20 percent of regular work time will be devoted to performing collateral-duty safety duties. Provides assistance and advice to the Superintendent and supervisors in meeting management responsibilities of compliance to Director’s Orders #50A and 50B, and achieving all GPRA goals associated with occupational safety and health and visitor safety.

Works closely with regional Risk Managers and/or Occupational Safety and Health Managers to obtain professional advice and consultation on program implementation and evaluation. Provides Operating Unit Manager with recommendations for specialized services of occupational safety and health professionals, such as Industrial Hygienists, Safety Engineers, etc., when the site needs technical information and support.

Provides assistance to line managers and supervisors in establishing and implementing primary compliance programs contained in the park’s written Safety and Health Program, such as; Hazard Analysis (JHA), Worksite Inspections, Accident investigation, Hazardous Communications, Motor Vehicle Operations, Employee Emergency Action Plans, Fire Prevention, Personal Protective Equipment, Ergonomics and Office Safety, etc. Provides line management with resources to implement more specialized programs, such as; Hearing Conservation, Respiratory Protection, Lock-out Tag-out, Fall Protection, etc.

Assists supervisors and line management in conducting self-analyses of worksite safety. Leads in-park team in conducting annual evaluations of occupational safety and health programs.

Assists line management in the identification of appropriate training, including training on: managing employee safety and health; OSHA Standards relating to facilities/working environments and inspections of those environments; preparation and use of job hazard analyses; and, unsafe work practices in the workplace. Assists supervisors in conducting investigations of all employee occupational safety/health accidents/incidents. Participates in the Accident Review Committee process for those incident/accidents to identify roots causes and effective corrective actions.

Coordinates the implementation of the Safety Management Information System (SMIS) for the operating unit and accurately enters into SMIS all employee incident/accident data. Advises the site manager of all lost time employee accidents/incidents and maintains an OSHA 300 Log, or equivalent, for the unit.
Works collaboratively with Human Resources/Personnel Office to assist and promote effective management of OWCP cases and implementation of the Medical Surveillance Program.

Provides operating unit manager with data and reports on overall site occupational safety and health program progress, including annual program evaluation.
References


2. 370 Departmental Manual (DM), Part 451, 1.4J.

Requirements for Service-Wide Employee Safety and Health Achievement Award Program

1. Director’s Safety and Health Achievement Award: Presented annually by the Director, this award is the highest level Employee Safety Achievement Award granted. The recipient will be chosen from nominees submitted to the Risk Management Program Office by the Regional Safety Managers using the following criteria.

   a. Criteria established to provide standards for recognition of outstanding safety and health performance by NPS employees are:

      • Achieved outstanding employee safety and health work conditions or performance through improved practices and attitudes (Best Practices).

      • Reduced employee accidents, injuries and fatalities.

      • Encouraged employee-driven actions in the recognition and control of hazards in the workplace.

      • Increased managerial and employee commitment toward accident prevention.

      • Advocated occupational safety and health leadership.

   b. Eligibility: All National Park Service employees (including volunteers) are eligible regardless of assignment, grade level or time in service.

   c. Nomination and Selection Procedures: Nominations are submitted by each Regional Safety Manager to the Risk Management Program Office by January 10 of each year. A WASO Safety Committee should receive, review and select a recipient each year by January 31.
d. Forms of Recognition:

- Letters of Commendation for all nominees.
- Recognition at a suitable location.
- Selected employee (team of employees) will receive the Director’s Employee Safety and Health Achievement Award Plaque and a monetary award of $1,000. The WASO Risk Management Program Office will provide the $1,000 monetary award and funding for the plaque.

Requirements for Service-Wide Public Safety Achievement Award Program

**Andrew Clark Hecht Memorial Public Safety Achievement Award:** This award is presented annually by the Director. It is the highest award bestowed by the NPS for outstanding public safety achievement. The recipient will be chosen from nominations submitted to the Risk Management Program Office by the Regional Safety Managers.

a. **Criteria** established to provide standards for recognition of outstanding public (visitor) safety and health contributions are as follows:

- Prevention of accidents that may cause serious injuries or fatalities.
- Innovative work and achievement of an employee, non-employee or group to enhance public (visitor) safety awareness.
- Promotion of visitor recognition of recreational activity hazards.
- Development of visitor risk-reduction methods and managerial action to lessen human and material resource loss.
- Advocacy in identification and control of environmental hazards that endanger safe and enjoyable visitor experiences.

b. **Eligibility:** All National Park Service employees, regardless of assignment, grade level or time-in-service, and any non-employee and/or group are eligible for this award.

c. **Nomination and Selection Procedures:** Nominations are submitted by Regional Safety Managers to the Risk Management Program Office by January 10 of each year. A WASO Safety Committee should receive, review and select a recipient for the award each year by January 31.
d. Forms of Recognition:

- Letters of Commendation for all nominees.
- Recognition at a suitable location.
- Selected individual/group will receive the Andrew Clark Hecht Memorial Public Safety Achievement Award Plaque and a monetary award of $1,000. The Hecht Foundation, Denver, Colorado, will provide $1,000 for the monetary award and funding for the plaque.

Park and Regional Employee and Public Safety Achievement Awards Programs — Suggestions and Recommendations

The National Safety Achievement Award Program does not preclude, but encourages, the development of park and regional Safety Awards Programs. It is helpful if parks and regions develop and implement similar programs to the National Program, so that park and regional safety award program recipients may be nominated for the National Safety Achievement Award Programs.

1. Park/Operating Unit Employee Safety and Health Achievement Award: This award is given no less than annually by the Superintendent/Operating Unit Manager. Nominations may be submitted by any employee or volunteer, and all park employees (including volunteers) are eligible nominees. The recipient will be chosen from nominations submitted to the Operating Unit Safety Committee or Safety Manager. The award selection should be submitted to the Regional Safety Manager by November 30 for consideration for the Regional Director’s Employee Safety Achievement Award:

   Suggested forms of recognition:

   - Letter of commendation from the Superintendent.
   - Recognition at a suitable location.
   - Employee Safety Achievement Award Certificate.
   - Time-Off Award or other form of recognition such as safety award button/pens, park newspaper recognition, etc.

2. Regional Director’s Employee Safety and Health Achievement Award: This is the highest-level award presented for employee safety achievement in the Region and is awarded no less than annually. All regional employees (including volunteers) are eligible, and the recipient should be chosen from nominations submitted to the Regional Safety Committee or Regional Safety Manager.
The Regional Employee Award selection should be made by December 1, and should be forwarded to the Risk Management Program Office by January 10 of each year for consideration for the Service-wide Director's Employee Safety Achievement Award.

Suggested forms of recognition:

- Letter of commendation from the Regional Director.
- Recognition at a suitable location.
- Regional Director's Safety Achievement Award Certificate.
- $500 monetary award.

3. **Regional Director’s Public Safety Achievement Award**: This is the highest level of award for outstanding public safety achievement presented in the Region. It is awarded annually by the Regional Director from nominations submitted to the Regional Safety Committee or Regional Safety Manager. All regional employees, volunteers, groups or non-employees are eligible nominees for this award. The Regional selection should be made by December 1, and should be forwarded to the Risk Management Program Office by January 10 for consideration for the Service-wide Andrew Clark Hecht Memorial Public Safety Achievement Award.

- Suggested forms of recognition:
  - Letter of commendation from the Regional Director.
  - Recognition at a suitable location.
  - A plaque presented by the Regional Director or designee.
  - $500 monetary award.

4. **Safety Champions Award Program**: This program is recommended for consideration by regions and operating units as one option to recognize employees and others for public and employee safety achievement. It is a Department of Interior (DOI) Award Program Initiative, designed to recognize individuals specifically outside the safety and health community. These individuals show innovative work and accomplishments that support and encourage zero loss to human and material resources, and cultivate a favorable safety and health culture. All park or regional employees, volunteers and others are eligible. Park/regional safety managers and committees should establish general procedures for this award.
Suggested forms of recognition:

- Letter of Commendation from Superintendent/Regional Director.

- Certificate of Appreciation or plaque from Superintendent/Regional Director.

- Recognition at a suitable location.

- Other forms of recognition as deemed appropriate by the park or region, including Time-Off Award, sending the recipient to the DOI Safety and Health Seminar, published news articles, etc.