



DEPARTMENT OF VETERANS AFFAIRS
ASSISTANT SECRETARY FOR HUMAN RESOURCES AND ADMINISTRATION
WASHINGTON DC 20420

SEP 16 1997

Mr. John E. Plummer
Director, Office of Federal Agency Programs
200 Constitution Avenue, NW
Room N 3112
Washington, DC 20210

Dear Mr. Plummer:

Enclosed is the Annual Occupational Safety and Health Program Report for Fiscal Year 1996 for the Department of Veterans Affairs (VA) as required by 29 Code of Federal Regulations (CFR) 1960.74. Through the cooperative efforts of our respective organizations, I hope to see further accomplishments within VA in the area of employee safety and health.

If your staff has any questions concerning this report or the VA Occupational Safety and Health program, they may contact Mr. Gary R. Mills, Director, Occupational Safety and Health, on 273-9742.

Sincerely yours,


Eugene A. Brickhouse
Designated Agency Safety
and Health Official

Enclosure

ANNUAL OCCUPATIONAL SAFETY AND HEALTH REPORT

OF THE

DEPARTMENT OF VETERANS AFFAIRS

Reporting Period: Fiscal Year 1996



A handwritten signature in black ink, appearing to read "Eugene A. Brickhouse", written over a horizontal line.

SIGNATURE

**EUGENE A. BRICKHOUSE
ASSISTANT SECRETARY FOR HUMAN RESOURCES AND
ADMINISTRATION/DESIGNATED AGENCY SAFETY AND
HEALTH OFFICIAL (006/00S)**

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ANNUAL OCCUPATIONAL SAFETY AND HEALTH REPORT

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I. BACKGROUND

The Department of Veterans Affairs (VA) facilities are located in all 50 states, as well as Puerto Rico and the Philippines. About 92.5 percent of all VA employees work in direct healthcare or healthcare-related areas.

II. PROGRAM PERFORMANCE

A. Injury/Illness Experience.

OWCP costs in VA continued to decline in chargeback year 1996, due to improved claims management. The number of new claims (11,878) initiated in FY 1996 has decreased since FY 1995 when the number of new claims was 13,091 (see Attachment A); however, direct comparison of the lost time claims rates is not feasible because VA initiated a new recordkeeping system for OWCP claims.

The recordkeeping system, VA's WC/Safety Tracker (previously called the Office of Workers' Compensation Programs/Occupational Safety and Health Management Information System [OWCP/OSH MIS]), permits removing the denied claims from the final count before the rate is calculated. The previous system did not permit the removal of denied cases. Many detailed reports about specific causes of injuries and the costs for each organizational unit within VA were available for the first time in FY 1996. For instance, a detailed report on "Slips, Trips, and Falls" was provided to the Veterans Health Administration (VHA) to assist them in planning a prevention program.

B. Significant Accomplishments.

1. Workplace Conditions.

The following three DASHO Letters were published during FY 1996 to communicate information to VA field facilities and VA program managers.

00S1-96-1: "FY 1995 Compliance with Occupational Safety and Health Standards." This letter identified the most common occupational safety and health standards cited as part of OSHA inspections of VA facilities. The ten most common standards cited were: 1) Hazard Communication, 2) General Electrical, 3) Electrical Wiring, 4) Mechanical Power Transmission, 5) Bloodborne Pathogens, 6) Lock-out/Tagout, 7) Woodworking Machinery, 8) Machine Guarding, 9) Flammable/Combustibles, and 10) Passageway Clearance.

00S1-96-2: "Indicators and Sentinel Events Concerning Occupational Safety and Health (OSH) Programs." This letter identified 1) Outcome indicators which were developed by Federal Agency OSH personnel, 2) Outcome indicators developed by VA OSH personnel, and 3) Sentinel events developed by VA OSH personnel. These lists of indicators and sentinel events should serve as the basis for evaluating OSH program effectiveness.

00S1-96-3: "Reporting of Needle Stick Incidents." This letter clarified the management and regulatory reporting requirements of needle stick incidents. Reporting requirements are referenced from the OWCP, OSHA, Food and Drug Administration (FDA), and VA policy manuals.

VHA prepared and distributed the following "Guidebooks" during FY 1996: 1) General Safety, 2) Fire Safety, and 3) Industrial Hygiene. The guidebooks are used by the safety staff at the medical centers.

2. Safety Awareness and Hazard Recognition Information, and Training.

VA's National OSH Training Committee completed and distributed to all VHA facilities, the following training manuals in FY 1996:

- a. New Employee Orientation,
- b. Top Management Safety Training,
- c. Control of Hazardous Energy (Lockout/Tagout),
- d. Confined Spaces,
- e. Asbestos Awareness,
- f. Basic Safety for Supervisors,
- g. Advanced Safety Training for Supervisors, and
- h. Basic Safety for Union Safety Representatives.

The manuals contain all the training materials needed (including video tapes, instructor's guides, handouts, and evaluation materials) to provide safety and health training for employees. After each training manual was distributed to the field, the committee that developed the materials held a nationwide conference call to introduce the manual to field personnel and to provide an opportunity for the committee to answer questions about the training materials.

The training presented, using these training packages, has already had substantial impact on the percent of employees trained. For instance, prior to the distribution of the training packages, only 6.8 percent of the facilities had provided OSH training to top management officials. Since the training packages have been distributed, over 65 percent of the facilities have provided the training. Complete details of the impact of the training are in the memorandum which is Attachment B.

Annual OSH goals were established by the DASHO (see Section III, PROGRAM PLANNING of this report for details). One of the DASHO's OSH Goals for FY 1996 was that VA Medical Center Directors, Associate Directors, and Chiefs of Staff complete the "Basic Safety Training for Top Management Officials" (which is part of the VA's National OSH Training Program).

Another DASHO OSH goal involving training was that all Motor Vehicle Operators complete motor vehicle safety training within three years.

A major, multi-disciplinary OSH training conference was held in September 1996, in New Orleans, Louisiana. Participants included safety and health professionals, OWCP specialists, infection control specialists, and employee health practitioners. The conference was attended by over 600 VA employees.

3. Program Effectiveness.

A number of VA facilities met the DASHO's goals for FY 1996 (details in Section II), including approximately 34 percent of VHA's Medical Centers, 43 percent of Veterans Benefits Administration (VBA) Regional Offices, and 54 percent of National Cemetery System (NCS) Cemeteries.

4. Recognition and Accountability.

Letters of congratulations and embossed certificates were given facilities that met the DASHO's goals. (See Attachment C.)

Establishing accountability and performance standards of VHA Veterans Integrated System Network (VISN) Directors was the focus of a task group within VA. The task group developed a multi-factor index which would quantitatively rate VISN Directors' OSH performance.

5. Employee Participation.

The training manuals produced by the VA National OSH Training Committee were developed with input from employee-staffed sub-committees for each manual. Their input ensured that the materials were acceptable and understandable to the employees who would be trained. Employee unions (e.g., American Federation of Government Employees [AFGE] and National Association of Government Employees [NAGE]) worked closely with VA in revising their national agreements including the safety and health sections.

Approximately 40 union representatives received a one-week training course in "Basic Safety and Health for Local Union Representatives" at VA's Education Training Center in Little Rock, Arkansas.

VHA conducted monthly OSH conference calls in which they provided information and answered questions from employees who participated in the calls.

The DASHO's quarterly OSH conference calls addressed specific topics. The dates and topics of the four calls during FY 1996 were:

- a. October 1995, "Respiratory Protection for Tuberculosis";
- b. January 23, 1996, "Who is Responsible for Safety in GSA Buildings";
- c. April 23, 1996, "Bio-Safety Requirements"; and
- d. July 23, 1996, "Lead Safety."

A VA representative assisted OSHA with the planning of their annual conference by obtaining speakers and participating in the Federal exhibition.

6. Resources.

VA competed for and was awarded a training grant from the Centers for Disease Control and Prevention (CDC). The \$125,000 grant was the first such grant awarded to VA and will be used to produce a satellite training course on tuberculosis, scheduled for October 28, 1997.

A second CDC training grant for \$20,000 was also awarded to VA for training top management health care officials; however, funding has not been provided to date.

III. PROGRAM PLANNING

A. Goals and Objectives.

Attachment D is a copy of the DASHO's OSH goals for FY 1996. The goals for VHA dealt with reducing the Lost Time Claims Rate (LTCR), reducing the most common injuries, conducting tuberculosis skin tests for those exposed to tuberculosis, training for top management and supervisors, training for motor vehicle operators, and attendance of safety personnel at national safety meetings. Approximately 34 percent of VHA facilities met the goals.

Goals for VBA were concerned with reduction of the LTCR, training motor vehicle operators, providing training to those potentially exposed to tuberculosis. About 43 percent of VBA facilities met the goals.

Goals for NCS included a goal to provide training to motor vehicle operators. About 54 percent of NCS Cemeteries met the goal.

B. Corrective Action Priorities.

Attachment E is a copy of the VA's OSH Goals for FY 1997. VA facilities are also encouraged to establish additional goals at the facility level.

C. Significant Initiatives.

The WC/Safety Tracker has been so successful in VA that it has been purchased by other Federal Agencies, including NASA and GSA.

The Occupational Safety and Health web pages, which are located on VA's internal web will continue to grow in FY 1997 as additional information and links are added. Safety staffs throughout VA are encouraged to seek the information they need by visiting the web site.

D. Other Safety and Health Plans.

New training courses are being developed for FY 1997. One of the courses, "Basic Occupational Health", will be targeted to employee health professionals. Another course "Basic OWCP" will focus on OWCP case management personnel, who need a basic understanding of OWCP regulations and how they are applied.

IV. PROGRAM EVALUATION

OSHA has proposed an agency-wide evaluation of VA using a partnership approach to planning and implementing the project. The partnership would involve participants from OSHA, VA (i.e., the DASHO's office), VHA, and a representative from one of the national employee unions.

VA will continue to improve tracking of OWCP injury/illness rates and management of OWCP claims.

V. GOVERNMENT-WIDE INITIATIVES - SAFETY BELT USE.

As noted earlier in this report, the DASHO's OSH goals for FY 96 included motor vehicle safety training for all motor vehicle operators. This training included the instruction on the Federal requirements for safety belt use and the need to use seat belts properly.

The "Motor Vehicle" training materials package, being developed in FY 1997, will also contain a section of safety belt use.

VI. COMMENTS, REQUESTS AND RECOMMENDATIONS

OSHA has, during FY 1997, provided feedback to VA on the annual report for FY 1995. At the meeting, OSHA staff pointed out that three VA medical centers received notices of "willful" violations of OSHA standards, and that VA ranked the highest among other Federal agencies in reporting injuries that resulted from "human violence." The sites that received the "willful" notices have corrected the conditions that lead to the notices.

VA staff have assured OSHA that a substantial number of training conference opportunities have been provided about violence in the workplace, and that a violent behavior awareness training package was published in FY 1997.

VA recommends that OSHA's Office of Federal Agency Programs modify their web page to allow for comments, questions, and suggestions from Federal employees. The page, as currently constructed, does not provide information about how to contact them.

OWCP claims submitted to DOL from VA in FY 1996

		FTEE in FY 1996	Rate per 100 FTEE
No-lost-time claims	4,113	207,370	1.98
First aid claims	480	207,370	0.23
Lost-time claims	7,282	207,370	3.51
Fatal claims	3	207,370	0.00
Total	11,878	207,370	5.73*

These figures reflect the claims that have not been denied.

Data are from the WC/OSH MIS report of 12/12/96 "Total Claims Report"

There is no comparison to previous year because the previous year data was counted differently.

*Does not add up due to rounding.

OWCP Chargeback Costs

Chargeback Year		Percentage Change From Previous Year
1990	\$115,889,353	
1991	\$119,923,382	3.48
1992	\$133,365,989	11.21
1993	\$142,486,288	6.80
1994	\$145,470,294	2.10
1995	\$142,996,914	-1.70
1996	\$140,744,015	-1.58

**Department of
Veterans Affairs**

Memorandum

Date: August 7, 1997

From: Director, Office of Occupational Safety and Health (00S1)

Subj: Impact of Current Training Packages

To: All Members of the National, Top Management, Confined Space, Lockout/Tagout, Asbestos,
and New Employee Orientation Committees

Thru: Designated Agency Safety and Health Official (00S)

8/7/97

1. Recently, the Little Rock Education Center (LREC) surveyed VA medical center personnel to determine the extent that training packages you developed have been used. Below is a summary of the results:

- **Top Management** - The training package provided was used to train 551 top management officials (an average of over 9 top management officials per facility that provided training). Hopefully the package will increase awareness of top management officials so that they provide additional support to facility safety and health programs as a result of the training.

- Prior to distribution of the training package, only 6.8 percent of the facilities reporting (103) had provided this required training.

- Currently, 65.1 percent of the facilities reporting have provided the required training.

- Ultimately, 92.2 percent of the facilities reporting state that they will provide the training.

- **Confined Spaces** - The training package provided was used to train 1,103 VA personnel that could be exposed to life threatening hazards within confined spaces.

- Prior to distribution of the confined spaces package, only 11.7 percent of the facilities reporting (120) that have confined spaces had provided the training required by OSHA. (Five facilities reported they did not have confined spaces.)

- Currently, 46.7 percent of the facilities reporting have provided the required training.

- Ultimately, 79.2 percent of the facilities reporting state that they will provide the training.

- **Lockout/Tagout** - The training package provided was used to train 1,352 VA employees. In 1995, a VA employee who had not received lockout/tagout training was killed as a result of lockout/tagout violations. Hopefully, this committee has contributed to the elimination of one major reason for that fatality.

2.

All Members of the National, Top Management, Confined Space, Lockout/Tagout, Asbestos, and New Employee Orientation Committees

– Prior to distribution of the lockout/tagout package, only 12.9 percent of the facilities reporting (101) had provided the training required by OSHA.

– Currently, 59.4 percent of the facilities reporting have provided the required training.

– Ultimately, 96 percent of the facilities reporting state that they will provide the training.

• **Asbestos** - The training package provided was used to train 1,496 VA personnel that could be exposed to asbestos. Recently, when I went for my annual AHERA re-certification, a video tape was shown that I felt was extremely good. When I returned to my office, I checked the asbestos awareness training package to determine which video was included in the package. It was the same video used for the AHERA re-certification.

– Prior to distribution of the asbestos training package, only 11.7 percent of the facilities reporting (103) had provided the training required by OSHA, while another 9.7 percent did not have asbestos at their facility. Stated another way, only 21.4 percent of the facilities reporting were in compliance with this requirement before the training packages were provided.

– Currently, 45.6 percent of the facilities with asbestos that reported have provided the required training.

– Ultimately, 78.6 percent of the facilities with asbestos that reported state that they will provide the training.

• **New Employee Orientation** - The training package provided was used to train 3,735 VA employees. With downsizing, etc., that number in and of itself is surprising. (One facility reported that it had no new employees since receiving the package.)

– Prior to distribution of the new employee orientation package, only 32.4 percent of the facilities reporting (102) had provided the training.

– Currently, 71.6 percent of the facilities reporting have provided new employee safety and health orientation.

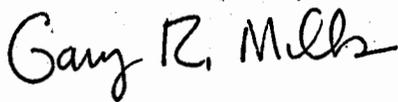
– Ultimately, 94.1 percent of the facilities reporting state that they will provide the training.

3.

All Members of the National, Top Management, Confined Space, Lockout/Tagout, Asbestos, and New Employee Orientation Committees

2. Although the survey conducted by the LREC did not ask questions concerning any resulting savings of preparation time, improved materials over what had been previously used, etc., it is obvious that the facilities using the materials have used them for these reasons. The packages have been well received. However, those of us on the committees should periodically review the packages to determine if they are current or if they can be enhanced. Each of us should be gratified by the impact of these packages and the fact that each of us have contributed to the improved safety and health training of our fellow employees.

3. Thank you again for your continued support.



Gary R. Mills

cc: James O. Wear, Ph.D.
Director, Little Rock Education Center

VETERANS HEALTH ADMINISTRATION

VISN/FACILITIES	TYPE OF AWARD
VISN 1 VAMC Providence, RI VAMROC Togus, ME	Commendation Commendation
VISN 2 VAMC Bath, NY	Achievement
VISN 3 VAMC Brooklyn, NY	Achievement
VISN 4 VAMC Clarksburg, WV VAMC Coatesville, PA	Achievement Achievement
VISN 5 VAMC Martinsburg, WV	Achievement
VISN 6 VAMC Richmond, VA	Honorable Mention
VISN 7 VA Central Alabama Veterans Health Care System VAMC Montgomery, AL VAMC Tuskegee, AL VAMC Tuscaloosa, AL	Honorable Mention Honorable Mention
VISN 8 VAMC Lake City, FL VAMC Miami, FL VAMC San Juan, PR	Achievement Achievement Achievement
VISN 9 VAMC Memphis, TN VAMC Mountain Home, TN VAMC Nashville, TN	Commendation Achievement Commendation
VISN 10 VAMC Chillicothe, OH VAOPC Columbus, OH	Achievement Achievement
VISN 11 VAMC Danville, IL VAMC Detroit/Allen Park, MI	Achievement Achievement

VISN 12

VA Chicago Health Care System
VAMC Lakeside
VAMC Westside
VAMC Hines, IL
VAMC Tomah, WI

Honorable Mention

Achievement
Achievement

VISN/FACILITIES

TYPE OF AWARD

VISN 13

VAMC St. Cloud, MN
VA Black Hills Health Care System
VAMC Fort Meade, SD
VAMC Hot Springs, SD
VAMROC Sioux Falls, SD

Achievement
Commendation

Honorable Mention

VISN 14

VAMC Des Moines, IA
VAMC Grand Island, NE
VAMC Lincoln, NE

Commendation
Achievement
Honorable Mention

VISN 15

VAMC Kansas City, MO
VAMC Marion, IL

Commendation
Achievement

VISN 16

VAMC Alexandria, LA
VAMC Fayetteville, AR
VAMC Jackson, MS
VAMC Little Rock, AR
VAMC Muskogee, OK
VAMC Oklahoma City, OK
VAMC Shreveport, LA

Commendation
Commendation
Commendation
Commendation
Achievement
Commendation
Achievement

VISN 17 - Grand Prairie, Texas

Special Commendation for VISN

VA Central Texas Health Care System
VAMC Marlin, TX
VAMC Temple, TX
VAMC Waco, TX

Commendation

VA North Texas Health Care System
VAMC Dallas, TX

Achievement

VA South Texas Health Care System
VAMC Kerrville, TX
VAMC San Antonio, TX

Commendation

VISN 18

VAMC Amarillo, TX
VAOPC El Paso, TX

Achievement
Achievement

VISN 19

VAMC Fort Lyon, CO
VAMC Grand Junction, CO

Achievement
Achievement

VISN 20

VAMROC Anchorage, AL
VAMC Portland, OR
VAMC White City, OR

Achievement
Commendation
Honorable Mention

VISN 21

VAMROC Honolulu, HI

Commendation

VISN 22

VAMC Long Beach, CA
VAMC San Diego, CA
VAMC Sepulveda, CA

Achievement
Honorable Mention
Achievement

TYPES OF AWARDS

Commendation: Met the 2% reduction goal (or had rate less than 1.5) **AND** met 9 or 10 of the other goals.

Achievement: Met the 2% reduction goal (or had rate less than 1.5), **BUT** met less than 9 of the other goals.

Honorable Mention: Did not meet the 2% reduction goal, but met 9 or 10 of the other goals, **AND** had a rate less than 3.0.

There were:

16 Commendation Awards

28 Achievement Awards

8 Honorable Mention Awards

52 of 154 (or 34%) VHA facilities received awards.

The combined facilities are counted as one facility.

VETERANS BENEFITS ADMINISTRATION

STATION NUMBER	VARO FACILITY NAME	TYPE OF AWARD
AREA 1		
313	VARO, Baltimore, MD	Achievement
308	VARO, Hartford, CT	Commendation
306	VARO, New York, NY	Achievement
304	VARO, Providence, RI	Achievement
372	VARO, Washington, DC	Achievement
AREA 2		
333	VARO, Des Moines, IA	Achievement
326	VARO, Indianapolis, IN	Achievement
334	VARO, Lincoln, NE	Achievement
330	VARO, Milwaukee, WI	Achievement
331	VARO, St. Louis, MO	Commendation
335	VARO, St. Paul, MN	Commendation
AREA 3		
362	VARO, Houston, TX	Achievement
321	VARO, New Orleans, LA	Commendation
318	VARO, Winston-Salem, NC	Commendation
AREA 4		
340	VARO, Albuquerque, NM	Achievement
347	VARO, Boise, ID	Commendation
348	VARO, Portland, OR	Achievement
354	VARO, Reno, NV	Achievement
341	VARO, Salt Lake City, UT	Achievement
343	VARO, Oakland, CA	Commendation

TYPE OF AWARD

Commendation: Met the rate reduction goal (or had a rate less than 0.5) AND met all three other goals.

Achievement: Met the rate reduction goal (or had a rate less than 0.5) BUT met 2 or fewer other goals.

7 VA Regional Office Facilities Received Commendation Awards.

13 VA Regional Office Facilities Received Achievement Awards.

20 of 47 (43%) of VBA Facilities Received an award.

NATIONAL CEMETERY SYSTEM

NCS AREA	STATION NUMBER	OWCP NUMBER	NCS STATION NAME	
ATLANTA AREA				
	788	4386	National Cemetery Area Office Atlanta, GA	Commendation
	825	4381	Alexandria National Cemetery, LA	Commendation
	828	4381	Barrancas National Cemetery, FL	Commendation
	830	4382	Bay Pines National Cemetery, FL	Commendation
	831	4461	Beaufort National Cemetery, SC	Commendation
	832	4427	Biloxi National Cemetery, MS	Commendation
	833	4407	Camp Nelson National Cemetery, KY	Commendation
	835	4467	Chattanooga National Cemetery, TN	Commendation
	838	4428	Corinth, National Cemetery, MS	Commendation
	842	4366	Fayetteville National Cemetery, AR	Commendation
	843	4462	Florence National Cemetery, SC	Commendation
	844	4451	Fort Gibson National Cemetery, OK	Commendation
	846	4474	Fort Sam Houston National Cemetery, TX	Commendation
	847	4367	Fort Smith National Cemetery, AR	Commendation
	851	4475	Houston National Cemetery, TX	Commendation
	855	4468	Knoxville National Cemetery, TN	Commendation
	856	4410	Lebanon National Cemetery, KY	Commendation
	859	4387	Marietta National Cemetery, GA	Commendation
	860	4469	Memphis National Cemetery, TN	Commendation
	864	4470	Mountain Home National Cemetery, TN	Commendation
	865	4471	Nashville, National Cemetery, TN	Commendation
	866	4429	Natchez National Cemetery, MS	Commendation
	867	4401	New Albany National Cemetery, IN	Commendation
	868	4446	New Bern National Cemetery, NC	Commendation
	870	4417	Port Hudson National Cemetery, LA	Commendation
	871	4460	Puerto Rico National Cemetery, PR	Commendation
	876	4448	Salisbury National Cemetery, NC	Commendation
	879	4433	Springfield National Cemetery, MO	Commendation
	883	4413	Zachary Taylor National Cemetery, KY	Commendation
	908	4360	Fort Mitchell National Cemetery, AL	Commendation
	911	4383	Florida National Cemetery, FL	Commendation
DENVER AREA				
	886	4473	Fort Bliss National Cemetery, TX	Commendation
	890	4434	Fort McPherson National Cemetery, NE	Commendation
	894	4426	Fort Snelling National Cemetery, MN	Commendation
	898	4372	Los Angeles National Cemetery, CA	Commendation
PHILADELPHIA AREA				
	802	4421	Baltimore National Cemetery, MD	Commendation
	817	4400	Marion National Cemetery, IN	Commendation
	821	4396	Rock Island National Cemetery, IL	Commendation
	909	4425	Fort Custer National Cemetery, MI	Commendation

38 cemeteries and 1 Area Office of 69 (55%) of NCS Cemeteries received an award

Commendation: Met the goal to provide motor vehicle safety training