

Agency Fiscal Year 2003 Annual Report on Occupational Safety and Health

Name of Department: Department of Veterans Affairs (VA)

Address: 810 Vermont Avenue, NW, Washington, DC 20420

Number of Employees Covered by this Report: 230,406

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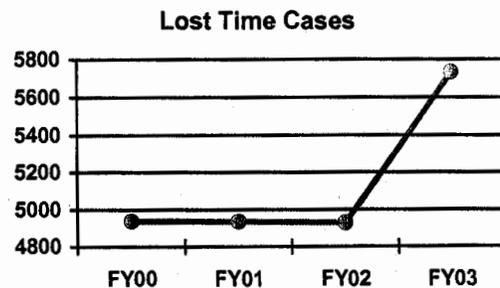
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1.A. USE AGENCY INJURY/ILLNESS DATA TO DISPLAY THE ANNUAL STATISTICS FOR FATALITIES AND LOST TIME DISABILITIES FOR THE REPORT YEAR AND, IF POSSIBLE, COMPARE THESE FATALITIES AND DISABILITIES WITH SIMILAR STATISTICS FOR THE PREVIOUS THREE-YEAR PERIOD. DATA BASED ON AGENCY CLAIMS SUBMITTED TO THE OFFICE OF WORKERS' COMPENSATION PROGRAMS (OWCP) IS PREFERRED, BUT INTERNAL ACCIDENT OR INCIDENT REPORTING DATA (FARS) IS ACCEPTABLE, IF OWCP DATA IS NOT AVAILABLE TO THE AGENCY. THE DATA SHOULD BE DISPLAYED IN CHARTS OR TABLES SO THAT CHANGES CAN BE EASILY SEEN OR DEMONSTRATED.

Lost Time Cases*

	FY 00	FY 01	FY 02	FY 03
National Cemetery Administration (NCA)	90	91	78	73
Veterans Benefits Administration (VBA)	156	145	135	116
Veterans Health Administration (VHA)	4,559	4,587	4,605	5,406
OTHER	131	120	108	137
Total	4,936	4,943	4,926	5,732

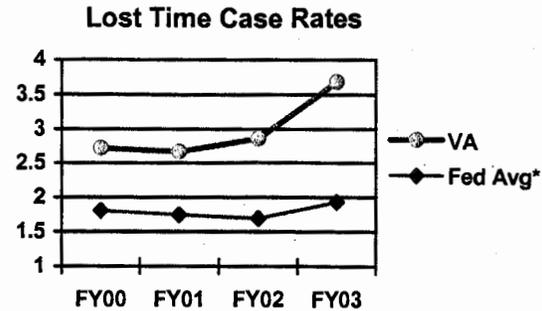


* Excludes claims denied by the Office of Workers' Compensation Programs

In FY 2003, VA employee injuries and illnesses cases rose by 806 cases. (Note: Data presented in this report are based on VA workers' compensation case status as of 1st quarter FY 2004. Minor fluctuations in rates may exist from earlier data presentations due to the changes in claim adjudication status.)

Lost Time Case Rates

	FY 00	FY 01	FY 02	FY 03
NCA	7.16	7.32	7.95	7.58
VBA	1.53	1.34	2.45	1.26
VHA	2.78	2.74	2.89	3.74**
OTHER	2.13	2.00	1.85	12.41
All VA	2.71	2.67	2.86	3.68



* FY 2003 Federal average Lost Time Case Rates (LTCR) is currently a tentative figure provided by the Department of Labor's (DOL) Occupational Safety and Health Administration's (OSHA) Office of Federal Agency Programs and is subject to revision.

**Veterans Health Administration's (VHA) Lost Time Claims Rate (LTCR) is currently under review to ensure appropriate employee work experience is included in the LTCR calculation. This assessment focuses primarily on medical residents working for VHA. The calculation above reflects the historical calculation formula FY 2003 LTCRs for VA and VHA will be updated upon completion of the assessment.

Fatalities

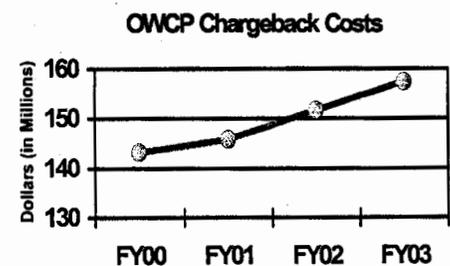
	FY 99	FY 00	FY 01	FY 02	FY 03
NCA	0	0	0	1	0
VBA	0	0	0	0	0
VHA	2	4	0	2	6
OTHER	0	0	0	0	0
Total	2	4	0	3	6

Employee survivors filed six occupational fatality claims during FY 2003. The report will be amended should OWCP deny those claims under review.

1.B. USE AGENCY DATA TO DISPLAY THE MOST RECENT OWCP CHARGEBACK AND COP COSTS AND, IF POSSIBLE, COMPARE THESE COSTS WITH SIMILAR STATISTICS FOR THE PREVIOUS THREE-YEAR PERIOD. THE DATA SHOULD BE DISPLAYED IN CHARTS OR TABLES SO THAT CHANGES CAN BE EASILY SEEN OR DEMONSTRATED.

OWCP Chargeback Costs

	FY 00	FY 01	FY 02	FY 03
NCA	\$2,152,991	\$2,022,260	\$2,087,212	\$2,326,421
VBA	\$3,914,928	\$3,498,232	\$3,807,450	\$3,886,071
VHA	\$135,124,527	\$138,193,789	\$143,463,337	\$148,179,062
OTHER	\$2,024,673	\$2,188,757	\$2,253,683	\$2,923,724
Total	\$143,217,119	\$145,903,038	\$151,611,682	\$157,315,278



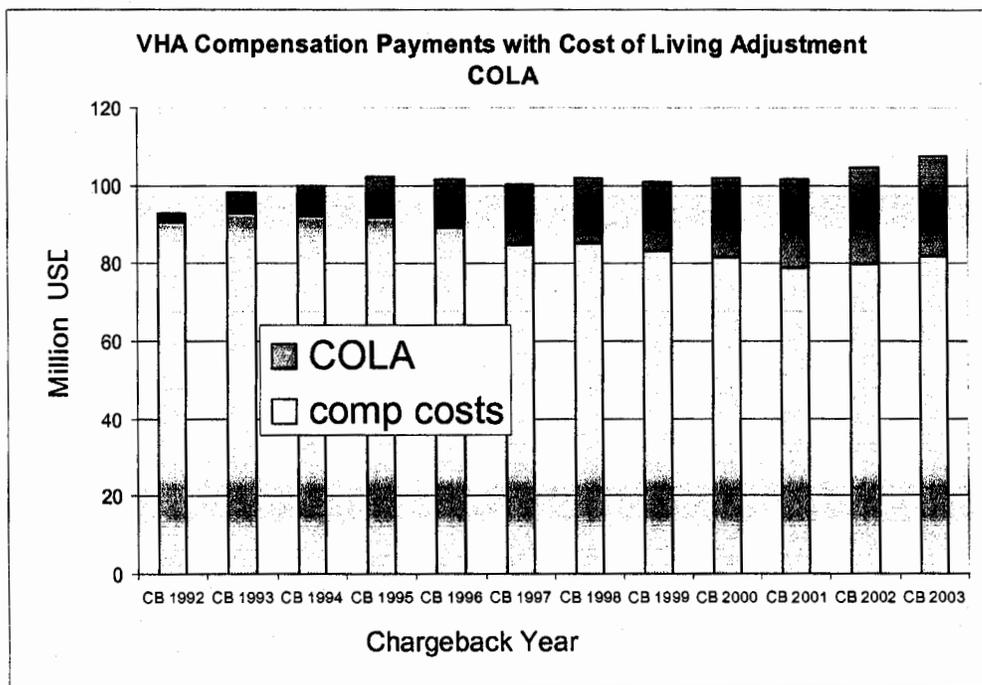
VA FY 2003 workers' compensation costs rose 3.8 percent over the previous reporting period.

Continuation of Pay (COP) Costs

Composite departmental data COP cost data is not yet available for VA. While each medical center maintains COP documentation, the automated COP data collection process is pending modification of the departmental payroll system. Accordingly, departmental data is not available for this report.

VHA:

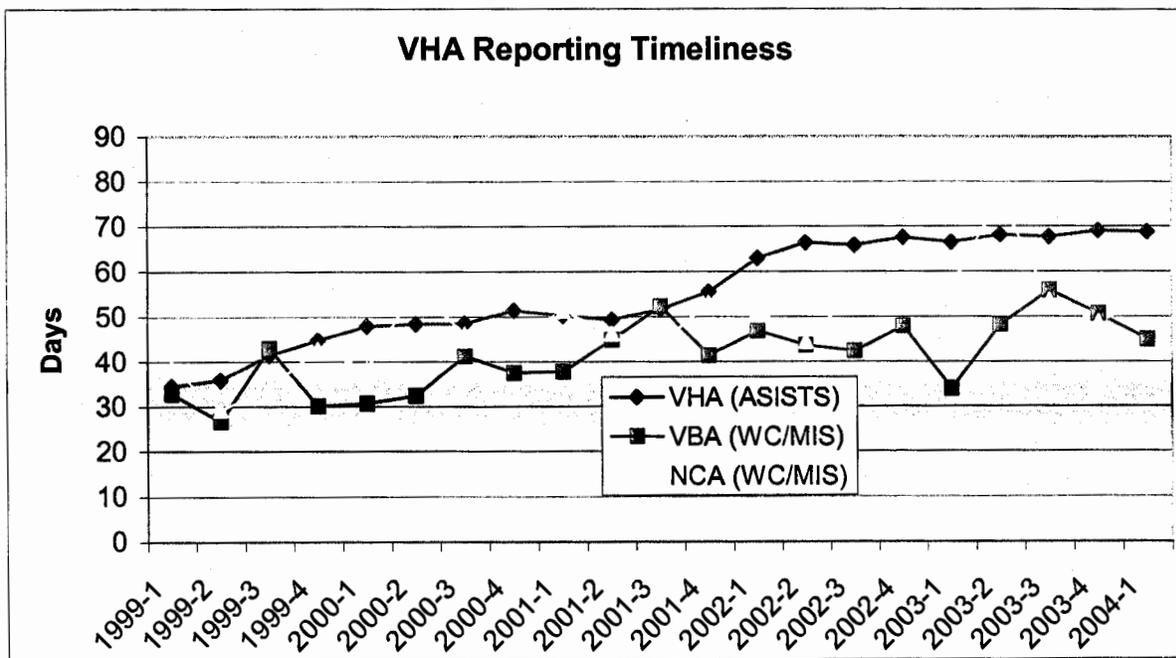
FY 2003 chargeback costs remain relatively unchanged through significant efforts on the part of the Agency to hold increased costs in check. Under the reorganization of VHA into 21 Veteran Integrated Service Networks (VISN), chargeback costs at each VISN are tracked and costs are borne by each medical center. In fact, after controlling for the cost of living increases, chargeback costs appear to have decreased in real dollars until an approximately 1 percent increase in FY 2003 (see figure below).



This decentralization of the costs of the program has provided an incentive to more actively and aggressively manage claims. Because VHA was concerned about inadequate management of the workers compensation program, VHA hired a full-time VHA workers' compensation program manager at the end of FY 2002. A formal review of workers' compensation costs over the last ten years suggested that over 90 percent of annual costs are attributable to "old" claims, i.e., cases over one year old.

VHA formed an Advisory Group, discussed the data, identified system needs and weaknesses, selected likely practices from the field, and presented a strategy to the Human Resources Committee of the National Leadership Board. A five-element strategy includes improved training (lecture series to become desk-top streaming audio; guidebook), local quality improvement and auditing; a public feedback system (creation of a Web site for presentation of data, with a stocks-and-pillory, improved competition goal); data stream improvement; and annual performance monitors.

VHA continues to emphasize aggressive case management with simultaneous fair and prompt processing of claims for employees injured in the workplace -- an essential element of a system to provide help to employees. Implementation of an in-house knowledge-management (and injury reporting) system, the Automated Safety Incidence Surveillance and Tracking System (ASISTS), described in greater detail under 1.c., remains a core element of VHA's safety program. Reporting timeliness was made a Network Director Performance Monitor in FY 2003, based on discussions with VA and DOL staff. The ASISTS system has been reformatted as a graphic-user interface and implemented across VHA. Due to implementation difficulties, overall timeliness remained the same despite some dramatic improvements and some decreases in VISNs with implementation delays (see figure below).



In recognition of inadequate management of interagency billing, VHA has developed and disseminated field guidance on appropriate billing of in-house treated injuries.

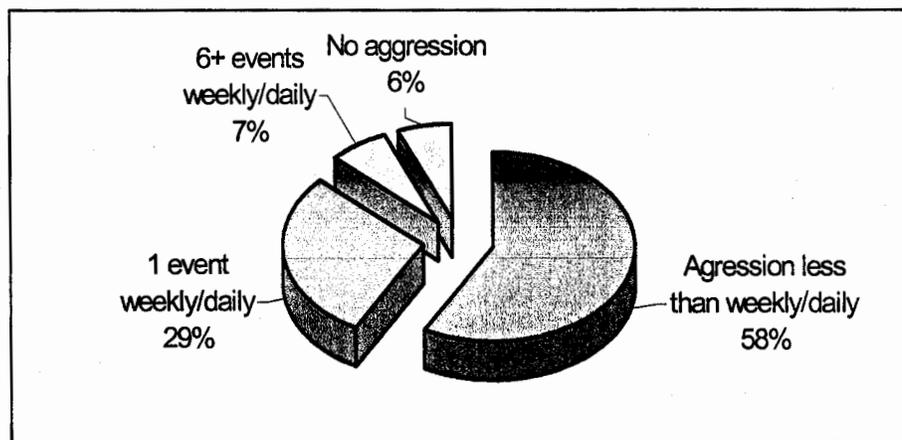
1.C. USE AGENCY ACCIDENT OR INCIDENT REPORTING SYSTEM OR SUPPLEMENTAL REPORTS TO THE OSHA LOGS OR THE OWCP REPORTS FOR DETAILS WHICH WILL HELP EXPLAIN ANY SIGNIFICANT TRENDS AND MAJOR CAUSES OR SOURCES OF FATALITIES AND LOST TIME DISABILITIES WHICH OCCURRED LAST YEAR(S).

VA: Analysis of VA's loss experience by occupational series in FY 2003 using the Workers' Compensation and Occupational Safety and Health Management Information System (WC/OSH-MIS) indicated that, of the more than 12,000 employees listed on the current chargeback report, over 45 percent represent positions identified as mission critical and at-risk occupations in VA's Human Capital Plan. Again this year, nurses accounted for the largest proportion of cases among VA employees. In depth analyses of workplace conditions and procedures for nurses and other high-risk occupations were initiated in FY 2003.

Workplace Violence:

Violent and disruptive behaviors in our workplace continue to impact our ability to provide safe and efficient service to veterans. Action teams implemented customized solutions for participating facilities and have had a dramatic positive impact on VA work climate, morale, and productivity. These initiatives are being expanded to sites throughout VA and include courses in the prevention and management of disruptive behavior and facility action teams to alleviate stress and aggression in the workplace. The frequency of aggression in the VA workplace is represented in the figure below.

Frequency of Aggression in VA – FY 2003

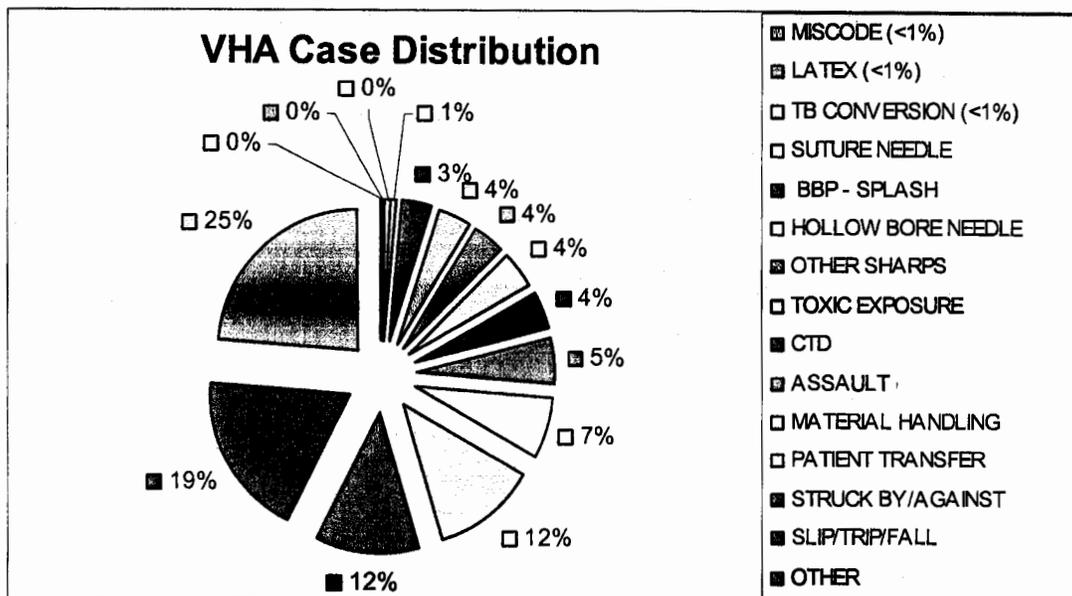


Source: VA Stress and Aggression Project (FY 2003)

VA: The VA WC/OSH MIS remains VA's primary source for workers' compensation and OSH data. VA's Office of Occupational Safety and Health and Workers' Compensation continues to provide all VA organizations access to an Electronic Data Interchange (EDI) capability for full operation. The WC/OSH MIS maintains the capability for all organizations to record non-reportable cases to facilitate inclusion of "near miss" data into facility hazard reduction efforts. The WC/OSH-MIS system provides accessible, easy-to-use, accurate, and timely information, with full Privacy Act protections, to both workers' compensation claims managers and OSH professionals throughout VA.

VHA:

- VHA's new ASISTS package -- a system to align safety, clinical, workers' compensation, and supervisory personnel and practices -- has been in use throughout VHA since October 2002. In 2003, a graphic user interface (GUI) was released after appropriate alpha and beta-testing to increase user acceptability and expand ASISTS into a knowledge management system from an injury reporting system. The final two hospitals implemented ASISTS use in 2003.
- The in-house injury reporting system confirms that, generally, this distribution of injuries has not changed substantially since the prior year (see figure below). Interestingly, the ratio of lost time cases to total cases has crept up again, now closer to 2 than to 3 when injury reporting was a formal performance monitor.



- VHA implemented a performance monitor to increase the timeliness of CA-1 reporting to DOL, in accordance with and anticipation of the President's "Safety, Health, and Return to Employment" (SHARE) program, in concordance with VA program offices. This monitor relies on the in-house reporting systems.

2. DESCRIBE SAFETY AND OCCUPATIONAL HEALTH PROGRAM ACCOMPLISHMENTS AND INITIATIVES IMPLEMENTED LAST FISCAL YEAR TO CONTROL THE TRENDS AND MAJOR CAUSES OR SOURCES OF FATALITIES AND LOST TIME DISABILITIES IN YOUR AGENCY AND TO IMPROVE YOUR AGENCY'S OVERALL SAFETY AND OCCUPATIONAL HEALTH PROGRAMS. DISCUSS YOUR SUCCESSES AND/OR FAILURES AS A RESULT OF YOUR AGENCY'S IMPLEMENTATION OF THESE INITIATIVES. EXPLAIN ANY SIGNIFICANT ONETIME OR ADDITIONAL PERMANENT RESOURCES ALLOCATED TO THE SAFETY AND OCCUPATIONAL HEALTH PROGRAM LAST YEAR FOR AREAS SUCH AS: WORKPLACE HAZARD ABATEMENT, RESEARCH AND DEVELOPMENT, DATA SYSTEMS, STAFFING, TRAINING, ETC. ATTACH A COPY OF ANY SIGNIFICANT SAFETY AND OCCUPATIONAL HEALTH POLICY OR PROCLAMATION RELATED TO THOSE INITIATIVES.

IN DESCRIBING YOUR ACCOMPLISHMENTS AND INITIATIVES, PLEASE TRY TO EXPLAIN YOUR AGENCY'S EFFORTS IN THE FOLLOWING AREAS:

- **ACCOMPLISHMENTS FOR ASSURING THAT WORKERS, SUPERVISORS AND COMMITTEE MEMBERS RECEIVED APPROPRIATE JOB HEALTH AND SAFETY AWARENESS AND HAZARD RECOGNITION INFORMATION AND TRAINING.**
- **ACCOMPLISHMENTS FOR ASSESSING THE EFFECTIVENESS OF YOUR SAFETY AND OCCUPATIONAL HEALTH PROGRAMS.**
- **ACCOMPLISHMENTS IN THE IDENTIFICATION, ASSESSMENT AND RESOLUTION OF SAFETY AND HEALTH PROBLEMS, INCLUDING YOUR AGENCY'S SYSTEM OF (A) PROVIDING RECOGNITION TO OUTSTANDING ACHIEVERS AND (B) ESTABLISHING ACCOUNTABILITY AND PERFORMANCE STANDARDS FOR MANAGERS, SUPERVISORS AND EMPLOYEES.**
- **UNIQUE OR SIGNIFICANT ACCOMPLISHMENTS THAT YOUR AGENCY MADE LAST YEAR TO ENHANCE EMPLOYEE PARTICIPATION, INVOLVEMENT AND CONSULTATION IN THE SAFETY AND OCCUPATIONAL HEALTH PROGRAM.**

VA's overarching mission is to provide high quality service and support for our Nation's veterans. In serving veterans, we recognize that a safe and healthful workplace allows VA employees to better meet those obligations. VA's Office of Occupational Safety and Health has implemented a number of initiatives to identify and abate hazardous procedures and conditions, educate employees and supervisors on safe and healthful work practices, and encourage open communication between labor and management partners.

Federal Workers 2000 Initiative Summary for VA

This initiative will be replaced by goals established under the President's SHARE program.

Goal 1: Reduce the Total Case Rate (TCR) for most Federal agencies by 3 percent per year, while at the same time increasing the timeliness of reporting new injuries and illnesses to OWCP for each agency by 5 percentage points per year.

Baseline Total Case Rate	FY 2003 Target	FY 2003 Actual
5.47	4.9	7.65

Baseline Timeliness %	FY 2003 Target	FY 2003 Actual
49.2%	53.1%	67.8%

Goal 2: Reduce the Lost Time Case Rate (LTCR) for those worksites with the highest Federal lost time case rate by 10 percent per year (based on cumulative LTCR of five targeted VAMCs).

Baseline Lost Time Case Rate	FY 2003 Target	FY 2003 Actual
6.29	5.01	4.22

VA met this goal in FY 2002 and these facilities were removed from the OSHA tracking report.

Goal 3: Reduce the Lost Production Day Rate (LPDR) (lost days due to injury or illness per 100 employees) by 2 percent per year. These figures are provided by DOL.

Baseline LPDR	FY 2003 Target	FY 2003 Actual
63.4	59.7	65.4

VA: VA's Office of Occupational Safety and Health has accomplished a number of initiatives to provide workers and supervisors with appropriate job health and safety awareness and hazard recognition information and training, program assessment, and hazard resolution. These initiatives are described below.

Unique and Significant Accomplishments:

VA:

- National occupational safety and health conference calls were conducted on:
 - ✓ West Nile Virus
 - ✓ OSHA Recordkeeping
 - ✓ Emerging Pathogens Protection (i.e., Severe Acute Respiratory Syndrome (SARS) and Noroviruses)
 - ✓ Emergency Respiratory Protection

- The number of organizations participating in the Workplace Stress and Aggression Project expanded during FY 2003. VA also initiated a stress and aggression initiative in which Veterans Service Organizations (VSO) participate to promote a less stressful service delivery climate in VA, improved care for veterans, and improved workplaces for VA employees. These groups consist of representatives from all VA administrations, Human Resources Management, Resolution Management, union representatives, academia, and VSOs. They continue to evaluate strategies and implement programs that reduce employee stress and violence, which have a considerable positive effect on employee performance and veteran care.

- Over the reporting period, VA's Office of Occupational Safety and Health has provided support to a number of Administration initiatives, including programs on prevention and management of violent behavior, union safety and health training, personal protective equipment, workers' compensation management, and emergency preparedness and response. In addition, the following program initiatives were implemented during the reporting period.
- On June 10, 2003, the Training Officers Conference presented the VA Workplace Stress and Aggression Project Team the Distinguished Service Award for Training Research. The Training Officers Conference established the Distinguished Service Awards Program in 1955 to recognize outstanding training professionals who have used creative and innovative approaches to achieve performance results through training. VA's project team, sponsored by VA's Office of Occupational Safety and Health, is a collaborative group of VA managers, employees, and employee union officials drawn from all three administrations and university researchers from four educational institutions.
- Office of Occupational Safety and Health staff member Rita Kowalski co-presented "The VA Workplace Stress and Aggression Project" program in the Daniel Twomey Chair as part of a symposium, "A Cross Cultural Comparison of Practice-Grounded Action Research Projects." The presentation was held in June 2003 as part of the International Eastern Academy of Management Conference conducted in Porto, Portugal.
- VA participated in a conference of the Inter-Agency Board (IAB) for Equipment Interoperability to assist in the development of national personal protective equipment (PPE), detection, and decontamination equipment and guidelines for national emergency management operations. This program ensures that local, State, and Federal emergency responders have appropriate guidance when selecting protective equipment.
- VA's Office of Occupational Safety and Health provided guidance on regulatory requirements and operational procedures to the OSHA and Federal Emergency Management Agency (FEMA) Workgroup on appropriate PPE selection. This material included comments on the committee position and on draft recommendations of PPE selection criteria. The OSHA/FEMA Workgroup is developing government-wide policy for the selection and use of PPE in weapons of mass destruction incidents.
- VA's Office of Occupational Safety and Health represented VA as a stakeholder at the National Institute for Occupational Safety and Health (NIOSH) meeting evaluating respirators used to escape from Weapons of Mass Destruction (WMD) events. Approximately 200 stakeholders represented manufacturers, Federal agencies, consultants, and industry journals.
- The Workplace Stress and Aggression Project team expanded the project to incorporate additional VSOs and Wayne State University as project partners. In cooperation with the Secretary's VSO Liaison, the team added representatives from the Paralyzed Veterans of America. These groups bring a unique perspective to recognizing and resolving stress and aggression in VA's service delivery arena.

- The Fifth Annual Federal Workers' Compensation Conference was held August 5-7, 2003, in Washington, DC. Approximately 600 Federal employees from more than 50 different Federal agencies attended the 3-day conference. VA staff led the conference curriculum development team to ensure this year's conference content was improved and expanded, and represented the best practices of several participating agencies. The 57-member faculty of Federal and private sector experts conducted over 65 sessions. In addition, optional evening sessions were well attended, as well as intra-agency meetings.
- VA's Office of Occupational Safety and Health provided technical support, classroom instructors, and program review support to the following training initiatives:
 - ✓ Safety management practices for Leadership VA.
 - ✓ Emergency respirator training for the Office of Policy, Planning, and Preparedness.
 - ✓ Basic safety instruction provided to union safety representatives.
 - ✓ Stress and aggression management practices for the Office of Resolution Management's National Leadership Conference.
 - ✓ Office of Acquisition and Materiel Management Conference.
- VA's Office of Occupational Safety and Health Intranet/Internet Web sites were again significantly upgraded and modernized during the reporting period. OSH trainers have access to fully developed powerpoint presentations for a number of OSH training programs – including the OSHA safety instruction CD-ROM. These materials were developed in cooperation with VHA's Employee Education System, OSHA, and other interested parties. Employees utilizing these distance-learning packages can obtain automated certificates of training.
- National Cemetery Administration's (NCA) Network Safety Tracker System has been expanded to serve additional NCA management information needs due to its utility and flexibility.
- VA's Office of Occupational Safety and Health coordinated video programs on VA Action Team stress and aggression prevention initiatives. These programs were broadcast several times throughout the year.
- The Workplace Stress and Aggression Web site was upgraded for VA's stress and aggression project. This new Web site is included on VA's Occupational Safety and Health's Intra- and Internet Web site at <http://vaww.va.gov/vasafety> and <http://www.va.gov/vasafety>.
- The July 2003 issue of "Webtrends" reports that VA's Office of Occupational Safety and Health Web site remains a highly utilized and significant safety information resource for both VA employees and outside visitors. The Internet report showed that in the month of July 2003, there were 2,685 "unique visitors" and 30,674 "hits." The Intranet Web site report for July 2003 showed 362 "unique visitors" and 13,465 "hits." Visitors are defined as a count of unique users for the reporting period. Hits are defined as a count of successful document visits, not including the supporting graphic files on the page.

VHA:

- VHA continues to require performance measures and monitors for the Director of each VISN. The national performance monitors this past year included a workplace violence monitor to implement a new patient flagging system for identifying patients with known history of violence as well as continued training of employees working in areas of high risk for violence, timely submission of Workers' Compensation forms to DOL electronically using ASISTS, and replacement of devices with the potential for blood borne pathogens exposure, following the "Needlestick Safety and Prevention Act." Finally, each VISN Director must report all repeat and willful violations along with a plan on how they will be corrected. These initiatives have created a much greater emphasis on controlling accidents, as the measures directly reflect on each Director's performance.
- Violence program evolution. Implementation of the FY 2002 performance monitor identified within VHA a need to enhance efforts to prevent and manage violent behavior. The performance monitor for FY 2003 required each facility to train at least two trainers able to provide hands-on training for staff in high-risk units and occupations and to develop a plan on how to train those individuals. By the end of the fiscal year, all facilities had met those requirements. The VHA Violence Technical Advisory Group recommended that VHA reconsider its support for flagging of potentially violent patients. VHA conducted a systematic analysis and recognized the need for threat assessment training to complement such flagging. These were proposed as VISN Director Performance Monitors for FY 2004.
- VHA continues to use the Safety Automated Facility Evaluation (SAFE) package, a comprehensive software program to support compliance with OSHA, Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and Environmental Protection Agency (EPA) standards, as an in-house product. This software is a "leading indicator" surveillance system. Initial roll-up of national data is being aligned with the national employee survey to understand and measure systems effectiveness. During FY 2003, the software was reviewed by field advisory groups and updated in the General Safety, Ergonomics and Fire Safety Programs.
- VHA partners with VA unions and DOL to coordinate efforts and strengthen VHA's safety and health programs. VHA is committed to a strategy that will fully implement the recommendations in the Agency Evaluation Report. One of several VHA/union activities this year included a highly successful union safety conference. Presentations and coursework were provided on accident investigation, blood-borne pathogens, ergonomics and use of personal protective equipment for protection from tuberculosis and weapons of mass destruction.
- VHA is collaborating with NIOSH and Liberty Mutual to develop a five-element program on slips, trips, and falls. Four facilities are participating in systematic reviews of their data to serve as one component of an etiologic (case-control) research study. A tool for auditing and abating hazards is under development based on the preliminary data. A laboratory evaluation and an intervention component are scheduled to understand the results from the etiologic case control study and to implement solutions.

- VA's Deputy Under Secretary for Health for Operations and Management continues to support a Strategic Healthcare Group on Occupational and Environmental Health to address clinical safety as well as the more common operational and environmental safety issues.
- The Center for Engineering and Occupational Safety and Health (CEOSH) was enhanced with additional core staff to improve the occupational safety programs within VHA. The VA Technical Career Field Trainee Program, specifically for Engineering and Safety/Industrial Hygiene, is a 2-year training program for Graduate Engineers and Occupational Safety and Health/Industrial Hygienists. During FY 2003, the Engineering and Safety program hired 6 Industrial Hygiene/Safety Specialists. The candidates are trained and mentored at VA medical centers. After successful completion of the 2-year program, the trainees acquire the career conditional status and will qualify to work in any of the VA medical facilities.
- During FY 2003, VHA continued to emphasize mandatory new employee orientation that requires general training on safety and health at each medical center, and supervisory training that includes a section on safety and health. All facilities perform annual awareness training for all employees in the areas of safety, health, and security including hazard recognition. The annual training also includes violence in the workplace.
- VHA completed an Ergonomics Guidebook focused on patient transfer ergonomics, additional general healthcare ergonomic problems, and general ergonomics. Portions of that program were incorporated into OSHA's Nursing Home initiative. VHA is represented on OSHA's Federal Advisory Committee on Ergonomics.
- In response to a four-fold increase in workers' compensation claims among clinical staff for upper extremity disorders, VHA has initiated a broad review of ergonomic consequences of technology implication in clinical medicine. The results will be available in FY 2004.
- VHA continues the use of a dedicated Task Group to annually survey and identify Safety and Health Program weaknesses and strengths for each VISN. Medical center senior management, safety staff, and union officials complete this survey. Recommended improvements were submitted to each VISN Director during FY 2003.
- A course of Basic Safety for Safety, Fire Protection and Industrial Hygiene was available for all new and existing VHA Safety and Health employees.
- Annual Workplace Evaluations (AWE) were performed in FY 2003 at medical centers by VISN staff. Deficiencies were identified and programs were re-evaluated. The findings are discussed with top management of the medical centers. The total number of medical center evaluations completed increased by 10 percent during FY 2003.

- Within VHA medical centers, the Safety Committee remains the premier decision making body for safety and health issues. Significant issues are continually identified by various services through the information and issue-gathering process and brought to the Committee for assessment and development of recommended resolutions. Recommendations receive final approval by the medical center director. This group provides for continuous oversight of the medical center safety and health program. JCAHO surveyors regard the Safety Committee as the most important committee of the medical center.
- Written safety performance measures are maintained as a part of position descriptions from top management to rank and file employees.
- VHA maintains a VA/Union Partnership Committee that has opened new lines of communication and dialogue with employees and/or their representatives, particularly with regard to safety and health issues. The OSHA/VA/Union Partnership program assessment project indicates the new receptivity of VHA to a cooperative and collaborative approach to occupational safety and health. Medical centers continue to work toward strengthening these partnerships. Through a cooperative effort, both management and the unions are collectively involved in safety and health issues. There is union (employee) representation on every medical center safety committee. Several VISNs have Network-level safety committees with the union participating as a permanent member. These Network-level committees are continually encouraged as a "best practice" strategy. Employee representatives also take part in both internally- and externally-originated medical center inspections. Conference calls for all Union National Safety Representatives are conducted to discuss issues, announcements and program updates.
- VHA's Medical Center Decontamination Task Force conducted a needs assessment survey and identified an initial set of 78 medical facilities to receive funding, support and training for mass-casualty decontamination resulting from the use of weapons of mass destruction by terrorists. Ten decontamination training classes (4-day) were provided during FY 2003. Topics included decontamination assessment, installations and personal protective equipment.
- VHA commissioned a study through the Soldiers Biological and Chemical Command (SBCCOM), and an academic scientist to conduct a hazard analysis for agents likely used in weapons of mass destruction terrorist incidents. An expert group defined scenarios, derived necessary operational strategies, and developed an appropriate PPE posture. A report is posted on VHA's Center for Engineering and Occupational Safety and Health (CEOSH) Web site.
- VHA developed a SARS program based on Centers for Disease Control and Prevention (CDC) policies, best practices and recommendations of the VHA SARS Working Group. VHA policy requires the reporting of VA patients with suspect or possible SARS, recommendations for the evaluation and care of patients, isolation and infection control, PPE, communication and education. A VA SARS Web site was developed to provide VA clinical and policy information with access to the CDC SARS Web site.

- VHA issued an Employee Safety Alert to warn VHA 15-passenger van drivers of its high center of gravity with the propensity to a rollover accident that could occur during a sudden driver maneuver such as ice on the highway, tire separation, and going off the roadway onto the soft shoulder of the highway. Beginning October 1, 2003 (FY 2004), VHA will no longer purchase or accept donations of 15-passenger vans at VHA health care facilities.
- VHA implemented a National occupational safety and health policy in FY 2003. The policy requires accident and injury reporting requirements and standards to comply with VA policies and OSHA regulations. VHA VISNs developed written programs to ensure medical center facility compliance within their regions. The VISN programs were reviewed by VHA headquarters staff and National Union Council representatives.
- VHA has had a mandate that facilities conduct accident review boards to understand underlying causes of injuries. VHA has worked with safety and patient safety staff to develop recommendations and guidelines on examining and understanding adverse safety events through a satellite broadcast, new training materials, and Web products.

Veterans Canteen Service (VCS):

- In FY 2003, the VCS identified and eliminated the major causes of repetitive stress at the VA Central Office canteen. This included modifications to employee workstations and providing ergonomically correct equipment. In addition, VCS managers provided employees with quarterly educational materials on various safety issues, including proper lifting techniques, slips and falls, proper use of sharp utensils, and fire safety.
- During FY 2003, VCS conducted safety and workers' compensation training for over 70 VCS managers.
- FY 2003 VCS injury compensation payments decreased by 4.6 percent.

NCA:

- The safety and health of all NCA employees is of utmost importance. NCA is fully dedicated to conducting a comprehensive occupational safety and health program to prevent accidents and injuries, and to providing a safe place of employment. In order to prevent and minimize injuries and/or illnesses to personnel, occupational safety and health concerns are given full consideration in the planning, development, and operation of every program and activity throughout NCA.
- All NCA employees are encouraged to include safety awareness as a part of their daily routine. Every employee must be protected from, and every place of employment free of discrimination, restraint, interference, coercion, or reprisal for participating in NCA's safety and health program. NCA is committed to these principles and expects the full support of all employees to achieve a safer and more productive work environment for all.

- In FY 2003, NCA committed \$4.97 million to capital improvement and/or new construction projects. Projects designed to enhance/remediate workplace and employee safety and health received priority funding further exemplifying the Administration's commitment to its safety and health program.
- In FY 2003, NCA published information about safety and health policies and procedures in an official NCA Notice, Directive, and Handbook. The Under Secretary for Memorial Affairs endorsed the policy statements in December 2003.
- In FY 2003, NCA initiated this training program through the introduction of its equipment operator safety program – providing national training through Caterpillar, Inc. for all field equipment operators.
- Additionally, NCA identified monthly safety themes and topics. These will serve as the foundation for the national safety training program.
- In FY 2003, NCA collaborated with VHA for continued support with field audits and inspections.
- In FY 2003, NCA identified the need for safety standards to accurately assess program and personnel standards. The Administration also recognizes the requirement of a safety organizational assessment.

Veterans Benefits Administration (VBA):

- VBA Handbook 7700, "Occupational Safety and Health," contains occupational safety and health related training requirements.
- In conjunction with the development of a written OSH program for VBA, a review of roles and responsibilities for VBA organizations involved with OSH-related programs has been accomplished.
- VBA field stations emphasize employee training in those areas of greatest concern or interest to employees. According to field station reports, training was given in the following areas: ergonomics, workplace violence, general industry, safety and health, security awareness, anthrax and safe mail handling, stress prevention, driver safety, and hazardous materials, safety and housekeeping. Employees attend committee meetings and safety and health issues are published in a quarterly bulletin.
- Procedures and standards for the identification, assessment and resolution of OSH-related problems are detailed in VA Directive 7700, "Occupational Safety and Health;" VA Handbook 7700.1, "Occupational Safety and Health;" station circulars; and the American Federation of Government Employees (AFGE) master agreement.

- The majority of VBA space is located in General Services Administration (GSA) owned or leased buildings. VBA maintains close liaison with GSA, regional and local safety organizations, local Federal Executive Boards, and local labor organizations to ensure that employees and visitors have a safe and healthful environment. VBA offices work closely with local VHA and VISN Occupational Safety and Health staffs to provide periodic safety inspections and to take advantage of the wide variety of health and safety-related programs and training opportunities offered by VHA.
- In addition, VBA is responsible for the operation and maintenance of six department-owned regional office facilities. VBA coordinates the ongoing safety and health inspections of all VBA facilities to ensure that all building systems are environmentally sound and safe. Regularly scheduled maintenance and replacement of building systems are planned, budgeted, and systematically carried out.
- VBA annually plans, budgets, and distributes minor construction funding to its facilities, via a Delegated Miscellaneous Account, specifically established for the resolution of identified life/safety hazards.
- VBA has an ongoing process of replacing or repairing furniture that does not meet the government-wide ergonomic standards or is deemed inaccessible for handicapped employees.
- An automated external defibrillator (AED) program was implemented at VA Regional Office (VARO) in Waco, Texas. Training was provided to volunteers in the operation of the AED. Security personnel also received training from an outside source.
- VBA continues to place special emphasis on prevention of violence in the workplace. Every VBA facility has written policy on this subject and annual refresher training is required.
- VARO in Hartford, Connecticut has implemented an ergonomically correct working environment at the VA Newington campus. Enhancements include an x-ray and a magnometer, which is a magnetic swipe card to access all doors, and video cameras at all unmanned entrances.
- The Continuity of Operation Plan is updated annually, with tabletop exercises conducted on an annual basis, also. Quarterly evacuation drills are given.
- Building OSH-related policy circulars are reviewed and updated annually. These OSH-related circulars address sexual harassment, severe weather, general building access and security, smoking policy and safety of personally owned property.

Board of Veterans' Appeals (BVA):

During the past year, new computers were provided to each BVA employee. The flat screen monitor produces less glare and reflection. Ergonomically-designed keyboards are provided to all employees upon request. Two employees were provided voice-recognition software during the reporting period.

BVA continued participating in the Department of Defense (DOD) Computer/Electronic Accommodations Program (CAP) during FY 2003. The National Defense Authorization Act granted CAP the authority to "provide assistive technology, devices, and services to any department or agency in the Federal government upon the request of the head of the agency. All Federal agencies (including VA) are eligible, at no cost to the agency. During the past year, BVA accommodated two employees through this program.

3. IDENTIFY YOUR ANNUAL OSH PLANS, GOALS AND OBJECTIVES, AND SIGNIFICANT OSH INITIATIVES PLANNED AND PROGRAMMED FOR THE COMING YEAR(S).

VA: The overall plan for VA's Office of Occupational Safety and Health is to continue to support and oversee the development and operation of effective VA administration OSH programs. Several initiatives are planned to enhance VA's ability to educate and inform employees and supervisors, recognize OSH issues, and to develop goals that reduce or eliminate the severity of adverse outcomes. These goals include:

- Supporting efforts to identify, assess, and resolve OSH problems and support White House and administration efforts to improve OSH program operations, VA's Office of Occupational Safety and Health issued Annual OSH Goals for FY 2004 on behalf of the Secretary of Veterans Affairs. The goals provide basic requirements for VA organizations that support overall DOL goals and the President's SHARE initiative. Elements of the Secretary's goals included presidential goals for the reduction of lost time cases, improvement of claim submission timeliness, and program improvement items such as development of violence prevention programs.
- Continuing development of training materials and new delivery modes, including CD-ROM, Internet and satellite programs in cooperation with VHA's Employee Education Service.
- Fostering and sponsoring intra- and inter-agency projects to enhance the delivery and effectiveness of VA's OSH programs.
- Tracking and analyzing the performance of each VA Administration and staff office using the following performance indicators:

- ✓ The Presidential Initiative for Federal Agencies (Federal Workforce 2000), including case rates and timeliness of claims submission to DOL.
- ✓ The development of written policies and plans for comprehensive hazard prevention programs as applicable to each organization in response to special OSHA, OWCP, or other Presidential initiatives.
- Ensure that at least one facility OSH official/manager attends an OSH-related training opportunity.
- Perform a Job Hazard Analysis for high-risk occupations based on OSHA guidelines.
- VA continues to encourage the development of VHA, VBA, and NCA OSH Program policy documents to further implement VA Directive 7700. These policy documents are intended to enhance program commitment, provide OSH program documentation at operational levels, and provide more specific program guidance.
- The initiative to address nursing injuries and illnesses will continue in FY 2004.

VHA:

- There is emphasis on upgrading a SAFE package designed to standardize facility evaluations through the use of uniform criteria. Through a strong program of deficiency identification and decisive abatement, the potential for accidents is reduced. During FY 2004, the SAFE software package is scheduled for review and upgrade in Program Administration, Industrial Hygiene, Violence Prevention and Environment of Care Programs.
- CEOSH continues to expand its presence on the Intranet with a redesigned Web portal to provide support information in general safety, workers' compensation, fire safety, industrial hygiene, and environmental compliance. The CEOSH site has proven a valuable information resource as illustrated by the increased number of users during FY 2003 Healthcare Analysis and Information Group survey.
- ASISTS claims submission reporting will facilitate VHA efforts to meet the White House goals for FY 2004.
- VHA will continue to identify and encourage the use of "best practice" OSH initiatives.
- VHA has implemented a violence prevention performance monitor to re-develop a network of trainers and facility-specific training plans.
- VHA has identified supervisor training needs as the next critical step. A field group is developing essential content with a contractor to develop a computer-based training course. In a joint effort with OSHA Training Institute, VHA is also developing an interactive satellite course to address the responsibilities of Respiratory Protection Program Administrators.

- In FY 2004, VHA will conduct research into aggregated root cause analyses of common injury types as a major initiative to identify broad system contributions to adverse safety events.
- VHA is developing a Web site to support market-driven safety improvement for the more rapid use of safer devices.
- In FY 2004, VHA will continue to provide a series of quality improvement programs on important clinical issues, including clinical management of back pain, post-exposure prophylaxis, and psychiatric claims review.
- VHA has committed to developing an employee medical record system, tentatively named the Occupational Health Recordkeeping System (OHRs), to address Privacy Act concerns in the current management of employee records, to support better management of in-house clinical work, and to improve the ability to conduct medical surveillance.
- VHA has developed several programs to respond to threats associated with terrorism, including decontamination and personal protective device usage, bioterrorism (smallpox, anthrax) and clinician cognitive aids (pocket cards for chemical, biological, and nuclear agents). The VHA Medical Center Decontamination Task Force will conduct a needs assessment survey of additional facilities for support and training during mass-casualty decontamination resulting from the use of weapons of mass destruction by terrorists. Decontamination training and protective equipment will be provided for additional facilities entering the program.
- VHA will continue to offer training classes for union safety representatives and collateral duty staff. The basic course provides a review of safety management principles and an overview of VA Occupational Safety and Health programs, OSH regulations and standards. The main thrust of this course is to provide hazard awareness training for the union. VHA has offered this course for the last 7 years and has trained close to 250 people. For those union safety representatives that have obtained significant expertise, VHA and VA's Office of Occupational Safety and Health developed an "Intermediate Safety for Union Representatives" program. The intermediate program builds on information obtained from the "Basic Safety for Union Representatives" course. It updates union safety representatives on the latest changes in application of the safety standards for VAMC health care facilities. Attendees are provided more advanced information to assist them with their responsibilities as local union safety representatives. This course emphasizes visual learning where students are taught all the OSHA standards and shown powerpoint slides and photographs on how these potential hazards actually appear in the workplace.
- VHA is establishing a quarterly conference call for all Union safety representatives at the national and facility levels. The National Union Safety representatives will select topics and speakers.

- VHA is establishing a standard practice to extract inspection data from the OSHA National database and distribute to each VHA VISN on a quarterly basis for assessment and improvement of Network programs.

VCS:

- Expand use of the OSHA Web site by managers for training purposes.
- Continue efforts to contain workers' compensation costs.
- Introduce a safety-training module to VCS managers nationwide. This module will provide general guidelines that address various safety techniques.

NCA:

➤ **Resources:**

- ✓ In FY 2003, NCA recruited a senior safety professional to serve as the Special Assistant for Occupational Health, Safety and the Environment to the Under Secretary for Memorial Affairs. The establishment and empowerment of this position reflects the Administration's commitment to enhancing workplace and employee safety.
- ✓ Additionally, NCA recruited two professional training and education specialists and a workers' compensation program manager. The training and education positions will enhance the Administration's ability to implement a robust safety training program, while the workers' compensation manager will improve the Administration's data collection, trends analysis, and accident/injury reduction efforts.
- ✓ In FY 2004, NCA will continue to expend and commit the resources needed to ensure a resilient and respected safety program. NCA intends to deploy a national safety and health training program, enhance safety information management resources (i.e. Safety Tracker, etc.), and integrate employee incentives (i.e. Safety Awards Program).

➤ **Policies and Procedures:**

- ✓ In FY 2004, NCA intends to promulgate its Safety Directive and Handbook. National standard operating procedures for safe field operations will be drafted for the Administration's 153 cemetery and soldiers' lot sites. NCA also expects to strengthen its safety performance and trends analysis utilizing its historical workers' compensation and accident/injury reporting data.

➤ **Training:**

- ✓ As indicated above, NCA recruited a senior safety professional and two training and education specialists to launch and deploy its national safety training program.

- ✓ In FY 2004, NCA anticipates completion of its first annual equipment operator safety program, and utilization of the monthly safety themes to further promote safety awareness.

➤ **Audit and Inspection Program:**

- ✓ In FY 2004, NCA will strengthen its relationship with VHA and enhance the support received. NCA also expects to partner with OSHA, seeking their expertise and compliance assistance.

➤ **Organizational Performance and Assessment:**

- ✓ In FY 2004, NCA will initiate the incorporation of program and personnel performance standards. Additionally, in FY 2004, NCA will assess its organizational structure with respect to its safety mission.

VBA:

- VBA endorses the President's SHARE initiatives and the related injury reduction and timeliness goals.
- Develop and begin implementation of appropriate Headquarters program policies and procedures, as applicable to each organization, in response to special OSHA, OWCP, or other Presidential Initiatives. For example, current OSHA initiatives include government-wide focuses on hazard control programs related to ergonomics, workplace violence, sharps, and others as announced.
- Provide regional and facility OSH officials/managers at least one OSH-related training opportunity. For example, attendance at a national meeting/conference of a nationally recognized safety and/or health professional group, such as OSHA, the National Safety Council, or the American Industrial Hygiene Association.

4. PROVIDE COMMENTS, REQUESTS, AND RECOMMENDATIONS FOR CONSIDERATION BY OSHA'S OFFICE OF FEDERAL AGENCY PROGRAMS (OFAP) IN GOVERNMENT-WIDE OCCUPATIONAL SAFETY AND HEALTH PROGRAMS OR REPORT ANY ITEMS OF SPECIAL INTEREST CONCERNING OCCUPATIONAL SAFETY AND HEALTH ACTIVITIES OR PROGRAMS. (OPTIONAL)

VHA:

VHA suggests the Federal government discontinue the use of the LTCR as a primary measure of success.

NCA:

NCA requests OSHA's Office of Federal Agency Programs consider the following when providing customer support and compliance assistance to Federal agencies:

- Identify Federal safety themes and topics. Safety topics currently on the OSHA Web site address issues facing those in private industry.
- Provide compliance assistance to Federal agencies. OSHA's current compliance assistance program is geared toward private industry. The Federal government's mission is broad and diversified, thereby intensifying the need for tailored on-site assistance. Procedures that apply to the Federal Aviation Administration, for example, vastly differ from those needed for NCA. Missions significantly vary even within a single department. Safety operations for VHA, for example, differ greatly from those of NCA. Both Administrations, however, organizationally "belong" to the Department of Veterans Affairs.
- Host national conferences for Federal agencies to broadcast Presidential, OSHA, and OWCP initiatives, i.e. the Presidential SHARE Initiative, establish a cadre of Federal safety professionals, and facilitate networking and frequent information exchange.

VBA:

VA Regional Office and Insurance Center in Philadelphia, Pennsylvania, requests that the OSHA Office of Federal Agency Programs conduct training for a biological or chemical attack for both short- and long-term stay (shelters in place) in the workplace.

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Statistics

In FY 2003, the size of the Department of Veterans Affairs rose by 7,421 to a new level of 230,406 (See Figure 1).

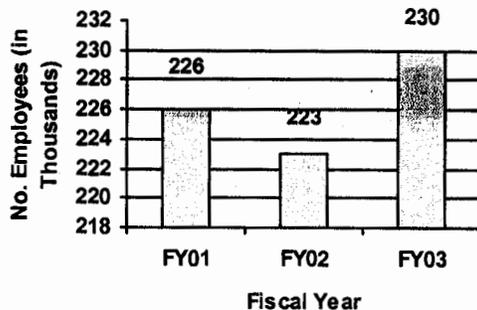


Figure 1 Total Number of employees for the past three fiscal years.

VA reported 11,924 total cases and 5,732 lost time cases in FY 2003. This represents a 28 percent and 16 percent increase, respectively, over FY 2002 numbers.

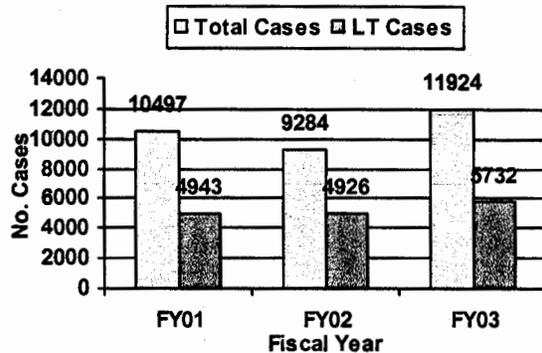


Figure 2 Total injury and illness cases and total lost time cases for the past three fiscal years.

The associated case rates increased in correlation with the related case totals. The total case rate for FY 2003 was 7.65 and the lost time case rate was 3.68 (See Figure 3).

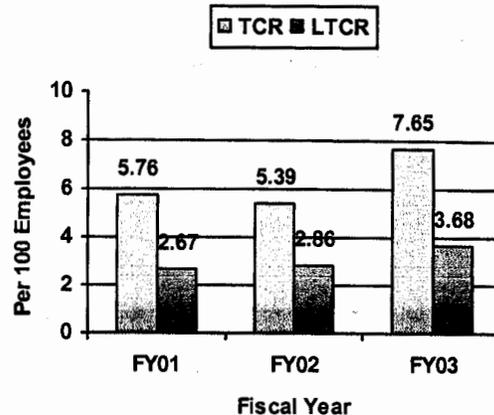


Figure 3 Total injury and illness and total lost time case rates for the past three fiscal years.

VA's workers' compensation costs for chargeback year 2003 increased by 3.8 percent compared to chargeback year 2002 (See Figure 4).

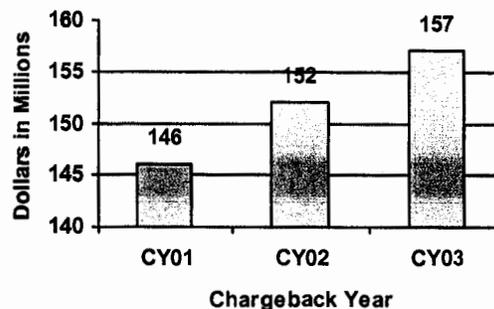


Figure 4 Workers' compensation costs for the past three chargeback years.

Training

In FY 2003, VA engaged in assessing training needs, developing programs based on those assessments, and implementing the programs. The focus of training efforts was primarily on hazard recognition and abatement, emergency management and continuity of operations, and workers' compensation case

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Training, con't.

management. Specifically, these programs included patient lifting and other hazards related to patient care and service, alleviation of stress, aggression, and violence in the workplace, respiratory protection equipment selection and use, ergonomics, falls, and lifting. In support of these initiatives, information management systems were either created or enhanced to provide far-reaching benefits to field program managers and employees.

Whenever appropriate, distance learning strategies were applied to training programs to foster the most effective and efficient use of resources and employee availability. VA organizations developed programs for satellite broadcasts, CD-ROM, and web-based applications. These initiatives created new opportunities to reach busy employees and managers by permitting employees to view material during non-traditional timeframes.

Conferences and inter-agency tasks groups were frequently used to develop and implement national training programs for VA. Other Federal agencies – including OSHA – and union partners were invited to participate. VA is currently involved in developing or implementing programs on violence prevention, personal protective equipment, accident investigation, bloodborne pathogens, ergonomics, fire safety, workplace evaluations, and many other safety program initiatives.

Accomplishments

VA has a number of unique and significant accomplishments that represent a high level of commitment, energy, and expertise.

The Veterans Health Administration has developed national performance monitors for Veterans Integrated Service Network directors, established violence prevention programs, and continued to foster partnerships in the development of workplace inspections, fire

Accomplishments, con't.

safety, employee orientation, and emergency management.

In recognition of their accomplishments, the VA Workplace Stress and Aggression Prevention Project Team received the Distinguished Service Award for Training Research for the Training Officers Conference. VA also coordinated the curriculum for the Fifth Annual Workers' Compensation Conference, a government-wide conference which provides training at both the beginner and expert levels. The VA OSH Web site was also cited by "Web Trends," an information technology journal, as a highly utilized and significant safety resource.

The National Cemetery Administration recruited a senior safety professional and two training and education specialists to implement its national safety and health training program.

The Veterans Canteen Service eliminated the major causes of repetitive stress at the VA Central Office canteen.

VA updated its safety and health policy documents during FY 2003 to re-emphasize their commitment to providing a safe and healthful workplace for all employees.

Goals

VA established the following goals for FY 2004:

VA is committed to achieving the President's "Safety, Health, and Return to Employment" (SHARE) initiative.

Special emphasis programs are planned by all VA organizations to enhance training and education programs, protect employee privacy, encourage the use of "best practices," and to establish administrative controls to ensure all employees are provided a safe and healthful working environment.