



# 2022 Interim-Year SHARP Site Self-Evaluation

**Company Name:**

**Mailing Address:**

**Physical Address:**

**Contact Person:**

**Email Address and Phone #:**

**Date Submitted:**

## 1. Safety and Health Management System Recommendations and Status:

When you qualified for SHARP and received your approval, the consultant provided recommendations to assist you in continuing to improve your safety and health management system. Please outline those recommendations, their present status, and the steps you have taken to implement them.

- A. Recommendation:  
Status:  
Steps to implement:
- B. Recommendation:  
Status:  
Steps to implement:
- C. Recommendation:  
Status:  
Steps to implement:
- D. Recommendation:  
Status:  
Steps to implement:

## 2. Significant Events:

Please discuss below any significant events that have occurred over the past year and the steps that you have taken to ensure that your safety and health management system is operating effectively. (Include any fatalities, catastrophes, imminent danger incidents, complaints, OSHA inspections, and the results of all investigations)

- A. Event:  
Correction:
- B. Event:  
Correction:



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### 3. Injury Rates:

Double click on the below chart to fill out the light gray cells with your company information

Establishment:				NAICS		
Log Year	Average # of Employees	Hours	Total Cases	Total Case Incident Rate (TCIR)	Days Away, Restricted, or Transferred Cases	Days Away, Restricted or Transferred Rate (DART)
2021						
2020						
2019						
TOTAL						
<i>Three Year Average Rates</i>						
<a href="#">Most recently published **BLS rates 2020</a>						
<i>Percent above / below BLS rate</i>						

BLS averages may be found at this link:  
[https://www.bls.gov/iif/oshwc/osh/os/summl\\_00\\_2020.htm](https://www.bls.gov/iif/oshwc/osh/os/summl_00_2020.htm)

### 4. Other Safety and Health Management System Improvements:

Please outline improvements, new equipment or procedures, incentive programs, policy changes that you have made, or activities you have engaged in to improve your safety and health management system. Please feel free to include copies of any policy or programs you may want us to review.

Click or tap here to enter text.



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## SHARP Commitment

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Company Name \_\_\_\_\_

Date \_\_\_\_\_

Agrees to comply with the following items as a SHARP participant:

### 1. Compliance

- a. We will comply with the Occupational Safety and Health Act (OSHA Act) and correct, in a timely manner, all hazards discovered through self-inspections, employee notifications, accident investigations,
- b. VOSH onsite reviews, process hazard reviews, annual evaluations, or any other means.

### 2. Correction of Deficiencies

- a. Within the shortest feasible time as mutually agreed upon with the Consultant, we will correct safety and health deficiencies related to compliance with VOSH requirements and identified during any VOSH onsite review.
- b. The correction due date(s) for serious hazards discovered will be tracked in the Action Plan.
- c. We will provide effective interim protections when appropriate for affected employees at the worksite while the identified hazard(s) are being corrected.
- d. We will provide written verification to the consultant when serious hazard(s) have been corrected.

### 3. Non-Discrimination

- a. We will protect employees given safety and health duties as part of our safety and health program from discriminatory actions resulting from their carrying out such duties, just as Section 40.1-51.2:1 of the Code of Virginia and protect employees who exercise their rights.

### 4. Notification

- a. Agree to notify the Consultant and request a subsequent on-site consultation visit when changes in working conditions or work processes occur that may introduce new hazards into the workplace.
- b. Notify the Consultant sixty (60) days in advance of the facility relocating and allowing if needed, a consultant on-site visit within thirty (30) days after the new site becomes operational to ensure compliance with the program.
- c. Post and provide information regarding all hazards identified by the consultant to employees.
- d. Notify VOSH as required under Virginia Code § 40.1-51.1.D. Report a Workplace Fatality or Severe Injury
- e. Notify the Consultant of any VOSH compliance actions at your worksite.

### 5. Incentive Programs

- a. We will not have a rate-based incentive programs that discourage employee reporting of work-related injuries and illnesses or safety and health hazards.



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## 6. Documentation

- a. We will maintain our safety and health program information and make it available for VOSH review to determine initial and continued approval to the SHARP Program. This information will include:
  - i. A copy of the worksite's OSHA 300 log,
  - ii. A copy of the worksite's Injury and Illness incident reports, and
  - iii. Information regarding the completion of item(s) set forth in the Action Plan.

## 7. Interim-year self-evaluation

- a. Each year, we will submit the following information to the Consultant:
  - i. A copy of the worksite's OSHA 300 and 300a logs.

## 8. Organizational Changes

- a. Whenever significant organizational or ownership changes occur, we will provide the Consultant, a new Statement of Commitment signed by management.

I understand the company's safety and health obligations while participating in the SHARP Program. I also understand that the company may withdraw its participating at any time or for any reason should we so desire.

In applying for the SHARP Program, I agree to make all requested occupational safety and health information available to VOSH upon requested and to allow the Consultation Service to make visits to any of our site in Virginia.

Highest Site Company Official Signature and Title	Date
Print Name and Title	
Highest Union Official Site Representative Signature and Title	Date
Print Name and Title	

**Please return this completed Self-Evaluation along with a copy of your OSHA 300 and 300a's injury and illness logs for the last 3 full calendar years, as well as your current year's log and a copy of your Action Plan. These shall be submitted to your VOSH Consultant each interim year between your original approval and your exemption end date.**