

Work-Related Injury and Illness Recordkeeping

Short description

This section outlines the guidance for maintaining regulatory health and safety records for work-related injuries and illnesses.

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1 Objective and area of application

The objective of this section is to ensure that work related injury and illness data is accurately reported and recorded to ensure compliance with all regulatory requirements. It is essential that work related health and safety injury and illness data be recorded by Centennial is uniform and accurate to assure the consistency and validity of statistical data that may be used by Centennial and regulatory agencies for many purposes, including identifying high risk projects for increased inspections and performance measurement as part of the PDCA process to assess the HSEQ management system for continuous process and system improvement.

The Centennial HSEQ management system and regulatory agencies require that injury and illness data be reported, recorded and maintained. Records of fatalities, injuries, and illnesses must be recorded for each case that:

- Is work-related
- Is a new case
- Meets one or more of the criteria for being a “reportable case”

This health and safety recordkeeping procedure applies to all Centennial employee work-related injuries and illness cases. All work-related injuries and/or illnesses must be reported immediately to the RSM and/or the HSEQ Director and must be input into Active as required.

2 Superior and additional applicable documents

1000_GD_11_01_en_1.2 Group Principle on HSEQ

1000_GP_11_01_en_7.0 Group Policy on Health, Safety, Environment and Quality (HSEQ)

1000_SOP_11_01_en_2.0 SOP on HSEQ Management

1000_SOP_11_03_en_1.0 SOP on Leadership & Workers Involvement

1000_SOP_11_04_en_1.0 SOP on Health & Safety Standards of Work

1000_SOP_11_05_en_1.0 SOP on HSEQ Incidents & Accounting Rules

1000_SOP_11_06_en_1.0 SOP on Administration and use of the HSEQ management software ACTIVE

29 CFR 1904- Recordkeeping

OSHA 300 Log of Work-Related Injuries and Illnesses

OSHA 300A Summary of Work-Related Injuries and Illnesses

This section of the HSEQ Manual applies to all Centennial employees and subcontractors who are performing work in Centennial facilities and project sites. There may be more stringent requirements than this section as defined by specific State, local or contract specific recordkeeping requirements. If there is a conflict between this section and other applicable regulations, the more stringent will apply.

3 Definitions

The following definitions of terms are important for an understanding of this section.

Term	Definition
Centennial	All Centennial employees, joint venture employees, subcontractors and business partners
HSEQ	Health, Safety, Environment and Quality
PDCA	The plan, do, check, act process for continuous improvement.
Active	Risk management HSEQ software platform.
OSHA	Occupational Safety and Health Administration
OSHA 300 Log	Log of work-related injuries and illnesses
OSHA 300A	Annual summary of work-related injuries and illnesses
Amputation	The traumatic loss of a limb or other external body part
In-patient hospitalization	A formal admission to the in-patient service of a hospital or clinic for care or treatment
Loss of an eye	The physical removal of the eye
HSEQ Director	Leads the HSEQ Team
RSM	Regional Safety Manager

4 Determining injury or illness work-relatedness

Any injury or illness is considered to be work-related if an event or exposure in the work environment either:

- Caused or contributed to the resulting condition
- Significantly aggravated a pre-existing injury or illness

Any injury or illness is considered to be work-related if an event or exposure in the work environment is:

- A discernible cause of the injury or illness
- A significant aggravation to a pre-existing condition

The work event or exposure needs to be one of the discernible causes. The work event or exposure does not need to be the sole or predominant cause.

The work environment is defined as the area or place where the employee performs his/her work activities including the project site, the assigned parking area (and walkway to the work area), and travel between work areas either walking or in a vehicle, etc. The work environment does not include commuting between the residence or hotel and the assigned work site.

5 General health and safety recordkeeping criteria

Any health and safety condition, injury or illness that is work-related and is not a pre-existing condition that was aggravated by work event or exposure and meets the following criteria is considered recordable if it results in any one of the following six conditions:

- Death
- Days away from work
- Restricted work or job transfer
- Medical treatment beyond first aid
- Loss of consciousness
- A significant injury or illness diagnosed by a physician or other licensed health care professional

Any Centennial employee recordable injury or illness will be investigated according to HSEQ Manual section 8 (Incident and Near Miss Reporting), entered into the Active HSEQ software program and recorded on the OSHA 300 Log (Appendix 1) as required by the HSEQ Director or a designated RSM.

5.1 Fatality

Any work related injury or illness that results in an employee fatality must be recorded by entering a check mark in column (G) of the OSHA 300 Log for cases resulting in death. Any work-related fatality must be reported to OSHA within 8 hours according to paragraph 7 of this section.

5.2 Days away from work

When a work related injury or illness causes a Centennial employee to miss one or more days away from work it must be recorded as an injury or illness in Column (H) on the OSHA 300 Log as a lost workday case and the total of days away from work must be recorded in the OSHA 300 column (K).

- Days away from work cases will be counted starting from the day after the injury occurred or the illness began or from the first day away from work following the injury or illness beyond the day of the injury or illness
- Days away from work will end on the date the physician or other licensed health care professional releases the employee to return to work
- Days away from work are counted by calendar days the employee was unable to work as a result of the injury or illness, regardless of whether or not the employee was scheduled to work on those day(s) (This includes weekend days, holidays, vacation days)
- Days away from work will be capped once the total reaches 180 days away from work and/or days of job transfer or restriction

5.3 Work restriction or job transfer

When an injury or illness involves Centennial employee work restrictions or job transfer, the HSEQ Director or a designated RSM will record the injury or illness on the OSHA 300 Log by placing a check mark in column (I) and enter the total number of restricted or transferred days in the restricted workday column (L).

Restricted work or job transfer occurs as the result of a work-related injury or illness:

- A Centennial employee is kept from performing one or more of the routine functions of his/her job, or from working the full day that he/she would otherwise work
- A physician or other licensed health care professional recommends that the Centennial employee not perform one or more of the routine functions of their job, or not work the full workday that they would otherwise work

For recordkeeping purposes, an employee's routine functions are those work activities the employee regularly performs at least once per week. A recommended work restriction is recordable only if it affects one or more of the employee's routine job functions. A partial day of work is recorded as a day of job transfer or restriction for recordkeeping purposes, except for the day on which the injury occurred or the illness began. Cases involving job transfer or restriction will be counted in the same way that days away from work are counted.

5.4 Medical and first aid treatment

One of the most confusing and important aspects of work-related health and safety recordkeeping is correctly determining if a work-related injury or illness is recordable. The 29 CFR 1904 standard defines the specific criteria of medical treatment and first aid treatment regarding recordkeeping decisions.

Examples of medical treatment that is greater than first aid treatment include:

- Administering immunizations, such as Hepatitis B (does not include tetanus)
- Using wound closing devices, such as sutures, staples, skin adhesive, etc.
- Using rigid means of support to immobilize parts of the body
- Physical therapy or chiropractic treatment
- Prescription medication or nonprescription medication at prescription strength

Medical Treatment that is greater than first aid treatment does not include:

- Visits to a physician or other licensed health care professional solely for observation or counseling
- The conduct of diagnostic procedures, such as X-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes
- The use of prescription medication strictly for diagnostic purposes

Examples of first aid treatment include:

- Using a nonprescription medication at nonprescription strength
- Administration of tetanus immunizations
- Cleaning, flushing or soaking wounds on the surface of the skin
- Use of wound coverings, such as bandages, gauze pads, etc.
- Application of hot or cold therapy
- Use of any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.
- Use of temporary immobilization devices while transporting an accident victim (e.g. splints, slings, neck collars, back boards, etc.)
- Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister
- Removal of foreign bodies from the eye using only irrigation or a cotton swab
- Removal of splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means
- Use of finger guards
- Administration of massage
- Drinking fluids to relieve heat stress

5.5 Loss of consciousness

The HSEQ Director or a designated RSM will record any work-related injury or illness which results in a loss of consciousness regardless of how long the worker is unconscious.

5.6 Work-related illness

Illnesses include both acute and chronic illnesses, such as, but not limited to, a skin disease (i.e. contact dermatitis), respiratory disorder (i.e. occupational asthma, pneumoconiosis), or poisoning (i.e. lead poisoning, solvent intoxication). The HSEQ Director or a designated RSM will record any work-related occupational illness on the OSHA 300 column (M).

5.7 Pre-existing or severely aggravated conditions

Centennial will consider any non-work-related injury or illness that, according to 29 CFR 1904, involves "signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment" as a pre-existing condition. Pre-existing conditions will also include any injury or illness that the employee experienced while working for another employer.

A pre-existing injury or illness is significantly aggravated when an event or exposure in the work environment results in any of the circumstances below:

- Death, provided that the pre-existing injury or illness would likely not have resulted in death but for the occupational event or exposure
- Loss of consciousness, provided that the pre-existing injury or illness would likely not have resulted in loss of consciousness but for the occupational event or exposure
- One or more days away from work, of restricted work, or days of job transfer that otherwise would not have occurred but for the occupational event or exposure
- Medical treatment in a case where no medical treatment was needed for the injury or illness before the workplace event or exposure, or a change in medical treatment was necessitated by the workplace event or exposure

5.8 Employees working remotely

When a Centennial employee is working remotely and reports an injury or illness that the employee's direct work activities caused or contributed to the injury or illness, or significantly aggravated a preexisting injury, the case is considered work-related and must be further investigated and evaluated in accordance with the Centennial Incident and Near Miss Investigation procedure to determine if the injury or illness meets the recording criteria. If the injury or illness is related to non-work activities then the case is not considered work-related.

6 OSHA 300 Log and 300A summary

Centennial uses the OSHA 300 log along with our HSEQ management system software (Active) to record and maintain information about employee injuries and illnesses. The OSHA 300 Log is divided into three general sections:

- Identity (name, case number, job title, etc.)
- Descriptive (date, injury location, description of incident, etc.)
- Classification (type of injury, days away from work, days on restriction, etc.)

Guidelines to use for maintaining an OSHA 300 log:

- Maintain the OSHA 300 log on a calendar year cycle (not fiscal)
- Record cases within seven calendar days of receiving information that a recordable case has occurred
- Retain the OSHA 300 log for five years

At the end of each year the HSEQ Director will prepare the OSHA 300A (Appendix 2) which is an annual summary of injuries and illnesses that occurred during the previous calendar year for each establishment. An establishment, as defined by 29 CFR 1904.46 is "a single physical location where business is conducted, or where services or industrial operations are performed; the place where employees report for work, operate from or from which they are paid."

The HSEQ Director may also create OSHA 300A summaries for each contract for business development purposes, quick contract specific injury and illness statistics or to maintain specific data in the event of an OSHA or other regulatory inspection. The annual summary, OSHA 300A Summary of Work-Related Injuries and Illnesses, tracks work-related injury and illness totals for the previous year by category by adds the totals from columns G through M of the OSHA 300 Log of Work-Related Injuries and Illnesses.

The OSHA 300A includes:

- Calendar year covered
- Company's name
- Company's address
- Annual average number of employees
- Total hours worked by all employees covered by the OSHA 300 log

The OSHA 300A summary must be:

- Posted by February 1 and remain posted until April 30
- Posted in an area where employees have access and may view the summary
- Certified (signed) by a company executive, stating that the information is correct
- Retained for five years

7 Reporting fatalities and severe injuries

The following work-related events shall be reported to OSHA in the associated timeframes specified below:

- Fatalities (within 8 hours)
- In-patient hospitalizations of one or more employees (within 24 hours)
- Amputations (within 24 hours)
- Loss of an eye (within 24 hours)

7.1 Criteria for reporting fatalities and severe events

Centennial shall report any fatality that occurs within 8 hours to the OSHA area office. Work related fatalities shall be reported to OSHA if they have occurred within 30 days of a work-related incident.

Centennial shall report any work-related in-patient hospitalization of one or more employees, amputation, or eye loss that occurs within 24 hours to the OSHA area office.

The following information shall be reported to OSHA for any work-related fatality or severe injury:

- Establishment name
- Location of the work-related incident
- Time of the work-related incident
- Type of reportable event (i.e., fatality, in-patient hospitalization, amputation or loss of an eye)
- Number of employees who suffered the event
- Names of the employees who suffered the event
- Contact person and his or her phone number
- Brief description of the work-related incident

Notification is not required to OSHA if the event:

- Resulted from a motor vehicle accident on a public street or highway, except in a construction work zone
- Occurred on a commercial or public transportation system. Examples include, but are not limited to:
 - o Airplane
 - o Subway
 - o Bus
 - o Ferry
 - o Street car
 - o Light rail
 - o Train
- Occurred more than 30 days after the work-related incident in the case of a fatality or more than 24 hours after the work-related incident in the case of an in-patient hospitalization, amputation, or loss of an eye
- In-patient hospitalization strictly for diagnostic testing or observation only
 - o In-patient hospitalization due to heart attack shall only be reported if it resulted from a work-related incident

8 Amendment history

Date	Version	Revised content
01.29.2014	1.0	Initial Preparation
01.01.2018	2.0	Updates to Paragraph 1 Objective and area of application (reporting and input into Active), Paragraph 2 Superior Documents (add the Group Policy and Global Standards), Paragraph 3 Definitions (Centennial and HSEQ Director), Paragraph 5 General health and safety recordkeeping criteria (recording), Paragraph 5.1 Fatality (Changed from Death), Paragraph 5.3 Work restriction or job transfer (recording), Paragraph 5.5 Loss of consciousness (recording), Paragraph 5.6 Work-related illness (recording) and Paragraph 6 OSHA 300 Log and 300A summary (responsibility)
07.31.2026	2.1	Updated Super Documents. Updates to Section 5.3 to include skin adhesive. Change PSM to RSM throughout

9 Appendix

Appendix 1: OSHA 300 Log of Work-Related Injuries and Illnesses
(0206500_CP_11_09_en_A1)

Appendix 2: OSHA 300A Summary of Work-Related Injuries and Illnesses
(0206500_CP_11_09_en_A2)

Log of Work-Related Injuries and Illnesses

Year

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-017

Establishment name _____

City _____ State _____

[illegible]

Be sure to transfer these totals to the Summary page (Form 300A) before you post it.

Public reporting burden for this collection of information is estimated to average 14 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

OSHA's Form 300A (Rev. 01/2004)

0206500_CP_11_09_en_A2

Year _____

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

OSHA's Form 300A (Rev. 01/2004)

0206500_CP_11_09_en_A2

Year _____

U.S. Department of Labor
Occupational Safety and Health Administration

Form approved OMB no. 1218-0176

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you've added the entries from every page of the log. If you had no cases write "0."

Employees former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 29 CFR 1904.35, in OSHA's Recordkeeping rule, for further details on the access provisions for these forms.

Number of Cases			
Total number of deaths	Total number of cases with days away from work	Total number of cases with job transfer or restriction	Total number of other recordable cases
0	0	0	0
(G)	(H)	(I)	(J)

Number of Days	
Total number of days away from work	Total number of days of job transfer or restriction
0	0
(K)	(L)

Injury and Illness Types			
Total number of...			
(M)			
(1) Injury	0	(4) Poisoning	0
(2) Skin Disorder	0	(5) Hearing Loss	0
(3) Respiratory Condition	0	(6) All Other Illnesses	0

Post this Summary page from February 1 to April 30 of the year following the year covered by the form

Public reporting burden for this collection of information is estimated to average 58 minutes per response, including time to review the instruction, search and gather the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about these estimates or any aspects of this data collection, contact: US Department of Labor, OSHA Office of Statistics, Room N-3644, 200 Constitution Ave, NW, Washington, DC 20210. Do not send the completed forms to this office.

Establishment information

Your establishment name

Street

CityStateZip

Industry description (e.g., Manufacture of motor truck trailers)

Standard Industrial Classification (SIC), if known (e.g., SIC 3715)

OR North American Industrial Classification (NAICS), if known (e.g., 336212)

Employment information

Annual average number of employees

Total hours worked by all employees last year

Sign here

Knowingly falsifying this document may result in a fine.

I certify that I have examined this document and that to the best of my knowledge the entries are true, accurate, and complete.

Company executive

Title

Phone

Date