



**PESH Federal Fiscal Year 2015  
State OSHA Annual Report  
(SOAR)**

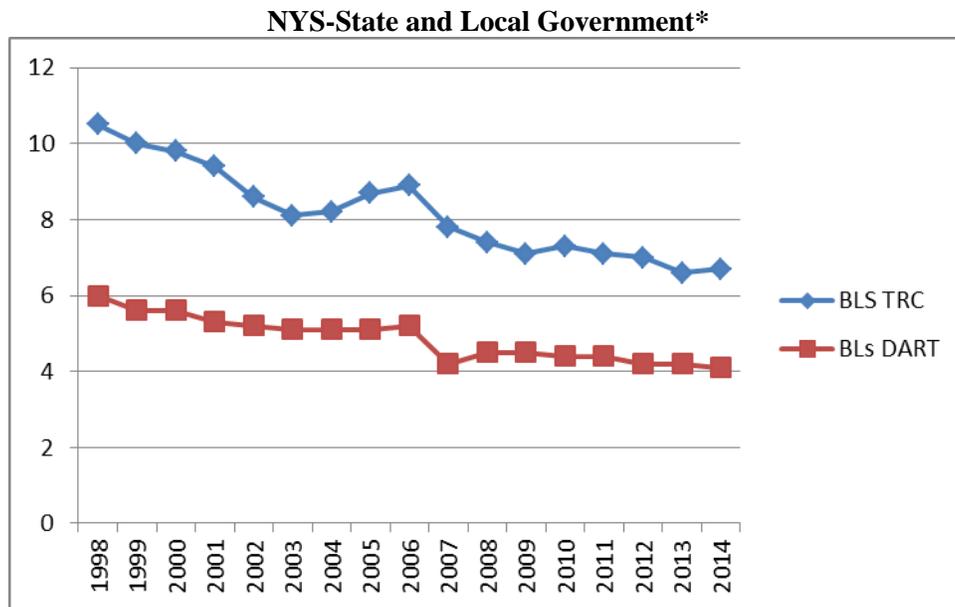
## Annual Performance Plan Activities FFY 2015

The Division of Safety and Health (DOSH) is one of two divisions within the Worker Protection Bureau of the New York State Department of Labor. The Division of Safety and Health administers ten programs to protect the public and working men and women of New York from hazards, accidents and injuries; one of which is the Public Employee Safety and Health (PESH) Program. The PESH Program was created in 1980 and oversees workplace protection of public employees at the state and local levels through the enforcement of OSHA and specific State regulations. Public sector employers include State, County, Town, Village governments, Public Authorities, School Districts and Paid and Volunteer Fire Departments. The PESH Program provides protection through two main functions - enforcement and consultation services.

In addition, the PESH Program instituted a Strategic Plan in 1998. The PESH Strategic Plan is an initiative which focuses on select industries which have high injury and illness or Days Away, Restricted or Transfer (DART) rates. The PESH Strategic Plan consists of three distinct committees including Fire Service, Police Protection (County Level) and Healthcare (specifically nursing homes and residential mental health). Each committee identifies the cause(s) of injuries to employees in their sector and focuses on building partnerships with labor and management in the development of strategies to reduce the occurrence and/or seriousness of these injuries.

The PESH Program continues to make significant progress in protecting New York State’s public employees and promoting a safe and healthy workplace. The activities and accomplishments of the PESH Program and the Strategic Plan committees are identified in this report. The following are noteworthy statistical highlights and trends.

Based on the Bureau of Labor Statistics, the Total Recordable Injury and Illness Incident Rate (TRC) for CY 2014 for state and local government employment was 6.7 per 100 full-time equivalent workers. This is a 0.1 increase from 2013 when it was 6.6. The DART rate for CY 2014 was 4.1 which is a 0.1 decrease from CY 2013. Both the Total Recordable Injury and Illness Rates and the DART Rates have experienced a fairly consistent trend of declining rates since the inception of the Strategic Plan in 1998. Overall the TRC Rate has decreased more than 37% and the DART Rate 30% over this time period.



\* Based on BLS data

TRC- Total Recordable Injury and Illness Rate

DART – Days Away, Restricted, Transfer Rate

PESH conducted 1,513 inspections in FFY 2015 which is 79.6% of the projected 1900 inspection goal. Safety staff conducted 1,067 inspections (79% of the goal) and industrial hygiene staff conducted 446 inspections (81% of their goal). The change to the OIS system and the loss of enforcement staff during the year had an effect on the totals for the year.

There were a total of 2,930 enforcement violations issued in FFY 2015. Of that total three (3) were willful serious, four (4) were FTA serious, seven (7) were repeat serious, 699 were non-serious and 2,217 were serious violations. There were 166,138 employees covered by the inspections performed in FFY 2015.

PESH investigated 393 complaints in FFY 2015.

PESH performed 17 FATCAT investigations in FFY 2015.

PESH investigated 19 of the reported 20 allegations of discrimination reported by employees in FFY 2015.

PESH performed 257 consultations in FFY 2015 which was 86% of our projected goal. During FFY 2015 PESH performed 324 consultations. During FFY 2015 PESH lost five (5) of their 11 consultants to promotion or retirement, this had a direct impact on the overall consultation and compliance assistance performance during this period. In addition to consultation visits, PESH performed a total of 131 Compliance Assistance Visits in FFY 2015, which affected 1,548 different employers and 73,750 total employees. During FFY 2015 PESH performed 166 outreach visits.

There were seven (7) new contested cases in FFY 2015 and there were three (3) contested cases that were closed during this same period.

There were four informal conferences held during FFY 2015.

PESH issued penalty bills to twelve (12) employers for a total of \$84,592 during FFY 2015.

# Progress toward Strategic Plan Goals

## Strategic Goal 1

The overall goal was to continue developing and implementing strategies to improve workplace safety and health for all public employees, with special focus on those in the select strategic plan industries. The Strategic Plan Performance Goals for FFY2015 were:

- Decrease the Injury and Illness Rate by 1% in NAICS 922120 (Police Protection, County Government).
- Decrease Injury and Illness Rate by 1% in NAICS 922160 (Fire Service)
- Decrease the Lost Work Day Rate by 1% in the following healthcare sectors:
  - NAICS 623110 (Nursing Care Facilities)
  - NAICS 622110 (Hospitals)

## County Level Police Protection (NAICS 922120)

**Strategic Goal:** Improve workplace safety and health for all public employees.

**Performance Goal #1:** Reduce Injury and Illness Rate by 1% in County Level NAICS 922120.

**Baseline:** 2010

### Activity Measures:

**Partnerships** – This committee’s primary focus is on building partnerships with the NYS Sheriff’s Association, various county level sheriff’s departments and related associations. This year new partnerships were made with NYS Association of Police Chiefs, where the group received an invitation to attend their annual conference which will be held in Buffalo in June 2016.

**Injury Data Collection and Analysis** – The Log of Work Related Injuries and Illnesses (SH900) and the Summary of Work Related Injuries and Illnesses (SH900.1) for 2014 have been collected for each county Sheriff’s Department (excluding correctional facilities). Data has been assessed and outreach has been developed based on these trends.

**Outreach**– There was a total of 10 Compliance Assistance Visits completed during FFY 2015, compared to the goal for the year which was eight (8).

**Consultations** – There were eight (8) consultation visits in FFY 2015, compared to the goal for the year which was five (5).

**Inspections** – There were 67 inspections conducted in FFY 2015, the goal for the year was 68.

**Primary Outcome Measures:**

The primary goal of this committee was to reduce the Injury Rate by 1%. This will be the last year for the CY 2010 baseline, next calendar year the group will start using CY 2012 as a new baseline. The SH900.1 was used to calculate the rates and was provided directly by the counties. As depicted below, the Total Recordable Case Rate decreased 15.0% and the DART Rate decreased 14.9% compared to the 2010 baseline year.

**Police Service Injury and DART Rates**

Year	2010 (Baseline)	2011	2012	2013	2014	% Change from Baseline
Total Recordable Incident Rate*	16	17	16.3	14.0	13.6	15.0% Decrease
DART Rate*	9.4	9.7	9.7	8.4	8	14.9% Decrease

\* Based on SH900.1's collected by the committee.

**Intermediate Outcome Measures:**

Measure Description	Baseline Year (2010)	1st Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	YTD	FFY 2015 Goal
Increase # Consultations by 10% **	4	5	1	1	0	8	5
Increase # Inspections by 10% **	62	7	17	15	16	67	68
Increase # Compliance Assistance Visits by 10% **	7	3	3	1	3	10	8

\*\*OSHA Performance Indicators & OIS data

Note: Quarters may not equal YTD due to late IMIS/OIS entries

## **County Level Police Protection**

### **Introduction:**

Since inception of the Law Enforcement Strategic Planning Group (2012 FFY), an emphasis has been placed on identifying and maintaining contacts within the law enforcement community. The contacts made have become very helpful each year when obtaining Injury and Illness data. Each year the data collection is a labor intensive task for the group, in FFY 2015, again much of the committee's efforts were focused on obtaining and analyzing the SH 900 and SH 900.1 data from the various county level police departments. This information, coupled with existing research, literature and hazard recognition will be used to develop strategies to help reduce injuries in this sector going forward.

### **Partnership Activity:**

The committee members continued to develop new partnerships, during FFY 2015 members met with the NYS Association of Police Chiefs, where the group is planning on presenting at the association's annual conference in June of 2016. Group members also attended and presented at the 2015 Annual Sheriff Association Conference. The PESH Information booth was also staffed at this conference providing additional opportunities to connect with the law enforcement community. The partnership with the NYS Division of Criminal Justice Services was utilized to share information contained in the group's latest factsheets on Respiratory Protection for Law Enforcement and Fentanyl Hazards. Both factsheets were finalized in FFY 2015 and this information is now included on the committee's updated Law Enforcement Resource CD.

### **Injury Data Collection & Analysis:**

SH 900's and SH 900.1's have been collected and injury and DART rates have been calculated. Information from the SH900's is being evaluated to identify preventable injuries. Injury control strategies are being developed based on this evaluation.

### **Outreach:**

There were a total of 10 Compliance Assistance Visits conducted during FFY 2015; this was a 30% increase from the 2010 base line year and two more than the stated goal for the year. Each year the committee updates the Law Enforcement Resource CD. The CD provides education, information and resources addressing a wide variety of safety and health topics that would be applicable to the police protection sector. New additions to this year's CD included factsheets on Respiratory Protection and Fentanyl Hazards both of which were specifically tailed to discuss hazards unique to law enforcement. Copies of the CD can be obtained from the various district offices or PESH staff can access the files on the O drive.

### **Inspections and Consultations:**

There were a total of 67 inspections performed during the 2015 FFY which was a 7.5% increase from the 2010 baseline and one inspection short of the 2015 goal. There were a total of 10 consultations performed during the same period which is a 30% increase from the baseline year.

### **Training:**

Police agencies are not typically open to training performed by civilians. Committee members are working with this restriction by meeting with decision makers of various agencies who are in a position to incorporate some of the PESH resources. Committee members have met with representatives from the New York State Preparedness Center in Oriskany, NY and the New York State Sheriff's Association. Each committee member has been asked to perform outreach with the zone training academy within their assigned area.

### **Future Activities Planned:**

In FFY 2016 this committee intends to continue with the success from increased personal contacts within the affected law enforcement jurisdiction. Their plan will also include development of additional informational and educational materials for distribution through NYSDCJS, continued production and updating of the Law Enforcement Resource CD, and increasing consultation activity, specifically program

and training assistance.

Committee members will continue to work with the Department of Labor's Communications Office to add the contents from the 2015 Law Enforcement Resource CD on the NYSDOL internet site so that it's readily accessible and provided in a more "searchable" format. This will also help PESH to update the individual items without sending out new CDs when new information becomes available. The committee participants anticipate spending more time with sector employers to improve their safety and health programs, and less time dealing with recordkeeping issues. This committee also plans to develop and disseminate a SWAT/SERT team occupational safety & health advisory bulletin.

## Fire Service - NAICS 922160

**Strategic Goal:** Improve workplace safety and health for all public employees.

**Performance Goal # 2:** Decrease the Injury and Illness Rate by 1.0%/ year. Improve accuracy of Injury and Illness data.

**Baseline Year:** 2008

### Activity Measures:

**Partnerships** – This committee continued building partnerships with the Fireman’s Association of the State Of New York (FASNY), New York State Association of Fire Chiefs (NYSAFC) and county fire coordinators and emergency managers.

**Outreach**– There were 33 Compliance Assistance Visits conducted during the 2015 FFY.

**Consultations** – There were 33 consultations conducted in FFY 2015.

**Inspections** – There were 78 inspections conducted in FFY 2015.

### Primary Outcome Measures:

**Fire Service Injury and DART Rates**

Year	2008 Baseline	2009	2010	2011	2012	2013	2014	2015**	% Change from Baseline
Injury Rate*	53.1	44.4	34.3	29.9	21.8	24.0	79.1		32.9% Increase
DART Rate*	51.1	41.9	20.9	28.7	20.0	23.0	77.5		34.1% Increase

\* Based on BLS Data

\*\*2015 BLS Injury data was not yet available

### Intermediate Outcome Measures:

Measure Description	Baseline Year 2008	1st Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	YTD	FFY Goal
Perform 10% more Inspections compared to baseline year**	93	11	24	13	16	78	102
Perform 10% more consultations compared to baseline year**	23	6	2	13	9	33	25
Provide 10% more Compliance Assistance visits compared to baseline year**	101	1	2	10	20	33	111

\*\* OSHA Performance Indicators & OIS Data

Note: Quarters may not equal YTD due to late IMIS/OIS entries

## **Fire Service**

### **Introduction:**

The Fire Strategic Planning committee is currently working under new leadership. Previous strategies were reviewed in an attempt to provide a new approach to assisting the New York's fire service community. Committee meetings have been conducted with members to discuss different strategies in obtaining PESH Injury and Illness information. Currently there are approximately 1650 fire departments and fire stations within New York State. Obtaining and analyzing injury and illness data from each fire department would be too time consuming and would not be considered feasible. The group has been using Bureau of Labor Statistics (BLS) annual reporting data to track fire fighter illness and injuries as well as fatalities. The BLS data does not provide specifics where the group can identify trends and develop strategies to assist; also possible outliers were found in the 2014 data that are difficult to explain.

During 2015 PESH adopted a "Best Practices" approach to fire fighter's training requirements. The training recommendations were taken from the requirements for paid fire fighters as prescribed by the New York State Office of Fire Prevention and Control. Committee participants were involved in the review of new outreach documents relating to the Best Practices. The final documents have since been added to the 2015 PESH Fire Resource CD.

### **Partnership Activity:**

This committee continues to work with FASNY, NYSAFC and County Fire Coordinators as it relates to PESH activities. Members continue to network with county level emergency managers through the New York State Emergency Management Association (NYSEMA) and the Local Emergency Planning Committee (LEPC) meetings.

### **Outreach and Interventions:**

Committee participants completed a factsheet about the dangers associated with overhaul environments after a fire. The factsheet describes the respiratory and dermal exposures that firefighters receive when not wearing the proper personal protective equipment. Other projects included participation in two different multi-agency severe weather related exercises. During the 2015 WRECKIT Exercise committee members participated inside the New York State Office of Emergency Services, Emergency Operation Center. The exercise was used to test our response protocols and train new employees on our responsibilities at the emergency operations center

PESH conducted 37 Compliance Assistance visits during FFY 2015 in this sector. The resources on the 2015 Fire Service Resource CD were updated to include the recommended Best Practices training programs for fire departments and the Overhaul Factsheet.

### **Consultations:**

PESH conducted 25 consultations in FFY 2015. This is an 8% increase from the 2008 Baseline year and meets the Federal Fiscal Year's goal.

### **Inspections:**

There were 82 inspections in the fire service NAICS in FFY 2015. Although inspections in Fire Service have declined by 12% from the baseline year of 2008; this is attributed to various open inspectors' positions and new inspectors still working toward obtaining the minimum OSHA Institute prerequisite training.

### **Training Seminars:**

There were no training seminars given by committee members in FFY2014.

### **Future Activities Planned:**

For FFY 2016, committee members will be implementing a new strategy for obtaining injury and illness data from random groups of fire departments across New York State. This information will be compared

to the same year's BLS data to look for consistencies in reporting data and also to identify any trends and patterns to fire fighter's injuries and illnesses.

## **Residential Nursing Care (NAICS 623110) and Acute Hospital Care (NAICS 622110)**

**Strategic Goal:** Improve workplace safety and health for all public employees.

**Performance Goal 3:** Reduce the Lost Work Day Rate by 1.0% in NAICS 623110 and 622110.

**Baseline Year:** 2012

### **Activity Measures:**

**Partnerships** –This committee continued building and maintaining partnerships with organized labor (PEF and CSEA), advocacy groups (NYS Zero Lift Task Force, NYCOSH, WNYCOSH) and various healthcare facilities. Safe patient handling assistance programs and other forms of assistance are being provided to public sector long term care and acute healthcare facilities.

**Injury Data Collection and Analysis** - The Log of Work Related Injuries and Illnesses (SH900) and the Summary of Work Related Injuries and Illnesses (SH-900.1) were used to assemble statistics relating to nursing home and acute hospital facilities covered by this committee.

**Compliance Assistance Activities** – There were seven (7) Compliance Assistance Visits conducted in Nursing and Hospital Care settings in FFY 2015. The PESH Compliance Assistance database was used to track Compliance Assistance Activities.

**Consultations** – There were two (2) consultation visits conducted between Nursing and Acute Hospital Care settings.

**Inspections** – The OSHA IMIS Performance Indicators and OIS were used to assemble inspection data. During FFY 2015 there were 17 inspections conducted in Nursing and Acute Hospital Care facilities. This is a 32% decrease from the FFY 2012 baseline. This shortfall can partly be attributed to a loss of inspectors to job changes and the lag associated with filling open positions during the 2015 FFY. Once the open positions are filled, new employees are mandated to attend OTI to obtain the prerequisite enforcement classes. The change to OIS has also impacted enforcement production as well.

**Training Seminars** – Strategic plan committee members and the Department of Labor were involved in co-sponsoring the 2015 Safe Patient Handling Conference. The date of this conference falls outside FFY 2015 but group members did spend significant time planning and coordinating for the conference within the reported year.

**Primary Outcome Measures:**

**Nursing Care Facilities (NAICS 623110)**

<b>Nursing and Residential Care Facilities</b>			
Measure	CY2012 Baseline*	CY2013*	CY2014*
# Lost Work Days due to Resident Handling	13,375	10554	10,530
Change	Baseline	21.1% Decrease	21.3% Decrease
<b>General and Surgical Hospitals</b>			
Measure	CY2012 Baseline*	CY2013*	CY2014*
# Lost Work Days due to Resident Handling	12,335	NA <sup>1</sup>	9,863
Change	Baseline	NA	20.05% Decrease

<b>Nursing and Residential Care Facilities</b>			
Measure	CY2012 Baseline	CY2013	CY2014
Lost Work Day Rate	7.8	6.2	7.0
Change	Baseline	20.5% Decrease	10.3% Decrease
<b>General and Surgical Hospitals</b>			
Measure	CY2012 Baseline	CY2013	CY2014
Lost Work Day Rate	3.9	NA <sup>1</sup>	3.6
Change	Baseline	NA	7.7% Decrease

\*Lost Work Day Rate - # cases resulting in lost time X 200,000 / total # work hours (Based on SH900.1)

NA – Not available

1. The lost workday total was not available for general and surgical hospitals for 2013.

**Intermediate Outcome Measures: Nursing Care Facilities and Acute Hospital Care (Total)**

Measure Description	Baseline 2012	1 <sup>st</sup> Quarter	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter	YTD	FFY 2015 Goal
10% Increase in # Inspections *	25	2	3	5	7	17	28
10% Increase in # of Consultations *	1	0	1	1	0	2	2
10% Increase in Compliance Assistance Visits *	8	4	0	2	1	7	9

\* IMIS Performance Measures and OIS data

## **Healthcare FFY 2015 Activities**

### **Introduction:**

The PESH Healthcare Strategic Plan focuses on injury and illness reduction in County Nursing homes, State veterans' homes and public Acute Hospital Care facilities. In FFY 2015 public hospitals that fall under the NAICS 622110 were added to this group, as a result of dropping residential mental health facilities (NYS Office of Mental Health (OMH)) and residential intellectual and developmental disability facilities (NYS Office for People with Developmental Disabilities (OPWDD)). The goal of the Healthcare Strategic Plan committee was to reduce the Lost Work Day rate by 1% per year or 5% over the 5 years of this phase.

### **Partnership Activity:**

Committee members partnered with the NYS Zero Lift Task Force and NYS DOH Safe Patient Handling committee to identify develop and share patient lifting strategies. During FFY 2015 much of the committee member's efforts were concentrated on planning for the 2015 Safe Patient Handling Conference. This event was scheduled for October 28 and 29, 2015 in Saratoga Springs, New York. Committee members helped planning and coordination of the conference by working with attendee registrations, vendors, conference facility planners and arranging for attendee certifications. Additionally the behind the scenes planning and coordination with other conference partner agencies, New York State Zero Lift Task Force and WNYCOSH helped contribute to the success of the conference. The conference was designed to educate healthcare workers, patient advocates, union representatives, and safety and health professionals in safe patient lifting strategies.

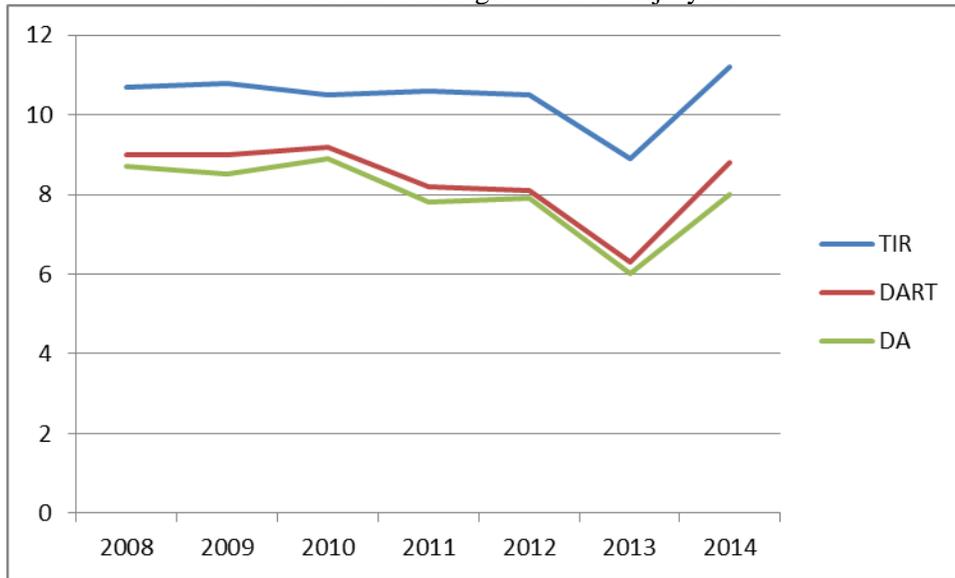
### **Compliance Assistance:**

During FFY 2015, the African Ebola epidemic came to the United States through infected travelers and health care workers returning home to the states. Nursing Home Strategic Plan members were part of the task force that worked with various hospitals designated by NYS DOH to receive Ebola patients. Strat Plan members met with unions and management at Bellevue, Upstate Medical Hospital in Syracuse, Erie County Medical Center, and Stoney Brook University Hospital to review operating and decontamination procedures. Every year when committee members solicit nursing homes and hospitals for their injury and illness data, information is shared about proper record keeping techniques. Sometimes sharing of compliance assistance materials through email is enough to help the facility, other times a site visit is needed to review the facilities records and strategies.

### **Injury Data Collection & Analysis:**

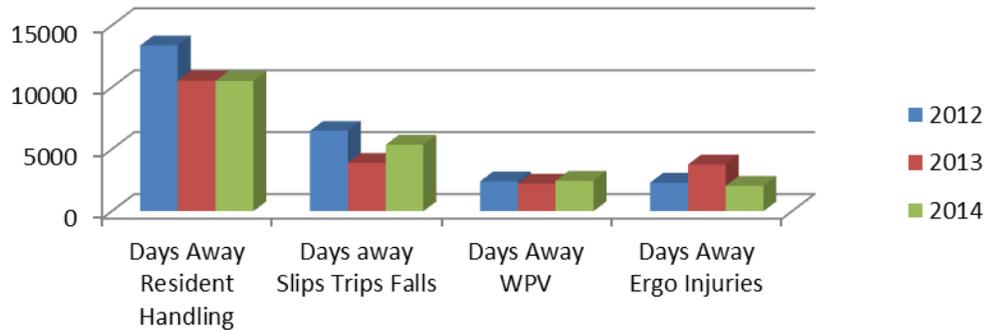
Comparing data from one year to the next has been challenging in the nursing home sector. In the last decade alone there have been 27 county nursing homes that were closed or sold to private companies. In CY 2015 alone there were 6 county nursing homes lost to privatization. To allow for data comparison, data for a nursing home that closed or was privatized was deleted entirely from the committee's database. For this reason, the baseline and subsequent year's rates may change from year to year. Based on data from the CY 2014 Log of Work Related Injuries and Illnesses, the overall injury rate from 2008 compared to 2014 increased 4.5%. The DART rate for the same period decreased 2.3% and the Days Away rate decreased by 8.1%.

### NYS Public Sector Long Term Care Injury Rates

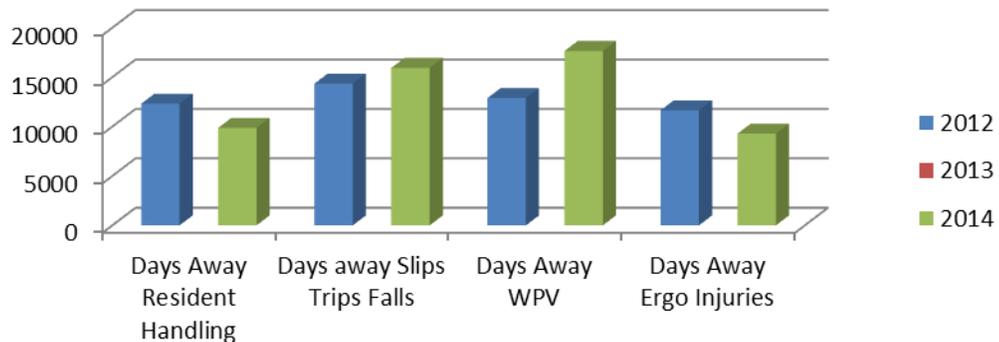


TIR- Total Recordable Injury and Illness Rate  
 DART – Days Away, Restricted or Transfer Rate  
 DA – Days Away Rate

### Public Nursing Homes, DA Events 2012-2014



### NY Public Hospitals DA events, 2012 and 2014



**Consultations and Inspections:**

During FFY 2015 the committee conducted two nursing home consultations and one consultation at an acute care hospital. During FFY 2015 there were 16 enforcement inspections performed in Nursing and Acute Hospital Care facilities. This is a 43% decrease from the 2012 baseline. The inspection shortfall can partly be attributed to a decrease in inspectors due to job changes. As positions were filled new employees were required to complete the OSHA prerequisite training prior to any inspection being started. The change to OIS has also impacted enforcement production as well. Another issue unique to the nursing home and acute hospital care committee involves the percentage of facilities in the NYC metro area. Almost 46% of the nursing home or veteran care facilities and 75% of the Acute Hospital Care facilities within NY State are located in the NYC metro area. Logistically the facilities located downstate tends to be much larger in size requiring more inspection hours to complete. Also it is difficult for inspectors to cost effectively travel to the NYC metro area to perform inspections, consultations or compliance assistance activities.

**Training:**

Future training strategies will be developed to best serve newly established goals for FFY 2016. Members of the committee have recognized the benefit previous provided through employer assistance with record keeping strategies. The return to the committee is realized through recordkeeping data that is more accurate and easier to work with.

**Future Activities Planned:**

This committee has experience a recent change in leadership as one of the committee's leaders has retired from State service; her efforts within the committee provided much of the safe patient momentum from the start of this committee over 10 years ago. She personally formed many of the committee's agency partnership and her efforts cultivated many of the success stories resulting from those efforts. Moving forward the committee will need to evaluate what impact, if any losing 27 of the 48 public nursing homes in NY State over the last decade will have on the committee's statistics and effectiveness. Also the committee will evaluate logistical issues relating to the majority of both nursing and hospital facilities being located in the NYC metro area and how the restrictions placed on overnight travel will play in the number of inspections. The committee plans to continue to be involved with the NYS Zero Lift Task Force and will continue to play a role in future Safe Patient Handling conferences. The committee participants' will also be involved in the NYS Safe Patient Handling Working Group. They will be very active in conducting compliance assistance to long term care and acute care facilities, promoting compliance with the Safe Patient Handling legislation.