

VOSH PROGRAM DIRECTIVE: 09-060 (2026)

ISSUED: 01 October 2016

REISSUED: 01 July 2026

SUBJECT Virginia BEST Policies and Procedures Manual

Purpose This Directive establishes policies and procedures for implementation of the strategic partnership pilot program between the VOSH Program and the Associated General Contractors of Virginia, Inc. (AGCVA)

This Program Directive is an internal guideline, not a statutory or regulatory rule, and is intended to provide instructions to VOSH personnel regarding internal operation of the Virginia Occupational Safety and Health Program and is solely for the benefit of the program. This document is not subject to the Virginia Register Act or the Administrative Process Act; it does not have general application and is not being enforced as having the force of law.

Scope This Directive applies VOSH-wide.

Reference VOSH Directive 13-060, **Building Excellence in Safety, Health and Training Program** (Virginia BEST), 01 July 2026

Cancellation 01 October 2016

Effective Date 01 July 2026

Expiration Date Not Applicable.

Action Directors and Managers shall ensure that policies and procedures established in this Directive are uniformly enforced and field personnel understand and comply with the requirements included in this Directive.

James S. Frederick
Commissioner

Distribution: Commissioner of Labor and Industry
Deputy Commissioner
VOSH Directors and Managers
VOSH Legal Support & OIS Staff

Director of VOSH Cooperative Programs
VOSH Compliance & Cooperative Programs Staffs
OSHA Philadelphia Region & Norfolk Area Offices

When the guidelines, as set forth in this Program Directive, are applied to the Commissioner of the Department of Labor and Industry and/or to Virginia employers, the following federal terms if, and where they are used, shall be considered to read as below:

<u>Federal Terms</u>	<u>VOSH Equivalent</u>
OSHA	VOSH
Federal Agency	State Agency
Agency	Department
Regional Administrator	Deputy Commissioner
Area Director	Regional Director VOSH Program Director
Regional Solicitor	Attorney General or VOSH Division of Legal Support (DLS)
Office of Statistics	VOSH Research and Analysis
29 CFR	VOSH Standard
Compliance Safety and Health Officer (CSHO)	CSHO

Summary of Changes

The Virginia BEST Program Manual (2026) represents a significant evolution from a pilot initiative into a more structured, performance-based framework. Key updates include modernized governance through an Executive Leadership Team (ELT) and the addition of the VOSH Cooperative Programs Director role, creating more consistent and scalable oversight. Industry integration is strengthened through the AGCVA Review Board, formal mentoring programs, and expanded use of SGEs.

The program now incorporates tiered TCIR/DART performance thresholds, making entry more accessible while establishing a clear path to excellence. Level 3 benefits have been expanded and clarified, particularly around inspection exemptions and enforcement boundaries, increasing program value and transparency. Enhanced expectations for leadership accountability, employee engagement, and continuous improvement shift the focus from compliance to a culture-driven safety system. Finally, clearer definitions, standardized processes, and refined roles improve consistency and reduce ambiguity across the program.

Virginia BEST

**Building Excellence in Safety and Health
Training**

Policy and Procedures Manual

May 15, 2026

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Chapter 1 Introduction

I. Purpose:

This directive provides a policy and procedure framework for administering the Virginia BEST Program (Building Excellence in Safety, Health and Training).

II. Scope:

This directive applies to all VOSH personnel.

III. Cancellations:

None.

IV. Definitions:

AGCVA:

Associated General Contractors of Virginia

AGCVA Review Board:

The AGCVA Review Board will be comprised of Level One, Level Two, and Level Three participants whose main responsibility is to review and validate Virginia BEST applicants. Participants must be willing to act as mentors.

45-Day Item:

Compliance-related issues that must be corrected within a maximum of 45 days, with effective protection provided to employees in the interim.

Annual SHMS Self-Assessment:

A Participant's yearly review and self-assessment to gauge the effectiveness of all required BEST elements and any other elements of the Participant's safety and health management system. (See Virginia BEST SHMS Self-Assessment tool).

Annual Report:

A document written by a Participant and submitted to the Virginia BEST Coordinator by February 15th each year, consisting of the following information:

- Updated names and addresses;
- The site's and key contractors' injury and illness case numbers and rates, average annual employment and hours worked for the previous calendar year;
- A copy of the most recent Self-Assessment of the site's safety and health management system;

- Descriptions of significant changes or events, progress made on the previous year's recommendations, and
- Any success stories.

Accepted Application:

An application that has been reviewed by the AGCVA and the Virginia BEST Coordinator and found to be complete. Also referred to as a completed application.

Backup Team Leader:

A member of an on-site evaluation team who provides assistance to the team leader and can assume his/her duties when necessary.

Competent person:

A person who, through training and experience, must be able to recognize hazards and has the authority to take prompt corrective action.

Compliance Officer:

A Federal/State compliance safety or health officer (CSHO).

Construction Schedule:

A programmed construction inspection selected from a list of sites provided by the Scheduling System for Programmed Inspections. The Construction Schedule does not include VOSH Local and National Inspection Programs (e.g., trenching, fall protections, scaffolds, etc.)

Contract Employees:

Workers who are employed by a company that provides services under contract to the BEST Applicant or Participant, usually at the BEST Applicant's or Participant's worksite.

Days:

Unless otherwise specified in this document, when a number of days is referenced to complete a task (e.g., 45 days), calendar days shall be used to count the due date.

Days Away, Restricted, and/or Transfer Case Incidence Rate (DART rate):

The rate of all injuries and illnesses resulting in days away from work, restricted work activity, and/or job transfer. This rate is calculated for a worksite for a specified period of time (usually 1 to 3 years).

Designated safety and health personnel:

A person who, through training and experience, must be able to recognize safety and health hazards and has the authority to take prompt corrective action.

Executive Leadership Team:

A member of DOLI leadership (ELT), to include Assistant Commissioner, Deputy Commissioner, and the Commissioner of the Virginia Department of Labor and Industry.

Field construction supervisory personnel:

Anyone in the field who is authorized to assign or make decisions about the work task.

Hazard recognition:

Identification of hazards in the workplace that, if unabated, could potentially cause bodily harm.

Incident:

An undesirable event that results from a failure to meet acceptable standards and causes harm to people, property or processes (e.g., in-patient hospitalization, amputation, loss of an eye).

Injury/Illness Rates:

Numerical rates that represent recordable injuries and illnesses for a BEST Participant.

Key Subcontractor:

A participant's subcontractor identified by AGCVA and VOSH based on, but not limited to the following criteria:

- A key subcontractor performs critical, essential, or specialized functions for a main contractor, often involving significant portions of the project and is specifically identified due to their vital role or high contract value, or on-site throughout substantial completion of project
- Risk (the perceived risk level associated with the construction work activities/hazards scheduled to occur at the worksite – e.g., steel erection, roofing/siding, masonry work, scaffolding, fall protection hazards, electrical hazards)

Levels of Achievement and Participation:

Level 1: The basic achievement level in the Virginia BEST program for Applicants that develop and implement an effective safety and health management system that meets current VOSH regulatory requirements

Level 2: The intermediate achievement level in the Virginia BEST program for Applicants having an established safety and health management system that exceeds current VOSH regulatory requirements

Level 3: The highest achievement level in the Virginia BEST program for Applicants having an exceptional safety and health management system that serves as a model for other construction employers

Major worksite:

A construction site that is eligible for consideration for either the required VOSH Consultation on-site surveys required for Level One and Level Two applications; or the required AGCVA and VOSH on-site review for Level Three applications. Major worksite eligibility will be determined by the AGCVA and VOSH based on the following criteria:

- Risk (the perceived risk level associated with the construction work activities/hazards scheduled to occur at the worksite – e.g., steel erection, roofing/siding, masonry work, scaffolding, fall protection hazards, electrical hazards)
- Duration (30% to 70% scheduled completion)

- Value (total project value; or the percent of gross revenue that the total project value represents to the applicant)

Mentoring Program:

The assistance that a BEST Participant provides to another Applicant/Participant worksite to improve that site's safety and health management system or prepare it for Virginia BEST application or participation. The Mentoring Program is coordinated by the AGCVA.

Near-hit incident:

Hazard in the workplace that could potentially cause bodily harm where there is employee exposure (top rail of guardrail system is missing and employees are working in the area).

On-site Assistance Visit:

A visit to an Applicant or Participant by the Virginia BEST Coordinator, Voluntary Compliance Consultant (for small employers with less than 250 employees), or other non-enforcement personnel, to offer assistance to the site including help with their application, conduct a records review, and/or make general observations about the site's safety and health management system.

On-site Review:

A team of AGCVA, Private Industry Volunteers (PIV), Special Government Employees (SGE), and VOSH representatives conducting a walkthrough/assessment of a project that will include an observation of how the employer responds to abating identified hazards, written programs, training records and all other items related to the applicable achievement level.

On-site Review Report:

A document written by the VOSH and AGCVA on-site evaluation team following an on-site review visit. This document contains the team's assessment of a site's safety and health management system and the team's recommendation regarding approval of the Applicant or re-approval of the Participant in Virginia BEST.

On-site Review Team:

An interdisciplinary group of VOSH and AGCVA professionals and private industry volunteers who conduct on-site evaluations. The team normally consists of a team leader, a backup team leader, safety and health specialists, and other specialists as appropriate.

Private Industry Volunteer:

A private industry volunteer (PIV) from a VPP or Virginia BEST Participant, knowledgeable in safety and health management system assessment, formally trained in the policies and procedures of Virginia BEST, and determined by VOSH to be qualified to perform as a team member on a Virginia BEST on-site evaluation.

Recommendations:

Suggested improvements noted by the on-site evaluation team that are not requirements for Virginia BEST participation but that would enhance the effectiveness of the Participant's safety and health management system. Compliance with VOSH standards is a requirement, not a recommendation.

Safety and Health Management System:

For the purposes of Virginia BEST, a method of preventing worker fatalities, injuries and illnesses through the ongoing planning, implementation, integration, and control of four interdependent elements:

- Management Leadership and Employee Involvement;
- Worksite Analysis;
- Hazard Prevention and Control; and
- Safety and Health Training.

Small Business:

A company having no more than 250 employees at any one facility and no more than 500 employees nationwide.

Special Government Employee (SGE):

As defined in 18 U.S.C. § 202, an “SGE is an officer or employee who is retained, designated, appointed, or employed to perform temporary duties...for not more than 130 days during any period of 365 consecutive days.” OSHA will retain SGEs from a VPP participant who is knowledgeable in safety and health management system assessment, formally trained by OSHA in the policies and procedures of VPP, and determined by OSHA to be qualified to perform VPP on-site evaluations. An SGE may participate as a team member on VPP on-site evaluations and as a team leader for VPP on-site evaluations conducted at OSHA Offices.

Team Leader:

The VOSH staff person who coordinates the VOSH on-site evaluation team and ensures that all evaluation activities are performed.

Temporary Employees:

Employees hired on a non-permanent basis by the Applicant/Participant.

Termination:

Formal removal of a Virginia BEST Participant from the program by VOSH.

Total Case Incidence Rate (TCIR):

A number that represents the total recordable injuries and illnesses per 100 full-time employees, calculated for a worksite for a specified period of time (usually 1 to 3 years).

Uncontrolled Hazard:

A hazard found during an on-site review of a Level Three Participant worksite and brought to the attention of the company for corrective action.

Unprogrammed inspection:

An inspection performed in response to a report of imminent danger, fatality, in-patient hospitalization, amputation, loss of an eye, referral or complaint.

Virginia BEST Celebration:

An event coordinated by the approved Participant where a representative from VOSH recognizes the Participant's achievement, presents the Virginia BEST certificate and the BEST Participant flag.

Virginia BEST Coordinator:

The VOSH staff person directly responsible for the day-to-day operations of Virginia BEST. This position is supervised by the VOSH VPP Manager.

Virginia BEST Participant Representative:

The person designated by an Applicant or Participant as the primary contact regarding Virginia BEST activities.

Voluntary Protection Program Participants' Association (VPPPA):

A nonprofit 501(c) (3) organization whose members are involved in the VPP. The mission of the VPPPA is to promote safety, health, and environmental excellence through cooperative efforts among employees, management, and government.

VOSH VPP Manager:

The VOSH staff person directly responsible for the day-to-day operations of the VPP.

VOSH VPP Regional Coordinator:

The VOSH staff person assigned to handle VPP and Virginia BEST assignments in one of the VOSH regions.

VOSH Cooperative Programs Director:

The VOSH Cooperative Programs Director responsible for coordinating and overseeing Virginia BEST.

VOSH Strategic Partner:

A contractor or association that participates in a voluntary and cooperative relationship with VOSH in an effort to reduce workplace injuries and illnesses in Virginia.

Withdrawal:

Decision by the Applicant or Participant to discontinue pursuing or participating in Virginia BEST.

Worksite:

For Virginia BEST purposes, a worksite is a location where work is carried out by employees of a Participant or Applicant.

V. Background:

The Virginia BEST program is a strategic partnership of the VOSH program and the AGCVA. It was established as a result of a series of meetings starting in 2012, where the AGCVA and the VOSH Program met to discuss a partnership that would mutually recognize the importance of providing a safe and healthful work environment in the construction industry. The parties agreed to pursue a cooperative relationship that encourages construction employers to develop exceptional safety and health management systems and recognize that achievement through the Virginia BEST program.

VI. Virginia BEST Principles:

The following principles are embodied in the Virginia BEST Program:

A. Voluntarism:

Participation in Virginia BEST is strictly voluntary. The Applicant who wishes to participate freely submits information to AGCVA and VOSH on its safety and health management system and opens itself to partnership review.

B. Cooperation:

VOSH has long recognized that a balanced, multifaceted approach is the best way to accomplish the goals of the OSH Act. Virginia BEST's emphasis on trust and cooperation between VOSH, the AGCVA, the employer, employees, and employees' representatives is complementary to the agency's enforcement activity but does not take its place.

VOSH staff, AGCVA and participating employers work together to resolve any safety and health problems that may arise. This partnership enables the Agency to make participating Level Three sites exempt from programmed inspection lists, allowing VOSH to focus its inspection resources on establishments in greater need of agency oversight and intervention. However, VOSH continues to investigate valid employee safety and health complaints, fatalities, in-patient hospitalizations, amputations, loss of an eye, and other significant events at Virginia BEST Participant sites.

C. A Systems Approach:

Compliance with the OSH Act and all applicable VOSH requirements is only the starting point for a Virginia BEST site. BEST Participants develop and implement systems to effectively identify, evaluate, prevent, and control occupational hazards so that injuries and illnesses to employees are prevented. BEST Level Three sites, in particular, are often on the leading edge of hazard prevention methods and technology. As a result, BEST Participant's worksites serve as models of safety and health excellence, demonstrating the benefits of a systems approach to worker protection.

D. Model Worksites for Safety and Health:

The AGCVA and VOSH select Virginia BEST Participants based on their written safety and health management system, the effective implementation of this system over time, and their performance in meeting BEST requirements. Not all construction employers are appropriate candidates for BEST.

At qualifying Participants, all personnel are involved in the effort to maintain rigorous, detailed attention to safety and health. BEST Participants often mentor other Applicants/Participants interested in improving safety and health, participate in safety and health outreach and training initiatives, and provide VOSH with input on proposed policies

and standards. They also share best practices and promote excellence in safety and health in their industries and communities.

E. Continuous Improvement:

Virginia BEST Participants must demonstrate continuous improvement in the operation and impact of their safety and health management systems. Annual self-evaluations (ASE) help Participant's measure success, identify areas needing improvement, and determine needed changes. VOSH and AGCVA staff monitor, review and verify improvement through annual self-assessments, assistance visits and on-site evaluation reviews of Level Three Applicants/Participants.

F. Employee and Employer Rights:

Participation in Virginia BEST does not diminish employee and employer rights and responsibilities under VOSH laws, regulations and standards.

VII. Categories of Participation:

A. The Elements:

To qualify for Virginia BEST, a Participant must operate a comprehensive safety and health management system that includes four essential elements and their sub-elements. These elements, when integrated into a Participant's daily operations, can reduce the incidence and severity of illnesses and injuries:

1. Management leadership and employee involvement
2. Worksite analysis
3. Hazard prevention and control
4. Safety and health training

B. Level One Participants:

Level One – Assess, Learn & Develop

Level One introduces Participants to the basic Virginia BEST elements that are necessary to launch the development and implementation of an effective safety and health management system. The activities normally are related to:

- Assessing performance of existing safety and health programs and policies,
- Providing training to management and employees on effective SHMS programs and activities, and
- Developing strategies, programs, policies, and expected outcomes to accomplishing Level One.

Level One Participants will:

1. Receive a recognition letter from the AGCVA and the VOSH Cooperative Programs Director.
2. Receive priority access to Virginia BEST mentors and/or PIVs.
3. In the event of a VOSH inspection, not receive a penalty assessment for citations related to other-than-serious violations, provided the hazards are abated within VOSH's prescribed abatement period.
4. In the event of a VOSH inspection, be eligible for the minimum good faith penalty reductions (currently 15 percent) available under the existing VOSH penalty assessment policy for serious violations.

C. Level Two Participants:

Level Two – Implement, Track and Control

This is the Level in Virginia BEST in which the basic actions and outcomes of Level One have been completed and the Participant's worksites are beginning to implement more thorough safety and health management system processes. The activities are generally related to the following:

- Continuing to enhance and develop the Participant's safety and health management system,
- Fully implementing and adjusting the Participant's safety and health management system as needed, and
- Beginning to incorporate policies for key subcontractor/special trade contractor safety and health program requirements.

Level Two Participant's will:

1. Receive a certificate of recognition from the VOSH Cooperative Programs Director.
2. Receive priority access to Virginia BEST mentors and/or PIVs.
3. Be recognized for the achievement on the Virginia BEST webpage.
4. In the event of a VOSH inspection, not receive citations for other-than-serious violations, provided the hazards are abated during the inspection. If the other than serious violation is not abated during the inspection, the Participant will not receive a penalty, provided the hazard is abated during VOSH's prescribed abatement period.
5. In the event of a VOSH inspection, be eligible for the maximum good faith penalty reductions (currently 25 percent) available under the existing VOSH penalty assessment policy for serious violations.

D. Level Three Participants:

Level Three – Reassess, Monitor and Improve

This is the Challenge Stage in which the Participant's safety and health management system has been fully implemented at its worksites and the Participant is continuing to assess its effectiveness and improving its performance where necessary. The activities are generally related to the following:

- Monitoring the Participant's safety and health management system,
- Refining and enhancing the Participant's safety and health management system, and
- Reassessing and continuously improving the Participant's safety and health management system.

Level Three Participant's will:

1. Receive a Governor's Proclamation and Flag for the participants' raising ceremony.
2. Receive priority access to Virginia BEST mentors and/or PIVs.
3. Be recognized for the achievement on the Virginia BEST webpage.
4. General/Management Contractor participants receive an exemption from Construction Schedule inspections for all company sites across Virginia.

(a) For purposes of programmed inspection exemption, when a Level 3 Virginia BEST participant is serving as the general contractor on a construction site, the exemption from Construction Schedule (programmed) inspections applies to the entire project site under the

control of the general contractor, not solely to the Level 3 participant's direct employees.

4. General/Management Contractor participants receive an exemption from Construction Schedule inspections for all company sites across Virginia.
 - (a) For purposes of programmed inspection exemption, when a Level 3 Virginia BEST participant is serving as the general contractor on a construction site, the exemption from Construction Schedule (programmed) inspections applies to the entire project site under the control of the general contractor, not solely to the Level 3 participant's direct employees.
 - (b) All subcontractors and trades operating on that site are included within the scope of the exemption while work is being performed under the oversight and safety and health management system of the Level 3 participant.
 - (c) When a Level 3 Virginia BEST participant is operating as a subcontractor, the programmed inspection exemption applies only to the participant's own operations, work areas, and employees. It does not extend to the entire project site or to other employers working on the site.
 - (d) Subcontractor participants will be excluded from the opening conference involving all other non-participant contractors and are exempt from inspection for those sites where the General/Management Contractor is not a Level Three participant.
 - (e) Other inspections, such as complaint/referral investigations, incident investigations, local emphasis program inspections, etc., will still be conducted in accordance with the procedures in the VOSH Field Operations Manual (FOM).
5. In the event of a VOSH Unprogrammed inspection, will not receive citations for other than serious violations, provided the hazards are abated during the inspection. If the other than serious violation is not abated during the inspection, the participant will be cited but not receive a penalty provided the hazard is abated during the VOSH's prescribed abatement period.
6. In the event of a VOSH inspection, be eligible for the maximum good faith penalty reductions (currently 25 percent) available under the existing VOSH penalty assessment policy for serious violations.
7. Participate in the AGCVA Review Board.

Chapter 2 Responsibilities

I. Introduction:

This chapter describes VOSH's responsibilities for managing the Virginia BEST Program. The number of employers who may be approved as participants will depend on the availability of AGCVA and VOSH resources.

II. The Executive Leadership Team:

The ELT is responsible for all decisions relating to approval of new Participants, and termination of participation.

III. VOSH Cooperative Programs Director:

A. The VOSH Cooperative Programs Director is responsible for:

1. Policies and Procedures:

The VOSH Cooperative Programs Director develops, interprets and revises, as needed, policies and procedures for the administration and management of the Virginia BEST Program, including the Virginia BEST Policies and Procedures Manual.

2. Review of Applications and On-site Evaluation Reports:

The VOSH Cooperative Programs Director:

- a. Reviews Level Two applications and documentation and provides recommendations to the ELT.
- b. Reviews Level Three applications and documentation, including on-site evaluation reports and re-certifications to ensure that evidence that the Virginia BEST requirements are met is clearly documented.
- c. Reviews annual eligibility status of Participants with the VOSH VPP Manager and Virginia BEST Coordinator. If concerns are raised, briefs the ELT and takes appropriate action to assure corrective actions are taken. Where necessary, the procedures on Participant withdrawal and termination discussed below will be considered to address unresolved issues.
- d. Prepares appropriate documentation for the ELT's review, decision and signature.
- e. Notifies the Virginia BEST Coordinator of the ELT's final decision on Level Two applications and Level Three applications and re-certifications.
- f. Forwards, through the BEST Coordinator, copies of the following documents to the Participant (depending on the level of participation), appropriate labor unions, Regional Directors, and VOSH Directors:

- (1) ELT's approval or congratulatory letter
- (2) The on-site evaluation report for newly approved Participants
- (3) Certificate of Recognition signed by a member of the DOLI Executive Leadership Team
- (4) Notification letters to members of the Virginia General Assembly and Congressional Delegation

IV. Virginia BEST Coordinator:

A. VOSH VPP Manager:

The VOSH VPP Manager is responsible for the oversight of the management of Virginia BEST. The Virginia BEST Coordinator is responsible for the day-to-day operations of Virginia BEST. The Virginia BEST Coordinator position is supervised by the VPP Program Manager.

B. The Virginia BEST Coordinator is responsible for:

1. Maintenance of Records and Data:

The Virginia BEST Coordinator maintains a file on all approved Participants that includes (depending on the level of participation):

- a. The application and SHMS Self-Assessment Form.
- b. Annual Reports.
- c. The Director's memorandum to the ELT requesting approval of an evaluation report.
- d. Annual Evaluation reports.
- e. The ELT's letter to the Participant (which includes notification of a copy sent to any and all collective bargaining agents).
- f. Congressional and General Assembly letters.
- g. Any formal correspondence to and from the Department of Labor and Industry, the Virginia BEST Participant or the public.
- h. A comprehensive database of Virginia BEST Participants' information including, but not limited to: name, location, contact person, telephone number, approval date, BEST level and status, TCIR and DART rate, union information if applicable, and number of employees.

2. Application Processing:

Review and process applications to Virginia BEST in accordance with Chapter 4. In addition:

- a. Provide application information and assistance to interested employers, employee groups, and other parties such as trade associations, state and local governments.

- b. Obtain and review the Applicant's VOSH inspection history to determine its eligibility for participation in Virginia BEST.

3. On-site Evaluations:

- a. Ensure on-site consultation surveys and on-site evaluation are conducted in accordance with the requirements for the participating level, but no later than 6 months of accepting an application.
- b. Schedule on-site evaluations, taking into consideration due dates, deadlines, priorities, and coordination with company officials.
- c. When appropriate for the participating level (Level 3), inform the Regional Safety and Health Directors so that the Participant's sites can be removed from the programmed inspection list. Such removal may occur no more than 75 days prior to the on-site evaluation.
- d. Ensure that an on-site evaluation report is drafted on-site.

4. Approval:

- a. Serve in advisory capacity to the AGCVA Review Board on Level One applications.
- b. Review Level Two applications and all appropriate documentation and provide recommendations to the VOSH VPP Manager and Director of Cooperative Programs.
- c. Ensure completion of on-site evaluation reports for Level Three Applicants/Participants.
- d. Identify and track 45-day items and assure correction.
- e. Forward the Level Three on-site evaluation report to the VOSH VPP Manager and Director with recommendation.
- f. Inform Applicants of the ELT's decision regarding approval for Level Two and Level Three participation.
- g. Inform the Regional Safety and Health Directors of the Level Three Participant's approval.

5. Annual Report Submissions from Virginia BEST Participants:

- a. Ensure that each BEST Participant's annual report and self-assessment is received by February 15th of each year.
- b. As a courtesy, notify the Participant in writing that the annual report and self-assessment submission has been received.
- c. On a case-by-case basis, additional time, not to exceed 45 days, may be negotiated by the Virginia BEST Coordinator and the company's BEST representatives. If, after 45 days, the annual submission has not been received, the Participant may be asked to withdraw from the program.
- d. Review the annual submissions and note any areas of concern. Provide advice and assistance to the AGCVA on their reviews of Level One Participants. Provide recommendations on annual eligibility status for

each Level Two and Level Three Participant to the AGCVA, the VOSH VPP Manager and the Director of Cooperative Programs.

- e. Request an explanation from the Participant if a substantial increase (or decrease) in rates or some problem with the program evaluation is noted.
- f. If an unresolved serious problem is evident, make arrangements with the AGCVA and Participant for an on-site assistance visit.

6. Re-certification (Level Three):

- a. Track current Virginia BEST Participants and ensure that on-site re-certification evaluations are scheduled and conducted in accordance with policy.
- b. Obtain the VOSH VPP Manager's approval for any requests to extend the period between on-site evaluations.
- c. Any approved extensions of time between on-site evaluations must be documented.

7. Withdrawal or Termination:

Upon receiving a withdrawal letter from a Participant, or upon termination of a Participant, the Virginia BEST Coordinator will:

- a. Close the Participant's file, including the application, on-site evaluation reports, approval letters, and annual reports.
- b. Notify the Regional Safety and Health Directors of the withdrawal or termination so that the Participant may be returned to the programmed inspection list, if applicable, at the time of the next inspection cycle.
- c. Notify the VOSH Cooperative Programs Director and ELT in writing of any withdrawals or terminations and the reason(s) for withdrawal.

8. Special Circumstances:

- a. Discuss any change in ownership, organization, and union representation (if applicable) with the Participant's representative, and schedule an on-site visit if needed to evaluate the change's impact.
- b. Forward to the VOSH VPP Manager any resultant updates to the Participant's information.
- c. Coordinate and review any formal or non-formal complaints, referrals, fatalities, incidents, and resultant inspection reports or letters.

9. Ongoing Assistance:

The Virginia BEST Coordinator will be available to assist Participants, as needed, e.g., when changes occur that may affect continued participation.

V. VOSH Regional Safety and Health Directors:

In addition to being knowledgeable about the Virginia BEST Program and its Participants, the Regional Safety and Health Directors will:

- A.** Ensure that programmed inspections of Level Three Applicants are deferred for no more than 75 days prior to their scheduled on-site evaluation.
- B.** Remove approved Level Three Participants from any programmed inspection lists for the duration of participation.
- C.** Return Level Three Participants that have withdrawn or been terminated to the programmed inspection list, if applicable, at the time of the next inspection cycle.
- D.** Use routine procedures for conducting complaint, referral, fatality, in-patient hospitalization, amputation, and loss of an eye inspections and investigations at BEST Participant worksites.
- E.** Notify the VOSH VPP Manager when a complaint (including an informal complaint responded to by letter) is received for a BEST Participant and of the subsequent disposition of the complaint.
- F.** Immediately notify the VOSH VPP Manager of any fatalities or other incidents requiring enforcement that occur at a BEST worksite.
- G.** Send the VOSH VPP Manager a copy of any report resulting from an enforcement case.

Chapter 3

Requirements for Virginia BEST

I. Introduction:

This chapter delineates requirements for Levels One, Two and Three of the Virginia BEST Program.

II. The Virginia BEST Program:

A. The Virginia BEST Program recognizes the very best construction employers that are in compliance with VOSH standards and that operate outstanding safety and health management systems for worker protection.

B. Levels of Achievement and Participation:

Level One: The basic achievement level in the Virginia BEST program for Participants that develop and implement an effective safety and health management system that meets current VOSH regulatory requirements

Level Two: The intermediate achievement level in the Virginia BEST program for Participants that have established a safety and health management system that exceeds current VOSH regulatory requirements

Level Three: The highest achievement level in the Virginia BEST program for Participants that have established an exceptional safety and health management system that serves as a model for other construction employers

C. Term of Participation:

There is no limit to the term of participation in Virginia BEST, as long as a Participant continues to meet all Virginia BEST requirements appropriate to its level of participation and to maintain Virginia BEST quality. Annual reports must be reviewed every March/April by AGCVA and VOSH to assure that the Participant remains eligible to remain in the program.

The number of employers who may be approved as participants will depend on the availability of AGCVA and VOSH resources.

D. Injury and Illness History Requirements:

1. Injury and illness history of the Participant in Virginia is evaluated using a 3-year total case incident rate (TCIR) and a 3-year day away, restricted, and/or transfer case incident rate (DART rate). The 3-year TCIR and DART rates must be compared to the published Bureau of Labor Statistics (BLS) national average for the five- or six-digit North American Industrial Classification System (NAICS) code for the industry in which the Applicant or Participant is classified.
2. The BLS publishes NAICS industry averages 2 years after data is collected. (For example, in calendar year 2015, calendar year 2013 national averages will be available and used for comparison).
3. Both the 3-year TCIR and DART rate must be:
 - 1) For Level One, no more than double one of the three most recently published BLS national averages for the specific NAICS code,
 - 2) For Level Two, no more than one and a half (1.5) times one of the three most recently published BLS national averages for the specific NAICS code,
 - 3) For Level Three, below one of the three most recently published BLS national averages for the specific NAICS code.
4. Some smaller worksites may be eligible to use alternate rate calculation.

• **Comprehensive Safety and Health Management System Requirements:**

The following safety and health management system elements and sub-elements must be implemented according to appropriate Level One, Two or Three application requirements. (Reference: Level One, Two and Three Requirements documents specify system elements and sub-elements that apply to each level of participation).

For small companies, at the discretion of the on-site team, some of the requirements may be implemented and documented less formally.

i. **Management Leadership:**

1. **Management Commitment:**

Management demonstrates its commitment by:

- (1) Establishing, documenting, and communicating to employees and contractors' clear goals that are attainable and measurable, objectives that are relevant to workplace hazards and trends of injury and illness, and policies and procedures that indicate how to accomplish the objectives and meet the goals.
- (2) The highest-level company official signing a statement of commitment to safety and health.
- (3) Meeting and maintaining Virginia BEST requirements.

- (4) Maintaining a written safety and health management system that documents the elements and sub-elements, procedures for implementing the elements, and other safety and health programs including those required by VOSH standards.
- (5) Identifying persons whose responsibilities for safety and health includes carrying out safety and health goals and objectives and clearly defining and communicating their responsibilities in their written job descriptions.
- (6) Assigning adequate authority to those persons who are responsible for safety and health, so they are able to carry out their responsibilities.
- (7) Providing and directing adequate resources (including time, funding, training, personnel, etc.) to those responsible for safety and health, so they are able to carry out their responsibilities.
- (8) Holding those assigned responsibility for safety and health accountable for meeting their responsibilities through a documented performance standards and appraisal system.
- (9) Planning for typical as well as unusual/emergency safety and health expenditures in the budget, including funding for prompt correction of uncontrolled hazards.
- (10) Integrating safety and health into other aspects of planning, such as planning for new equipment, processes, buildings, etc. Establishing lines of communication with employees and allowing for reasonable employee access to top management at its worksites.
- (11) Setting an example by following the rules, wearing any required personal protective equipment, reporting hazards, reporting injuries and illnesses, and basically doing anything that they expect employees to do. Ensuring that all workers, including contract workers, are provided equal, high-quality safety and health protection.
- (12) Conducting an annual self-evaluation of the safety and health management system in order to:
 - a) Maintain knowledge of the hazards at worksites.
 - b) Maintain knowledge of the effectiveness of system elements.
 - c) Ensure completion of the previous year's recommendations.
 - d) Modify goals, policies, and procedures.

2. **Employee Involvement:**

- (1) Employees must be involved in the safety and health management system in at least three meaningful, constructive ways in addition to their right to report a hazard.
- (2) Avenues for employees to have input into safety and health decisions include participation in audits, incident investigations,

self-inspections, suggestion programs, planning, training, job hazard analyses, and appropriate safety and health committees and teams. Employees do not meet this requirement by participating in incentive programs or simply working in a safe manner.

- (3) Employees must be trained for the task(s) they will perform. For example, they must be trained in hazard recognition to participate in self-inspections.
- (4) Employees must receive feedback on any suggestions, ideas, reports of hazards, etc. that they bring to management's attention. A Participant must provide documented evidence that employees' suggestions were followed up and implemented when appropriate and feasible.
- (5) All employees, including new hires, must be notified and trained on the company's participation in Virginia BEST and employees' rights (such as the right to file a complaint) under VOSH statutes and regulations.
- (6) All employees will be retrained on an annual basis on Virginia BEST principles and employee rights under VOSH statutes and regulations.
- (7) Orientation training curriculum must include this information. Employees and key contractors must demonstrate an understanding of and be able to describe the fundamental principles of Virginia BEST.

3. Contract Worker Coverage:

- (1) Key subcontractor workers must be provided with safety and health protection equal in quality to that provided to Participant employees.
- (2) All other subcontractor workers must be provided with safety and health protection that meet minimum VOSH requirements.
- (3) ALL subcontractors, whether regularly involved in routine site operations or engaged in temporary projects such as construction or repair, must follow the safety and health rules of the Participant.
- (4) Virginia BEST Participants must have in place a documented oversight and management system covering all subcontractors. Such a system must:
 - (a) Ensure that safety and health considerations are addressed during the process of selecting contractors and when contractors are on-site.
 - (b) Encourage contractors to develop and operate effective safety and health management systems.
 - (c) Include provisions for timely identification, correction, and tracking of uncontrolled hazards in contractor work areas.

- (d) Include a provision for removing a contractor or contractor's employees from the site for safety or health violations. Note: A Participant may have been operating effectively for one year without actually invoking this provision if just cause to remove a contractor or contractor's employee did not occur.
- (e) The hazards they may encounter while on the site.
 - How to recognize hazardous conditions and the signs and symptoms of workplace-related illnesses and injuries.
 - The implemented hazard controls, including safe work procedures.
 - Site-specific emergency procedures.

4. **Safety and Health Management System Annual Self-Evaluation:**

There must be a system and written procedures in place to annually evaluate the safety and health management system. An annual self-evaluation that is merely a workplace inspection with a brief report pointing out hazards or a general statement of the sufficiency of the system is inadequate for purposes of Virginia BEST qualification.

The annual self-evaluation must be a critical review and assessment of the effectiveness of all elements and sub-elements of a comprehensive safety and health management system:

- (1) The written annual self-evaluation must identify the strengths and weaknesses of the safety and health management system and must contain specific recommendations, timelines, and assignment of responsibility for making improvements. It must also document actions taken to satisfy the recommendations.
- (2) The annual self-evaluation may be conducted by Participant employees, managers, qualified corporate staff, or outside sources that are trained in conducting such assessments.
- (3) The annual self-evaluation must be included with the Participant's annual self-evaluation submission to VOSH.

ii. **Worksite Analysis:**

- 1. A hazard identification and analysis system must be implemented to systematically identify basic and unforeseen safety and health hazards, evaluate their risks, and prioritize and recommend methods to eliminate or control hazards to an acceptable level of risk. Through this system, management must gain a thorough knowledge of the safety and health hazards and employee risks. The required methods of hazard identification and analysis are described below.

2. **Baseline Safety and Industrial Hygiene Hazard Analysis:**

A baseline survey and analysis are a first attempt at understanding the hazards at a worksite. It establishes initial levels of exposure (baselines) for comparison to future levels, so that changes can be recognized. Systems for identifying safety and industrial hygiene hazards, while often integrated, may be evaluated separately. Baseline surveys:

- (1) Identify and document common safety hazards associated with the site (such as those found in VOSH or building standards, for which existing controls are well known), and how they are controlled.
- (2) Identify and document common health hazards (usually by initial screening using direct-reading instruments) and determine if further sampling (such as full-shift dosimetry) is needed.
- (3) Identify and document safety and health hazards that need further study.
- (4) Cover the entire work site; indicate who conducted the survey, and when it was completed.
- (5) The original baseline hazard analysis need not be repeated subsequently unless warranted by changes in processes, equipment, hazard controls, etc.

3. **Hazard Analysis of Routine Jobs, Tasks, and Processes:**

Task-based or system/process hazard analyses must be performed to identify hazards of routine jobs, tasks, and processes in order to recommend adequate hazard controls. Acceptable techniques include but are not limited to: Job Hazard Analysis (JHA), and Process Hazard Analysis (PHA). Hazard analyses should be conducted on routine jobs, tasks and processes that:

- (1) Have written procedures.
- (2) Have had injuries/illnesses associated with them or have experienced significant injury or near-hit incidents.
- (3) Are perceived as high-hazard tasks, (i.e., they could result in a serious fall, structural collapse, catastrophic explosion, electrocution, or chemical over-exposure).
- (4) Have been recommended by other studies and analyses for more in-depth analysis.
- (5) Are required by a regulation or standard.
- (6) Any other instance when the Virginia BEST Applicant or Participant determines that hazard analysis is warranted.

4. **Hazard Analysis of Significant Changes:**

- (1) Hazard analysis of significant changes, including but not limited to non-routine tasks (such as those performed less than once a year), new processes, materials, equipment and facilities, must be conducted to identify uncontrolled hazards prior to the activity or use, and must lead to hazard elimination or control.
- (2) If a non-routine or new task is eventually to be done on a routine basis, then a hazard analysis of this routine task should subsequently be developed.

5. **Pre-use Analysis:**

- (1) When a Participant is considering new equipment, chemicals, facilities, or significantly different operations or procedures, the safety and health impact to the employees must be reviewed.
- (2) The level of detail of the analysis should be commensurate with the perceived risk and number of employees affected. This practice should be integrated in the procurement/design phase to maximize the opportunity for proactive hazard controls.

6. **Documentation and Use of Hazard Analyses:**

Hazard analyses performed to meet the requirements of c. or d. above must be documented and must:

- (1) Consider both health and safety hazards.
- (2) Identify the steps of the task or procedure being analyzed, hazard controls currently in place, recommendations for needed additional or more effective hazard controls, dates conducted, and responsible parties.
- (3) Be used in training in safe job procedures, in modifying workstations, equipment or materials, and in future planning efforts.
- (4) Be easily understood.
- (5) Be updated as the environment, procedures, or equipment change, or errors are found that invalidate the most recent hazard analyses.

7. **Routine Self-Inspections:**

A system is required to ensure routinely scheduled self-inspections of the workplace. It includes:

- (1) Written procedures that determine the frequency of inspection and areas covered, those responsible for conducting the inspections, recording of findings, responsibility for abatement, and tracking of identified hazards for timely correction.
- (2) Findings and corrections must be documented.
- (3) Inspections must be made at frequent and regular intervals, preferably daily, with the actual inspection schedule being determined by the types and severity of hazards.
- (4) The entire worksite must be covered at least once each week.
- (5) Top management and others, including employees who have knowledge of the written procedures and hazard recognition, should participate in the inspection process.
- (6) Personnel qualified to recognize workplace hazards, particularly hazards peculiar to their industry, must conduct inspections.
- (7) Documentation of inspections must evidence thoroughness beyond the perfunctory use of checklists.

8. **Hazard Reporting System for Employees:**

- i. The Participant must operate a reliable system that enables employees to notify appropriate management personnel in writing--without fear of reprisal--about conditions that appear hazardous, and to receive timely and appropriate responses.
- ii. The system must have an anonymous component and must include timely responses to employees and tracking of hazard elimination or control to completion.

9. **Industrial Hygiene (IH) Program:**

A written IH program is required. The program must establish procedures and methods for identification, analysis, and control of health hazards for prevention of occupational disease.

10. **IH Surveys:**

Additional expertise, time, technical equipment, and analysis beyond the baseline survey may be required to determine which environmental contaminants (whether physical, biological, or chemical) are present in the workplace, and to quantify exposure so that proper controls can be implemented.

11. **Sampling Strategy:**

The written program must address sampling protocols and methods implemented to accurately assess employees' exposure to health hazards. Sampling should be conducted when:

- (1) Performing baseline hazard analysis, such as initial screening and grab sampling.
- (2) Baseline hazard analysis suggests that more in-depth exposure analysis, such as full-shift sampling, is needed.
- (3) Particularly hazardous substances (as indicated by a VOSH standard, chemical inventory, safety data sheet, etc.) are being used or could be generated by the work process.
- (4) Employees have complained of signs of illness.
- (5) Exposure or near-hit incidents have occurred.
- (6) It is required by a standard or other legal requirement.
- (7) Changes have occurred in such things as the processes, equipment, or chemicals used.
- (8) Controls have been implemented, and their effectiveness needs to be determined.
- (9) Any other instance when the Virginia BEST Applicant or Participant determines that sampling is warranted.

12. **Sampling Results:**

Sampling results must be analyzed and compared to at least the VOSH/OSHA permissible exposure limits (PELs) to determine employees' exposure and possible overexposure. Comparison to more restrictive levels, such as action levels or Association of Certified Industrial Hygienists (ACGIH) Threshold Limit Values (TLVs), is encouraged to reduce exposures to the lowest possible level.

- (1) **Documentation:**
The results of sampling must be documented and must include a description of the work process, controls in place, sampling time, exposure calculations, duration, route, and frequency of exposure, and number of exposed employees.
- (2) **Communication:**
Sampling results must be communicated to employees and management.
- (3) **Use of Results:**
Sampling results must be used to identify areas for additional, more in-depth study, to select hazard controls, and to determine if existing controls are adequate.

13. **IH Expertise:**

IH sampling should be performed by an industrial hygienist, but initial sampling, full-shift sampling, or both may be performed by safety staff members with special training in the specific procedures for the suspected or identified health hazards in the workplace.

- (1) **Procedures:**
Standard, nationally recognized procedures must be used for surveying and sampling as well as for testing and analysis.
- (2) **Use of Contractors:**
If an outside contractor conducts industrial hygiene surveys, the contractor's report must include all sampling information listed above and must be effectively communicated to management. Any recommendations contained in the report should be considered and implemented where appropriate. Use of contractors does not remove responsibility for the IH program, including identification and control of health hazards, from the Virginia BEST Applicant or Participant.

14. **Analysis Injury, Illness and Near-Hit Incidents:**

The Participant must investigate all incidents involving injuries, illnesses, or near-incidents and must maintain written reports of the analysis. Incident analysis must:

- (1) Be conducted by personnel trained in incident investigation techniques.
- (2) Personnel who were not involved in the incident or who do not supervise the injured employee(s) should conduct the investigation to minimize potential conflicts of interest.
- (3) Document the entire sequence of relevant events.
- (4) Identify all contributing factors, emphasizing failure or lack of hazard controls.
- (5) Determine whether the safety and health management system was ineffective and provide recommendations to prevent recurrence. Do not place undue blame or reprisal on employees but instead try to assess what aspects of the worksite culture or management system implementation led the employee to believe that engaging in unsafe behaviors was acceptable.
- (6) Assign priorities, time frames, and responsibilities for implementing recommended controls.
- (7) The results of the analysis must be made available to employees on request, although the actual investigation records need not be provided.

15. **Trend Analysis:**

- (1) The process must include analysis of information, such as injury/illness history, hazards identified during inspections, employee reports of hazards, findings from incident analyses for the purpose of detecting trends.

- (2) The results of trend analysis must be shared with employees and management and utilized to direct resources; prioritize hazard controls; and determine or modify goals, objectives, and training to address the trends.

iii. **Hazard Prevention and Control:**

Management must ensure the effective implementation of systems for hazard prevention and control and ensure that necessary resources are available, including the following:

1. **Certified Professional Resources:**

Access to certified safety and health professionals and other licensed health care professionals is required. They may be provided by offsite sources such as corporate headquarters, insurance companies, or private contractors. VOSH will accept certification from any nationally recognized accrediting organization.

2. **Hazard Elimination and Control Methods:**

The types of hazards to which employees are exposed, the severity of the hazards, and the risk the hazards pose to employees should all be considered when determining methods of hazard prevention, elimination, and control.

When engineering controls have been studied, investigated, and implemented, yet still do not bring employees' exposure levels to below VOSH/OSHA permissible exposure limits; or when engineering controls are determined to be infeasible, then a combination of controls may be used.

Whichever controls a Participant chooses to employ, the controls must be understood and followed by all affected parties; appropriate to the site's hazards; equitably enforced through the disciplinary system; written, implemented, and updated by management as needed; used by employees; and incorporated in training, positive reinforcement, and correction programs. In general, the following hierarchy should be followed in determining hazard elimination and control methods:

(1) **Engineering:**

Engineering controls directly eliminate a hazard by such means as substituting a less hazardous substance, by isolating the hazard, or by ventilating the workspace. These are the most reliable and effective controls.

(2) **Protective Safety Devices:**

Although not as reliable as true engineering controls, such methods include interlocks, redundancy, failsafe design, system protection, fire suppression, and warning and caution notes.

- (3) **Administrative:**
Administrative controls significantly limit daily exposure to hazards by control or manipulation of the work schedule or work habits. Job rotation is a type of administrative control.
- (4) **Work Practices:**
These controls include workplace rules, safe and healthful work practices, personal hygiene, housekeeping and maintenance, and procedures for specific operations.
- (5) **Personal Protective Equipment (PPE):**
PPE to be used are determined by hazards identified in hazard analysis. PPE should only be used when all other hazard controls have been exhausted, or more significant hazard controls are not feasible.

3. **Hazard Control Programs:**

- (1) Applicants and Participants must be in compliance with any hazard control program required by a VOSH standard, such as PPE, Respiratory Protection, Lockout/Tagout, Confined Space Entry, Process Safety Management, or Bloodborne Pathogens (although the VOSH Bloodborne Pathogens Standard does not apply to the construction industry, a Participant should consider setting a Bloodborne Pathogens program as an aspirational goal).
- (2) Applicants and Participants must periodically review these programs (most VOSH standards require an annual review) to ensure they are up to date.
- (3) Applicants and Participants must assure compliance with VOSH unique regulations (Reverse Signal Operation, Overhead High Voltage Line Safety Act, etc.)

4. **Occupational Health Care Program:**

- (1) Licensed health care professionals must be available to assess employee health status for prevention, early recognition, and treatment of illness and injury.
- (2) Arrangements for needed health services such as pre-placement physicals, audiograms, and lung function tests must be included.
- (3) The Participant supplies first aid and CPR or an equally effective alternative in accordance with VOSH regulations. Multiple employees and supervisors trained in first aid and CPR available for all shifts within a reasonable time and distance should be considered for an aspirational goal.

- (4) The Applicant or Participant may consider, based on site conditions, providing Automated External Defibrillators (AEDs) and training in their use.
- (5) Emergency procedures and services including provisions for ambulances, emergency medical technicians, emergency clinics or hospital emergency rooms should be available and explained to employees on all shifts.
- (6) Also see paragraph h., below.

5. **Preventive Maintenance of Equipment:**

- (1) A written preventive and predictive maintenance system must be in place for monitoring and maintaining workplace equipment.
- (2) Equipment must be replaced or repaired on a schedule, following manufacturers' recommendations, to prevent it from failing and creating a hazard.
- (3) Documented records of maintenance and repairs must be kept.
- (4) The system must include maintenance of hazard controls such as machine guards, exhaust ventilation, mufflers, etc.

6. **Tracking of Hazard Correction:**

A documented system must be in place to ensure that hazards identified by any means (self-inspections, incident investigations, employee hazard reports, preventive maintenance, injury/illness trends, etc.) are assigned to a responsible party and corrected in a timely fashion. This system must include methods for:

- (1) Recording and prioritizing hazards, and
- (2) Assignment of responsibility, time-frames for correction, interim protection, and correction follow-up.

7. **Disciplinary System:**

A documented disciplinary system must be in place:

- (1) The system must include enforcement of appropriate action for violations of the safety and health policies, procedures, and rules.
- (2) The disciplinary policy must be clearly communicated and equitably enforced to employees and management.
- (3) The disciplinary system for safety and health can be a sub-part of an all-encompassing disciplinary system.

8. **Emergency Preparedness and Response:**

Written procedures for response to all types of emergencies (fire, chemical spill, incident, terrorist threat, natural disaster, active shooter, etc.) on all shifts must be established. They must comply with VOSH standards, must be communicated to all employees, and must be practiced at least annually. These procedures must list requirements or provisions for:

- (1) Assessment of the emergency
- (2) Assignment of responsibilities
- (3) First aid
- (4) Medical care
- (5) Routine and emergency exits
- (6) Emergency telephone numbers
- (7) Emergency meeting places
- (8) Training drills
- (9) Documentation and critique of evacuation drills
- (10) Personal protective equipment where needed

iv. Safety and Health Training:

1. Training must be provided so that managers, supervisors, non-supervisory employees, and contractors are knowledgeable of the hazards in the workplace, how to recognize hazardous conditions, signs and symptoms of workplace-related illnesses, and safe work procedures.
2. Training required by VOSH standards must be provided in accordance with the particular standard.
3. Managers and supervisors must understand their safety and health responsibilities and how to carry them out effectively.
4. New employee orientation/training must include, at a minimum, discussion of hazards at the site, protective measures, emergency evacuation, employee rights under VOSH laws, standards and regulations, and Virginia BEST.
5. Training should be provided for all employees regarding their responsibilities for each type of emergency. Managers, supervisors, and non-supervisory employees, including contractors and visitors, must understand what to do in emergency situations.
6. People responsible for conducting hazard analysis, including self-inspections, incident investigations, job hazard analysis, etc., must receive training to carry out these responsibilities, e.g., hazard recognition training, incident investigation techniques, etc.

7. Training attendance must be documented. Training frequency must meet VOSH standards, or for non-VOSH required training, be provided at adequate intervals. Additional training must be provided when changes in work processes, new equipment, new procedures, etc. occur.
8. Training curricula must be up-to-date, specific to worksite operations, and modified when needed to reflect changes and/or new workplace procedures, trends, hazards and controls identified by hazard analysis. Training curricula must be understandable for all employees.
9. People who have specific knowledge or expertise in the subject area must conduct training.
10. Where personal protective equipment (PPE) is required, employees must understand that it is required, why it is required, its limitations, how to use it, and maintenance.

Chapter 4

The Application Process

I. Eligibility and Program Requirements:

A. Eligibility:

All Applicants must meet the following minimum requirements:

1. For the purpose of evaluating the implementation of safety and health management systems, the Participant must allow the AGCVA and VOSH designated representative(s) access to project sites throughout Virginia, when requested. Coordination for visits will be made initially with the contractor's Participant contact and, thereafter, with the project superintendent and/or foreman.
2. Assign at least one trained employee with responsibility for employee safety to administer the Participant's safety and health management system. A trained employee is one who has completed a 30-hour construction training course or safety training equivalent to the 30-hour course within the previous 12 months before applying to join Virginia BEST. For small contractors, documented ongoing use of a safety consultant or VOSH Workplace Safety Consultation may satisfy this requirement.
3. Provide for direct employee involvement in the safety and health management system. A safety committee, comprising company employees and management, or participation of employees in self-inspections, site inspections, job hazard analysis, safety and health program reviews, safety training and incident investigations would be acceptable.
4. Maintain a total case injury/illness incidence rate (three-year average) and day away, restricted, and/or transfer case incident rate (three-year average) that, when compared to the most current Bureau of Labor Statistics rate for the Applicant's North American Industrial Classification System (NAICS) code, is:
 - a) no more than double for Level One applicants,
 - b) no more than one and a half for Level Two applicants,
 - c) and below for Level Three applicants.
5. Develop, implement and maintain a prohibited substance policy and testing program that complies with applicable laws and regulations.

B. Applications for participation are subject to the following conditions.

1. **Employees' Support of Participation:**

Employees must support the company's participation in Virginia BEST. Requirements vary according to whether the Participant has a recognized employee representative.

2. **VOSH Inspection History:**

- a. If VOSH has inspected an Applicant site in the three years preceding the application, the inspection, abatement, and any other history of interaction with VOSH must indicate good faith attempts by the employer to improve safety and health at the site.
- b. The Applicant must have no fatalities or major incidents involving serious injury or illness to an employee that resulted in serious or willful citations related to the incident within the three years prior to application.
- c. The Applicant must have no willful, repeat or failure to abate violations that became final within the three years prior to application.
- d. This includes verification of correction of all serious violations. In addition, the existence of any of the following at the site precludes the company's participation in Virginia BEST:
 - Open enforcement investigations,
 - Pending or open contested citations or notices under appeal at the time of application, Whistleblower violations during the 36 months prior to application,
 - Unresolved, outstanding enforcement actions, such as long term abatement agreements or contests.

C. **Program Requirements:**

Applicants must understand and agree, through assurances, to fulfill program requirements for participation in Virginia BEST. Applicants must assure that:

1. The Applicant will comply with VOSH laws and regulations and will correct in a timely manner all hazards discovered through self-inspections, employee notification, incident investigations, a VOSH/AGCVA on-site review, process hazard reviews, annual self-assessments, or any other means. The Applicant will provide effective interim protection as necessary.

2. Deficiencies related to compliance with VOSH requirements and identified during the VOSH on-site review for a Level Three Applicant/Participant will be corrected within 45 days, with interim protection provided to employees.
3. Employees support the Virginia BEST application.
4. Virginia BEST elements are in place for the Level applied for, and the requirements of the elements will be met and maintained.
5. Employees, including newly hired employees and subcontractor employees when they reach the site, will have Virginia BEST explained to them, including employee rights under the program and under VOSH laws and regulations.
6. Employees performing safety and health duties as part of the Applicant's safety and health management system will be protected from discriminatory actions resulting from their carrying out such duties, just as Va. Code §40.1-51.2:1 protects employees who exercise their rights.
7. Employees will have access to the results of self-inspections, incident investigations, and other safety and health management system data upon request. At unionized sites, this requirement may be met through the employee representative's access to these results.
8. The information listed below will be maintained and available for VOSH review to determine initial and continued approval to Virginia BEST:
 - a. Written safety and health management system
 - b. Any agreements between management and the collective bargaining agent(s) concerning safety and health
9. Each year by February 15, each Participant must send its annual self-evaluation submission to the Virginia BEST Coordinator.
10. Whenever significant organizational, ownership, union, or operational changes occur, such as but not limited to a change in management, takeover, or merger, the Participant will provide VOSH within 60 days a new statement of commitment signed by both management and any authorized collective bargaining agents, as appropriate.
11. The Applicant must demonstrate a willingness to follow through on all assurances.

12. Employees must be aware of the recourse available to them if management fails to fulfill any of these assurances. This may include rescinding their support of Virginia BEST participation or exercising the right to file a VOSH complaint.

D. Preparing the Application:

1. The Virginia BEST Coordinator may visit with a prospective Applicant to offer assistance in the application process or before scheduling the on-site evaluation to obtain additional information or clarification of information provided in the application.
2. Pre-application assistance may also include referrals to the Virginia BEST Mentoring Program, to Virginia BEST/VPP conferences, and to Virginia BEST application workshops.

E. Confidentiality:

1. During the application process, prior to program approval, the application and all related information are confidential and therefore must be used solely for Virginia BEST related activities.
2. If an Applicant withdraws, the original application and related documents must be returned.
3. Once an application has been accepted, the contents are subject to the requirements and protections of the Virginia Freedom of Information Act and Title 40.1 of the Code of Virginia.

II. Procedures for Receipt and Review of Applications:

- A.** AGCVA Review Board will process Level One applications as received and notify the Virginia BEST Coordinator of receipt of application within 10 working days. The Virginia BEST Coordinator must process Level Two and Level Three applications as received.

B. Acknowledgment and Record of Receipt:

As appropriate, the AGCVA or the Virginia BEST Coordinator must notify the Applicant by letter or e-mail of receipt of the application within 15 working days. The acknowledgment must also include the name and telephone number of the Virginia BEST Coordinator.

C. Application Review:

1. As appropriate, the AGCVA Review Board or the Virginia BEST Coordinator must review the application to determine if it includes all required information listed in the most recent Virginia BEST application instructions to pinpoint any major deficiencies, and to notify the Applicant that the identified deficiencies must be rectified prior to application acceptance.

2. In general, application review should include an examination of the following:

a. **General Information:**

Ensure that the general information includes but is not limited to: the Applicant's name, address, key contact personnel and titles, corporate identification, collective bargaining agent contact information, number of employees and contractor employees, type of work performed, and products produced.

b. **Injury and Illness Rates:**

The Virginia rates supplied in the application must be examined as follows:

- The reviewer of the application must calculate the last 3 complete calendar years' total case incidence rate (TCIR) for injuries and illnesses and similarly, the days away, restricted, and/or transfer (DART) rate for injuries and illnesses for the Participant's regular employees.
- The reviewer must compare the 3-year Participant rates to one of the three most recent published BLS rates for the appropriate North American Industrial Classification System (NAICS) code, for the site's regular employees as well as for all Key Contractors.
- The reviewer must determine if the Applicant's injury and illness rates are low enough to warrant an on-site review.

c. **Safety and Health Elements:**

The reviewer must determine if the application describes how the Applicant is meeting the Virginia BEST requirements for the applicable Level, addressing each of the elements and sub-elements of an effective safety and health management system listed in Chapter III and as outlined below.

d. **Management Leadership and Employee Involvement:**

- The Applicant must describe top-level management leadership in the safety and health management system.
- Note: Management must clearly describe its commitment to meeting and maintaining the requirements of Virginia BEST.

- The Applicant must also describe how employees are involved in safety and health.

e. **Worksite Analysis:**

- The Applicant must describe methods used to recognize, identify, and analyze hazards.
- Effective worksite analysis provides the information managers and employees need for a thorough understanding of all hazardous situations to which they may be exposed.

f. **Hazard Prevention and Control:**

The Applicant must describe and give examples of how hazards are addressed, including preventative maintenance, occupational health care program, emergency preparedness, and hazard elimination employing the hierarchy of controls.

g. **Safety and Health Training:**

- The Applicant must describe its formal and informal safety and health training program for managers, supervisors, and employees.
- The information must include training protocols and schedules of training.

h. **Assurances:**

The reviewer must determine that the application contains a signed statement of assurance and that all of the required assurances have been included.

i. **Additional Attachments:**

The reviewer must determine if the application contains the required additional attachments, as follows:

- Copy of top-level safety and health policy.
- Organization chart.
- Most recent annual report and self-assessment.
- List of current job sites.
- Signed statement of union support if applicable.

D. Incomplete Applications:

1. If the application is considered incomplete, the AGCVA or Virginia BEST Coordinator, as appropriate, must notify the Applicant by letter, noting the missing elements and requesting that the missing information be submitted within 90 days.

2. If the additional information is not provided within that time, the application must be returned to the Applicant.
3. It can be resubmitted when completed.

E. Ineligible Applications:

1. If it is clear that the Applicant cannot qualify at the Level applied for, the AGCVA or Virginia BEST Coordinator, as appropriate, must ask the Applicant to withdraw the application within 30 days. The application can be resubmitted at a lower level, if appropriate.
2. If the application is not withdrawn, the AGCVA or Virginia BEST Coordinator, as appropriate, must return the application with a letter indicating the reasons the application was denied and forward a copy of the letter to the Director.

F. Voluntary Withdrawal of an Application:

1. An Applicant may withdraw the application by notifying the AGCVA or Virginia BEST Coordinator, as appropriate. The withdrawal is effective on the date the notification is received. Then, the AGCVA or Virginia BEST Coordinator, as appropriate, must:
 - a. Return the original application to the Applicant within 10 working days. If the application had already been accepted, the Virginia BEST Coordinator must retain a working copy for one year, for use in responding to questions that may arise.
 - b. The AGCVA or Virginia BEST Coordinator, as appropriate, must acknowledge the withdrawal by letter, giving the official withdrawal date. The letter must include a statement the AGCVA and VOSH will entertain re-application if circumstances change. A copy of the letter must be sent to the VOSH Cooperative Programs Director.

G. Decision to Conduct the On-site Evaluation:

NOTE:

On-site evaluations by an interdisciplinary team of ABC-VA, Private Industry Volunteers (PIV), Special Government Employees (SGE), and VOSH representatives are only conducted for Level Three Applicants.

1. Once an application is accepted, the Virginia BEST Coordinator must:

- a. Notify the Applicant by letter or e-mail in a timely manner that the required on-site evaluations will be conducted. However, no on-site evaluation may be conducted until all enforcement actions have been closed.
- b. Notify the appropriate Regional Safety and Health Director(s) so that the Applicant can be removed from any programmed inspection lists, effective no more than 75 days prior to the scheduled on-site reviews.

Chapter 5

The On-site Evaluation

Level Three on-site reviews consist of a thorough evaluation of a Virginia BEST Applicant's or Participant's safety and health management system in order to recommend approval or re-approval. On-site evaluations are carried out by a team consisting of VOSH staff acting in a non-enforcement capacity, AGCVA staff, qualified private industry volunteers, and other qualified team members.

I. Preparation for On-site Evaluations:

A. Scheduling On-site Evaluations:

1. On-site evaluations must be scheduled according to the priorities described in Chapter 4. Level Three participants must successfully complete up to three separate on-site reviews at major construction sites that VOSH has jurisdiction over by a team consisting of AGCVA and VOSH personnel (SGE and PIV personnel may also be used as part of the on-site review team).
2. For new Level Three Applicants, an on-site evaluation must be conducted within six (6) months of receipt of a completed application.
3. For Level Three Participants, on-site re-evaluations must be conducted between 36 and 48 months following initial approval or subsequent re-approvals.

B. Scheduling Exceptions:

1. On-site evaluations must be conducted earlier than normal scheduling requirements when:
 - a. Significant changes have occurred in management, processes, or products that may require evaluation to ensure the Participant is maintaining a Virginia BEST quality safety and health management system.
 - b. VOSH has learned of significant problems with the Participant, such as increasing injury and illness rates, serious deficiencies described in the Participant's annual self-assessment of its safety and health management system, or deficiencies discovered through VOSH enforcement activity resulting from an employee complaint, fatality, in-patient hospitalization, amputation, loss of an eye, or other event.
2. An on-site evaluation may be conducted earlier when requested by a Participant, but no earlier than 18 months after the closing of the most recent on-site evaluation.

C. Arrangements with the Participant:

1. Arrangements for the on-site evaluation must be coordinated by the team leader, who must contact the Applicant or Participant representative to:

- a. Set the date(s) for the on-site evaluation and explain the on-site evaluation process.
- b. Inform the representative of the documents that must be reviewed by the on-site evaluation team. OSHA 300 logs may be requested in advance of the on-site evaluation, if appropriate.

The Virginia BEST Coordinator or team leader must inform the employer of the team members for the onsite evaluation team. The finalized team members must be agreed upon by the employer.

2. Where collective bargaining agents are involved, the team leader must tell the Participant representative that such agents must be included in the initial and closing conferences and allowed the opportunity to accompany the on-site evaluation team on the site walkthrough. Similar employee involvement must be encouraged at non-collective bargaining sites.

D. The On-site Evaluation Team:

1. **Team Composition:**

Team composition is based on the size of the site and nature of the process and must include at least (a) through (c) below.

- a. Team Leader
- b. Safety Engineer or Safety Specialist
- c. Industrial Hygienist
- d. Backup Team Leader
- e. Additional Safety or Health Specialists, including others with knowledge and skills appropriate to the specific site
- f. Private Industry Volunteers (PIVs) or other non-government specialists can comprise no more than 50% of the team.

2. **Selection of the Team:**

The Virginia BEST Coordinator must formally request team members. This may be done by e-mailing the proposed on-site evaluation schedule to VOSH Regional Safety and Health Directors, Consultation Program Manager, or employers of other private industry volunteers.

a. **Basic Qualifications:**

All team members must have at least the following:

- (1) Thorough knowledge of Virginia BEST policy
- (2) OSHA Course 5450, the Special Government Employee (SGE) course (required of PIVs), or other formal classroom training in evaluating safety and health management systems
- (3) Working knowledge and understanding of safety and health management systems
- (4) At least one of the VOSH employees (not including PIVs) on the team must have safety and health expertise

b. **Team Leader:**

The team leader must meet the qualifications in a., above, plus have experience on three on-site evaluations, including once as a team member, once as a backup team leader, and once as a team leader in training (with a qualified team leader as backup team leader).

c. **Compliance Officers (23g):**

VOSH personnel whose current duties include enforcement responsibilities may be assigned to an on-site evaluation team, provided the CSHOs' Regional Safety or Health Director approves of their participation. Should a CSHO be a team member, such personnel are not permitted to subsequently engage in enforcement activity at an evaluated worksite(s) during the pendency of the construction project or until the company is no longer a Virginia BEST participant, whichever comes first.

d. **Consultation Staff (21d):**

VOSH safety and health personnel in the Consultation Program may be assigned to an on-site evaluation team in a training capacity or team, provided the Consultation Program Manager approves their participation. Consultation staff that are split-funded (21d and 23g) may participate, as team members, provided the necessary 23g funding is available.

e. **Training Capacity:**

Individuals assigned in a training capacity may voice their observations to the team members, but will not have a say, voice, or vote in the evaluation team's final report(s) and/or decision(s).

3. **Preparing the On-site Evaluation Team:**

a. **In Advance:**

The team leader must supply the team with the following information in advance of arrival at the worksite to be evaluated.

- (1) **Virginia BEST History:**
For new Applicants, team members must be given relevant sections of the application and the most recent self-assessment, and annual self-evaluation.
For current Participants, team members must be given a copy of the company's last on-site evaluation report, and annual self-evaluation.
- (2) **Inspection History:**
Team members must be given the inspection history and a summary of past interactions between the Applicant and VOSH.
- (3) **Any Documents Obtained with the Application:**
If any records were submitted in advance of the on-site evaluation, these should be shared with team members.

b. **Preparation Required of On-site Evaluation Team Members:**

In advance of the on-site evaluation, team members must prepare in the following ways:

- (1) **Review:**
When feasible, team members must carefully review the application and any previous on-site evaluation reports.
- (2) **On-site Evaluation Report Format:**
Team members must familiarize themselves with the on-site evaluation report format to ensure they understand what information they will be responsible for obtaining during the on-site evaluation.
- (3) **Interview Questions:**
Team members must carefully review the interview questions in preparation for conducting on-site interviews.
- (4) **Personal Protective Equipment (PPE)**
Team members must equip themselves with any PPE, such as safety shoes and safety glasses, required for the on-site evaluation (unless they have been informed that PPE will be provided at the work site).

c. **On-site:**

Once the team has arrived at the location, the team leader should hold a short strategy meeting with the team to discuss team assignments to answer any questions that the team members may have.

II. **Conducting the On-site Evaluation:**

The three primary methods of evaluation are document review, walkthrough, and interviews. Additional activities that must occur are the opening conference, daily briefings, report preparation, and closing conference. The on-site evaluation team must evaluate each element and sub-element of the safety and health management system and Virginia BEST requirements as described in Chapter 3. At the conclusion of the on-site evaluation, the on-site evaluation team must recommend to the Virginia BEST Coordinator, the VOSH VPP Manager and Director whether the Participant is suitable for participation or continued participation in Virginia BEST, and at what level of participation.

A. Opening Conference:

The opening conference with the employer and employee representatives will set the stage for the on-site evaluation, letting everyone know what to expect and what assistance will be needed. During this session the on-site evaluation team should be able to get a sense of the extent of commitment that exists for the Participant and at the specific work site. The team leader must convey the following information:

1. **Balanced Approach:**

Describe VOSH's view of the Virginia BEST Program and the importance of VOSH's balanced approach between cooperative programs and enforcement.

2. **Purpose:**

Clearly state the purpose of the on-site evaluation.

3. **Full Disclosure:**

Indicate that the on-site evaluation team expects the company will adhere to the signed full disclosure assurances submitted with the application.

4. **Schedule:**

Outline the schedule for the on-site evaluation.

5. **Interviews:**

State that arrangements must be made to conduct private interviews with supervisors, union representative(s), maintenance personnel, recordkeepers, occupational health staff, and randomly selected employees, including key subcontractor employees (if any).

6. **Responding to Hazards:**

Explain the differences between the walkthrough and an enforcement or consultation visit, as well as the hazard correction requirements for the evaluation.

7. **Status:**

Explain how the on-site evaluation team will keep the Participant and work site representatives updated daily on the progress of the on-site evaluation. When the on-site evaluation is completed, the Virginia BEST on-site evaluation team will discuss its findings with the work site representative so that the recommendations are clearly understood.

8. **Employee Rights:**

Outline the rights of employees under VOSH laws and regulations, and the OSH Act.

B. Document Review:

The Applicant's or Participant's written safety and health management system must describe how each of the requirements outlined in Chapter 3 are being met. The documents listed below are part of the written safety and health management system. The documentation of the system must be site specific, where appropriate. On a case-by case basis for small businesses, some documentation need not be in writing, provided all employees have the same clear understanding of the particular policy. This will be verified by the on-site evaluation team.

1. **Injury/Illness Data:**

The following documents must be reviewed to verify that the Participant is properly and accurately recording injuries and illnesses.

a. **Summary of Occupational Injuries and Illnesses:**

- Review Virginia specific data for the most recent complete 3-year period, current year-to-date for the company, and any key contractors.
- Recalculate the total case incidence rate (TCIR) and the days away, restricted, and/or transfer case incidence rate (DART rate).

b. **Incentive Programs:**

- The review of incentive programs must focus on ensuring that any incentive programs in operation are not based solely on providing awards to employees for the reduction or absence of safety or health incidents. Instead, these programs should be innovative, positive, and promote safety awareness and worker participation in safety-related activities.

- The on-site evaluation will focus on the incentive program's potential impact on the accuracy of reporting, injury and illnesses data.

c. First Reports of Injury:

Review First Reports of Injury to assess potential hazards and accurate reporting.

d. Incident and Near-hit Incident Analysis:

Verify that all injury and illness incidents, as well as near-hit incidents, are properly reported and investigated.

e. First-Aid Reports:

Verify that the first-aid incidents are properly categorized as such and are not causing possible over-reporting.

f. Medical Surveillance Reports:

Review First Reports of Injury to assess potential hazards and accurate reporting.

g. Record Keeping:

- Any cause for under- or over-reporting, such as lack of training in VOSH recordkeeping requirements, an incentive program, misdiagnosis of an injury or illness, etc., must be addressed.
- Discuss any discrepancies or omissions with the recordkeeper. Determine corrective actions and recalculate the 3-year TCIR and DART rate if necessary.

2. Management Leadership:

- a. Management's statement of commitment to safety and health.
- b. Written goals and objectives for safety and health.
- c. Annual safety and health report and self-assessment.
- d. Job descriptions.
- e. Performance standards and appraisals (These reviews must be performed in a manner that protects confidentiality and anonymity).
- f. Resource documents including budget projections.

3. **Employee Involvement:**

- a. Safety and health committee minutes.
- b. Self-inspection forms and records, incident investigations, hazard analyses, and employee reports of hazards.
- c. Documents attesting to union support.

4. **Worksite Analysis:**

- a. Baseline safety and industrial hygiene surveys.
- b. Self-inspection forms and records.
- c. Health hazard assessment and monitoring records (such as industrial hygiene surveys, sampling results, exposure calculations, and summary reports).
- d. Hazard analysis forms and reports.
- e. Incident investigations to verify that all causes of an incident are identified, undue blame or reprisal is not placed on employees, and recommendations for preventing future occurrence are listed.
- f. Hazard reporting system for employees.
- g. Annual safety and health management system assessments, site audits, and when needed to demonstrate that Virginia BEST criteria are being met, corporate audits that an Applicant voluntarily chooses to provide in support of its application.
- h. The system for managing contractor safety and health, and related documents.
- i. Trends analysis reports of injury/illness, incidents, employee hazard reports, etc.

5. **Hazard Prevention and Control:**

- a. Hazard control programs required by VOSH standards (such as Lockout/Tagout, Hazard Communication, Respiratory Protection, Process Safety Management, Confined Space Entry, Emergency Response, etc.). Although the VOSH Bloodborne Pathogens Standard does not apply to the construction industry, a Participant should consider setting a Bloodborne Pathogens program as an aspirational goal.

- b. Compliance with VOSH unique regulations (Reverse Signal Operation, Overhead High Voltage Line Safety Act, etc.).
- c. Preventive maintenance program, maintenance schedule, and examples of work orders.
- d. Engineering studies, to verify that any over-exposures to health hazards were adequately addressed and controlled following the hierarchy of controls.
- e. Hazard correction/work order and tracking reports.
- f. Safety rules, examples of safe work procedures and practices.
- g. Disciplinary system, including a review of policy.

6. **Training:**

- a. New employee and contractor orientation curricula.
- b. Training curricula related to required VOSH standards.
- c. Additional safety and health training curricula to verify that personnel performing hazard analysis and incident investigation are trained to do so. Also to verify that information from hazard analysis, incident reports, etc., are incorporated into training.
- d. Training attendance records and tracking methods.
- e. Any other related documents that support and verify that Virginia BEST requirements are being met.

C. **Walkthrough:**

1. **Scope:**

The on-site evaluation team must walk through the entire worksite of each applicable worksite to understand the type of work performed and construction trades involved, and to gain a sense of overall work conditions, unless the size of the site or nature of the process does not allow for it, in which case a representative sampling of all major construction areas and supporting activities must be covered.

a. **Key Subcontractors:**

The on-site evaluation team must review areas where work is performed by key subcontractor workers to ensure that they are provided equally effective protection.

b. **Hazard Analysis:**

The safety and health specialists must examine the site in sufficient detail to understand the types of hazards that exist and to determine that such hazards are controlled systematically by the safety and health management system.

c. **Problem Areas:**

The on-site evaluation team must examine areas where site reports of the following indicate that uncontrolled hazards may be present:

- Baseline hazard analysis
- Trends in injuries or illnesses
- Employee complaints or concerns
- Recurring incidents
- Health hazard surveys
- Site self-inspections

d. **Informal Interviews:**

During the walkthrough (and at other times, as appropriate) the on-site evaluation team must question randomly selected employees (including subcontractor employees) privately in their work area about prescribed work procedures, hazards to which they may be exposed, and their knowledge of how to protect themselves from hazards, including how to use and maintain their personal protective equipment. The team must keep track of the number of employees interviewed, but employee names and addresses must not be recorded.

2. **Construction Safety and Health Review:**

a. The safety specialist/engineer and industrial hygienist must:

- (1) Follow the construction workflow/process where possible. Focus on areas where document review and/or interviews indicate that uncontrolled safety and health hazards may be present.
- (2) Look for evidence that hazards are appropriately controlled following the hierarchy of controls.
- (3) Identify and note any uncontrolled hazards that must be corrected. Ensure that a responsible member of management takes notes, as well, and agrees on a reasonable time for correction.

- (4) If uncontrolled hazards are present, determine the causative deficiencies in the safety and health management system.
- (5) Relate hazards seen in the work areas to safety and health management system improvements that would control the hazards and prevent recurrence.
- (6) Inform the team leader of findings at the end of each day.

D. Interviews:

1. **Formal Interviews:**

Private formal interviews are conducted in a private area away from the works area to ascertain the extent of safety and health involvement and program awareness of managers, supervisors, employees, and contractors.

2. **Informal Interviews:**

Informal interviews are conducted at employees' work area during the walkthrough and at other times, as appropriate.

3. **Persons to Be Interviewed:**

- Managers
- Supervisors
- Employees
- Occupational Health Care Professionals
- Maintenance Personnel
- Record keepers
- Key Subcontractor Employees
- Temporary Employees

Other Subcontractor Employees:

- a. Subcontractor employees who work under their own company's supervision must be interviewed to determine whether they are aware of all the hazards to which they are exposed, and whether they are protected by a safety and health management system that meets VOSH regulatory requirements.
- b. Representatives from each craft should be interviewed, where possible.

4. **Selecting Persons to be Interviewed:**

- a. The selection of people to be interviewed must be made by the on-site evaluation team, not by the employer.

- b. The team must be flexible in choosing the most reasonable method of selection, given the characteristics of the site and any concerns expressed by the employer. Methods for selecting employees for interviews include:
 - (1) Identifying the most hazardous areas, selecting employees at random from those areas, and conducting informal interviews in these areas during the walkthrough
 - (2) For formal interviews, the team leader may select appropriate employees at random from an employee roster or using a random selection protocol.

5. **Scheduling Formal Interviews:**

- a. Formal interviews lasting no more than 15 minutes must be conducted in a manner that minimizes disruption.
- b. The number of formal interviews is up to the team leader, based upon the size and nature of the site and whether a new Applicant or current Participant is being evaluated.

6. **Use of Interview Questions:**

- a. The reviewers must assure each interviewee that responses will be treated confidentially, and that no single answer they give will influence the team's recommendation.
- b. Notes (without names or addresses) should be made of employees' responses to interview questions and other comments. These notes later will be used to support the team's recommendation and the Agency's decision.

III. **Discussion of Findings:**

A. **Daily Debriefings:**

- 1. At the end of each day, the on-site evaluation team must meet privately to discuss their findings.
- 2. The team leader is responsible for organizing the findings and conducting daily briefings with the site management and employees.

B. **Uncontrolled Hazards:**

1. **Informing Site Management:**

- a. As hazards are found and discussed during the walkthrough, the on-site evaluation team must add them to a written list of the uncontrolled hazards identified.
- b. This list will be used when the team briefs site management at the end of the day.

2. **Hazard Correction:**

- a. VOSH expects that every effort will be made by the site to correct identified hazards before the closing conference.
- b. If hazard correction cannot be accomplished before the conclusion of the on-site evaluation, the on-site evaluation team and site management must discuss and agree upon correction methods and time frames.
- c. The site may be given a maximum of 45 days to correct uncontrolled hazards, as long as interim protection is provided. These “45-day Items” must be corrected before the final on-site evaluation report can be processed. Management must provide the team leader with a signed letter indicating how and when the correction will be made. The team leader may decide to return to the site to verify correction.
- d. If, after repeated attempts to reach agreement, site management refuses to correct a situation that endangers the safety and health of employees, that situation must be referred to the Director who may, at his or her discretion, refer the matter to the ELT for review and, if necessary, enforcement action.

C. **Deficiencies in the Safety and Health Management System:**

Where the team detects deficiencies in the safety and health management system, even when physical hazards are not present, the on-site evaluation team must document these deficiencies as goals for correction, recommendations for improvement, or both.

1. **Goals:**

If the system deficiency is a requirement for Virginia BEST as a specific level, it must become the subject of a goal). Implementation of goals is mandatory for Virginia BEST participation. Time frames, interim protection, and methods of achieving goals must be discussed and agreed to with site management.

2. **Recommendations:**

If improvement of the system deficiency is not necessarily a requirement for Virginia BEST but will improve worker safety and health at the site, the improvement must be a recommendation. Implementation of recommendations is encouraged but is not mandatory for Virginia BEST participation.

IV. Final Analysis of Findings:

- A.** When the documentation review, the walkthrough, and employee interviews have been completed, the on-site evaluation team must meet privately to review and summarize its findings. The team leader must facilitate the discussion and assist the team members in drawing conclusions about the quality of the safety and health management system, based on their findings.
- B.** In analyzing their findings, the on-site evaluation team must consider the following:
 - 1. Observations made in the work areas.
 - 2. The nature of injuries or illnesses recorded on the Summary of Occupational Injuries and Illnesses and reflected in the First Report of Injury data.
 - 3. The degree to which implementation of written programs has been verified.
 - 4. Responses to formal and informal interviews.
 - a. The reviewer must look for an overall pattern in the perceptions of managers, supervisors, employees, and subcontractor employees regarding worksite conditions and the safety and health management system.
 - b. Employee responses that are supported by information obtained by document review, observation, or other employee interviews should carry the most weight.
 - 5. When the Applicant or Participant is very small or in a low-hazard NAICS, some of the requirements for formality may be relaxed (for example, informal programs or scaled-down documentation), providing that a strong case can be made to support the effectiveness of the safety and health management system.

V. Recommendations for First-time Participation:

In the final private meeting prior to the closing conference, the on-site evaluation team must reach consensus on their recommendation for program participation.

A. General Applicants:

The on-site evaluation team must decide among the following recommendations:

1. **Level of Participation Applied For:**
 - a. Should the on-site evaluation team find that an Applicant's safety and health management system meets all requirements for Level Three Participation, a recommendation for participation as a Virginia BEST Participant must be made.
 - b. Should the team find that an Applicant's safety and health management system does not meet all requirements for Level Three Participation, they will make a determination as to whether the Applicant's system meets a lower Level of Participation and make a recommendation accordingly for participation in Virginia BEST.

VI. Recommendations for Participants Re-approvals:

The on-site evaluation team must decide among the following recommendations:

A. Level Three Participants:

1. **Recommendation for Virginia BEST Re-approval at the Same Level:**

Should the on-site evaluation team find that the Participant's safety and health management system continues to meet all Virginia BEST requirements appropriate to the level of participation, the team must recommend re-approval upon satisfactory completion of any 45-day items.

2. **Recommendation for Virginia BEST Re-approval at a Different Level:**

Should the on-site evaluation team find that the safety and health management system does not meet all Virginia BEST Level Three requirements, the team must recommend a lower level of participation or withdrawal from the program.

VII. Closing Conference:

A. The findings of the on-site evaluation team, including its recommendation to the ELT, must be presented to the Applicant/Participant management and appropriate employee representatives before the team leaves the site.

B. During the closing conference, the team leader must review:

1. **Findings:**

Review the team's findings, addressing each of the major Virginia BEST elements as outlined in Chapter 3. Also review the injury and illness rates and how they compare to the industry national average.

2. **The On-site Evaluation Team's Recommendation to the ELT:**

Discuss and support the on-site evaluation team's recommendation to the ELT so that the Applicant or Participant has a clear idea of how the site measures up to the requirements of Virginia BEST.

3. **45-day Items:**

Review all uncorrected hazards, expected correction methods, and time frames.

4. **Recommendations:**

Review any recommendations made by the on-site evaluation team for improvement of the safety and health management system.

5. **Responsibilities:**

Remind the company of its responsibilities under Chapter 4, The Application Process, and Chapter 6, Participation Decisions and Management.

VIII. The On-site Evaluation Report:

A. Purpose of the Report:

The on-site evaluation team must write a report documenting the on-site evaluation to substantiate the team's recommendation to the ELT for approval or re-approval of the Applicant/Participant in Virginia BEST. If the Participant is approved or re-approved, the report and any worksheets along with the application will provide baseline data for future evaluation purposes. The report must include the following information:

1. Verification of the application information submitted by an Applicant/Participant.
2. Documentation of the qualifications of the Applicant for participation, or the Participant for continuation in Virginia BEST.

B. Writing the On-site Evaluation Report:

All attempts must be made to complete a draft report before leaving the site. The draft report must reflect the consensus of the on-site evaluation team. Each team member must complete the sections of the on-site evaluation report assigned by the team leader, following the format in of the evaluation report.

1. **Review of the Draft On-site Evaluation Report:**

Once the draft is complete, the team must review it and make any needed changes.

2. **Presentation of the Draft On-site Evaluation Report:**

If the draft on-site evaluation report is completed on-site, the draft must be presented at the closing conference. If the draft report is not presented at the time of the closing conference, the team leader must advise the Applicant/Participant approximately when the draft report will be available for review.

3. **Applicant/Participant's Comments and Revised Draft Report:**

After the draft report is presented to the company, the team leader must allow the Applicant or Participant 30 days to review and comment on the draft report. A revised version of the on-site evaluation report must be prepared by the team leader following receipt of the Applicant/Participant's comments.

C. **Completing the Final On-site Evaluation Report:**

The Virginia BEST Coordinator or team leader must compile the final report and submit it to the VOSH VPP Manager for review.

D. **Deferral of Final On-site Evaluation Report:**

The final report may be deferred from submission to the ELT if uncorrected hazards are still present at the site after the closing conference or after the team leaves the site.

The final report may be deferred for up to 45 days from the closing conference or until the Applicant/Participant has corrected all uncontrolled hazards identified by the on-site evaluation team, whichever occurs first.

IX. **Correction of Remaining Hazards:**

A. **Hazard Correction Plan:**

1. Within a week of the closing conference, the Applicant/Participant must document in a letter to the Virginia BEST Coordinator or his/her designees any hazard correction plans (this can be the list of 45-day items) and dates agreed upon.

2. This letter will be kept on file until all corrections have been made.

B. **Verification of Hazard Correction:**

1. When the Applicant/Participant has corrected the hazards, it must send a signed letter to the Virginia BEST Coordinator indicating how and when the corrections were made.

2. The team leader or Virginia BEST Coordinator may decide to conduct a return visit to the site to verify the corrections. The findings of this visit must be written in a correction letter and kept on file. The correction letter may be made available to an on-site evaluation team at a later date.

C. Finalizing the On-site Evaluation Report:

When hazard correction has been verified, the team leader must remove any lists of uncorrected hazards from the final report before submitting the report to the ELT.

D. Failure to Correct Hazards by End of Deferral Period:

If the deferral period has expired, the Applicant/Participant has not corrected the hazards, and the Virginia BEST Coordinator has made every attempt to resolve the problem in a manner consistent with the cooperative spirit of the program, then:

1. The Virginia BEST Coordinator must inform the Applicant or Participant that the matter is being referred to the VOSH VPP Manager and the Director of Cooperative Programs.
2. The VOSH VPP Manager and the Director of Cooperative Programs must review the situation and make a decision regarding enforcement action. If the Director decides that all cooperative efforts have failed and that VOSH must ensure hazard correction, they must send a memorandum to the ELT recommending that the appropriate Regional Safety or Health Director take enforcement action.
3. For withdrawal, termination, and reapplication procedures, refer to Chapter 6.

Chapter 6

Participation Decisions and Management

I. Report Processing:

After the required on-site evaluation(s) for Level Three Applicants/Participants has been conducted and the on-site evaluation report has been completed, the Virginia BEST Coordinator submits the report to the VPP Program Manager and Director for approval and forwarding to the ELT.

A. Final Decision Regarding Participation:

1. All decisions are based on the on-site evaluation(s), final evaluation report, and recommendations.
2. In each of the following cases, the VOSH Cooperative Programs Director must recommend an action to the ELT regarding:
 - a. Approval of new Participants
 - b. Withdrawal or termination of participation
 - c. Re-approval (or disapproval) of participation in Virginia BEST
 - d. Approval of a Participants movement from one level of participation to another
3. The VOSH VPP Manager is responsible for:
 - a. Acknowledging withdrawal of participation from Virginia BEST

II. Final On-site Evaluation Report and Participation Date:

When the final on-site evaluation report is sent to the Applicant/Participant with the ELT's letter announcing the participation decision, approval becomes final. For new approvals, approvals from one level of participation to another, and re-approvals, the effective date is the date the ELT's approval letter is signed.

III. Notification:

- A.** When the ELT's approval or congratulatory letter is signed, the VOSH Cooperative Programs Director must:

1. Notify the Virginia BEST Coordinator and the VOSH VPP Manager and mail the letter and the final copy of the report to the Participant representative(s). This mailing constitutes official notification that the Participant has been approved for participation in Virginia BEST.
2. As appropriate according to the level of participation, inform the Participant of the following potential actions/awards:
 - a. Press Release
 - b. Certificate of Recognition
 - c. Governor's Proclamation
 - d. Virginia BEST Flag
 - e. Virginia BEST Celebration
3. For Level Three Participants, inform the Participant that they may hold a ceremony and may request VOSH officials to make a formal presentation of the Virginia BEST designation.

IV. Awards:

Newly approved Participants receive recognition in accordance with the level of participation.

A. Press Release:

A press release and DOLI website news item will be provided for all levels of participation.

B. Letter of Recognition:

Letters of Recognition will be provided for all levels of participation.

C. Certificates:

The VOSH Cooperative Programs Director must arrange for the printing of the award certificate(s) for initial approvals of Level Two and Level Three Participants.

D. Flags:

VOSH awards Level Three Participants newly approved to Virginia BEST a flag. The VOSH VPP Manager must maintain an inventory of flags.

E. Governor's Proclamations:

The VOSH Cooperative Programs Director must arrange for Level Three award proclamation(s) to be signed by the Governor and forwarded to the ELT for presentation.

V. Approval Ceremonies:

Upon notification of approval, the Participant representative should contact the Virginia BEST Coordinator to schedule the ceremony.

- A. An ELT representative available shall make the presentation.
- B. The Participant may send an invitation to the appropriate Regional Safety and Health Directors, any VOSH personnel who were responsible for recruiting the Participant for Virginia BEST, as well as higher-level VOSH officials. The on-site team may also be included on the invitation list. In addition, the Virginia BEST Coordinator should suggest other potential invitees such as local and state political officials or other area companies that might be potential Virginia BEST candidates.
- C. The VOSH Cooperative Programs Director will arrange for a press release.

VI. Withdrawal:

- A. Participants may withdraw on their own accord or be asked by VOSH to withdraw from the program.
- B. Any Participant may choose to withdraw voluntarily at any time.
- C. VOSH must request that a Participant withdraw from Virginia BEST if it is determined that the participant is no longer meeting the requirements for Virginia BEST.

D. Withdrawal Process:

1. The Participant must write a letter addressed to the ELT stating that it is withdrawing from the program, with the reason(s) for withdrawal, effective on the date of the letter.
2. The ELT must send the Participant a letter acknowledging the withdrawal. The letter must also state:
 - a. As appropriate for the level of participation, the Virginia BEST flag and certificate are invalid and must no longer be used.
 - b. That the company's application, on-site evaluation reports, approval letters, and annual reports and self-assessments will be retained in accordance with the Department's Document Retention Schedule.
 - c. That the Participant must be returned to the programmed inspection list, if applicable, at the time of the next inspection cycle.
 - d. That VOSH will consider the Participant's reapplication to Virginia BEST if and when eligibility requirements are met.

E. Notification of VOSH Regional Office:

The Virginia BEST Coordinator must notify the appropriate Regional Safety and Health Directors that the withdrawn establishment is no longer participating in Virginia BEST and must be returned to the programmed inspection list for the next inspection cycle.

VII. Suspension:

A Participant may be suspended from the program by the ELT or the Participant may choose voluntarily suspend themselves during the investigation of a fatality or major incident at a covered worksite. A Participant will be automatically suspended from the program during the pendency of a termination process initiated by either the AGCVA or VOSH under the procedures in Chapter 6, section VIII, below. The timing for reinstatement from the suspension will be at the sole discretion of the ELT. The ELT or AGCVA may also move to terminate the Participant from the program as provided in Chapter 6, section VIII, below.

VIII. Termination:

A. A Participant will be terminated by AGCVA and VOSH if one or more of the following occurs:

1. An inspection by AGCVA or VOSH reveals a significant deviation from program criteria (e.g., a pattern of serious violations and/or unabated hazards is identified and verified).
2. The Participant provided falsified information.
3. The Participant refuses to cooperate with on-site reviews, or requests for prompt abatement of hazards.
4. The Participants' total case injury/illness incidence rate rises above set criteria (in certain cases, when agreed upon by both AGCVA and VOSH, the contractor may be reclassified to a lower level).
5. A willful violation or failure to abate violation is issued by VOSH.
6. The Participant engages in a pattern of participating in or allowing misclassification of employees.
7. The contractor takes other such actions that may be determined to be grounds for termination by AGCVA and/or VOSH.
8. The contractor is no longer a member in good standing with AGCVA.

B. Prior to final termination of a Participant's status, the following will occur:

1. The contractor and union representative(s) will be notified in writing of the intent to terminate.
 2. The notice will include an explanation of the reasons for termination.
 3. The contractor will have an opportunity to reply to the written notice within a period of 30 days and appeal the decision.
 4. The contractor will have the right to appeal before AGCVA and the ELT. AGCVA will conduct an initial review of the appeal and either reject or give conditional approval. For rejected appeals, the decision of the AGCVA is final. Conditionally approved appeals will be forwarded to VOSH for review. The ELT's decision to approve or reject the appeal will be final.
 5. If the ELT decides to terminate then the VOSH Cooperative Programs Director must send a memorandum explaining the reason(s) for termination of participation.
 6. The Virginia BEST Coordinator must notify the appropriate Regional Safety and Health Directors that the former Participant must be returned to the programmed inspection list, if applicable, 30 days following the date of the termination letter.
- C.** Participants that experience a fatality, whether an employee or contract employee, may be immediately suspended from program participation until such time as a VOSH fatality investigation can be completed. In the event the investigation shows substantial deficiencies in the Participant's safety and health programs, such that during a normal certification review the types of deficiencies would have precluded the company from participation in Virginia BEST, the ELT, at their discretion, may terminate the company's participation in the Virginia BEST.
- D.** Under most other situations, termination by VOSH should occur only when all efforts for assistance have been exhausted. An example is when VOSH has identified one or more serious problems and recommended technologically feasible solutions, but the Participant has refused to make necessary corrections.
- E.** Termination may also occur when evidence exists that the trust and cooperation among labor, management, and VOSH, upon which approval was based, no longer exist, or when VOSH requests a Participant to withdraw and it does not.

IX. Reinstatement:

Reinstatement requires reapplication. See the table below for time frames.

<i>If:</i>	<i>And:</i>	<i>Then:</i>
An Applicant withdraws its application, or a Participant withdraws from the program of its own accord.	VOSH Inspection History conditions and Assurances are met [See Chapter 5].	The Applicant may reapply at any time.
An Applicant withdraws its application, or a Participant withdraws from the program due to a VOSH enforcement inspection.		The Applicant can reapply when all enforcement activity is closed.
An Applicant withdraws its application, or a Participant withdraws from the program voluntarily, due to a fatality.		The Applicant may reapply immediately upon closure of VOSH activity, provided the VOSH fatality investigation does not fault the employer.
An Applicant withdraws its application, or a Participant withdraws from the program, due to withdrawal of union support.		The Applicant may reapply when a new letter of union support is received by the Virginia BEST Coordinator.
VOSH terminates a Participant.	N/A	The Applicant must wait 24 months to reapply.

Chapter 7

Enforcement Activity at Virginia BEST Participant Sites

I. Additional Virginia BEST Reassessment:

This chapter describes the procedures followed by VOSH in the event of enforcement activity at a Virginia BEST Applicant's or Participant's site.

A. Two types of enforcement activity trigger additional Virginia BEST reassessment:

1. Unprogrammed VOSH Inspections:

Unprogrammed inspections occur in response to referrals, formal complaints, fatalities, in-patient hospitalizations, amputation, and loss of an eye.

2. Other Incidents or Events:

- a. Other incidents or events, whether or not injuries or illnesses have occurred and whether or not normal enforcement procedures apply to the situation, may trigger reassessment.
- b. VOSH may reassess the company's safety and health management system if there is reason to believe that a serious deficiency exists that would have an impact on its continued qualification for Virginia BEST.
- c. Any enforcement activity covered by VOSH Directive 13-080.
- d. Any applicable memorandum or directive issued by VOSH.

II. VOSH Personnel:

A CSHO who was a Virginia BEST on-site team member cannot conduct an enforcement inspection at a Virginia BEST Participant during the pendency of the construction project or until the site is no longer a Virginia BEST Participant, whichever occurs first.

III. Virginia BEST Activity:

- A.** If the event that triggers enforcement activity occurs during the time between application and on-site evaluation, the on-site evaluation must be postponed until the enforcement case is closed.
- B.** If there already is an open enforcement case at a site when the Regional Safety or Health Director is notified by the VOSH VPP Manager of a pending on-site evaluation, the Regional Safety or Health Director must inform the VOSH VPP Manager of the enforcement activity so the Virginia BEST evaluation can be postponed.

- C. If the event that triggers enforcement activity occurs during the time between the scheduling and the beginning of an on-site evaluation, the Virginia BEST on-site visit must be postponed until the enforcement case is closed.
- D. If the event that triggers enforcement activity occurs during the Virginia BEST on-site evaluation, the Virginia BEST on-site must cease until the enforcement case is closed.

IV. Initiation of Enforcement Activity:

When a Regional or Field Office receives a complaint, a referral or is notified of a fatality, in-patient hospitalization, amputation, loss of an eye, or other event requiring enforcement occurring at a Virginia BEST Participant site, the Regional Safety or Health Director will initiate an inspection following normal VOSH enforcement procedures.

- A. The Regional Office must immediately notify the VOSH VPP Manager of any fatalities, or other incidents requiring enforcement that occurs at a Virginia BEST worksite, as well as when a referral or complaint is received from a Virginia BEST Participant, including informal complaints that receive responses by letter. The VOSH VPP Manager will comply with VOSH procedures concerning avoidance of advanced notice of inspections (see Va. Code §40.1-51.3:1 and requirements in the VOSH Field Operations Manual (FOM)).
- B. If the Virginia BEST Coordinator is the first person to be notified by the BEST Participant of an event requiring enforcement, they must instruct the Participant to contact the appropriate Regional Office.
- C. When enforcement activity is complete:
 - 1. The Regional Office must send the VOSH VPP Manager a copy of all reports resulting from enforcement activity.
 - 2. The VOSH VPP Manager must review any reports of investigations triggered by referrals, formal or non-formal complaints, or letters written by the Regional Office concerning conditions at the Participant's site, fatalities and other incidents requiring enforcement or involving publicity.
 - 3. The Virginia BEST Coordinator and the VOSH VPP Manager must assess whether deficiencies in the Participant's safety and health management system led to the event and, if so, must use their professional judgment and discretion to determine one of the following courses of action:
 - a. In cases where there are no obvious systemic errors in the Participant's safety and health management system, the Participant was cooperative with the investigation, VOSH issued no willful violations, all cited hazards were abated, and Virginia BEST elements continue to be in place, a phone call with the Participant is sufficient to:

- Obtain assurances that Participant management and unions (if applicable) remain committed to Virginia BEST.
 - Note any improvements in the Participant's systems, policies, procedures, and/or hazard controls.
 - Determine whether the company remains qualified for Virginia BEST participation.
- b. In cases where there were minor systemic errors/failures in the Participant's safety and health management system or incorrect/inappropriate hazard control(s) selected, and where there may or may not have been fatalities, the Participant was cooperative with the investigation, VOSH issued no willful violations, and all cited hazards were abated, but where Virginia BEST elements may not be in place, the Virginia BEST Coordinator and AGCVA must visit the site to:
- Review conditions pertaining to the event.
 - Obtain assurances that Participant's management and unions (if applicable) remain committed to Virginia BEST.
 - Determine if the company remains qualified for Virginia BEST participation.
- c. In cases where the enforcement inspection leads to concerns about major failures in the Participant's safety and health management system, or a fatality or multiple fatalities occurred indicating that Virginia BEST elements are not in place, the ELT may, at their discretion and based on the findings of the fatality investigation, either terminate the employer's participation or request that an on-site evaluation be conducted to:
- Review all safety and health management system elements.
 - Obtain assurances that Participant management and unions (if applicable) remain committed to Virginia BEST.
 - Determine if the Participant remains qualified for Virginia BEST participation.
- d. In cases where a willful violation or failure to abate violation was issued, the employer's participation will be terminated; see the procedures for termination outlined in Chapter 6.

V. Decision for Continued Participation, Withdrawal or Termination:

- A.** In the case of IV.C.3(a) or 3(b) above, the VOSH Cooperative Programs Director may approve the Participant's continued participation. The VOSH Cooperative Programs Director must forward a memorandum to the ELT describing their decision. No further action is necessary. If the ELT decide that termination is required, the procedures in Chapter 6 must be followed.

B. In the case of IV.C.3(c) or 3(d) above, the Director must make a recommendation regarding the Participant's continued participation. The Director must forward a memorandum describing their recommendation to the ELT.

1. If the ELT decides that termination is required, the procedures in Chapter 6 must be followed.
2. If the ELT decides that the employer may continue its participation, the Director will be notified and must:
 - a. Notify the Participant of the ELT's decision, and no further action is necessary, or
 - b. Re-approve the Participant according to procedures in Chapter 6, if the purpose of the on-site was also to determine re-approval.

VI. Confidentiality:

Information gathered during the BEST evaluations cannot be used by the Regional Office for any enforcement activity at the worksite unless the worksite has refused to correct hazards found by the BEST Evaluation team, the team has recommended enforcement action, and the ELT has initiated such action.

Appendix A

Instructions for Calculating Injury and Illness Rates

I. Definitions:

- A.** Total Case Incidence Rate (TCIR). Total number of recordable injuries and illness cases per 100 full-time employees that a company has experienced in a given time frame.
- B.** Days Away, Restricted, and/or Transfer (DART) Case Incidence Rate. The number of recordable injuries and illness cases per 100 full-time employees resulting in days away from work, restricted work activity, and/or job transfer that a company has experienced each time frame.

II. Review of Rates:

- A.** New Applicants and current Participants are required to calculate annual rates and 3-year rates for the last 3 complete calendar years. Information recorded in the OSHA 300 log will be used for the rate calculations.
- B.** Virginia BEST on-site teams will calculate the company's rates for the previous 3 full calendar years and the year-to-date rate. The Virginia BEST on-site teams also will review the rates of each key subcontractor.

III. Key Subcontractor Rates:

- A.** Copies of each key subcontractor's hours worked and injury and illness data pertaining to the site must be maintained by the Participant's management. (See glossary for definition of key contractor).
- B.** Injury and illness data for temporary employees who are regularly intermingled with the owner's employees and under direct supervision by company management must be included in the Participant's rates.

IV. Rate Calculations:

Rates are calculated by the formula $(N/EH) \times 200,000$ where:

N = The sum of the number of recordable injuries and illnesses in the year

For the TCIR, use the total of items H, I and J from the OSHA 300A Summary. For the DART rate, use the total of items H and I from the OSHA 300 summary

EH = total number of hours worked by all employees in the year

200,000 = equivalent of 100 full-time workers working 40 hours per week, 50 weeks per year

Year-to Date	Hours	Total Cases (H, I and J from OSHA 300A)	Total Incident Rate (TIR)	Away, Restricted or Transferred Cases (H and I from the OSHA 300A)	Days Away, Restricted or Transferred Rate (DART)
20XX	163780	3	3.7	1	1.2
BLS National Average			4.10		2.10

- A. The calculations for 3-Year TCIR and DART are done in the same way. First, total the number of items from H, I and J from the OSHA 300A Summary for the past three full years. Divide this sum by the total hours worked for all three years. Multiply the result by 200,000. Use the table below as an example.

Year	Hours	Total Cases (H, I and J from OSHA 300A)	Total Incident Rate (TIR)	Away, Restricted or Transferred Cases (H and I from the OSHA 300A)	Days Away, Restricted or Transferred Rate (DART)
20XX	163739	0	0	0	0
20XX	156504	4	5.1	0	0
20XX	148419	2	2.7	1	1.35
Total	468662	6		1	
3 Year Average (20XX – 20XX)			2.60		.45
BLS National Average			4.10		2.10
Year to Date*	86897	0	0	0	0

B. Rounding Instructions

You must round the rates to the nearest tenth following traditional mathematical rounding rules. For example, round 5.88 up to 5.9; round 5.82 down to 5.8; round 5.85 up to 5.9.

V. Comparison to National Averages:

Compare the 3-year TCIR and DART rate to 1 of the 3 most recently published Bureau of Labor Statistics (BLS) national averages for the NAICS code for the industry in which the Applicant is classified.

A. These national averages, currently broken down by NAICS code, are found in the Table of Incidence Rates of Non-fatal Occupational Injuries and Illnesses by Industry of the BLS Occupational Injuries and Illnesses Bulletin that BLS publishes each year.

B. To calculate the percentage above or below the national average use the following formula $(\text{Participant rate} - \text{BLS rate}) / \text{BLS rate} \times 100$.

VI. Alternative Calculation for Small Worksites:

A. An alternative rate calculation is available to small companies where a single or relatively small number of incidents would cause the worksite's disqualification when using the normal 3-year rate calculation. If the following criteria are met, the TCIR and DART rate calculations can be based on the best 3 out of the most recent 4 complete calendar years' injury and illness incidence experience.

B. Using the most recent calendar year's hours worked, calculate a hypothetical TCIR assuming the employer had two cases for the year. Compare the hypothetical rate to the most recently published BLS national average TCIR for the industry. If the hypothetical rate is equal to or higher than the BLS rate, the employer qualifies for the alternative rate calculation method.

Appendix B

Format for Annual Self-Evaluation (ASE)

Virginia BEST requires each Participant to annually evaluate the effectiveness of its safety and health management system. The Annual Self-Evaluation, which must be submitted to the Virginia BEST Coordinator by February 15th of each year, must include assessments of the effectiveness of all elements and sub-elements of the Participant's safety and health management system as described in Chapter 3 of this manual. The preferred method of submission is via E-mail to the Virginia BEST Coordinator at <mailto:VPPBEST@doli.virginia.gov>.

VOSH also expects the Annual Self-Evaluation to include injury and illness data for all applicable key subcontractors, and success stories. VOSH uses the information to update records and statistics, to showcase successes related to implementation of the Virginia BEST requirements, and to demonstrate that Participants are committed to continuously improving worker safety and health at their facilities.

The Annual Self-Evaluation should include a review of all safety and health programs, reports on regular inspections of the Participant's worksites, and interviews with employees.

During this process Participants should be answering the following questions relating to each element and sub-element of their safety and health management system:

1. Is it comprehensive?
2. Is it operating effectively and meeting established goals and objectives?
3. What improvements can be made to make it even more effective?
4. What goal modifications should be made for the upcoming year?

The Annual Self-Evaluation is not a compliance audit. It is a critical review of all the elements of the safety and health management system, including a review of the Participants and key contractors' injury and illness data and trends.

The following is the information required that the Annual Self-Evaluation must address.

Appendix B
Annual Self-Evaluation (ASE)

1. Management Leadership and Employee Involvement
 - a. Management Commitment to Safety and Health Protection and to VPP Participation
 - b. Policy
 - c. Goals Objectives, and Planning
 - d. Visible Top Management Leadership
 - e. Responsibility and Authority
 - f. Line Accountability
 - g. Resources
 - h. Employee Involvement
 - i. Contract Employee Coverage
 - j. Written Safety and Health Management System

2. Worksite Analysis
 - a. Hazard Analysis of Routine Jobs, Tasks, and Processes
 - b. Hazard Analysis of Significant Changes, New Processes, and Non-Routine Tasks - Including pre-use analysis and new baselines
 - c. Routine Self-Inspections
 - d. Hazard Reporting System for Employees
 - e. Industrial Hygiene Program
 - f. Investigation of Accidents and Near-Misses
 - g. Trend/Pattern Analysis

3. Hazard Prevention and Control
 - a. Certified Professional Resources
 - b. Hazard Elimination and Control Methods
 - 1) -Engineering Controls
 - 2) -Administrative Controls
 - 3) -Work Practice Controls and Hazard Control Programs
 - 4) -Safety and Health Rules and Disciplinary System
 - 5) -Personal Protective Equipment
 - c. Process Safety Management (if applicable)
 - d. Occupational Health Care Program
 - e. Preventive/Predictive Maintenance
 - f. Tracking of Hazard Correction
 - g. Emergency Preparedness

4. Safety and Health Training
 - a. Managers
 - b. Supervisors
 - c. Employees
 - d. Emergencies
 - e. PPE

Additional Information to include:

1. Participant Company Contact Information
2. TCIR/DART (previous 3 years) for Participant and applicable Key-Subcontractors (see Appendix A for guidance)
3. Rate Reduction Plan (RRP) (if applicable)
4. Incentive Programs
5. Success Stories
6. Objective and Goals Update (from previous year)
7. Objective and Goals Projection (for upcoming year)
8. Virginia Unique Standards (where applicable)
9. Special Government Employee (SGE) or Private Industry Volunteers (PIV) activities (from previous year)

Virginia BEST Assurances

Company Name

Date

Agrees to comply with the following items as a Voluntary Protection Program participant:

1. Compliance

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

2. Correction of Deficiencies

- a. Within 45 days, you will correct safety and health deficiencies related to compliance with VOSH requirements and identified during any VOSH onsite review.

3. Employee Support

- a. The company employees support the Virginia BEST application.
- b. At sites with contractor employees organized into one or more collective bargaining units, the authorized representative for each collective bargaining unit must submit a signed statement indicating that the collective bargaining agent(s) support BEST participation.
- c. VOSH must receive concurrence from all such authorized agents to accept the application.
- d. At non-union sites, the VOSH onsite review team will verify management's assurance of employee support during employee interviews.

4. BEST Elements

- a. BEST elements are in place, and management commits to meeting and maintaining the requirements of the elements and the overall BEST.

5. Orientation

- a. Employees, including newly hired employees and contract employees, will receive orientation on the BEST, including employee rights under BEST and under the OSH Act.

6. Non-Discrimination

- a. The company will protect employees given safety and health duties as part of your 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.

7. Employee Access

- a. Employees will have access to the results of self-inspections, accident investigations, and other safety and health data upon request. At unionized worksites, this requirement may be met through employee representative access to these results.

8. Documentation

- a. The company will maintain your safety and health program information and make it available for VOSH review to determine initial and continued approval to the BEST. This information will include:
 - i. Any agreements between management and collective bargaining agent(s) concerning safety and health.

- ii. All documentation enumerated under VOSH Directives 09-060 and 13-060.

9. Annual Submission

- a. Each year by February 15, you will submit the following information to the Virginia BEST Coordinator:
 - i. For the previous calendar year, the TCIR for injuries plus illnesses, and the DART rates.
 - ii. The total number of cases for each of the above two rates.
 - iii. Hours worked and estimated average employment for the past full calendar year.

10. Contractor Rates

- a. The company will submit data on each applicable contractor. Applicable contractors are those employers who have contracted with you to perform certain jobs and whose employees worked a total of 1,000 or more hours in at least 1 calendar quarter at your worksite. The data will consist of:
 - i. The worksite’s TCIR and DART rate for each applicable contractor’s employees.
 - ii. The total number of cases from which these two rates were derived.
 - iii. Hours worked and estimated average employment for the past full calendar year.
 - iv. The appropriate NAICS code for each applicable contractor’s work at the worksite.

11. Annual Evaluation

- a. A copy of the most recent safety and health annual evaluation to VOSH. Include a description of any success stories, such as reductions in workers’ compensation rates, increased in employee involvement, and improvements in employee morale.
- b. Due by February 15 of each year to the Virginia BEST Coordinator.

12. Organizational Changes

- a. Whenever significant organizational or ownership changes occur, you will provide VOSH, within 60 days, a new Letter of Assurances signed by both management and any authorized collective bargaining agents.

13. Collective Bargaining Changes

- a. Whenever a change occurs in the authorized collective bargaining agent, you will provide VOSH, within 60 days, a new signed statement indicating that the new representative supports BEST participation.

Highest Company Official Signature and Title	Click here to enter a date. Date
--	---

Print Name and Title

Highest Union Official Representative Signature and Title	Click here to enter a date. Date
---	---

Print Name and Title

Appendix

Definitions

- **DUNS#:** The D&B Data Universal Numbering System or D-U-N-S® Number is a unique nine-digit identifier for businesses. It is used to establish a business credit file, which is often referenced by lenders and potential business partners to help predict the reliability and/or financial stability of the company in question.¹
- **FEIN:** An Employer identification Number (EIN) is also known as a Federal tax identification Number and is used to identify a business entity.²
- **NAICS Code:** The North American Industry Classification System (NAICS) is the standard used by Federal statistical agencies in classifying business establishments for the purpose of collecting, analyzing, and publishing statistical data related to the U.S. business economy.³
- **SIC Code:** The **Standard Industrial Classification** *SIC* is a system for classifying industries by a four-digit code.⁴

¹ <http://www.dnb.com/duns-number.html>

² <https://www.irs.gov/businesses/small-businesses-self-employed/employer-id-numbers-eins>

³ <https://www.census.gov/naics/>

⁴ https://en.wikipedia.org/wiki/Standard_Industrial_Classification

Instructions for locating and recording your NAICS Code and Employee Injuries and Key Sub-Contractor Injury and Illness Data

1. Look up the current BLS data

- a. Click on the Blue Link (Most recently published **BLS Rates)
- b. A web site will open with a PDF or Excel document. Locate your NAICS Code (2nd column)

TABLE 1. Incidence rates¹ of nonfatal occupational injuries and illnesses by industry and case types, 2015 -- Continued

Industry ²	NAICS code ³	Total recordable cases	Cases with days away from work, job transfer, or restriction			Other recordable cases
			Total	Cases with days away from work ⁴	Cases with job transfer or restriction	
Asphalt paving, roofing, and saturated materials manufacturing	32412	2.3	1.6	0.6	1.0	0.7
Asphalt paving mixture and block manufacturing	324121	3.0	2.0	0.7	1.3	1.1
Asphalt shingle and coating materials manufacturing	324122	1.6	1.3	0.5	0.8	0.3

- c. Use the Total Recordable Cases (3rd column) and Total Column (4th column) to fill in the Orange Cells in the table

2. Double click on Table 1 – Injury and Illness Table for your Facility

- a. Fill in the following columns: Hours, Total Cases, Days Away, Restricted, Transferred Cases for 2022, 2023 and 2024 years (**Yellow Cells**) with your facility information
- b. Use the BLS data you located in step 1b. to fill in the **Orange Cells** in the table

3. Move to Table 2 – Key Sub-Contractor Injury and Illness Chart and Double Click on Table to open

- a. Fill in Company Name, NAICS Code, Total Hours Worked at company 2023 (**Yellow Cells**) for each key sub-contractor
- b. Click on tabs at bottom (Labeled Contractor 1-6) and complete for each key sub-contractor
- c. Fill in the following columns: Hours, Total Cases, Days Away, Restricted, Transferred Cases for 2022, 2023 and 2024 years (**Yellow Cells**) for each key sub-contractor
- d. Use the BLS data you located in step 1b. to fill in the **Orange Cells** in the table

4. Each key sub-contractor should have their own tab and chart completed

5. Double click outside the table to close the window (it will be saved when you save your report)

6. Save the file

Elements

Management Commitment to BEST Participation and Leadership

- Describe the company's statement of commitment to maintaining compliance with and continuously improving safety and health and meeting BEST requirements? How is this communicated to all employees? Establishing, documenting, and communicating to employees and key sub-contractor's clear goals that are attainable and measurable, objectives that are relevant to workplace hazards and trends of injury and illness, and policies and procedures that indicate how to accomplish the objectives and meet the goals. Ensuring that all workers (including contract workers) are provided equal, high-quality safety and health protection.

Management Resources

- Describe how your company's management has committed resources to safety and health over the past year. Commitment can be displayed in many different and meaningful ways. Examples could be a budget line item for safety & health, allowing employees to meet during the workday for committee meetings, hiring safety professionals, supporting employees attending offsite training, etc.

Visible Leadership

- Describe the ways top management is visibly involved in the safety and health program such as wearing any required personal protective equipment, reporting hazards, reporting injuries and illnesses, following the same safety and health procedures expected for all employees at the workplace, and subjecting managers and employees to the same disciplinary system for infractions.

Communications

- Describe the methods used to communicate policies, goals and objectives with all employees and how the company's created an environment that allows for reasonable employee access to company's management and senior management.

Responsibility and Authority

- Describe how the company has communicated the responsibility and authority to its employees to contact senior management on unresolved safety & health issues. Explain how this has been accomplished.

Accountability

- Explain how management has established accountability for health & safety. This could be attained by job descriptions, performance plans for managers, mid-level managers/supervisors and or designated safety & health staff).

Discipline

- Describe the company's documented disciplinary plan. Also include any "stand alone" type disciplinary plans for safety & health such as cardinal safety rules, safety work rules or other safety & health related discipline.
- How does the written disciplinary system address safety and health violations? Does it include procedures for disciplinary action or reorientation of managers, supervisors, and non-supervisory employees who violate health and safety polices rules, work practices, material handling or emergency procedures? How has it been communicated to employees and management? Is it enforced equally? Does it discourage employees from reporting?

Program Evaluations

- Describe how the company's conducts an annual self-evaluation of the safety and health management system to maintain knowledge of the hazards to which employees are exposed, maintain knowledge of the effectiveness of system elements, ensure completion of the previous years' recommendations and modify goals, policies, and procedures.

Annual Self-Evaluation of the SHMS

- The company must complete an annual self-evaluation (this report will comply) that included a written narrative with recommendations for timely improvements, assignment of responsibility for those improvements, and documentation of timely follow-up action or the reason no action was taken. Who conducts the evaluation and how were they trained to perform an evaluation? Are the results shared with employees and how?

Safety & Health Perception Survey

- Explain how your company responded to the responses given by employees during the perception survey. This may include changes in policies, procedures, forms or addressing safety & health concerns

Employee Involvement

- List examples or describe how your company's employees are involved with safety & health. (Ex: safety committees, safety inspections, reviewing policies)

Employee Knowledge and Notification

- Discuss what your company did to inform all employees of their rights and responsibilities under VOSH laws, standards and regulations. Was this handled by training, pre-qualification statements, new hire orientation, etc.
- Describe the methods used to ensure that all employees, including newly hired/transferred employees, are initially and annually provided awareness of the following:
 - The company's participation in Virginia BEST
 - An employee's right to file a complaint with OSHA, and
- An employee's right to receive the results of self-inspections and accident investigation, upon request

Rights and Responsibilities

- Discuss what your company did to inform all key subcontractors of their rights and responsibilities under VOSH laws, standards and regulations. Was this handled by training, pre-qualification statements, new hire orientation, etc.
- Are key-subcontractor knowledgeable about BEST and their OSHA rights and responsibilities? How has this been verified?

Key Sub-Contractor Programs

- Discuss how key sub-contractors are selected to perform work for the company? Explain the oversight and management system for key sub-contractors to ensure the key sub-contractor's employees are provided effective protection and follow the company's safety and health policy. Discuss the procedure used when a key sub-contractor is found in violation of a Safety and Health policy.

Key Sub-Contractor Injury and Illness Data

- How does the company verify the key sub-contractor injury and illness data and is it included in the company's report? What happens if the key sub-contractors TCIR or DART rate increases?

Key Sub-Contractor Training

- How are key sub-contractor employees trained on the hazards they may encounter while working for your company? Are they trained how to recognize hazardous conditions and the signs and symptoms of workplace-related illness and injuries? Does the training cover safe work procedures, emergency procedures and accident / incident reporting?

Adherence to Rules

- What indicators does the company use to measure progress toward goals and objectives, effectiveness of hazard controls and overall effectiveness of the safety and health management system? Explain the rationale behind the selection of indicator, the method, frequency, and responsibility for monitoring or measuring each indicator. The periodic review of the indicator suitability, methods used to keep records, the analysis, interpretation, and communication of results.

Key Subcontractor Practices

- Describe how your company ensures key subcontractors promptly identify, correct, & track uncontrolled hazards in the workplace.

Key Subcontractor Use

- How does your company select key subcontractors & describe how injury and illness records, along with copies of their written safety and health programs, are part of the bid package.

Comprehensive Safety and Industrial Hygiene Survey

- Has the company needed to complete or update the baseline hazard survey and if so, explain why? Has the baseline identified and documented common safety hazards at the company? Were any new hazards identified that needs further study? Has the entire work area been covered? Explain the sampling rationale and strategy followed. (Sampling rationale should be based on the IH sampling strategy and objective data including reviews of any changes that have occurred. Review of safety data sheets, employee complaints, exposure incidents, medical records and any other instance determines that sampling is warranted.)

Industrial Hygiene (IH) Program

- Describe the company's industrial hygiene exposure assessment strategy. What permissible exposure limits are used for comparison? Does the program include descriptions of work process, controls in place, sampling times, calculations, and number of exposed employees? How are results communicated to employees and management? Who performs sampling and are they qualified?

Hazard Analysis of Routine Jobs, Tasks, and Processes

- Does hazard identification and analysis address both safety and health hazard? What hazard analysis techniques are employed for routine operations and activities? Are analyses conducted on routine jobs, tasks, processes that have had injuries/illnesses associated with them or experienced significant incidents or near-misses. Are results of the hazard analysis adequately documented, included in training and the hazard control program?

Hazard Analysis of Significant Changes, New Processes, and Non-Routine Tasks (Including Pre-Use Analysis and New Baselines)

- When purchasing new materials or equipment, or implementing new process, what types of analyses are performed and are these adequate? Are tasks performed less than once a year included in the hazard analysis? Pre-Use Analysis: When considering new equipment, chemicals, facilities, or significantly different operations or procedures is an analysis completed to address any concerns or hazards that might be created? Does the analysis address each step, hazard controls, dates conducted, recommendations for improvements, documented, included in training and the hazard control program?

Routine Self-Inspections

- Does the company have a minimally effective system for performing safety and health inspections? How often are they conducted? Is the entire company covered at least quarterly? Does the company include hazards identified by baseline hazard analysis, accident investigation and annual evaluations into inspections? Are employees conducting inspections adequately trained? Describe checklists that are being used. Are findings documented in written reports? Is there a system used to track all hazards until they are controlled or eliminated?

Investigation of Incidents

- Is there a reporting system for accidents and near-misses that include tracking? Are those conducting investigations trained in accident/incident investigation techniques? How were they trained? What techniques are used? Have any hazards been discovered during investigations? If so, what were they and how were they addressed. Are the results made available to employees?

Hazard Reporting

- Describe the system employees use to report hazards. Does it include responding to employees in a timely and appropriate manner following reports of hazardous conditions? Can employees report hazards anonymously and without fear of reprisal?

Trend Analysis

- What type of trending do you perform? What trends have you discovered and how have they been addressed? Is the company using injury/illness history, hazards identified during inspections, employee reports of hazards, accident and near-miss investigations, OSHA logs, inspection reports? How is this information shared with employees and management and used to prevent injuries?

Certified Professional Resources

- Does the company have access to certified safety and health professionals and other licensed health care professionals? This can be on company or off company (Example: IH, MD, CSP, etc.) What is their roll in your safety program?

Hazard Control Programs

- The hazard control programs a company uses must be understood by all employees, equally enforced, clearly communicated, written disciplinary system that includes procedures for disciplinary action or reorientation of managers, supervisors, and non-supervisory employees who break or disregard safety rules,

safe work practices, proper materials handling or emergency procedures. Hazard control programs must be updated by management as needed, used by employees and incorporated in training. (Examples: PPE, LOTO, Confined Space Entry, etc.) What Hazard Control Programs does the company have in place and are they effective?

Hierarchy of Controls

- Describe the different types of controls that are used at the facility and have any follow-up studies been conducted based on incidents, inspections or recommendations from employees?
- **Engineering Controls**
 - Engineering controls directly eliminate a hazard by such means as substituting a less hazardous substance, isolating the hazard; these are the most reliable and effective. What engineering controls have been implemented at the company?
- **Administrative Controls**
 - Administrative controls significantly limit daily exposure to hazards by control or manipulation of the work schedule or work habits. (Example: job rotation) What administrative controls have been implemented at the company?
- **Work Practice Controls**
 - These controls include workplace rules, safe and healthful work practices, personal hygiene, housekeeping and maintenance. What work practice controls have been implemented at the company?
- **Personal Protective Equipment**
 - PPE should only be used when all other hazard controls have been exhausted or more significant hazard controls are not feasible. What type of PPE is used and how was it determined?

Tracking of Hazard Correction

- How does the company track hazards until completion? Does the tracking system assign responsibility, time frames for corrections, interim protection, provide feedback to employees that have reported the hazard? Does the system result in timely correction of hazards?

Preventive Maintenance of Equipment

- Explain the preventive/predictive maintenance schedule and is it adequate? Is the schedule being followed? How are records kept? Who monitors the system?

Occupational Health Care Program

- Describe the occupational health care program used at the company. Include availability of medical services, first aid, special program (audiograms, pre-placement physicals, or other medical tests used). Are employees trained in First Aid, CPR, is there an AED on company? Do employees know where to go when they need medical attention? How are licensed occupational health professionals used in the company's hazard identification and analysis, early recognition and treatment of illness and injury? Is the program appropriate?

Emergency Preparedness

- Describe the company's emergency action plan. Does it assign responsibilities; address all types of emergencies (fire, chemical, spill, accident, active shooter, weather, etc.), specify exit routes (routine and emergency), have emergency numbers, designated meeting places. How many drills were held and what was the outcome? Were outside emergency responders included? Are all employees covered in a drill and if not, how are they briefed on the drill?

Formal and Informal Training

- Describe the training that managers, supervisors, non-supervisory employees, and key sub-contractors receive on hazards they face in the workplace, how to recognize hazardous conditions, signs and symptoms of workplace – related illnesses and safe work procedures. Is the training addressing the needs of ALL EMPLOYEES? Do all employees understand the hazards to which they may be exposed and how to prevent harm to themselves and others?
- Do managers and supervisors understand their safety and health responsibilities and how to carry them out? What training to they receive that is specific to their position?
- Does the new employee orientation/training include discussion of hazards, protective measures, emergency evacuation, employee rights under the OSH Act, and BEST? How long is the Safety portion of the orientation? Does the company utilize any type of mentoring or job shadow?
- How does the company ensure that employees who have specific roles in the safety and health management system are competent to carry out their responsibilities? Are education, training and experience used? Is the competency requirement for each role incorporated into position descriptions and standard operating procedures? Has any additional training been received?

Evaluation of Training

- Describe how often and in what way training courses are evaluated and updated.
- Are changes in courses prompted by statutory changes and updates?
- Do JSA, JHA, or PHA play a role in updating training material?
- Are employees involved in the review and revision of training courses?
- Are incident, near miss, and hazard reports considered when updating training courses?

Training Records

- Describe how and where training records are kept.
- Who or what department oversees keeping records and ensuring they are up to date?
- How often are records reviewed to ensure they are up-to-date?
- Are physical records kept?
- Are records kept electronically? If so, are they backed up?

Key-Subcontractor Training

- Describe how employees & key subcontractors have specific knowledge of their safety & health roles & responsibilities.

Hazard Recognition Training

- Describe how you train company managers, supervisors, and non-supervisory employees to recognize unsafe conditions.

Emergency Training

- Is training provided for all employees regarding their responsibilities for each type of emergency? Do all employees, key sub-contractors and visitors understand what to do in an emergency?

General Guidelines

- How is the training attendance documented? Is training required by an OSHA standard conducted as required? Is training not specifically required by an OSHA standard provided at adequate intervals? Is additional training provided when changes occur in work processes, new equipment, new procedures or work phases change?
- Is the training up-to-date, specific to the worksite, modified when needed to address changes, trends, hazards and understandable for all employees?
- Do the persons conducting the training have specific knowledge or expertise in the subject?

Goal – The following information is from <https://www.smartsheet.com/blog/essential-guide-writing-smart-goals>

- Goals are specific, primary and important, large.
- Measurable and achievable.
- Long term.
- Something that you are trying to do or achieve.

Objectives - The following information is from <https://www.smartsheet.com/blog/essential-guide-writing-smart-goals>

- Sub-goals.
- Medium or small.
- Shorter term.
- The steps to reach your goal.

Virginia Unique Standard

- Standard can be found at this link: [Virginia Unique Standard](#)
- Standards include: Tree trimming Operations, Reverse Signal Operation, Confined Space Standards Telecommunications Industry, Overhead High Voltage Line Safety Act, Fall Protection for Subpart R – Steel Erection, Field Sanitation, Agriculture, Construction Industry Standard for Sanitation, Administrative Regulations Manual, Telecommunications, General Approach Distance, Reporting Fatalities, Hospitalizations, Amputations and Losses of an Eye because of Work-Related incidents.

FAQ

1) *What is a BEST Annual Self-Evaluation?*

The evaluation should evaluate the company's success in meeting BEST goals and objectives. The evaluation must examine the effectiveness of all elements and sub-elements. The evaluation must provide for an annual written narrative report with recommendations for Timely improvements, assignment of responsibility for those improvements, and documentation of timely follow-up actions on the previous year's recommendations or the reason no action was taken. In addition to addressing the BEST elements and sub-elements, the evaluation should also include Success Stories, Significant Events, and Description of any SHMS Incentive Programs (if applicable). All BEST Applications must include in their attachment section their company's most recent self-evaluation (which is a BEST requirement). This demonstrates to VOSH that the self-evaluation process is understood and in place. After approval into the BEST and for as long as the company remains in BEST, VOSH requires the annual self-evaluation be sent in each year.

2) *Who may conduct the evaluation for the report?*

The evaluation may be conducted by competent company, corporate, or other persons who are trained and/or experienced in performing such evaluations.

3) *What is a Safety and Health Program?*

A program that can operate with or without you. The focus is typically on compliance with a specific regulation. Programs can lack strong, if any, feedback or evaluation mechanisms, which limits their continuous improvement over time. An example of a safety and health program would be a lock-out/tag-out program aimed at complying with VOSH's lockout standard.

4) *What is a Safety and Health Management System?*

A System approach, while not losing sight of program requirements, is broader in scope and addresses many other issues including quality of the safety and health performance, integration of safety with other business systems, and focuses on safety and health overall improvement. A key distinction of a System approach is that there are clear feedback and evaluation mechanisms so that the system responds to both internal and external events. BEST is a systems approach, and the annual self-evaluation is an example of this mechanism. A system's approach integrates all the individual safety programs within the business operations and is thus more dynamic and comprehensive than any single program. One of the advantages to a safety and health systems approach is the resolution of the common criticism that safety is rarely integrated into business systems but is a stand-alone static adjunct. Systems also allow for the alignment of safety and health objectives with the broader business objectives (such as marketing, sales, quality control and productivity), thus minimizing potentially competing interests for priority and resources.

5) *What is an annual self-evaluation of SHMS:*

A critical review and evaluation of the effectiveness of the BEST elements of the company's safety and health management system. The self-evaluation must identify the strengths and weaknesses of the safety and health management system, it must contain specific recommendations for improvements, including timelines and assignment of responsibility for improvements, and it must also summarize actions taken to satisfy all previous year's recommendations. Remember, the evaluation is not an annual company-wide compliance evaluation.

6) *How do I showcase the progress of my BEST company? The following should be addressed:*

What are the realistic strengths and weaknesses of the SHMS? It is to provide specific recommendations for improvements, assign responsibility for those improvements, document timely follow up of all actions or the reason no action was taken, ensure employee participation and input in the annual self-evaluation process, establish realistic goals and encourage goal

reaching success, and is the annual evaluation used for 'inputs' to the company's resource planning process.

7) ***What should the annual self-evaluation include?***

Written programs, walkthroughs of the workplace, interviewing employees, union officials and management (including senior management), and reviewing injury and occupational illness recordkeeping data. Make sure the rate calculations and NAICS code determination are correct - very important. Follow up on all the company's previous year's evaluation recommendations. Either close them out with a summary of what was accomplished, or explain why they are still open or applicable, and how they have been modified for this year. Always include who or what committee has the lead responsibility for implementing the recommendation. Self-evaluations with no recommendations for improvement are basically not acceptable. The basic premise of BEST is continual refinement and improvement of the company's safety and health programs and system. Please document this. If the company has had an onsite OSHA/VOSH Inspection or significant safety related event reported in the news, be sure to include this information in the evaluation.

Appendix C
On-site Evaluation Report Format

Virginia BEST SITE REPORT
Recommending

LEVEL THREE APPROVAL

For

Company Name

City, State

March 1, 20X6

Report Date

April 4, 20X6

Evaluation Team

Name, Team Leader

Name, Backup Team Leader

Name, Safety Specialist

Name, Hygienist

Name, PIV

- I. Purpose and Scope of Review
 - A. Applicant/Participant name
 - B. Site location
 - C. Date of evaluation
 - D. Purpose of evaluation
 - E. Virginia BEST Team Members
 - F. Virginia BEST Volunteers

- II. Methods of Data Collection

- III. Employees at the Worksite
 - A. Number of employees
 - B. Subcontractor workers and/or temporary workers
 - C. Collective bargaining agent(s) representing the employees
 - D. Number of interviews conducted with different types of workers

- IV. The Worksite
 - A. NAICS Code
 - B. Applicant/Participant and Site description (type of construction activity, stage of construction acreage, time on site, primary structures, etc.)
 - C. Basic description of construction trades, phases of construction, subcontractors involved
 - D. Housekeeping

- V. Worksite Hazards

- VI. Injury and Illness Rates
 - A. Rates - TCIR, DART
 - B. Comparisons to BLS industry averages

- VII. VOSH Activity
 - A. Prior VOSH inspection activity
 - B. Relationship with VOSH

- VIII. Elements of the Virginia BEST Review/Program Changes
 - A. Bulleted summary of Virginia BEST Elements with a reminder that all aspects of the Safety and Health program meet the Virginia BEST requirements as set forth in the VOSH Virginia BEST Policy and Procedure Manual.
 - 1. Management, Leadership, and Employee Involvement
 - 2. Worksite Analysis

3. Hazard Prevention and Control
4. Safety & Health Training

- IX. Areas of Excellence: A bulleted list and description of best practices (e.g., fall protection, trenching safety, crane operations, electrical safety, ergonomics, lockout/tagout, employee involvement)
- X. Recommendation for Participation

Appendix D
Recommended Interview Questions

- I. **Purpose:** Interviews are an important tool in assessing the effectiveness of an Applicant/Participant's safety and health program. These questions are intended to guide the VOSH reviewer during oral employee interviews. To begin, explain the purpose of the interview and the reason for VOSH's presence at the site. Make employees aware that interviews are kept confidential and that the employee's responses will not in themselves determine company approval or disapproval.
- II. **General Employee Interview Questions:**
- A. How long have you worked here?
 - B. Tell me about your job. What do you do during a typical day?
 - C. What are the safety and health hazards of your job?
 - D. How do you protect yourself from those hazards?
 - E. What kind of personal protective equipment do you wear? Were you provided training?
 - F. What type of safety and health training have you received?
 - G. What happens if management disobeys a company safety rule? If an employee disobeys?
 - H. How do you respond in the event of a fire, hazardous waste spill, alarm, or medical emergency?
 - I. What does Virginia BEST mean to you?
 - J. What is one method of reporting a safety or health concern? What was the last unsafe practice you reported and/or corrected?
 - K. How do your supervisors demonstrate their involvement in safety and health?
 - L. Have you ever seen anyone testing the air, noise levels, or conducting other surveys for possible health hazards? Do you know what the results were or what they meant?
 - M. Have you or anyone you know ever been injured or experienced a job-related illness? What is the procedure when someone is injured?
 - N. How are you involved in the safety and health decision-making process?
 - O. Is safety and health valued in your organization?
 - P. What is one objective in your department's safety and health program?
 - Q. How does management support your involvement in safety and health?
 - R. What are your rights under VOSH?
 - S. Is there anything else you think we should know about the safety and health program here?

II. Supervisors:

- A. How long have you worked here? When did you become a supervisor?
- B. What do you see as your role in safety and health?
- C. To what kinds of hazards are you and/or your employees exposed?
- D. Has the company's upper management provided adequate resources for safety and health programming, such as funding, time, and technical support?
- E. What do you do when you discover a hazard in your area?
- F. What do you do when an employee reports a hazard in your area?
- G. Do you provide employee training in safety and health related topics? (If so, please describe.)
- H. Please give some examples where you had to use the disciplinary system for infractions of safety and health rules.
- I. When was the last emergency drill? What is your role in drills?
- J. How are you held accountable for ensuring safe and healthful working conditions in your area?
- K. Is maintenance satisfactory? Is there adequate supervision provided for work performed on all shifts?
- L. Do you have subcontractor employees working in your area? If so, how do you control and address safety or health hazards relating to or created by them?
- M. Are there routine or unannounced inspections? Who participates?

III. Administrators and Executives:

- A. How long have you been with (company)?
- B. Describe the type of safety and health hazards at this site.
- C. How does management ensure that employee exposure to those hazards is eliminated or controlled?
- D. How do you demonstrate leadership in and commitment to safety and health?
- E. What benefits will a Virginia BEST partnership provide for your company?
- F. What do you think are your facility's best safety and health practices?
- G. How do you address the competing pressures of construction schedules and safety?
- H. How do you hold your supervisors accountable for safety and health? Have you ever had to discipline a supervisor for not following the rules?
- I. How are you held accountable for your safety and health responsibilities?

IV. Recordkeepers:

- A. Who is responsible for recordkeeping?
- B. Is your recordkeeping centralized? Is it computerized?
- C. Do you have a completed Summary of Occupational Injuries and Illnesses for the last 3 calendar years? Do you have the supplemental documentation for each case entered on the log?
- D. Which form do you use as the supplementary record: VOSH's First Report of Injury, a State workers' compensation form, an insurer's form, or other?
- E. What is the process by which injury and illness information gets to the recordkeeper? After an injury or illness occurs, how long does it take to enter it on the log?
- F. What type of reference material do you refer to for guidance on keeping illness and injury records?
- G. Who decides whether or not a case is recordable?
- H. How do you determine whether or not a case is work related?
- I. Do you record any cases on the VOSH forms that are not compensable under workers' compensation?
- J. How do you distinguish between an injury and an illness? Between medical treatment and first aid?
- K. When does a case involve lost workdays? What constitutes restricted work activity?
- L. What is your process for monitoring key contractor logs?
- M. How do you safeguard the confidentiality of medical records?
- N. How do you assure that any work restrictions are applied appropriately?
- O. How have you assured timely and clear communications with the health care professional?

V. Occupational Health Care Professionals:

- A. What are your qualifications and licenses?
- B. What procedures are in place to ensure that health care services are delivered consistently and effectively?
- C. What type of audit procedures do you use to compare your process with acceptable standards of practice and VOSH requirements?
- D. Are employees provided timely access to services?
- E. How do you assure that work restrictions or work removal are followed?
- F. How are you made aware of the job hazards at this facility? Are you included in identification of workplace hazards, or development of restricted duty jobs, or other on-site issues?
- G. What kinds of health surveillance programs are in place?
- H. How do you communicate health surveillance data to employees and management to reduce future risk?
- I. Explain how you evaluate the effectiveness of your occupational health care program.

VI. Maintenance Personnel:

- A. Is there a scheduled preventive maintenance program? How is it carried out?
- B. Do maintenance personnel participate in safety functions?
- C. Is there a priority system for safety/environmental related maintenance items? Is it being followed?
- D. Does the preventive maintenance program include on-site vehicles, detection/alarm equipment, fire protection and emergency equipment?
- E. Do you have input concerning safety and health and ease of maintenance for new equipment and machinery purchases?
- F. Do you have an inventory of spare parts critical to safety, health and environmental protection?
- G. Are you trained in the control of hazardous energy and the proper use of locks and tags?
- H. Is there a system in place to track requests for repairs?
- I. What methods are used to monitor the condition of critical equipment?
- J. What is the ratio of scheduled versus unscheduled maintenance work?
- K. What has the trend been like over the past few years?

VII. General Questions for On-site Evaluations to Determine Re-approval:

- A. Describe any changes in your job or in the handling of safety issues since the last VOSH on-site evaluation.
- B. How familiar are you with Virginia BEST? Has your awareness increased since the last visit?
- C. Do you have any increased knowledge of your rights under the program, including your right to receive upon request results of self-inspections or incident investigations?
- D. Do you feel that the Virginia BEST partnership has had a positive impact on your job and your safety?