



# NEW MEXICO ZIA STAR VOLUNTARY PROTECTION PROGRAM

## Application Instructions

### Purpose

Information on the New Mexico Occupational Health and Safety Bureau's Zia Star Voluntary Protection Program (Zia Star VPP). This document provides a general introduction to the Zia Star VPP and application instructions for site based general industry applicants. Provided by the Health and Safety Bureau of the New Mexico Environment Department

New Mexico Occupational Health and Safety Bureau  
[https://www.env.nm.gov/occupational\\_health\\_safety/](https://www.env.nm.gov/occupational_health_safety/)

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## ZIA STAR ZIA STAR VPP APPLICATION INSTRUCTIONS



### Introduction

What follows are instructions for applying to the New Mexico State Occupational Safety and Health Bureau (NM OSHA) Zia Star Voluntary Protection Program (ZIA STAR VPP). We encourage you to involve employees and managers in completing your application. After NM OSHA reviews and accepts your written submission within 15 days. We will schedule an onsite evaluation within six months of accepting the application.

There is some paperwork required in the application process, but we encourage you to use as much existing material as possible. **Please provide a list/index of all materials you choose to attach to your application.** Most worksites have found that, in the process of applying, they gain a greater understanding of worker protection and discover ways to improve their safety and health management system.

ZIA STAR VPP reviewers don't look for a single correct way to meet Zia Star VPP requirements. They want to see a system that works for you. Some successful safety and health management systems involve substantial written documentation, and others do not. Small businesses often can implement excellent safety and health processes with relatively little documentation. What is important is that your safety and health program meet the **four elements** and each of their sub-elements listed on the next page.

If you need more information, you can contact The New Mexico Zia Star VPP Coordinator at (505) 476-8700 or via email at [NMENV-NewMexicoVPP@state.nm.us](mailto:NMENV-NewMexicoVPP@state.nm.us). In addition to answering your questions, we can refer you to Zia Star VPP participants in your area. We encourage you to contact participants. They are happy to share their experience.

We encourage you to review the Federal Register Notice, 74 FR 927, January 9, 2009, that sets forth the basic philosophy and requirements of Zia Star VPP. We also encourage you to review the NM OSHA website at below for further information: [https://www.env.nm.gov/occupational\\_health\\_safety/voluntary-protection-program/](https://www.env.nm.gov/occupational_health_safety/voluntary-protection-program/)

**ZIA Star Voluntary Protection Program Application  
(Cover Page)**



Submitted to New Mexico Occupational Health and Safety Bureau

## **General Information**

### **A. Applicant**

1. Site/Employer
  - a. Name
  - b. Address
  - c. Mailing Address (if different)
2. Site Manager
  - a. Name
  - b. Title
  - c. Phone Number
  - d. E-Mail Address
3. ZIA STAR VPP Contact for NM OSHA correspondence (if different from Site Manager) - Name
  - a. Name
  - b. Title
  - c. Phone Number
  - d. E-Mail Address

### **B. Company/Corporation (if different from Applicant)**

1. Name
2. Address
3. ZIA STAR VPP Contact (if applicable)
  - a. Name
  - b. Title
  - c. Phone Number
  - d. E-mail Address

### **C. Union Information - Provide information for each union separately**

1. Full Name of Union and Local #
2. Authorized Bargaining Unit Representative's Name
3. Address
4. Phone Number
5. E-mail Address

**D. Number of Employees and Applicable Contractor Employees**

1. Total number of employees working at applicant's site (include regular and temporary employees)
2. Number of temporary employees supervised by applicant
3. Number of contractor/subcontractor employees who are regularly intermingled with the owner's employees and under direct supervision by management
4. Number of applicable contractor employees (see Appendix A. Definitions)

**E. Type of Work Performed, Products Produced, and Typical Hazards**

1. Provide a comprehensive description of the work performed at your site and the type of products produced.
  
  
  
  
  
  
  
  
  
  
2. Provide a description of the types of hazards typically associated with your industry and your site.

**F. Applicant's Industrial Classification Codes**

1. Provide what you believe to be your site's 6-digit North American Industry Classification System (NAICS) code and your 4-digit Standard Industrial Classification (SIC) code. NM OSHA will verify the NAICS code for purposes of ZIA STAR VPP.
2. Contact your ZIA STAR VPP Coordinator if you are having difficulty identifying an appropriate code. You can also find NAICS and SIC information on the [Website](#).

**G. Injury and Illness Performance**

See Appendix A: Definitions for explanation of terms.

1. Using information from your OSHA injury and illness logs (OSHA-300), complete and submit the appropriate rate table in Section IV below.
  - a. Most applicants should submit Table 1.
  - b. If you employ applicable contractors, have Table 2 (one table for each applicable contractor) ready for review by the Zia Star VPP Onsite Evaluation Team.
2. Provide your site's 3-year Total Case Incidence Rate (TCIR) for recordable nonfatal injuries and illnesses and Days Away Restricted or Transferred (DART) rate.

\*See Appendix B for calculating TCIR and DART Rates

**Employee Support for Zia Star VPP Participation**

A. Your application for Zia Star VPP participation must reflect the support of your employees, describe the onsite employee support.

**B. Unionized Workforce**

If, at the time of application, any of your employees are organized into one or more collective bargaining units, the authorized representative for each unit must either:

1. Sign the application or
2. Submit a signed statement indicating that the collective bargaining agent supports or is not opposed to Zia Star VPP participation.
3. Without such concurrence from all authorized agents, NM OSHA will not accept the application.

**C. Non-union Sites**

At non-union sites, NM OSHA will verify employee support during the onsite evaluation when the NM OSHA Zia Star VPP team interviews employee.

**Assurances**

Zia Star VPP applications must include a signed statement affirming the following: (Attached required statement)

**A. Compliance**

Applicant will comply with the Occupational Safety and Health Act (OSH Act) and will correct in a timely manner all hazards discovered through self-inspections, employee notification, accident investigations, NM OSHA onsite reviews or enforcement inspections, process hazard reviews, annual evaluations, or any other means. You will provide effective interim protection, as necessary to keep employees safe while corrections are being made.



**B. Correction of Deficiencies**

You will correct any site deficiencies related to compliance with NM OSHA requirements and identified during any NM OSHA onsite review. You understand that the correction period will be determined by the Zia Star VPP Team Leader and will not exceed 90 days.

**C. ZIA STAR VPP Elements**

1. Following approval, you will continue to meet and maintain the requirements of the Zia Star VPP elements.

**D. ZIA STAR VPP Orientation**

All employees, including newly hired employees, temporary employees, and contractor/subcontractor employees when they reach the site, will have the Zia Star VPP explained to them, including employee rights under the program and under the OSH Act or 29 CFR 1960.

**E. Protection from Discrimination**

You will protect employees engaged in safety and health activities, including those employees specifically given safety and health duties as part of your safety and health management system, from discriminatory actions resulting from their activities/duties, just as Section 11(c) of the OSH Act and 29 CFR 1960.46(a) protect employees who exercise their rights.

**F. Employee Access to Information**

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

**G. Documentation**

To enable NM OSHA to determine initial and continued Zia Star VPP approval, you will maintain and make available for NM OSHA review the following information:

1. Your written safety and health management system.
2. All documentation enumerated under Section VI.B.6.d of the January 9, 2009 VPP Federal Register Notice.
3. Any agreements between management and the collective bargaining agent(s) concerning safety and health.

**H. Annual Submission**

Each year by February 15, you will submit the following information to the NM OSHA Zia Star VPP coordinator:

1. Data reflecting all regular site employees, including temporary and contractor employees who are regularly intermingled with owner's employees and under direct supervision by management. The data will consist of:
  - a. For the previous calendar year, the site's TCIR rate for all employees.

- b. For the previous calendar year, the site's DART rate for all employees.
  - c. The total number of cases for each of the above two rates.
  - d. Hours worked and estimated average employment for the past full calendar year.
2. General Industry Applicable Contractor Injury and Illness Rates. General industry participants will submit data on each applicable contractor. See Appendix A for definition. The data will consist of:
  - a. For the previous calendar year, the site's TCIR rate for each applicable contractor.
  - b. For the previous calendar year, the site's DART rate for each applicable contractor.
  - c. The total number of cases for each of the above two rates.
  - d. Hours worked and estimated average employment for the past full calendar year.
  - e. The appropriate NAICS code for each applicable contractor's work at the site.
3. Annual Self-Evaluation
  - a. Submit a copy of the most recent annual safety and health self-evaluation. Include current goals.
  - b. Include a description of any success stories, such as reductions in workers' compensation rates, increases in employee involvement, and improvements in employee morale.

#### **I. Organizational Changes**

Whenever significant organizational or ownership changes occur, you will provide NM OSHA within 60 days a new Statement of Commitment signed by both management and any authorized collective bargaining agents.

#### **J. Union Representation Changes**

Whenever a change occurs in the authorized collective bargaining representative, you will provide NM OSHA within 60 days a new signed statement indicating that the new representative supports Zia Star VPP participation.

## Safety and Health Management System

Describe your written safety and health management system, including safety and health policies, procedures, systems, and programs. See Appendix A Definitions for an explanation of how the term safety and health management system is used in Zia Star VPP.

Program descriptions must contain pertinent information that clearly explains the management and administration of the program, such as responsibilities and types of documentation maintained. Include those systems applicable to operations considered highly hazardous (e.g., Lockout/Tagout, Confined Space, Process Safety Management) and those considered non-routine.

**Please provide a list/index for any supporting documentation you choose to attach to the written description of the program.**

### A. Management Leadership

#### 1. Commitment

Management must clearly demonstrate its commitment to meeting and maintaining the requirements of the ZIA STAR VPP and taking ultimate responsibility for worker safety and health. Attach a copy of your top-level safety policy specific to your facility.

#### 2. Organization

- Briefly describe how your company's safety and health function fits into your overall management organization.

- Attach a copy of your organization chart.

### 3. Authority and Responsibility

Describe what authority and responsibility you give managers, supervisors, and regular employees regarding safety and health and hazard mitigation.

### 4. Accountability

- a. Briefly describe your accountability system used to hold managers, line supervisors, and employees responsible for safety and health. Examples are job performance evaluations, disciplinary action, and contract language.

- b. Describe system documentation.

### 5. Resources

- a. Identify the available safety and health resources. Describe the safety and health professional staff available, including appropriate use of certified safety professionals (CSP), certified industrial hygienists (CIH), other licensed health care professionals, and other experts as needed, based on the hazards at your site.
- b. Identify any external resources (including corporate office and private consultants) used to help with your safety and health management system.

## 6. Goals and Planning

- a. Identify your annual plans that set specific safety and health goals and objectives.
  
  
  
  
  
  
  
  
  
  
- b. Describe how planning for safety and health fits into your overall management planning process.

## B. Worker Participation

### 1. Self-Evaluation

- a. Provide a copy of the most recent annual self-evaluation of your site's safety and health management system. Include assessments of the effectiveness of the ZIA STAR VPP elements listed in these application guidelines, documentation of action items completed, and recommendations for improvement.
  
  
  
  
  
  
  
  
  
  
- b. Describe how you prepare and use the self-evaluation.
  
  
  
  
  
  
  
  
  
  
- c. List at least three meaningful ways employees are involved in your safety and health management system. These must be in addition to employees reporting hazards and attending training.

- d. Provide specific information about decision processes in which employees participate, such as hazard assessment, inspections, safety and health training, and/or evaluation of the safety and health management system.

## 2. Employee Notification

- a. Describe how you notify employees about site participation in the ZIA STAR VPP, their right to register a complaint with NM OSHA, and their right to obtain reports of inspections and accident investigations upon request. Methods may include, but are not limited to, new employee orientation; intranet or email if all employees have access; bulletin boards; toolbox talks; or group meetings.

## 1. Contract Workers' Safety and Health

- a. Describe the process and the pre-selection criteria used for selecting contractors to perform jobs at your site.
  
  
  
  
  
  
  
  
  
  
- b. Describe your documented oversight and management system for ensuring that all contract workers who do work at your site enjoy the same safe and healthful working conditions and the same quality protection as your regular employees.

2. Site Map.

Attach a site map or general layout.

### C. Worksite Analysis

1. Baseline Hazard Analysis

- a. Describe the methods you use for baseline hazard analysis to identify hazards associated with your specific work environment. For example, air contaminants, noise, or lead.
  
- b. Identify the safety and health professionals involved in the baseline assessment and subsequent needed surveys.
  
- c. Explain any sampling rationale and strategies for industrial hygiene surveys if required.

2. Hazard Analysis of Routine Jobs, Tasks, and Processes

- a. Describe the system you use (when, how, who) for examination and analysis of safety and health hazards associated with routine tasks, jobs, processes, and/or phases.
  
- b. You should base priorities for hazard analysis on historical evidence, perceived risks, complexity, and the frequency of jobs/tasks completed at your worksite.
  
- c. Provide specific examples of some analyses you have performed, and any (completed) forms used.

### 3. Hazard Analysis of Significant Changes

Explain how, prior to activity or use, you analyze significant changes to identify uncontrolled safety and health hazards and the actions needed to eliminate or control these hazards. Significant changes may include non-routine tasks and new processes, materials, equipment, and facilities.

### 4. Self-Inspections

- a. Describe your worksite safety and health routine general inspection procedures.
- b. Indicate who performs inspections, their training, and how you track any hazards through to elimination or control.
- c. For routine health inspections, summarize the testing and analysis procedures used and qualifications of personnel who conduct them.
- d. Include some completed forms used for self-inspections.

### 5. Employee Reports of Hazards

- a. Describe the different ways employees notify management of uncontrolled safety or health hazards. NOTE: An opportunity to use a written form to notify management about safety and health hazards must be part of your reporting system.
- b. Explain procedures for follow up, tracking corrections, and reporting back to employees.



## 6. Accident and Incident Investigations

- a. Describe your written procedures for investigation of accidents, near misses, first-aid cases, and other incidents.
- b. What training do investigators receive?
- c. How do you determine which accidents or incidents warrant investigation?
- d. Describe how you use investigation results.

## 7. Trend Analysis

- a. Describe the system you use for safety and health data analysis.
- b. Indicate how you collect and analyze data from all sources, including injuries, illnesses, near-misses, first-aid cases, work order forms, incident investigations, inspections, and self-audits.
- c. Describe how you use analysis results.

## D. Hazard Prevention and Control

Applicants and participants must be in compliance with any hazard control program required by an OSHA standard, such as PPE, Respiratory Protection, Lockout/Tagout, Confined Space Entry, Process Safety Management (PSM), Bloodborne Pathogens, etc. ZIA STAR VPP applicants and participants must periodically review these programs (most OSHA standards require an annual review) to ensure they are up-to-date.

Applicants and participants who are covered by the PSM standard must additionally submit answers to all applicable questions found in the ZIA STAR VPP PSM Application Supplement A < >. (Other Supplements will be used during annual self-evaluations and NM OSHA onsite approval/reapproval visits.)

### 1. Hierarchy of Controls

#### a. Engineering Controls

1. Describe and provide specific examples of engineering controls you have implemented that either eliminated or limited hazards by reducing their severity, their likelihood of occurrence, or both. Engineering controls include, for example, reduction in pressure or amount of hazardous material, substitution of less hazardous material, reduction of noise produced, fail-safe design, leak before burst, fault tolerance/redundancy, and ergonomic design changes.
2. Although not as reliable as true engineering controls, this category also includes protective safety devices such as guards, barriers, interlocks, grounding and bonding systems, and pressure relief valves to keep pressure within a safe limit.

#### b. Administrative Controls

1. Briefly describe the ways you limit daily exposure to hazards by adjusting work schedules or work tasks, for example, job rotation.

c. Work Practice Controls

1. Describe and provide specific examples of your work practice controls. These include, for example, workplace rules, safe and healthful work practices, specific programs to address OSHA standards, and procedures for specific operations that require permits, labeling, and documentation.
  
2. Identify major technical programs and regulations that pertain to your site, such as lockout/tagout, process safety management, hazard communication, machine guarding, and fall protection.

d. Personal Protective Equipment

1. Describe and provide specific examples of required personal protective equipment (PPE) your employees use.
  
2. Identify what PPE the NM OSHA team members will need to bring to your worksite.

2. Enforcement of Safety and Health Rules

Describe the procedures you use for disciplinary action or reorientation of managers, supervisors, and other employees who break or disregard safety and health rules.

3. Preventive/Predictive Maintenance

a. Summarize your written system for monitoring and maintaining workplace equipment to predict and prevent equipment breakdowns that may cause hazards.

b. Provide a brief summary of the type of equipment covered.

4. Occupational Health Care Program

a. Describe your onsite and offsite medical service and physician availability.

b. Explain how you utilize the services of licensed occupational health care professionals.

c. Indicate the coverage provided by employees trained in first aid, CPR, and other paramedical skills, their training, and available equipment.

## 5. Emergency Preparedness

Describe your emergency planning and preparedness system. Provide information on emergency drills and training, including evacuations.

## E. Safety and Health Training

Applicants and participants must be in compliance with any required OSHA safety training requirements. How are employees given information safety at the site? How are skills verified?

1. Describe the formal and informal safety and health training provided for managers, supervisors, and employees.
2. Identify training protocols, schedules, and information provided to supervisors and employees on programs such as hazard communication, personal protective equipment, and handling of emergency situations.
3. Describe how you verify the effectiveness of the training you provide.

## F. Program Evaluation (Injury and Illness Performance)

See Appendix B for instructions on calculating required rates and completing this section's tables, and Appendix C for an alternative rate calculation for qualifying small employers.

### 1. Injury and Illness Rate Requirements

- a. To qualify for ZIA STAR VPP Star, both your 3-year TCIR and your 3-year DART rate must be below at least 1 of the 3 most recent years of specific industry national averages for nonfatal injuries and illnesses at the most precise level published by the U.S. Department of Labor's Bureau of Labor Statistics (BLS).
- b. NM OSHA will compare all submitted rates against the most advantageous single year that would qualify the applicant out of the last 3 published years.

### 2. Alternative Rate Calculation.

Some applicants, usually smaller employers with limited numbers of employees/contractors/subcontractors and/or hours worked, may use an alternative method for calculating incidence rates. Review Appendix C - Alternative Rate Calculation for more information.

### 3. TABLE 1: Site-Based Injury and Illness Rate Calculations for General Industry

- a. Table 1 tracks the injury and illness rates of all employees over whom the applicant has responsibility and authority for safety and health. These rates must be calculated from data that reflects the experience of all regular site employees, including temporary employees and any contractor employees regularly intermingled with your employees and under the direct supervision of your managers. Do not include applicable contractors in these rates.
- b. NM OSHA considers the site's most recent 3-year recordable injury and illness experience and compares that experience with industry averages published by the Bureau of Labor Statistics.
- c. Calculate your Total Recordable Case Incidence Rate (TCIR) for each of the past 3 years and for the 3 years combined.
- d. Calculate your site's incidence rate for cases involving days away from work, restricted work activity, and job transfer (DART) for each of the past 3 years and for the 3 years combined.
- e. Compare your rates with BLS national average rates to determine whether you meet Zia Star Requirements.

**TABLE 1. Site-based Recordable Nonfatal Injury and Illness Case Incidence Rates**

	A	B	C	D	E	F	G	H	I
Year	Total Work Hours	Total Number of Injuries	Total Number of Illnesses	Sum of Injuries and Illnesses	TCIR for Injuries and Illnesses	Total # of Injuries Involving DART	Total # of Illnesses Involving DART	Sum of Injury & Illness Cases Involving DART	DART Rate
3 Years Ago (annual)									
2 Years Ago (annual)									
Last Year (annual)									
3 Year Totals & Rates									
BLS Rates for NAICS code _____									
Year 1 (3 years ago)									
Year 2 (2 years ago)									
Year 3 (last year)									
Percent above or below BLS National Average									

4. TABLE 2: Site-Based Injury and Illness Rate Calculations for *Applicable Contractors* at General Industry Sites
  - a. Applicants/participants must maintain injury and illness rates for each applicable contractor. (See Appendix A Definitions)
  - b. Fill out and maintain TABLE 2 for each applicable contractor. You need not submit these particular tables with your application. The tables must be available at the site for review by the NM OSHA ZIA STAR VPP Onsite Evaluation Team.
  - c. In addition, approved participants must submit applicable contractor injury and illness data each year as part of their annual submission to NM OSHA.

TABLE 2. Site-based <i>Applicable Contractor</i> Recordable Nonfatal Injury and Illness Case Incidence Rates (for non-construction applicants) (for the contractor's work at your site only)									
Name of Contractor									
NAICS Code for contractor's work at your site									
	A	B	C	D	E	F	G	H	I
Year	Total Work Hours	Total Number of Injuries	Total Number of Illnesses	Sum of Injuries and Illnesses	TCIR for Injuries and Illnesses	Total # of Injuries Involving DART	Total # of Illnesses Involving Days Away DART	Sum of Injury & Illness Cases Involving DART	DART rate
3 Years Ago (annual)									
2 Years Ago (annual)									
Last Year (annual)									



## **Submission**

Once you feel that your application is complete, meets all off the elements and sub-elements of the Zia Star VPP, and is ready for submission please contact the New Mexico Zia Star VPP Coordinator at (505) 476-8700 or via email at [NMENV-NewMexicoVPP@state.nm.us](mailto:NMENV-NewMexicoVPP@state.nm.us).

## Appendix A: Definitions

**The following definitions apply to use of these terms within NM OSHA's Zia Star Voluntary Protection Programs (VPP)**

**90-Day Items.** Compliance-related issues that must be corrected within a maximum of 90 days, with effective protection provided to employees in the interim.

**Annual Self-Evaluation.** A participant's yearly self-assessment to gauge the effectiveness of all required VPP elements and any other elements of the participant's safety and health management system.

**Annual Submission.** A document written by a participant and submitted to OSHA by February 15th each year, consisting of the following information: Updated names and addresses; the participant's and applicable 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 annual self-evaluation of the participant's safety and health management system; descriptions of significant changes or events; progress made on the previous year's recommendations; any success stories; and any other information required by OSHA. In addition, participants covered by the Process Safety Management Standard (PSM) are required to respond to applicable questions from the annual VPP PSM questionnaire. Participants who have been approved within a Designated Geographic Area (DGA) must submit a list, including addresses, of all active worksites plus a second list of any work projects scheduled or projected to begin during the upcoming year.

**Applicable Contractor.** An employer who has contracted with a General Industry, site-based applicant/participant to provide specified services and whose employees:

1. Worked at least 1,000 hours at the VPP site-based applicant/participant's worksite in any calendar quarter within the last 12 months.
2. Are not directly supervised in day-to-day activities by applicant/participant's management.

The concept of applicable contractor does not include temporary employees or other contractor employees who are regularly intermingled with a site-based applicant/participant's employees and under direct supervision by management.

**Accepted Application.** An application that has been reviewed by NM OSHA and found to be complete. Also referred to as a completed application.

**Backup Team Leader.** A member of an onsite evaluation team who provides assistance to the team leader and can assume his/her duties when necessary.

**Combined Workforce.** An applicant/participant's regular workforce employees, including temporary employees, plus all contractor/subcontractor employees.

**Compliance Officer.** A State or Federal compliance safety and health officer (CSHO).

**Contract Employees.** Those individuals who are employed by a company that provides services under contract to the VPP applicant/participant, usually at the VPP applicant/participant's worksite.

**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 an individual worksite, all worksites within an applicant/participant's Designated Geographic Area (DGA), or all worksites of an employer for a specified period (usually 1 or 3 years).

**Directorate of Cooperative and State Programs (DCSP).** The OSHA Directorate responsible for coordinating and overseeing OSHA's VPP and other cooperative programs, located in OSHA's National Office.

**Demonstration Program.** The program within VPP that enables employers with VPP-quality safety and health protection to test alternatives to current VPP eligibility and performance requirements. If a Demonstration Program is judged successful, its alternative ways to achieve safety and health excellence may lead to changes in VPP criteria.

**Federal Register.** The official Federal government publication, issued by the Government Printing Office (GPO), in which OSHA announces the philosophy and criteria for VPP approval and participation in a public notice commonly referred to as the VPP Federal Register Notice or the Federal Register Notice.

**General Contractor.** A construction site owner or site manager who controls construction operations and has contractual responsibility for assuring safe and healthful working conditions at a worksite.

**Injury/Illness Rates.** Numerical rates that:

1. Represent an applicant/participant's nonfatal recordable injuries and illnesses at an individual worksite or within a Designated Geographic Area.
2. Are an important factor when NM OSHA assesses an applicant/participant's qualification for VPP.

**Mentoring.** The assistance that a Zia Star VPP participant provides to another employer to prepare that employer for VPP application and/or to improve that employer's safety and health management system.

**Onsite Assistance Visit.** A visit to an applicant/participant by an OSHA VPP Manager, Compliance Assistance Specialist, or other non-enforcement personnel, to offer assistance including, for example, help with the VPP application, a records review, and/or general observations about the employer's safety and health management system.

**Onsite Evaluation.** A visit to an applicant/participant worksite or headquarters by an NM OSHA onsite evaluation team to determine whether the applicant/participant qualifies for initial approval and continued participation within Zia Star VPP.

**Onsite Evaluation Report.** A document written by the OSHA onsite evaluation team and consisting of the site report and site worksheet. This document contains the team's assessment of an applicant/participant's safety and health management system and its implementation, a review of injury and illness rates, and the team's recommendation regarding approval of the applicant or reapproval of the participant to Zia Star VPP.

**Onsite Evaluation Team.** An interdisciplinary group of OSHA professionals and sometimes other government employees who conduct onsite evaluations. The team normally consists of a team leader, a backup team leader, safety and health specialists, and other specialists as appropriate.

**Outreach.** Assistance and information a Zia Star VPP participant provides to prospective VPP applicants, other employers, employer and employee organizations, and the public, for promoting safety and health principles and practices and Zia Star VPP. Outreach activities include, but are not limited to:

1. Conducting Zia Star VPP workshops at conferences.
2. Conducting safety and health training workshops.
3. Holding community safety days.
4. Serving as an advocate for Zia Star VPP within the business community.
5. Participation in NM OSHA Strategic Partnerships, and Alliances.
6. Making presentations on safety and health topics at conferences and other venues.

**Pre-screening.** An internal process to ensure and verify that sites/DGAs:

1. Are effectively implementing the applicant/participant's safety and health management system policies and procedures.
2. Meet all applicable VPP requirements, including, following approval, the requirement to continuously improve. For the corporate way to participate, applicant sites are expected to meet VPP Star requirements.

**Process Hazard Analysis (PHA).** For the purpose of VPP, a PHA is an organized and systemic effort to identify and analyze the significance of potential hazards associated with the processing or handling of highly hazardous chemicals.

**Process Safety Management (PSM).** A reference to OSHA standard 29 CFR 1910.119 and 1926.64, which covers all employers who either use or produce highly hazardous chemicals exceeding specified limits.

**PSM Level 1 Auditor.**

1. An OSHA employee with experience in the chemical processing or refining industries. A PSM Level 1 Auditor is responsible for evaluating employer PSM operations during OSHA VPP visits (or inspecting PSM operations during OSHA enforcement inspections).
2. Specific requirements for a PSM Level 1 Auditor include:
  - A. OSHA Training Institute (OTI) Course 3300, Safety and Health in the Chemical Processing Industries.
  - B. OTI Course 3400, Hazard Analysis in the Chemical Processing Industries.
  - C. Advanced training such as OTI Course 3410, Advanced Process Safety Management, or other equivalent specialized seminars in PSM.
  - D. Prior experience with chemical industry safety. This should include experience obtained in any one of the following ways:
    1. Through accident investigations in chemical, petrochemical, or refinery plants involving fires, explosions, and/or toxic chemical releases;
    2. Through previous chemical inspections involving process safety management evaluations; or
    3. Through previous chemical industry employment.
3. Alternatively, Special Government Employees may serve as PSM Level 1 Auditors on VPP onsite evaluation teams upon demonstrating training and experience equivalent to the above requirements.

**PSM Supplements.**

1. **PSM Supplement A.** Also known as the PSM Application Supplement or the static list. A series of questions designed to establish a basic understanding of a VPP applicant's PSM policies and procedures. Applicants covered by the PSM Standard must submit responses to all questions on the PSM Application Supplement when they submit their written VPP application.
2. **PSM Supplement B.** Also known as the PSM Annual Questionnaire. A document compiled annually by OSHA that uses selected questions from OSHA's Dynamic Inspection Priority Lists, also known as the dynamic question lists. The selected questions change from year to year. The PSM Questionnaire must be completed and submitted each year by VPP participants covered under the PSM standard as part of their annual submission to OSHA.

3. **PSM Supplement C.** Also known as the PSM Onsite Evaluation Questionnaire. Questions selected by the VPP Onsite Evaluation Team Leader and PSM Level 1 or equivalent team members from OSHA's dormant PSM Inspection Priority Lists, also known as the dynamic question lists. The questions are selected just prior to commencing a VPP onsite evaluation and presented to the VPP applicant/participant during the evaluation. Normally, each applicant/participant covered by the PSM standard will receive a different set of questions at the time of the preapproval onsite evaluation and then during each subsequent onsite reevaluation.

**Recommendations.** Suggested improvements noted by the onsite evaluation team that are not requirements for VPP participation but that would enhance the effectiveness of the applicant/participant's safety and health management system. (Compliance with OSHA standards is a requirement, not a recommendation.)

**Resident Contractor.** For the purposes of Zia Star VPP, resident contractor refers to a company that:

1. Provides ongoing, long term onsite services to a host employer.
2. Normally will occupy a recognizable, delineated work area within the host employer's site.

**Safety and Health Management System.** For the purposes of Zia Star VPP, a method of preventing employee 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.

**Site-Based Participation.** The only Zia Star VPP eligible operation, characterized by fixed, ongoing or long-term work operations at a single facility. These employers must control site operations and have ultimate responsibility for assuring safe and healthful working conditions. Site-based participation also is available to resident contractors at site-based Zia Star VPP participants.

**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).** An employee volunteer from a VPP participant or corporation who is knowledgeable in safety and health management system assessment, formally trained by OSHA in the policies and procedures of the Zia Star VPP and determined by NM OSHA to be qualified to perform Zia Star VPP onsite evaluations. An SGE may participate as a team member on VPP onsite evaluations. The NM OSHA directive governing the VPP Special Government Employee Program is CSP 03-01-001, Policies and Procedures Manual for Special Government Employee (SGE) activity conducted under the auspices of the Occupational Safety and Health Administration's (OSHA) Voluntary Protection Program, Jan. 4, 2002.

**State Plan.** A state-operated occupational safety and health program that has received approval and partial funding from Federal OSHA. The states that operate approved State Plans are commonly referred to as State Plan states. New Mexico is a State Plan state.

**Team Leader.** The OSHA staff person who coordinates the OSHA onsite evaluation team and ensures the performance of all evaluation activities.

**Temporary Employees.** Employees hired on a non-permanent basis by the applicant/participant. Temporary employees are grouped with regular hires for purposes of calculating employer injury and illness rates.

**Termination.** OSHA's formal removal of a VPP participant from the program. Alternatively, the act of ending a Demonstration Program.

**Total Case Incidence Rate (TCIR).** A number that represents the total nonfatal recordable injuries and illnesses per 100 full-time employees. This rate is calculated for an individual worksite, all worksites within an applicant/participant's Designated Geographic Area (DGA), or all worksites of an employer for a specified period of time (usually 1 or 3 years).

**VPP Activity Log.** The monthly log of VPP activity that is submitted to DCSP by the Regional Offices.

**VPP Annual Data Spreadsheet.** The yearly report prepared by the Regional VPP Manager and submitted electronically to DCSP that provides information on the annual TCIR and DART rates of participants.

**VPP Application Status Report.** A monthly report prepared by the Regional VPP Manager and submitted to DCSP that provides information on VPP applications, including the number of applications pending in the Region and the number of applicants whose onsite evaluation has not yet begun.

**VPP Approval Ceremony.** An event planned by the approved participant and normally held at the participant's approved work location or headquarters, where a representative from OSHA recognizes the participant's achievement and, for initial program approvals, presents the VPP plaque and VPP flag.

**VPP Automated Data System (VADS).** A database that includes information on approved VPP participants (under Federal or State Plan jurisdiction) and VPP applicants (under Federal jurisdiction).

**VPP Manager.** The NM OSHA employee directly responsible for the day-to-day operations of the VPP.

**VPP Participant Representative.** The applicant/participant employee designated as the primary contact with OSHA for matters concerning VPP.

**Withdrawal.** Decision by an applicant/participant to discontinue its VPP application process or its approved participation.

**Worksite.** For Zia Star VPP purposes, a worksite is a location where work is performed by employees of an employer.

**Zia Star Program.** The program within VPP designed for participants whose safety and health management systems operate in a highly effective, self-sufficient manner and meet all VPP requirements. Star is the highest level of VPP participation.

## Appendix B: Rate Calculations

### Injury and Illness Rate Calculations and Table Instructions

Follow these steps to complete the injury and illness rate calculation tables.

1. Estimate total hours worked annually for each of the last 3 years. Include temporary and contract employees directly supervised by your supervisors. All sites must include all overtime and management staff's total hours. Enter in the appropriate places in Column A. Enter the 3-year total at the bottom of Column A.
2. Enter the total number of recordable nonfatal injuries for each of the last 3 years in Column B. Enter the 3-year total.
3. Enter the total number of recordable nonfatal illnesses for each of the last 3 years in Column C. Enter the 3-year total.
4. For each of the past 3 years, combine the injuries and illnesses and enter in Column D. Combine the injury and illness 3-year totals and enter.
5. Calculate your Total Case Incidence Rate (TCIR) for each of the past 3 years and for the 3 years combined. Enter in Column E.

To calculate your TCIR, use the formula  $(N/EH) \times 200,000$  where

N = Sum of the number of recordable non-fatal injuries plus illnesses in a given time frame (either 1 year for an annual rate or 3 years for 3-year combined rate).

EH = Total number of hours worked by all employees in a given time frame (either 1 year for an annual rate or 3 years for a 3-year combined rate).

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

For example, to calculate your 3-year combined TCIR:

$$\text{3-Year TCIR} = \frac{[(\#inj + \#ill) + (\#inj + \#ill) + (\#inj + \#ill)]}{200,000} \times [\text{Hours} + \text{Hours} + \text{Hours}]$$

6. Repeat steps 2 to 4, except substitute injuries and illnesses that resulted in days away from work, restricted work activity, and/or job transfer. Enter in Columns F, G, and H.
7. Calculate your incidence rate for days away from work, restricted work activity, and/or job transfer (the DART rate) for each of the past 3 years and for the 3 years combined. Enter in Column I.

To calculate your DART rate, use the same formula as in 5. above, except

N = Sum of the number of all recordable injuries plus illnesses resulting in days away from work, restricted work activity, and/or job transfer in a given time frame.

8. Compare your 3-year rates with your industry's average rates for the 3 calendar years published most recently by the Bureau of Labor Statistics (BLS). (The BLS publishes rates by NAICS code each year in its Occupational Injuries and Illnesses Bulletin and at its [Website](#).) To qualify for VPP Star, both of your 3-year rates must be below the same 1 year of the 3 most recent published years of specific industry national averages for nonfatal injuries and illnesses, at the most precise level available.
9. Applicable Contractors: If you are a General Industry site, fill out and maintain Table 2 for each Applicable Contractor at your site. You do not need to submit Table 2 with your application, but you must maintain these tables at your site so that the NM OSHA VPP team can review them during your onsite evaluation.



## **Appendix C: Alternative Rate Calculations**

### **Alternative Rate Calculations for Qualifying Small Employers**

Some applicants, usually small companies with limited numbers of employees and/or hours worked, may use an alternative method for calculating their 3-year incidence rates.

The alternative method allows the employer to use the best 3 out of the most recent 4 years' injury and illness experience.

To determine whether you qualify for the alternative rate calculation method, do the following:

1. Using your company's actual employment statistics, determine hours worked during the most recent calendar year by your employees. Include temporary employees.
2. Then calculate a hypothetical TCIR assuming two recordable cases during the year.
3. Compare this hypothetical rate to the 3 most recently published years of Bureau of Labor Statistics (BLS) incidence rates for nonfatal injuries and illnesses in your industry. Use the most precise available NAICS code level. If the hypothetical rate (based on two cases) is equal to or higher than the BLS national average for your industry in at least 1 of the 3 years, you qualify for the alternative calculation method. You may use the best 3 of the last 4 calendar years of employee injury/illness experience when calculating both your 3-year TCIR and your 3-year DART rate.