

CESO

Regulation  
No. 385-1-99

15 March 2010

Safety and Occupational Health  
USACE ACCIDENT INVESTIGATION AND REPORTING

Supplementation to this regulation is permitted but not required. If supplements are issued, USACE Commanders will provide a copy of their supplement to HQUSACE, Safety and Occupational Health Office (CESO), Washington, DC 20314-1000.

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This regulation supersedes USACE Supplement 1 to AR 385-1-40, dated 30 March 1990

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## CHAPTER 1

### Accident Reporting and Record Keeping

1-1. Purpose. This Engineering Regulation (ER) establishes policies and procedures and assigns responsibilities for initial notification, investigation, preparation and submission of reports of U.S. Army Corps of Engineers (USACE) accidents and accident recordkeeping procedures. This regulation also serves as mandatory guidance for implementing accident reporting and record keeping requirements published in Occupational Safety and Health Act (OSHA) (Public Law 91-596), Executive Order 12196, 29 CFR 1960 (OSHA), AR 385-10; The Army Safety Program, DA Pamphlet 385-40; Army Accident Investigation and Reporting and DODI 6055.7; Accident Investigation, Reporting and Record Keeping.

1-2. Applicability. This regulation applies to USACE elements, to include Contractors, Vendors and Subordinate Commands.

1-3. Distribution. This publication is available in electronic media only.

1-4. References.

- a. AR 385-10 The Army Safety Program
- b. DA Pamphlet 385-10 Army Safety Program
- c. DA Pamphlet 385-40 Army Accident Investigation and Reporting
- d. DA Form 285 Series.

1-5. Policy. USACE policy is to investigate and report USACE accidents in order to prevent recurrences and to comply with OSHA, Department of Defense (DoD), Army and other regulatory requirements. All USACE accidents shall be reported (to include immediate notification), investigated, recorded and analyzed in accordance with the requirements of this regulation, 29 CFR 1960, DoDI 6055.7, AR 385-10, DA Pamphlet 385-40 and EM 385-1-1.

1-6. Suggested Improvements. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms)



## CHAPTER 2

## Definition and Classification of USACE Accidents

2-1. Responsibilities.

a. The Commander, USACE will establish overall USACE accident reporting and recordkeeping policy.

b. The HQUSACE Safety and Occupational Health Office (CESO) shall:

(1) Establish and maintain a USACE accident reporting, recordkeeping, and analysis system to track and analyze USACE Military and Civilian Personnel injuries and illnesses, USACE accidental property damage, USACE contractor personnel injuries and illnesses and contractor accidental property damage, member of the public fatal injuries and accidental injuries, illnesses and property damage caused by USACE and USACE contractor activities.

(2) Establish accident reporting, recording, and recordkeeping requirements for USACE to include requirement for subordinate Commands to report Civilian and Military personnel injuries and illnesses and USACE property damage accidents to the US Army Combat Readiness and Safety Center (CRSC), Building 4905, Fort Rucker, AL, 36362-5363 for entry into the Loss Reporting Automation System (LRAS) and the Army Safety Management Information System (ASMIS).

(3) Collect accident information, and distribute abstracts and/or lessons learned as appropriate.

(4) Analyze accident information to identify causal factors and trends, and develop USACE-wide accident prevention measures.

(5) Review and determine disposition of all USACE accident reports, including Board of Investigation (BOI) reports, lessons learned, and abstract summaries.

(6) Disseminate abstracts and accident lessons learned to subordinate commands.

c. HQUSACE Office of Counsel shall:

(1) Coordinate with CESO in developing Freedom of Information Act (FOIA) policy for all safety reports.

(2) Ensure that Counsel Offices in Subordinate Commands coordinate with local Safety Offices and the CRSC on releasing safety reports in response to FOIA requests. (See AR 385-10, Chapter 3, Paragraph 29.)

d. MSC Commanders/Directors shall:

(1) Perform quality control to evaluate and assure the accident investigation, reporting, and recordkeeping of MSC and subordinate Commands are compliant with this regulation.

(2) Analyze regional accident experience, causal factors, and trends to develop preventive measures for systemic hazards.

(3) Provide consolidated MSC accident data as required by HQUSACE.

(4) Appoint accident BOI by memorandum assuring the investigation team has the knowledge, training, and experience necessary to complete a thorough and quality investigation. See Appendix A.

(5) Require briefings by subordinate Commanders/Directors to the Board appointing Officer on all Class A fatalities and selected other BOIs as determined by the MSC SOH office in conjunction with the HQUSACE SOH Office.

(6) Provide the USACE Commander a personal briefing (face to face or VTC) on Government employee fatal accidents within 30 days after completion of the BOI report. The briefing shall describe the causes, lessons learned, and actions taken to prevent similar occurrences in the future and recommended changes in regulations, policy, and procedures for Division, MSC, or Corps-wide application.

(7) Review each BOI report to assure the report has determined that all accident causes and corrective actions have been adequately addressed.

(8) Request additional clarification/research from the Board if it is determined that all accident causes and corrective actions have not been adequately addressed.

(9) Forward BOI with associated cover letter to CESO if it is determined that all accident causes and corrective actions have been adequately addressed.

e. Commanders/Directors of Subordinate Commands (Divisions, Districts, Centers, Laboratories, and Field Operating Activities (FOAs)) shall:

(1) Ensure that all accidents are reported in accordance with this regulation.



(2) Ensure that accidents are investigated and analyzed to the extent necessary to identify causal factors and systemic deficiencies. Develop and implement countermeasures to prevent recurrence of similar accidents.

(3) Ensure that all Civilian and Military personnel Class A - D injuries and illnesses and USACE property damage accidents are entered into the Army Loss Reporting Automation System (LRAS) or forward accident investigation report and associated data on appropriate DA 285 series form (DA 285 or DA 285 AB-R) to Commander, US Army Combat Readiness and Safety Center (CRSC), Building 4905, Fort Rucker, AL, 36362-5363 for entry into the LRAS.

(4) Ensure that all contractor Class A - D injuries and illnesses, recordable member of the public injuries and illnesses, and contractor property damage accidents are entered into the ENGLink Incident Reporting System (IRS) and the ENG 3394 Form. When the Army Safety Management Information System (ASMIS) is activated, it will replace the use of the ENG 3394 Form.

(5) Ensure that consolidated accident data is forwarded through MSC to CESO.

(6) Ensure that a Report of Serious Accident (ROSA) is forwarded, as soon as reasonably possible but within 8 hours of the occurrence of the accident, to higher USACE Commands and CESO for each known or potential Class A or B accident and all other accidents for which a BOI is established. Upon release, the ROSA will automatically be forwarded to CESO, with a copy furnished to the next higher level Command.

(7) Ensure only knowledgeable and experienced personnel conduct accident investigations and serve as members of an accident BOI. See Appendix A.

(8) Ensure that an abstract summary, of all accidents where a BOI is required, is completed in accordance with this regulation. Ensure that a copy of the abstract is forwarded with the BOI and that a copy is submitted to the Lessons Learned system. .

(9) Determine the duty status of USACE employees involved in accidents if duty status is in question.

(10) In the event a USACE Military personnel, Civilian or contractor employee is fatally injured, while in a duty status, schedule an appointment and brief the next higher level Commander within 30 days after the BOI has been signed by the Commander appointing the BOI. The purpose of the briefing is to explain the causes of the accident, any lessons learned, and actions taken to prevent future occurrences. The briefing should

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be in person, but may be accomplished by video teleconference or telephone, if circumstances so warrant, as determined by the Commander being briefed.

(11) Report other high visibility accidents, (e.g., accidents resulting in less than \$500,000 property loss, permanent disability injuries to USACE employees, mishaps that could cause unfavorable publicity to USACE and serious near misses) to the next higher level Command, USACE Deputy Commander, or USACE Commander on a selected basis. The determination for these briefings shall be made by the HQ USACE Chief, Safety and Occupational Health Office (CESO) in consultation with the USACE Deputy Commander. When required, this briefing shall take place within 30 days after the completion of the BOI.

(12) Assure the local Command's Injury Compensation Program Administrator furnishes the Command's Safety and Occupational Health Office a copy of the OSHA report of injury (OSHA 301) electronically generated as a result of Federal Employee Compensation Act (FECA) claims to ensure that all accidents are reported and investigated, as appropriate.

NOTE: Functions 6.e. (1) – (11) are normally delegated to the local Command Safety and Occupational Health Office.

f. Supervisors shall:

(1) Assure all employees are trained in their rights and responsibilities for accident reporting and recordkeeping.

(2) Assure all accidents which occur within their area of responsibility are investigated and reported in accordance with this regulation.

g. Contracting Officer's Representatives shall:

(1) Assure contractors are informed of their responsibilities for accident reporting and investigation.

(2) Assure all accidents which occur within their area of responsibility are investigated and reported in accordance with this regulation.

h. Freedom of Information Act (FOIA) Officers shall:

(1) Assist in preserving accident reports for use in accident prevention purposes exclusively.

(2) Assure any release of information from accident records is in accordance with this regulation

(3) Consult with the USACE FOIA Officer for guidance on the release of accident records.

2-2. USACE Accident. A USACE accident is defined as an unplanned event, or series of events, which results in one or more of the following:

- a. Occupational illness to USACE Military or Civilian personnel.
- b. Injury to on-duty USACE Civilian personnel.
- c. Injury to USACE Military personnel on or off-duty.
- d. Injury to volunteers registered in the USACE Volunteer Clearinghouse Program.
- e. Damage to USACE property.

f. Damage to public or private property and/or injury or illness to members of the public caused by USACE operations or USACE contractor (on-site) operations (i.e., USACE/USACE contractor had a causal or contributing role in the accident.)

g. Injury or occupational illness to on-duty contractor employees supervised by USACE personnel on a day-to-day basis.

h. Injury or occupational illness to on-duty contractors/subcontractors or damage to contractor/subcontractor property, which occurs on-site and accident reporting to USACE is contractually required.

i. Injury or death to members of the public who are recreating at USACE-owned or operated areas where CFR Title 36, Chapter III, Part 327, Parks, Forests, and Public Property is applicable.

2-3. Accident Classification. Accident classes are used to determine the appropriate reporting, investigating, and recording procedures. USACE accident classifications are as follows:

2-4. Class A Accident. A USACE accident in which the resulting total cost of USACE or USACE contractor property damage is \$2,000,000 or more; an USACE aircraft is destroyed, missing, or abandoned, or an injury and/or occupational illness results in a fatality or permanent total disability to USACE Military or Civilian personnel or

contractor personnel. Persons who are missing and/or presumed dead as a result of an accident shall be reported as fatalities. Class A accidents are recordable and require a Preliminary Accident Notification, a Report of Serious Accident, an accident investigation report, and a Board of Investigation.

2-5. Class B Accident. A USACE accident in which the resulting total cost of USACE or USACE contractor property damage is \$500,000 or more, but less than \$2,000,000; an injury and/or occupational illness results in permanent partial disability to USACE Military or Civilian personnel or contractor personnel, or when three or more personnel are hospitalized as inpatients as the result of a single occurrence. Class B accidents are recordable and require a Preliminary Accident Notification, a Report of Serious Accident, an accident investigation report, and a Board of Investigation.

2-6. Class C Accident. A USACE accident in which the resulting total cost of property damage is \$50,000 or more, but less than \$500,000; a nonfatal injury or occupational illness to USACE Military or Civilian personnel or contractor personnel that causes one or more days away from work or training beyond the day or shift on which it occurred, or disability at any time (that does not meet the definition of Class A or B and is a lost workday case). Class C accidents are recordable and require a Preliminary Accident Notification and an accident investigation report.

2-7. Class D Accident. A USACE accident in which the resulting total amount of property damage is \$2,000 or more, but less than \$50,000; a non-fatal injury or occupational illness to USACE Military or Civilian personnel or contractor personnel resulting in restricted work, transfer to another job, medical treatment greater than first aid, needle stick injuries and cuts from sharps that are contaminated from another person's blood or other potentially infectious material, medical removal under medical surveillance requirements of an OSHA standard, occupational hearing loss that meets OSHA recordability criteria, or a work-related tuberculosis case. Class D accidents are recordable and require a Preliminary Accident Notification and an accident investigation report.

2-8. Class E Aviation Accident. See AR 385-10, Chapter 3 for reporting and recordkeeping requirements.

2-9. Class F Aviation Incident. See AR 385-10, Chapter 3 for reporting and recordkeeping requirements.

2-10. Recordable Public Fatality. An accident which results in the death of one or more members of the public who are recreating at USACE-owned or operated areas where CFR Title 36, Chapter III, Part 327, "Parks, Forests, and Public Property" is applicable. These accidents are recordable and require a Preliminary Accident Notification and an accident investigation report.

2-11. Other Reportable Accidents.

a. Any other accident that results in injury or illness to a member of the public or damage to private/public property due to Corps or Corps contractor (on-site) operations which results in a total cost of property damage of \$500,000 or more or an injury and/or illness results in a fatality or permanent total disability. These accidents are recordable and require a Preliminary Accident Notification, accident investigation report, and BOI.

NOTE: Public recreation accidents are not included in this classification but rather under the guidance included in paragraph 2-10 above.

b. USACE accidents which result in any injury, illness, or property damage other than those listed above in this section which the local Commander determines may be beneficial in accident trend analysis or may result in improvements to the facility's design safety by conducting an accident investigation. These accidents may be reported and documented with a Preliminary Accident Notification, an accident investigation report and/or BOI at the discretion of the local Command.



## CHAPTER 3

## Investigations

3-1. Accident Investigations.

a. All accidents shall be investigated to determine the extent of injuries, amount of property damage, and whether or not the accident meets the criteria for recordability.

b. Recordable accidents shall be investigated to the degree necessary to identify the immediate mistakes/errors/failures, and system inadequacies which may have caused, or contributed to, the accident. The techniques and procedures are provided in DA PAM 385-40

c. Recommendations shall be provided that will remedy the causes and minimize the chances for similar recurrences.

3-2. What to Investigate and Report. Responsible supervisors and managers shall be trained and shall investigate and report USACE and public recreation accidents to the local Command's Safety and Occupational Health Office. Contractor site safety and health officers shall be trained and shall investigate and report contractor accidents to the Contracting Officer's Representative. Accidents that result in one or more of the following shall be reported:

a. Injuries or Occupational Illnesses to the following:

(1) on-duty or off-duty Military personnel.

(2) on-duty USACE Civilian personnel, including non-appropriated fund (NAF) employees, and foreign nationals employed by USACE when the accident is incurred during the performance of work-related duties.

(3) on-duty contractor employees who are on the contract work site and accident reporting to USACE is contractually required.

(4) on-duty contractors supervised by USACE personnel on a day-to-day basis (i.e., "Government Direct Contractors", see glossary.)

(5) non-USACE personnel as a result of USACE or contractor operations.

(6) Soldier training related deaths. See AR 385-10, Chapter 3, Subparagraph 3-5 a.(4) and glossary for definition of a training related death.

(7) persons who are missing and/or presumed dead, as the result of an accident.

(8) members of the recreating public who are recreating at USACE owned or operated areas where CFR Title 36, Chapter III, Part 327, "Parks, Forests, and Public Property" is applicable.

(9) volunteers registered in the USACE Volunteer Clearinghouse Program.

b. Property Damage to the following:

(1) Government-owned property, including Government-furnished material (GFM), or Government-furnished property (GFP), or Government-furnished equipment (GFE) provided to a contractor.

(2) contractor/subcontractor property damage which occurs on-site and where accident reporting to USACE is contractually required.

(3) public or private property caused by USACE or contractor (on-site) operations (i.e., USACE had a causal or contributing role in the accident.)

c. Special reporting requirements exist for personnel injury, occupational illness, and property damage for the following types of accidents which are addressed in DA Pam 385-40:

(1) Motor Vehicle Accidents

(2) Aircraft accidents

(3) Commercial carrier/transportation accidents

(4) Marine accidents

(5) Fires

(6) Chemical agent accidents

(7) Explosives accidents

(8) Ionizing and non-ionizing radiation accidents

(9) Nuclear accidents

(10) Biological defense accidents



3-3. Types of Accidents and Incidents. When two or more types of vehicles, such as an Army Motor Vehicle (AMV) and an Army Combat Vehicle (ACV) are involved in an accident, the type of equipment operated by the individual deemed most responsible shall determine the accident type. This process shall also be followed in determining other types of accidents (for example, fire, marine, explosives.) See DA Pam 385-40 for additional detail.

3-4. Non-Reportable Events. (See AR 385-10, Chapter 3, subparagraph 3-7 for greater detail.)The following events are not reportable accidents:

a. Damage, loss, injury, or illness caused by enemy forces.

b. Malfunction or failure of parts that are normally subject to fair wear and tear and have a fixed useful life less than the complete system/unit are not considered accidents if the malfunction or failure is the only damage and the sole action is to replace or repair that component part. The only exception is that all fires or fire damage involving component parts must be reported.

c. Damage to USACE/contractor equipment or property that is planned, intended, or expected during authorized testing or intentional destruction is not considered an accident.

d. Property damage as a result of vandalism, riots, civil disorders, or felonious acts such as arson. Damage to USACE/contractor aircraft, vehicles, or any other property which occurs after property has been stolen is not reportable as an accident. Damage to USACE/contractor property which occurs when an individual misappropriates property to which they are not authorized to operate or use, shall not be reported as an accident.

e. Deliberate damage to USACE/contractor property or personnel.

f. Accidents occurring during the transportation of USACE/contractor material by commercial carrier.

g. USACE equipment leased, on bailment, or loaned to contractors, or other Governmental agencies or Governments when the lessee has assumed risk of damage or loss. (Note in the case of USACE contractor use of equipment it may be recordable as a contractor accident.)

h. Injuries associated with non-occupational diseases, when the disease, not the injury, is the proximate cause of the lost time, such as diabetes and its resultant complications like loss of vision. Complications of the injury (such as the infection of a cut aggravated by a work—related activity) that result in lost time are reportable.

i. Suicide or attempted suicide, homicide, or intentionally self—inflicted injuries. Violence in the workplace events shall be reported to the U.S. Department of Labor in accordance with 29 CFR 1904.5.

j. Injuries resulting from altercations, attack, or assault, unless incurred in the performance of official duties (for example, MPs).

k. Injuries sustained before entry into military service or employment by USACE/contractor, unless specifically aggravated by current tenure of service.

l. Illnesses caused by specific organisms and toxins (such as food-borne disease), unless the disease is directly related to, or the result of, the worker's employment.

m. Minimum stress and strain (simple, natural, and nonviolent body positions or actions, as in dressing, sleeping, coughing, or sneezing.) These are injuries unrelated to accident-producing agents or environments normally associated with active participation in daily work or recreation.

n. Hospitalization for treatment when the patient is retained beyond the day of admission solely for administrative reasons. Hospitalization for observation or administrative reasons not related to the immediate injury or occupational illness.

o. Injuries or fatalities to persons in the act of escaping from or eluding military or civilian custody or arrest.

p. Death due to natural causes unrelated to the work environment as determined by a physician. (This may be determined by autopsy.)

q. Adverse bodily reactions resulting directly from the use of drugs under the direction of competent medical authority.

r. Death or injury resulting solely from the use of alcohol, illegal drugs, or other substances.

s. Pre-existing injuries musculoskeletal disorders unless aggravated or accelerated by current employment.

Civilian / Contractor employee injuries / illnesses are reportable but not recordable if they meet the following criteria:

(1) At the time of the injury or illness, the individual was present in the work environment as a member of the general public rather than as an employee (i.e., the individual is on-site visiting in a non-work status unrelated to his employment. For example, an employee was on-site, in a non-work status to borrow personally owned tools from a co-worker.)

(2) The injury or illness involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside the work environment and not aggravated by the work environment. (Note – If it is not readily known whether an injury/illness/fatality is work-related, a physician's determination may be required.)

(3) The injury or illness occurs when the employee is in a travel status and either:

(a) the employee has established a "home away from home" by checking into a hotel/motel. Injuries and illnesses that occur while in "home away from home" status are not recordable. For example, if an employee slips in the hotel shower and is injured, the injury is not recordable, or

(b) the employee has detoured for personal reasons. For example, while on TDY, if an employee takes a side trip for a vacation, to go sight-seeing, shopping, etc., and is injured, the injury is not recordable.

(4) The injury or illness results solely from voluntary participation in a wellness program or in a medical, fitness, or recreational activity such as blood donation, physical examination, flu shot, exercise class, racquetball, or baseball.

(5) The injury or illness is solely the result of an employee eating, drinking, or preparing food or drink for personal consumption (whether bought on the employer's premises or brought in). For example, if the employee is injured by choking on a sandwich while in the employer's establishment, the case would not be considered work-related.

Note: If the employee is made ill by ingesting food contaminated by workplace contaminants (such as lead), or gets food poisoning from food supplied by the employer, the case would be considered work-related.

(6) The injury or illness is solely the result of an employee doing personal tasks (unrelated to their employment) at the establishment outside of the employee's assigned working hours.

(7) The injury or illness is solely the result of personal grooming, self-medication for a non-work-related condition, or is intentionally self-inflicted.

(8) The injury or illness is caused by a motor vehicle accident and occurs in a USACE parking lot or on a USACE access road while the employee is commuting to or from work.

(9) The illness is the common cold or flu (Note: contagious diseases such as tuberculosis, brucellosis, hepatitis A, or plague are considered work-related if the employee is infected at work).

(10) Hearing loss, if a physician or other licensed health care determines that the hearing loss is not work-related or has not been significantly aggravated by occupational noise exposure.

(11) Tuberculosis, if there is evidence that the case did not arise from a workplace exposure.

(12) The illness is a mental illness. Mental illness shall not be considered work-related unless the employee voluntarily provides USACE with an opinion from a physician or other licensed health care professional with appropriate training and experience (psychiatrist, psychologist, psychiatric nurse practitioner, etc.) stating that the employee has a mental illness that is work-related.

(13) Medical and first aid procedures if they meet the following criteria:

(a) Needle sticks and sharps, if the needle sticks and cuts are from uncontaminated sharps, and splashes or other exposures to blood or other potentially infectious material--- provided the incident results in no diagnosis of a blood borne disease.

(b) Medical removal if an employee is voluntarily removed below the thresholds established in the standards.

(c) Visits to a physician or licensed health care professional (PLHCP) solely for diagnostic procedures such as x-rays, blood tests, or MRIs, observation and counseling--- including follow-up visits.

(d) Injuries and illnesses that require only first aid if they meet the following criteria:

- Using nonprescription medication at nonprescription strength.
- Tetanus immunizations.
- Cleaning, flushing, or soaking surface wounds.
- Wound coverings, butterfly bandages, Steri-Strips.

- Hot or cold therapy regardless of how many times it is used.
- Non-rigid means of support.
- Temporary immobilization device used to transport accident victims.
- Drilling of fingernail or toenail, draining fluid from blister.
- Eye patches.
- Removing foreign bodies from eye using irrigation or cotton swab.
- Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means.
- Finger guards.
- Massages.
- Drinking fluids for relief of heat stress.

NOTE: The filing of an Office of Workers' Compensation (OWCP) claim form CA-1, CA-2, or CA-16 by a Federal employee does not necessarily indicate that a recordable injury/illness has occurred, even if the claim is accepted by the U.S. Department of Labor, Office of Workers' Compensation.

### 3-5. Initial Notification and Reporting of Accidents.

a. USACE employees involved in, or who become aware of, an accident shall immediately report it to their supervisor or to another employee who is directly responsible for the operation, materiel, or person(s) involved.

b. USACE contractor employees involved in, or who become aware of, an accident shall immediately report it to their supervisor or other responsible employee. The contractor shall immediately report the accident, in accordance with the terms of the contract, to the USACE Contracting Officer's Representative or other responsible USACE employee.

c. A preliminary accident notification (PAN) shall be created and released as soon as reasonably possible, but no later than seven days after the accident, in ENGLink for each recordable accident. NOTE: In the event the accident meets the USACE definition of a Class A or B accident, the PAN must be completed immediately so the automatically

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populated Report of Serious Accident (ROSA) may be released as soon as possible but no later than 8 hours after the Command becomes aware of the accident

d. The PAN shall be completed by the project/office experiencing the accident (Government, contractor, and public) and, when released by the user (initiator of the PAN), electronically sent to the safety manager and/or designee. If the accident meets the USACE definition of a Class A or B accident, a ROSA is automatically populated. The local Command Safety Manager, local Commander, and/or their designees shall edit the PAN and release it up the chain-of-Command. All USACE employees who have a USACE UPASS user ID and Oracle password can access ENGLink and the PAN. ENGLink may be accessed at: <https://englink.usace.USACE.mil/>. Guidance on using the ENGLink IRS to create PANs and ROSAs is available from the ENGLink help desk and local Safety and Occupational Health Offices. If employees have difficulty accessing ENGLink, they should contact their local Information Management Office for assistance.

e. The local Command Safety and Occupational Health Office shall ensure that PANs are complete and accurate for all recordable accidents.

f. The supervisor or other responsible employee who first becomes aware of any Class A or B accident or any other accident where an accident BOI will be appointed shall, through their chain-of-Command, immediately notify the local Commander and local Safety and Occupational Health Office.

g. The Commander or local Safety and Occupational Health Office shall forward the ROSA for any accident, for which a BOI is appointed, to their Division and HQUSACE Safety and Occupational Health Office. The local Safety and Occupational Health Office shall notify their Division and HQUSACE telephonically as soon as reasonably possible but no later than 8 hours after becoming aware of a Class A or B or other accident for which a BOI is required. HQUSACE telephone contact numbers are 202-761-8600, 202-761-8566, or 202-761-8567.

h. The Command experiencing a Military or Civilian Class A or B accident shall notify the Commander, US Army Combat Readiness and Safety Center (CRSC) immediately. The primary method for notification is through the web-based Initial Notification (IN) tool located on the CRSC website at: [IMMEDIATE NOTIFICATION INSTRUCTIONS](#). Checklists for compiling the necessary ground or aviation accident information to complete the IN Tool report are provided. The secondary method for immediate notification is by telephone (DSN 558-2660/3410, commercial (205) 255-2660/3410).

(1) Ground accidents. At a minimum, notification shall include the information on DA Form 7306-R, Worksheet for Telephonic Notification of Ground Accident. Using the IN Tool meets this requirement. See Appendix A, Figure 1, page 30 of this document. NOTE: The ROSA is an equivalent form to the DA Form 7306-R Worksheet for Telephonic Notification of Ground Accidents.

(2) Aviation accidents. See AR 385-10, Chapter 3.

i. For all Class A and B on-duty accidents, immediate notification of accidents shall be followed by Centralized Accident Investigation (CAI) or Installation-level Accident Investigation (IAI). The CRSC makes the determination whether the accident shall be investigated via a CAI. If a CAI is not conducted, an IAI shall be conducted.

j. For off-duty Military Class A and B accidents, at minimum, immediate notification of the accident shall be followed with an investigation.

k. Notifying Department of Labor. Within eight (8) hours after the death of any USACE Civilian employee from a work-related incident or the in-patient hospitalization of three or more Civilian employees as a result of a work-related incident, the local Command Safety Manager or their designee must orally report the fatality/multiple hospitalization by telephone or in person to the Area Office of the Occupational Safety and Health Administration, US Department of Labor, that is nearest to the site of the incident. The representative may also use the OSHA toll-free central telephone number, 1-800-321-OSHA (1-800-321-6742). If it is not readily known whether a fatality is work-related, a physician's determination may be required. If at a later date, a physician determines the fatality was not work related, notify OSHA of that determination.

3-6. Reporting. (See Appendix E for Notification and Reporting Requirements.)

a. USACE Military and USACE Civilian personnel reportable injuries and illnesses and Army property damage accidents shall be reported using the DA 285 series forms, until the Army Safety Management Information System (ASMIS) is activated. The DA 285 series forms are available on the CRSC web site. The DA 285-AB-R may be submitted in hard copy or via the Army Loss Reporting Automation System (LRAS).

b. USACE contractor and public reportable accidents shall be reported using the ENG 3394 Form, until the ASMIS is activated. When the ASMIS is activated the ENG 3394 Form shall no longer be used.

c. For all Class A and B on-duty accidents, the report of investigation shall be completed and submitted to HQUSACE within 45 calendar days.

d. For all off-duty Military accidents and other (on-duty) classes of Military, Civilian, and contractor, and public recordable accidents, the accident report shall be completed and submitted to the local safety office within 7 calendar days.

e. On USACE contracts, where an accident involves reportable damage to USACE equipment or injury to USACE personnel, the USACE Subordinate Command administering the contract is responsible for ensuring the accident is investigated and

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reported IAW this regulation and the terms of the contract. If USACE administers the contract and the mishap involves reportable damage or injury to another DOD agency, the USACE Subordinate Command administering the contract shall ensure that all mishap information is sent to the involved agency with an information copy to CRSC. If another DOD agency administers the contract and the mishap involves reportable damage to USACE property or injury to USACE personnel, the USACE Subordinate Command that owned the resources shall request the contracting agency to investigate and report the accident.

f. For accidents occurring in combat:

(1) The CRSC shall be notified immediately for all on-duty Class A, B, and aviation Class C accidents. Authority to waive normal investigation and reporting procedures for Class A, B and aviation Class C accidents is delegated to the senior Commander at the level determined appropriate by the USACE Headquarters, Theater USACE, or equivalent level. For all other classes of accidents which occur in combat, notification and reporting procedures shall be per other sections of this regulation.

(2) Whenever possible, normal investigations should be conducted on all accidents with potential USACE-wide impact (for example, materiel failure accidents). In cases in which normal investigation and reporting shall not be performed, the report of investigation shall identify that fact and the name and rank of the official who authorized the waiver.

(3) Notification shall be immediate via IN Tool, email, message (via Defense Message System (DMS)), or telephone to the CRSC and via ENGLink IRS/ROSA and telephonically (202-761-8600 or 202-761-8566). The notification shall include as much of the information required by the telephonic worksheet as can be determined.

(4) A completed report must be submitted as soon as conditions permit, not later than 60 calendar days, and shall serve as the official accident report. No follow-up is required.

3-7. Determining Accountability for USACE Accidents.

a. The purpose of accountability in this regulation is to address the most likely organization to affect corrective actions. Accidents normally shall be charged in this order of precedence:

- (1) The unit or element having operational control of the equipment or facility.
- (2) The unit having operational control of the most responsible person.
- (3) The unit or element to which the injured person(s) is/are assigned.



b. Exceptions to the above include, but are not limited to, the following:

(1) Accidents involving persons on temporary duty (TDY), pass, or military leave shall be charged to the activity or USACE Headquarters to which the person is permanently assigned. For military personnel, permanently assigned means on the Standard Installation/Division Personnel System (SIDPERS) or MILPO unit strength report. For Civilians, it means assigned by current SF 50 – B (Notification of Personnel Action).

(2) Accidents involving persons deployed for emergency response and recovery operations shall be charged to the emergency response event.

(3) Accidents involving military personnel in permanent change of station (PCS) status (with or without leave) or Civilians in PCS status shall be charged to the losing unit. PCS status ends on the assignment order reporting date or arrival date, whichever occurs first.

c. If a conflict in determining accountability between USACE subordinate commands cannot be resolved within Command channels, the Commanders involved shall submit a formal request for decision to the HQUSACE Loss Control Program Manager. The request shall include a summary of circumstances, statements of involved Commanders, and recommendations. These actions are separate from accident investigation requirements and shall not restrict or impede the investigation and reporting process. The final determination for accountability shall be made by the HQUSACE Loss Control Program Manager.

3-8. Categories of Accident Investigation Reports. The Army has two categories of safety accident investigation reports: “limited use reports” and “general use reports”. Most USACE accident reports are General Use Safety Accident Investigation Reports.

a. Limited Use Safety Accident Investigation Reports. These are close-hold, internal communications of Army whose SOLE purpose is prevention of subsequent Army accidents. They are required for all flight/flight related and fratricide/friendly fire accidents. They are authorized for use in certain accidents such as accidents involving other complex weapon systems, equipment, or military-unique items (such as ships and shipboard systems, guided missiles, laser devices, or armored vehicles), and military unique equipment /operations /exercises when the determination of causal factors is vital to the national defense. For additional information on Limited Use Safety Accident Investigation Reports see AR 385-10, Chapter 3, Paragraph 3-10.a.

b. General Use Safety Accident Investigation Reports. These are reports prepared to record data concerning all recordable USACE accidents not covered by Limited Use Safety Accident Investigation Reports. These reports are intended for accident prevention purposes and shall not be used for administrative or disciplinary actions within DOD.

Portions of these reports which contain privileged material, such as investigative findings, analyses, and recommendations, are not generally releasable to the public, to any Federal agency outside of DOD, or within DOD except to requesters who have a need to know for the purpose of accident prevention. Witnesses shall be advised that their statements may not be used for internal DOD disciplinary purposes. Promises of confidentiality shall not be given. The information shall be treated as exempt from mandatory disclosure in response to a request under the Freedom of Information Act (FOIA).

c. Legal (formerly known as "Collateral") Investigation.

(1) Commanders may initiate a legal investigation to obtain and preserve all available evidence for use in subsequent administrative or legal actions. Legal investigations will usually follow the procedures in AR 27-20 if it involves potential legal claims. Otherwise, the procedures in AR 15-6 for informal investigations will normally be followed. Local Safety and Occupational Health Managers shall advise local Commanders regarding the limited use of accident investigation reports and advise them that if they wish to preserve evidence for purposes other than accident prevention, they should convene a legal investigation.

(2) Safety accident investigations take priority over legal investigations for purposes of access to evidence, witnesses, and the accident scene; however, a spirit of cooperation is also required to ensure that the legal investigation board shall have equal access to the evidence.

(3) Personnel serving in designated safety positions or serving as a member on the safety accident investigation shall not participate in the conduct or formal review of a legal investigation of the accident.

3-9. Staffing and Review of Accident Investigation Reports. After responsible supervisors/managers/contractor investigate accidents and prepare accident investigation reports, all recordable accident investigation reports shall be processed as follows:

a. Initial review. The initial reviewing official shall normally be the supervisor above the unit involved or directly responsible for the operation, material, or persons involved in the accident. This official shall review the accident report, provide written concurrence or non-concurrence with the findings/recommendations, ensure that factual data are circulated within the unit, ensure recommendations which can be put into effect at the unit level are implemented, and forward the original through the designated chain of Command to the local Command safety manager.

b. Local Command Safety Manager review. The local Command Safety Manager shall ensure that the entire accident report is prepared per instructions, and accident data are analyzed for prevention purposes.

c. Local Commander. The local Commander shall provide written concurrence or non-concurrence for each finding and recommendation made by the accident investigator.

3-10. Accident Boards of Investigation (BOI). Guidance for USACE Accident BOI is provided at Appendix A. There are two types of accident BOI: Centralized Accident Investigation Board (CAI). A CAI is a BOI conducted by the CRSC. Installation-Level Investigation Board (IAI). IAI is a BOI conducted by USACE. Upon notification of a Class A or Class B accident, the Commander, CRSC will determine whether a CAI or IAI will be conducted.

3-11. Changes to Accident Reports and Request for Extension of Submission Time Limits.

a. A change to an accident report shall be submitted when:

(1) An event occurs that changes the classification of an accident (for example, from Class C to Class B, or Class B to Class A).

(2) Additional information is discovered that was not known when the initial report was submitted. Changes to reports shall not be submitted for changes in number of days lost or property damage estimates, except as indicated in 3-11.a (1) above.

b. When requesting a downgrade change (e.g., Class A to Class B) supporting documentation is required.

c. Requests for extension beyond the accident report due date or change in accident classification shall be made telephonically or via email to the USACE Loss Control Program Manager (202-761-8600).

3-12. Maintaining Accident Records. Accident report records required by AR 385-10 will be maintained by the CRSC at least 10 years. USACE Commands shall maintain accident report records required by ER 385-40 to include the current fiscal year and the previous 10 fiscal years, but at any rate based upon Army Records Information Management System (ARIMS) File Number 385 Series (10f1, 10d1 and 10j.)

3-13. Deviations. Occasionally, the safety accident reporting requirements of this regulation may be incompatible with mission accomplishment. In such cases, Commanders may request deviation from the specific requirements from the USACE Loss Control Program Manager (202-761-8600).

3-14. Accident Scene Preservation. USACE/contractor personnel who are first at the accident scene shall preserve the accident scene and secure/collect information required to properly conduct the accident investigation.

a. When the situation permits preservation of the accident scene, only those actions necessary for rescue or recovery of victims and the initial on-site investigation by emergency response personnel shall be allowed. Whenever possible, photographs of the location of victims should be made before the victims are moved. Access shall be restricted to those Commanders and personnel directly involved in investigating the accident. Before the arrival of the accident investigator/board at the accident site, responsible personnel should remove only those items of evidence which would be destroyed by time or the elements. During the on-site investigation, the safety investigator/board shall be accompanied by responsible personnel who know the nature and location of the evidence removed prior to the safety investigation. The investigator/board should also be assisted by personnel who directed the emergency response operations and who can discuss changes to the accident scene which occurred during the emergency response operation.

b. When the situation does not permit preservation of the accident scene, responsible personnel shall remove all items of evidence needed for the accident investigation. Photographs of items before they are collected shall be made whenever possible. All components, wreckage, and debris that must be moved shall be stored in a secure area and guarded until released by the investigator/board president. Personnel involved in the recovery operation and knowledgeable of the resulting damage shall be consulted during the accident investigator/board's preliminary inspection. The responsible personnel, wherever possible, shall ensure that photos are taken and a sketch of the scene is made with sufficient detail and measurements to allow a scale drawing to be made. All wreckage, damage, and ground markings incident to the accident shall be identified and photographed before measurement and cleanup of the accident scene. The sketch and photographs shall be provided to the investigator/board president as soon as possible after their arrival.

c. The accident investigator/board shall be allowed to inspect physical evidence collected by responsible personnel. The investigator/board president is responsible for ensuring that no one takes any action that would destroy the evidence or would compromise the legal chain of custody of those items.

3-15. Accident Scene Investigation. Procedures for accident scene investigation are contained in DA Pam 385-40 and CRSC CA-I Handbook, both of which are available on the CRSC web site.

3-16. Access to Information from Other Investigations. The accident investigator/board shall have access to all evidence, photographs, and witness statements collected by other

USACE investigators. The accident investigator/board shall also have access to all personnel and medical records of personnel involved in the accident and maintenance records on any equipment involved in the accident. If evidence is forwarded for laboratory analysis, the investigator/board president shall be provided a copy of the laboratory report. Whenever possible, emergency response or other personnel shall advise the investigator/board president of laboratory determinations which may be received from the laboratory by telephone. The investigator/board president may determine that additional information is necessary for the investigation. When this occurs, the investigator/board president shall request additional analysis by the laboratory. The results of the additional testing are considered common source factual data available for use by all investigators, unless it clearly shows investigator/board deliberative process.

3-17. Access to Information Collected by Accident Investigation Boards.

a. Other USACE-authorized investigators shall be given access to:

(1) Reports received pursuant to submission of equipment for teardown and analysis.

(2) Command-directed fitness-for-duty examinations.

(3) Official records on personnel and equipment involved.

(4) Photographs of the accident scene.

(5) Witness lists.

(6) Transcripts of relevant portions of intra-cockpit voice recordings.

b. Other investigators shall not be given access to:

(1) Witness statements taken by board members.

(2) Preliminary or final board findings and recommendations.

(3) Voice recordings of intra-cockpit communications without authorization of the Initial Denial Authority, Commander, CRSC.

c. For all classes of accidents, where it is applicable, the investigator/board president shall:

(1) Obtain the name and unit address of the legal (formerly known as "collateral") investigation officer or board president.

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(2) Provide the legal investigation officer or board president with all factual material requested.

3-18. Safeguarding Accident Information.

a. Safety accident investigation reports are official documents. They shall be used solely for accident prevention purposes. These reports and their attachments, or copies and extracts, shall not be enclosed in any other report or document unless the sole purpose of the other report or document is accident prevention. Common-source documents, photographs, and those documents (other than witness statements) containing purely factual information that are available to other USACE-authorized investigations are an exception to this rule.

b. Safety accident investigation reports and the privileged documents contained therein, may not be used as evidence or to obtain evidence in any disciplinary, administrative, or legal action such as the following:

(1) Determining or defending the determination of misconduct or line-of-duty status of USACE personnel.

(2) Flight evaluation boards or military occupational specialty (MOS) reclassification actions.

(3) Determining liability in claims for or against the Government.

(4) Determining pecuniary liability.

(5) Any other adverse personnel action.

3-19. Release of Information from Limited Use and General Use Safety Accident Investigation Reports. (See AR 385-10, paragraph 3-10) All requests under the provision of the Freedom of Information Act (FOIA) for information from, or copies of, safety accident investigation reports shall be forwarded to the local USACE command FOIA Office. The local FOIA Office notify the USACE FOIA Officer of the request and process requests pursuant to accepted FOIA regulations, policies and the procedures indicated herein.

a. Government Personnel and Government Property Accident Reports. USACE FOIA Officers will send all FOIA requests for information concerning Military personnel and Civilian employee class A, B, and C Army safety accident investigation reports directly to: U.S. Army Combat Readiness and Safety Center, ATTN: LEGAL/CSSC-ZJA, Fort Rucker, Alabama, 36362-5363. Only the CSSC-ZJA can authorize release of report information protected under FOIA.

(1) USACE FOIA Officers may respond directly to requesters for Class D and E accident reports subject to the requirements outlined in this section.

(2) Army accidents, for the purpose of this section, are defined in AR 385-10, section 3-3(a-d). USACE Contractor Employee and Property, and USACE Recreational Accident Reports. FOIA requests for reports involving USACE contractor employee and contractor property accidents and USACE recreational accidents shall be processed in the same manner as Army Class D and E accident reports by the local command FOIA office as follows.

(3) FOIA officers will follow the standard initial FOIA processing procedures to log in the FOIA request, respond to the requester, and obtain a copy of the accident investigation report. The report should be reviewed for releasability in coordination with the command Safety Officer. Privileged information in the accident reports, including opinions, analysis, conclusions, and recommendations, as well as personal information, will not be released. The privileged information is protected by FOIA Exemption 5, under the deliberative process privilege.

(4) Accident reports are prepared for and can only be used for accident prevention purposes; release of the privileged information could harm the integrity of the accident investigation report process. The reports derive conclusions and make recommendations to the Commander and Headquarters regarding potential causes of accidents and courses of action to deter like accidents. They are pre-decisional and prior to final adoption of prevention policies or remedies. Personal information in the reports is subject to Exemption 6 protection.

(5) FOIA Officers may release factual information in the report. If, however, the facts are inextricably intertwined with the privileged information, or the release of factual information would reveal the conclusions or recommendations or harm the deliberative process (by changing the way facts are gathered or written), they can be withheld. Since the deliberative process privilege does not generally apply to factual information, the factual portion of the report is usually released.

(6) FOIA Officers will prepare a recommended denial action for privileged and personal information that is being withheld. The recommended denial, along with the FOIA request, correspondence with the requester and complete and redacted versions of the accident report will be forwarded to CSSC-ZJA for an initial denial determination. CSSC-ZJA is the initial denial authority (IDA) for safety accident investigation reports. U.S. Army Combat Readiness Center, ATTN: LEGAL/CSSC-ZJA, Fort Rucker, Alabama, 36362-5363.

(7) If the FOIA Officer determines that privileged information in the accident report should be released, a justification and recommendation for release will be

forwarded to Headquarters Safety Office (CESO). Privileged information will not be released without CESO approval.

b. Requests for access to safety accident reports from other USACE staff or DoD organizations and commands will be processed according to AR 385-10, paragraph 3-29(g).

c. Requests for access to safety accident reports from non-DoD federal agencies will be processed according to AR 385-10, paragraph 3-29(e).

d. Subpoenas for the production safety accident reports will be coordinated between local Counsel Offices and CSSC-ZJA.

3-20. Legal Accident Investigations. (See AR 385-10, paragraph 3-10 c.) FOIA requests for legal accident investigation reports shall be processed by the local command FOIA office as follows.

a. Legal accident investigation reports are collateral investigation reports, sometimes done as an AR15-6 or AR 27-20 investigation, prepared to obtain and preserve evidence for use in subsequent administrative, disciplinary, or legal actions. They are not prepared for safety prevention purposes.

b. FOIA officers will follow the standard initial FOIA processing procedures to log in the FOIA request, retrieve the requested report and respond to the requester. The report should be reviewed for releasability in coordination with the responsible officials in the command and the command Safety Officer.

c. Privileged and personal information will normally be withheld under FOIA Exemption 5, deliberative process privilege, and Exemption 6, respectively. Factual information will normally be released. The local command FOIA Officer has the authority to release or deny the information, subject to coordination with command officials. If information is withheld, the designated local USACE IDA will issue the denial.

3-21. Injury and Accident Rates.

a. Civilian Employee/Contractor Days Away from Work Rate. The total number cases that resulted in days away from work (OSHA definition) for each 200,000 man-hours worked during the specific period of time. (I.e., for an annual rate – multiply the number accidents which resulted in days away from work by 200,000 then divide that number by the total hours worked during that year.)

b. Member of Recreating Public Fatality Rate. The total number of recreating public fatalities for each 1,000,000 visitor days during the specific period of time. (I.e.,



for an annual rate – multiply the number of public fatalities by 1,000,000 then divide that number by the total number of visitor days experienced during that year.)

c. Motor Vehicle Accident Frequency Rate. The total number of recordable motor vehicle accidents for each 1,000,000 miles driven during the specific period of time. (I.e., for an annual rate – multiply the number of recordable motor vehicle accidents by 1,000,000 then divide that number by the total number of miles driven during that year.)



## CHAPTER 4

### Log of Work-Related Injuries and Illnesses

#### 4-1. OSHA Logs.


a. Each USACE Command shall keep injury and illness records: the OSHA 300, “Log of Work-Related Injuries and Illnesses” and the annual OSHA 300A, “Summary of Work-Related Injuries and Illnesses”. The DA Form 285-AB-R is the equivalent to the OSHA 301 form. The Log must include injuries and illnesses to USACE employees as well as injuries and illnesses of Government direct contractor employees. Within seven calendar days of the time the fatality, injury, or illness occurs, USACE Commands must enter any case that is work-related, is a new case, and meets one or more of the recording criteria on the Log. The local Command Injury Compensation Program Administrator shall provide a copy of the OSHA 301 report generated when Civilian workers’ compensation claims are electronically generated in the DoD Civilian Personnel Management Service’s Electronic Data Entry (EDI) system.

b. If the outcome or extent of injury or illness changes after it has been recorded, draw a line through or delete the original entry. Then enter the revised information. The most serious outcome for each case must be entered.

c. After the end of each calendar year, each Command Safety Office shall review their Log to verify accuracy, summarize the 300 Log information on the OSHA 300A, “Summary of Work-Related Injuries and Illnesses”, and the senior management official shall certify and sign the summary for their establishment. This information must then be posted for three months, at each establishment from 1 February through 30 April. The USACE Command must keep the records for five years following the calendar year covered by them.

FOR THE COMMANDER:

6 Appendices  
(See Table of Contents)

  
STEPHEN L. HILL  
Colonel, Corps of Engineers  
Chief of Staff



## APPENDIX A

### Accident Boards of Investigation

A-1. Accident Board of Investigation (BOI). Except where specifically designated in this appendix, when the term BOI is used in this appendix it is referring to an Installation-Level Accident Investigation (IAI).

A-2. Purpose. This appendix provides guidance on appointing and conducting Accident Boards of Investigation and preparing Installation Accident Investigation (IAI) reports. By the proper use of this appendix, accident investigators will be able to conduct effective accident investigations promoting the best possible standards for the safety and health of USACE activities.

A-3. General Boards of Investigation. General Boards of Investigation are in-depth inquiries into and analyses of the events preceding, during, and immediately following the occurrence of a serious accident to determine the causes and contributing factors of the accident--the who, what, when, where, why, and how. By identifying and analyzing the causal and contributing factors of an accident we increase our knowledge of the unsafe and unhealthful conditions and practices which lead to accidents. This gives us the ability to identify and control similar hazards, prevent the occurrence of similar accidents, and improve the safety and health conditions and practices of the Corps. It is important to note that boards are not undertaken to assign blame or determine punitive actions for an accident. The use of Boards of Investigation is reserved for Class A or B accidents involving USACE personnel or property, USACE contractors directly supervised by USACE personnel (USACE Direct Contractors), or USACE contractor personnel or property when the contract provisions require compliance with USACE accident prevention requirements, which result in the following:

- a. fatal injury;
- b. permanent total disability;
- c. permanent partial disability;
- d. hospitalization of three or more people; or
- e. property damage of \$500,000 or more.

In addition, a Board of Investigation shall be conducted for:

f. fatalities and permanent disabilities of non-Army (public) personnel due to Army or contractor operations (on-site), or where the accident occurred on government property or the contractor site, or the accident involves a Corps employee motor vehicle accident; or

g. any accident which a Commander, at any level, determines that a board investigation is warranted due to the complexity of the accident or its potential for negative impact on USACE.

A-4. Appointing Authority.

a. The Director of Army Safety (DACS-SF) granted Accident Investigation Board appointing authority to the Chief of Engineers with permission to re-delegate that authority to subordinate commanders at the general officer level.

b. Division Commanders at the general officer (GO) level, including COL (P) Division Commanders, and acting Division Commanders shall appoint an accident investigation board, when a board is required. Accident investigation boards for all Centers and FOA shall be appointed by a Deputy Commanding General. Requests for appointment shall include a summary of the accident and recommendations for board members. All provisions of AR 385-10 including, but not limited to, confidentiality and release of information for accident prevention purposes continue to apply.

c. Boards shall be appointed in accordance with the following:

(1) For an accident occurring at a district or major subordinate Command, the board shall be appointed by the MSC Commander.

(2) For an accident occurring at a Center, the board shall be appointed by a Deputy Chief of Engineers.

(3) For an accident occurring during civil emergency response activities, the board shall be appointed by the Lead Division Commander assigned to the mission.

(4) For an accident occurring during military programs response activities, the board shall be appointed by the Deputy Commanding General for Military and International Operations.

d. When personnel or material involved in an accident are from differing USACE Commands, the decision of who will appoint the board will be made by the Commanders of the USACE Commands involved in the accident; if an agreement cannot be reached by these individuals, the decision will be made by the Deputy Commander, USACE.

e. When a serious accident occurs to an individual or a unit while in the area of another USACE Command, the Commander who would normally appoint the board may request that the Commander of the USACE Command in which the accident occurred appoint the board. Coordination for a transfer of authority should include specific agreement on funding the cost of the investigation.

f. With the exception of Centralized Accident Investigations, the USACE command which experiences the accident shall bear the cost of the accident BOI.

A-5. Responsibilities. In addition to the pertinent responsibilities in paragraph 6 of this regulation:

a. Commanders of USACE organizations that incur an accident requiring an accident BOI are responsible for:

(1) ensuring that the accident is investigated and analyzed to the extent needed to identify causal factors and systemic deficiencies and to develop countermeasures to prevent recurrence of similar accidents;

(2) ensuring that any intermediate Commander, his Safety and Occupational Health Office, and the Safety and Occupational Health Office, HQUSACE, are notified immediately but no later than 8 hours of its occurrence; and

(3) ensuring that an abstract report is completed for each accident BOI report and forwarded along with the BOI report, through the chain of Command, to Safety and Occupational Health Office, HQUSACE, via electronic mail within 45 days of the occurrence of the accident. The abstract report shall be transmitted in both hard copy and electronic format.

(4) ensuring that lessons learned are submitted electronically to the USACE Accident Lessons Learned data base. The template for the lessons learned shall be provided by the Safety and Occupational Health Office, HQUSACE.

(5) providing funds to cover the total cost of the investigation.

b. The President of the Board of Investigation is responsible for:

(1) the administration, supervision, and coordination of the entire investigative effort, ensuring that board members are provided the necessary resources to complete the investigation;

(2) ensuring that board members are provided an initial briefing;

(3) coordinating with the on-site POC (the government representative with supervision over the accident site) for investigation arrangements and administrative support;

(4) ensuring that room and transportation arrangements are made;

(5) providing liaison and information updates for the immediate and appointing Command;

(6) assisting board members as may be necessary;

(7) ensuring timely compliance with all reporting requirements;

(8) arranging administrative support for report preparation;

(9) briefing the immediate and appointing Commander of the investigation findings, analysis, and recommendations; and

(10) identifying and securing the assistance of subject matter experts such as professional investigators for crane or motor vehicle accidents, manufacturer's representatives, etc, when that assistance is deemed necessary by the Board.

c. Board members are responsible for:

(1) reviewing all briefing materials to become familiar with the purpose and responsibilities of, and the procedures to be used by, the board; and

(2) giving their full attention to the investigative efforts until the board is completed.

d. The Safety and Occupational Health advisor to the accident BOI is responsible for:

(1) providing guidance to the board president on the administration of the board; and

(2) providing technical safety and occupational health guidance.

e. The technical advisor from the element experiencing the accident is responsible for providing technical and procedural guidance on the elements operational procedures.

A-6. Initial Actions. When a serious accident occurs:

a. The government representative with supervision over the accident site shall:

(1) immediately secure the accident scene. When emergency response actions have been completed and any hazardous conditions have been controlled, the accident site shall be isolated and maintained in the same condition under which the accident occurred. In the event that it is impractical to preserve the accident scene, (e.g., the scene of a traffic accident), the government representative with supervision over the accident site shall ensure that the entire accident scene is photographed and that any evidence or wreckage removed from the site is identified, preserved in the condition in which it was found at the accident scene, and reported to the Board of Investigation;



(2) assist, as required, with emergency response activities;

(3) determine who, if anyone, witnessed the accident and obtain a preliminary statement of what happened. Witnesses shall be told the purpose of the statement (for accident prevention only, not to assign blame) and asked to provide a statement (preferably written) and the means of getting in touch with them. Preliminary statements should be obtained from individuals separately, not as a group, and preferably at or near the accident location;

(4) immediately notify the respective Commander and Safety and Occupational Health Office of the accident;

(5) obtain copies of information which may be required in the accident investigation such as SOPs, records of safety training or safety meetings, activity and job hazard analyses, project safety plans, design plans and specifications, inspection reports, equipment operating manuals and specifications, weather statements, etc; and

(6) assist the Board President in travel arrangements.

b. The Commander, upon first becoming aware of a serious accident that requires a Board of Investigation, shall:

(1) ensure preservation of the accident site;

(2) immediately notify, by telephone, any intermediate Commander;

(3) immediately notify CESO telephonically at (202) 761-8600, (202) 761-8566, or (202) 761-8567;

(4) as soon as reasonably possible but no later than 8 hours of the occurrence forward ROSA through chain of command (Division Office) to CESO and HQUOC;

(5) for USACE Military/Civilian Class A or B accidents, immediately notify the Commander, CRSC, telephonically at commercial (334) 255-2660/3410 or DSN 558-2660/3410; and

(6) for Civilian employee and Government direct contractor employees, notify within 8 hours, the Occupational Safety and Health Administration.

c. All notifications shall be made as soon as possible but no later than the suspense listed above, following the occurrence of the accident. As a minimum, notification shall include all data fields contained in DA Form 7306-R; Worksheet for Telephonic Notification of Ground Accident, included below.

<b>WORKSHEET FOR TELEPHONIC NOTIFICATION OF GROUND ACCIDENT</b> <small>For use of this form, see AR 385-40; the proponent agency is OCSA</small>							
Immediately notify USASC telephonically of all Class A and B accidents IAW AR 385-40, chapter 3. Phone numbers are: Commercial (205) 255-2660/4273/3410 or DSN 558-2660/4273/3410							
SHADED BLOCKS ARE FOR USASC USE ONLY		A. ASMIS CASE NUMBER		B. TIME AND DATE OPS RECEIVED THIS REPORT			
				a. Year	b. Month	c. Day	d. Time (local)
1. POINT OF CONTACT FOR ACCIDENT INFORMATION		A. Name					
b. Duty <input type="checkbox"/> Commander <input type="checkbox"/> Safety Officer <input type="checkbox"/> Other (Specify)			c. Phone DSN: - Commercial: ( ) - Number				
2. ACCIDENT CLASSIFICATION <input type="checkbox"/> A <input type="checkbox"/> B	3. TIME AND DATE OF ACCIDENT			4. PERIOD OF DAY	5. ON/OFF DUTY	6. TYPE OF EQUIPMENT/MATERIAL INVOLVED	
	a. Year	b. Month	c. Day	d. Time (local)	<input type="checkbox"/> Day <input type="checkbox"/> Night	<input type="checkbox"/> On-duty <input type="checkbox"/> Off-duty	
7. UNIT				8. MACOM		9. NIGHT VISION DEVICE IN USE <input type="checkbox"/> Yes <input type="checkbox"/> No	
10. EXACT ACCIDENT LOCATION							
10. ON-POST / OFF POST? <input type="checkbox"/> On-Post <input type="checkbox"/> Off-Post		11. MILITARY INSTALLATION NEAREST ACCIDENT SITE					
<i>CHECK "YES" or "NO" FOR QUESTIONS 13 THROUGH 17</i>				YES	NO	19 PERSONNEL INVOLVED	
13. EXPLOSIVES/HAZARDOUS/SENSITIVE MATERIALS INVOLVED						a. No. of Personnel by Rank/Category ____ Officer ____ WO ____ Enlisted ____ Army Civilian ____ Non- Army Civilian	
14. IF YES TO #13, ARE THEY SECURE?							
15. ACCIDENT SITE SECURED IAW DA PAM 385-40?						b. Total No. of Personnel ____ b. Highest Rank ____	
16. HAS ACCIDENT SCENE BEEN DISTURBED?							
17. IF YES TO #16, WERE PHOTOS ETC. MADE BEFORE DISTURBING THE SCENE?						20. INJURIES (Enter # of Each) ____ Fatalities ____ Non-Fatal Injuries	
18. WEATHER CONDITIONS							
21. ACCIDENT SYNOPSIS (What Happened)							
22. NEWS MEDIA AWARE OF ACCIDENT <input type="checkbox"/> Yes <input type="checkbox"/> No		23. NEAREST AIRFIELD		a. Nearest that can handle C-12 (4,000 ft. min.)			
				b. Nearest Commercial Airfield			
24. Who will Investigate?		a. Installation Level Investigation (IAI) Accident Board Appointed		<input type="checkbox"/> Yes <input type="checkbox"/> No	b. CAI Team Dispatched		<input type="checkbox"/> Yes <input type="checkbox"/> No Team:

DA FORM 7306-R, APR 94

Figure 1. DA Form 7306-R; Worksheet for Telephonic Notification of Ground Accident.

A-7. Forming a Board of Investigation. When it has been determined that a board is required to investigate a serious accident, the board shall be promptly appointed (within one calendar day of the receipt of notice of the accident) and prompt initiation of investigation is critical for an accurate, effective accident analysis.

a. The board shall consist of at least three voting members: in addition, non-voting advisors shall be appointed to facilitate the investigation. The president shall be a field grade officer (Major or higher) or a DA civilian in the grade GS-13 (or NSPS equivalent) or higher. The selection of board members and advisors shall be based on:

(1) their understanding of the circumstances and events surrounding the accident;

(2) their impartiality to the subject and outcome of the investigation;

(3) their willingness to lend their assistance to the accident investigation and analysis process; and

(4) their ability to analyze accident causation and prescribe corrective measures to preclude future occurrences of similar accidents.

b. A representative of the Safety and Occupational Health Office shall serve as technical advisor to the board on accident investigation and reporting and technical safety requirements. Representatives of the SOHO of the Command which experienced the accident shall not serve as a voting member of the BOI.

c. A representative of the organization experiencing the accident shall serve as a technical advisor to the board.

d. Voting members shall be screened to ensure they do not have an interest in the accident that may bias the outcome of the investigation.

e. Personnel appointed as advisors are non-voting participants.

f. Both members and advisors shall be appointed on orders (see example appointment letter at the end of this appendix). The orders shall specify that:

(1) board members are to be relieved of their regular duties (so that they may give priority to the accident investigation) until such time as the board report is submitted to the appointing Commander for final approval.

(2) board members and advisors are responsible for following the provisions of all applicable regulations dealing with the safeguarding of limited use accident investigation reports.

NOTE: It is important that the board members be independent; thus it is not appropriate to assign supervisors and subordinates to the board.

g. Upon appointment, the board shall receive an initial briefing, to be conducted by the Safety and Occupational Health Office. The purpose of the briefing is to instruct board members on their duties and responsibilities and provide information on the procedures for conducting the board. Initial board briefings should follow the outline presented below.

A-8. Outline for Initial Board Briefing.

I. Introductions

II. Provide details of accident

III. Discuss purpose of board

Reiterate that board is for accident prevention purposes only

Discuss composition of board

Explain the authority for the board

Discuss procedures to be followed in investigation, analysis, and report preparation

Discuss release of board members from regular duties

Discuss expected duration of investigation, analysis, and report preparation

Discuss duties and responsibilities of members and advisors

IV. Provide copies of accident reporting and investigation requirements (AR 385-10, DA Pam 385-40, this regulation, and any locally-developed requirements or guidance)

V. Review fundamentals of accident investigation and analysis techniques

VI. Discuss travel requirements (preparation/pick-up of travel orders and advances; location, time, and means of departure for accident site; hotel arrangements; rental car arrangements)

VII. Discuss special clothing and personal protective equipment requirements

VIII. Discuss preliminary return transportation arrangements (subject to confirmation)

IX. Decide upon and arrange for equipment required for the investigation, such as: forms; sketch pads; flashlight; camera (digital, and/or video) and batteries, appropriate memory/recording media, battery chargers, cables, etc.; tape recording equipment and tapes; measuring or monitoring equipment; other equipment which may be needed.

X. Decide upon and arrange for manuals (safety and operating) and industry standards required for the investigation. Introduce the board to any on-site personnel who were associated with the accident or who will be providing support for the investigation;

(a) brief the board on the availability of administrative support;

(b) brief the board on the actions which have been taken to secure the accident site until the board has approved its release;

(c) provide the board background information on activities leading up to the accident, including personnel and equipment involved, weather conditions, and any reports, photos, or sketches already on hand (emergency response crew reports, police or fire reports, OSHA investigation reports, etc.); and

(d) provide the board with preliminary witness statements.

#### A-9. Conducting the Investigation.

a. **Step 1.** Upon arrival at the accident location, the board shall meet with the on-site POC for pre-investigative briefings and, if required, discuss arrangements for on-site administrative support.

(1) The board president should introduce the board to the on-site POC and explain its purpose and authority; discuss the anticipated investigation procedures; and request records and background information required for the investigation and any on-site support needs.

(2) The on-site POC should

(a) introduce the board to any on-site personnel who were associated with the accident or who will be providing support for the investigation;

(b) brief the board on the availability of administrative support;

(c) brief the board on the actions which have been taken to secure the accident site until the board has approved its release;

(d) provide the board the background information on activities leading up to the accident, including personnel and equipment involved, weather conditions, and any reports, photos, or sketches already on hand (emergency response crew reports, police or fire reports, OSHA investigation reports, etc.); and

(e) provide the board with preliminary witness statements.

b. **Step 2.** Upon completion of the pre-investigative briefings, the on-site POC shall escort the board to the accident site.

(1) The on-site POC should introduce the board to other personnel who will be involved in the accident investigation (e.g., contractor or local emergency response personnel who will be providing information to assist in the investigation).

(2) The board shall begin their preliminary on-site investigation to obtain as thorough a familiarity with the circumstances leading up to the accident as is possible and to provide a foundation for developing accident causation scenarios. Project/activity personnel should describe the accident scenario and the board members shall begin formulation of accident causation. Photographs shall be taken and measurements made to assist in determination of causation. The board shall determine if forensic support (such as equipment inspection, materials testing, medical examination, etc.) is required.

c. **Step 3.** Upon completion of the initial on-site investigation, the board shall convene to develop accident scenarios. The board shall conduct a preliminary analysis of accident causation and develop an outline for further inquiry to confirm their theory of causation and to develop additional information which is needed to complete the causation theory. During this phase of the investigation the board should keep the following questions in mind:

(1) Was safety and health included in the planning for this operation? Was a hazard analysis prepared and risk assessment completed for this activity; did it address the applicable hazards and establish effective control measures? Is it documented? How frequently were these analyses/assessments reviewed/updated?

(2) Were personnel properly trained? Is the training documented? Were individuals knowledgeable of the hazards associated with this activity and their controls?

(3) What hazard controls were in place? What hazard controls were missing?

(4) Were safety requirements communicated among management, supervisors, and workers?

(5) What equipment was required for this job activity? Was the equipment tested, inspected, properly used, and maintained? What about safety equipment?

(6) What was the policy towards safety and health?

(7) Were the personnel involved in the accident incapacitated in any way?

(8) What were the environmental factors in the accident?

(9) Were job activities supervised? By whom?

(10) Was there a history of incidents similar to those which led to this accident? If so, how were they handled? Were they documented?

(11) Were there any changes in job practices, conditions, or policies at the time of the accident?

d. **Step 4.** Witnesses to the accident and project/activity personnel are interviewed to obtain any information they may have on the accident and to attempt to answer any questions that arise during the investigation and analysis processes. Witness and project/activity personnel interviews provide information which is essential to developing the accident scenario and determining events leading up to the accident. It is important that witnesses and project/activity personnel be interviewed as soon as possible. Witnesses and project/activity personnel should be interviewed one at a time; interview techniques are contained in DA Pam 385-40.

(1) The board president should introduce the board to the witness or project/activity person and explain the purpose and procedure for the Board of Investigation.

(2) The witness or project/activity person should be

(a) informed that this is an informal investigation;

(b) informed that although the Corps is not allowed to promise witnesses and project/activity personnel that the information they provide will be kept confidential, the Corps will take all available means to protect the identity of witnesses and project/activity personnel and will release only factual - not theorized or conjectured - information; and

(c) asked their occupation, their relation to personnel and equipment involved in the accident, their experience in the activity in progress at the time of the accident, and their location and activity at the time of the accident. The witnesses or project/activity person should be asked to tell everything they remember about the accident (particularly a description of the events leading up to, during, and following the accident) and to give their opinion of the cause of the accident, after which the board members should direct any questions they may have to the individual.

NOTE: Steps 2-4 shall be repeated as necessary to fully develop the accident causation.

e. **Step 5.** When the board is satisfied with their investigation of the on-site accident conditions and have no further need to secure the accident site, the president shall advise the on-site POC that the board has no further need for securing the site. If all other parties concur (Federal and state OSHA and base officials, if involved, other investigating bodies) the accident site shall be released.

A-10. Analysis of Findings.

a. When the board is satisfied with the accident information it has collected, the information is analyzed to determine the cause of the accident. The board president is responsible for supervision of the analysis.

b. Investigation, analysis, and preparation of board reports shall involve only those members and advisors, including their clerical support, specified in the board appointment orders. The report shall not be staffed through or reviewed by other persons or Corps elements outside the safety and occupational health and Command channels.

c. There are effective methods for conducting an accident analyses provided in DA Pam 385-40. The following steps are necessary for a thorough, effective accident analysis:

(1) The board develops all plausible accident scenarios. The events preceding, occurring during, and immediately following the accident are traced (and the steps laid out) to ensure an understanding of what occurred - and what was required but did not occur.

(2) The board firmly establishes the personnel, materiel and equipment, site conditions, and procedures involved with the accident.

(3) All abnormalities and safety deficiencies discovered during the investigative phase are listed. Every abnormality, regardless of perceived individual importance, must be brought to the attention of the entire board during their deliberations.



(4) Safety deficiencies and abnormalities are tied to the events identified in A-10.c(1) to establish cause-and-effect relationships.

(5) The cause-and-effect relationships established in A-10.c(4) are classified as either the direct cause, an indirect cause, or a contributing factor of the accident.

(a) Direct cause: That primary factor which brought about the accident.

(b) Indirect causes: Those factors which allowed the occurrence of the direct cause and led to, but did not directly initiate, the occurrence of the accident.

(c) Contributing factors: Factors which contributed to the occurrence or result of the accident (e.g., factors which exacerbated the degree of injury resulting from the accident) but were not direct or indirect causes.

#### A-11. Development of Corrective Measures.

a. A corrective measure shall be developed for the direct and for every indirect cause of the accident. To be effective, corrective measures must:

(1) Be directed at all levels, i.e., workers, supervisors, and management;

(2) Consider procedural, personnel, equipment, and environmental deficiencies;  
and

(3) Be considered at all phases of the accident, that is, prior to (job planning, training), immediately preceding, during, and immediately following the accident (emergency response).

(4) Institutionalize changes in policy, regulations and/or procedures for the Command and make recommendations for changes in policy, regulations or EM 385-1-1, and procedures for the Corps.

b. There is a precedence to be followed in selecting hazard control measures. This is because some control techniques are more effective or more reliable than others and because some techniques are not appropriate for certain hazards. The USACE hazard control precedence is as follows:

(1) The first precedence is to design to remove or minimize the hazard (including substituting a non-hazardous object for a hazardous object).

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(2) The second precedence is to provide safety equipment (physical barriers) to protect against the hazard.

(3) The third precedence is to provide devices to warn of the hazard.

(4) The fourth precedence is to control the hazard through the use of procedures and training.

(5) The fifth precedence is for the Commander to accept the residual hazards (risk) and document this risk acceptance.

NOTE: In many instances more than one hazard control procedure will be implemented. For example, when it is infeasible to implement a design to control a hazard, a combination of safety equipment, warning devices, and training is often used.

A-12. Board Report Format and Contents.

a. The purpose of the Board of Investigation report is to describe the accident scenario; explain the causes (direct and indirect) of, and the factors contributing to, the accident; and recommend corrective actions to control similar hazards and preclude future occurrences of similar accidents. For specific guidance on the development of each component of the report see DA Pam 385-40.

b. Board reports shall be developed and contain the following information:

(1) DA Form 285-A-R. Index A.

TAB 1 - Serious Incident/Casualty Report

TAB 2 - Copy of Orders Appointing Investigating Board

TAB 3 - Map of Accident Site

TAB 4 - Diagrams and/or Photographs

TAB 5 - Certificate of Damage/ECOD

TAB 6 - Copy of Deficiency Reports

TAB 7 - Copy of Directives, Regulations, Etc.

TAB 8 - Special Technical Reports and Laboratory Analysis

TAB 9 - Copy of Uncorrected Fault Record

TAB 10 - Copy of Equipment Modification Record (DA Form 2408-5)

TAB 11 - Weather Data

TAB 12 - Medical Data (Autopsy, Toxicology, AFIP, etc.)

TAB 13 - Other (Specify) to include Abstract Report

(2) DA Form 285-B-R. Index B.

TAB A - Statement of Reviewing Officials (DA Form 285-O)

TAB B - U.S. Army Accident Report (DA Form 285)

TAB C - Findings and Recommendations

TAB D - Narrative of Accident

TAB E - Summary of Witness Interviews (DA Form 285-W)

c. The accident report form (DA Form 285 for USACE accidents or ENG 3394 for contractor accidents) shall be completed by the accident investigation board in accordance with this regulation.

d. Testimony of witnesses and project/activity personnel shall be summarized; witnesses and project/activity personnel shall be identified only by job title or assignment. Verbatim, signed, or personally identifying statements shall not be included in the board reports or in supporting documents or files.

e. The report should include photographs, sketches, diagrams, and other exhibits such as inspection reports, accident prevention programs, training documents, operation manuals, etc., which are necessary to present a clear description of the accident and corrective measures.

A-13. Abstract Report. The abstract shall be used to disseminate information on the causes of the accident and the recommendations for precluding future occurrences of similar accidents. The abstract shall be furnished with the BOI report by the Command experiencing the accident through the MSC to CESO within 45 days of the accident occurrence. The abstract shall include only factual information. The abstract of the accident shall be in the following written format for distribution to the Command and in the electronic format provided by CESO for inclusion in the accident Lessons Learned Database:

a. Type of location (e.g., construction site - trench; maintenance yard - flammable storage area; highway - four lane);

b. Date and time of the accident;

c. Agent directly causing the accident (e.g., trench, flammable liquid, passenger vehicle);

d. Personnel and equipment categories (i.e., Army, contractor, other);

e. Description of the accident;

- f. Nature and number of injuries and property damage;
- g. Causes, direct and indirect, of the accident;
- h. Remarks;
- i. Recommendations for corrective actions to preclude future occurrences of similar accidents (one for each direct and indirect cause).

In writing abstracts for BOI reports the identity of the accident shall not be revealed: individuals shall be referred to by job titles or assignments, not their names, and locations shall be listed generically. Statements of conclusions on accident causation or recommendations for corrective actions shall be prefaced by the following: "It is the opinion of the board that the following direct and indirect factors led to the occurrence of this accident," or, "It is the opinion of the board that implementation of the following corrective actions will reduce the probability of future occurrences of similar accidents."

A-14. Enterprise Lessons Learned. The Abstract Summary shall be entered by the Command which experienced the accident into the Enterprise Lessons Learned database of the USACE Knowledge Management Environment.

- a. The following are the steps to reach the Lessons Learned database.
  - (1) Go to <https://kme.usace.army.mil/Pages/Default.aspx>
  - (2) Select Enterprise Initiatives.
  - (3) Select Enterprise Lessons Learned.
  - (4) Select CoP – Safety and Occupational Health.
  - (5) Select Submit a Lesson.
- b. At the Lessons Learned Master List: New Item, complete each of the data fields as follows:
  - (1) Attach the Abstract Summary to the list
  - (2) In the Title field, enter the type of Accident i.e. Contractor Fatality, Contractor Heavy Equipment Property Damage Accident, Fatal Motor Vehicle Accident, etc.
  - (3) In the Date field, enter the date you enter the lesson in the database

- (4) In the Description of Lesson Learned data field, enter the following:
- (a) Type of location (e.g., construction site - trench; maintenance yard - flammable storage area; highway - four lane,
  - (b) Agent directly causing the accident (e.g., trench, flammable liquid, passenger vehicle),
  - (c) Personnel and equipment categories (i.e., Army, contractor, other),
  - (d) Description of the accident,
  - (e) Nature and number of injuries and property damage, and
  - (f) The direct and indirect causes of the accident.
- (5) In the recommended actions data field, enter the corrective actions to preclude future occurrences of similar accidents (one for each direct and indirect cause).
- (6) In the Secondary Communities of Practice data field, enter those communities of Practice which would have interest in the accident lessons learned; i.e. E & C, Civil Works, Contracting, etc.
- (7) Leave the Division, District, and State data fields blank.
- (8) In the Suggested Breath of Applicability data field, enter any factors which may limit the lesson's applicability.
- (9) In the Key Words data field, enter all key words for the accident such as the examples provided on the form on Page A-19.
- (10) In the Safety and Occupational Health Sub-CoP data field, select the Sub-CoP most closely related to the accident.
- (11) In the Lesson Group, Cause, Classification, Nature of Injury, Activity, Equipment, Safety Equipment, Type and Source of Injury data fields, select the drop down menu item for each data field which most closely matches the circumstances of the accident.
- c. Only factual information shall be entered into the lessons learned data base and the identity of the accident shall not be revealed: individuals shall be referred to by job titles or assignments, not their names, and locations shall be listed generically. Statements of conclusions on accident causation or recommendations for corrective

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actions shall be prefaced by the following: "It is the opinion of the board that the following direct and indirect factors led to the occurrence of this accident," or, "It is the opinion of the board that implementation of the following corrective actions will reduce the probability of future occurrences of similar accidents."



USACE Enterprise Lessons Learned > Lessons Learned Master List > New Item  
Lessons Learned Master List : New Item

<input type="button" value="Attach File"/>   <input type="button" value="Spelling..."/> <span style="float: right;">* indicates a required field</span>	
Title: *	
Date	3/23/2009
Description of Lesson Learned *	<div style="border: 1px solid black; padding: 2px;"> </div>
Recommended Action(s)	<div style="border: 1px solid black; padding: 2px;"> </div>
Secondary Communities of Practice	<div style="border: 1px solid black; padding: 2px;"> <ul style="list-style-type: none"> <li><input type="checkbox"/> Civil Works Planning at</li> <li><input type="checkbox"/> Contracting</li> <li><input type="checkbox"/> Corporate Information</li> <li><input type="checkbox"/> COS-Fort Worth</li> <li><input type="checkbox"/> COS-Honolulu</li> <li><input type="checkbox"/> COS-Huntsville</li> <li><input type="checkbox"/> COS-Louisville</li> <li><input type="checkbox"/> COS-Mobile</li> </ul> </div>
Division	(None)
District	
State	
Suggested Breadth of Applicability	Are there factors that limit this lesson's applicability? (e.g. region, climate, etc)
Key Words	Enter any key words that will help make this lesson more searchable. (e.g. dam lock, laboratory, flood plain, bridge)
Safety and Occupational Health Sub-CoP	Civil Disaster and Military Contingency
Lesson Group	
Cause	
Classifications	
Nature of Injury	
Activity	
Equipment	
Safety Equipment	
Type of Injury	
Source of Injury	

A-15. Report Submission and Follow-up.

a. Centralized Accident Investigations (CAI) Board Reports (Prepared by CRSC). The original and one copy of the report shall be forwarded to the MSC or Center Command experiencing the accident; another copy shall be forwarded directly to HQUSACE, Attn: CESO. Commanders shall review the original report, concur or non-concur in writing, and return the report through channels to the HQUSACE (CESO). The CESO shall ensure the original copy of the report is returned to CRSC within 90 calendar days from the date of the CRSC letter of transmittal.

b. Installation Accident Investigation (IAI) Board Reports (Prepared by USACE). The original and two hard copies bound in 3-ring binders, and 2 electronic copies of the IAI report and supporting documents shall be forwarded by the BOI to the Command establishing the IAI within 30 days of the accident. The Command establishing the BOI shall forward the original, one hard copy, and 1 electronic copy of the IAI report and supporting documents within 45 days of the accident through HQUSACE, ATTN: CESO (Loss Control Program Manager), 441 G Street NW, Washington DC 20314-1000.

(1) Copies shall be retained by Safety Office of the Command experiencing the accident, and the appointing authority's Safety Office, and CESO. Copies of the report shall not be shared with or retained by any other office without the approval of CESO.

(2) The BOI report shall include the DA Form 285 accident investigation report for Military or Civilian accidents or ENG Form 3394 Accident Investigation Report or FAIR for contractor accidents until ASMIS is activated at which time the accident report will be printed from the system.

(3) A letter of transmittal, signed by the Commander of the USACE Command incurring the accident, shall be forwarded with the report to the Commander appointing the board. The letter of transmittal shall include: the Commander's concurrence or non-concurrence, and an implementation plan for corrective actions taken or proposed to satisfy the board recommendations. The implementation plan shall state how, when, and by whom the corrective actions were/will be implemented and state any recommendations for additional actions by higher headquarters or other agencies.

(4) A letter of transmittal, signed by the Commander who appointed the board, shall be forwarded with the report to HQUSACE indicating the Commander's concurrence or non-concurrence with the board findings and recommendations, noting any omissions, deficiencies, or inaccuracies in the report package, as well as the means for their resolution.

(5) The board package shall be forwarded to CESO, no later than 45 days following the occurrence of the accident.



(6) For contractor accidents, the recommendations of the board shall be forwarded by the contracting officer or his representative to the contractor for implementation. The contractor shall be given a suspense date for complete implementation of the recommendations and shall be required to formally notify (in writing) the Commander how and when implementation is completed.

c. For all board reports, the Commander of the USACE Command incurring the accident shall submit to the Commander at the next higher level and CESO, no later than three months following submission of the report, a letter detailing the means used to implement the recommendations and/or the status of those yet to be fully implemented.

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**DEPARTMENT OF THE ARMY**  
**COMMAND LETTERHEAD**

(Command Standing BOI) (385)

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Appointment of Special Board of Investigation for (Name Accident) (accident date)

1. References.
  - a. AR 385-10
  - b. DA Pam 385-40
  - c. ER 385-40

2. Under the provisions of the above listed references, I confirm the appointment of the following individuals to an accident board of investigation. The following Board, as appointed, consists of members as follows in the positions indicated:

AUTHORITY: AR 385-10.

NAME OF THE BOARD:

MEMBERS:

Name, Command and Office symbol, Board President

Name, Command and Office symbol, Board Member

Name, Command and Office symbol, Board Member

ADVISORS:

Name, Command and Office symbol, Safety Advisor

Name(s), Command and Office symbol, Technical Advisor(s)

EFFECTIVE DATE:

3. The purpose of this board is to gather and evaluate information to determine the cause of the accident which resulted in a Class XX accident. The accident occurred (date), at (location) being administered by the (Command). The board will develop recommendations for the prevention of future occurrences of similar accidents, and will prepare a report of their investigation, analysis, and recommendations within 30 days.

4. The board president and members shall be released from all other duties for full-time participation in this investigation and will not be removed from this detail without my approval. Board members are responsible for following the provisions of references listed above, dealing with the safeguarding of Limited Use Accident Investigation Reports.

5. The report of this investigation will be provided to CESO within 45 days of the accident. I will expect a briefing by the (Command which experienced accident) no later than 30 days after the completion of the report.

Appointing Commander Signature Block

DISTRIBUTION:

BOI Members

CESO

CEXXX-SO (Experiencing Safety Office)

CEXXX-SO (Appointing Safety Office)

Figure 2 - Example of Board Appointment Orders

## APPENDIX B

## Member of the Recreating Public Accidents

B-1. Reporting Public Accidents. Public accidents shall be reported and recorded as follows:

a. Geographic limits for reporting/recording. USACE owned or operated areas where CFR Title 36, Chapter III, Part 327, "Parks, Forests, and Public Property" is applicable. This includes:

(1) The water areas of any water resources development project administered by the Chief of Engineers and authorized under CFR Title 36 without regard to ownership of underlying land.

(2) All lands owned in fee by the Federal Government and administered by USACE.

(3) All facilities therein of any such water resources project, including state parks, marinas, etc.

b. Reportability. A reportable public accident is one that is investigated for the gathering of information, analyzing trends and the sharing of lessons learned but is not "charged" against the District having the accident. Reportable non-recordable accidents are not required to be forwarded beyond the District. The reportability of public accidents is as follows:

(1) Accidents resulting in fatal injury to recreation visitors at USACE owned or operated property or facilities must be reported.

(2) Any accident, caused by USACE operations resulting in injury to recreation or non-recreation visitors at USACE owned or operated property or facilities must be reported. For example:

(a) a USACE employee, when operating a motor vehicle or other equipment strikes and injures a visitor

(b) a member of the public is injured as a result of on-going project maintenance or construction

(c) a member of the public is injured because project personnel failed to reset a buoy which had moved off station

(3) Non-fatal or serious injuries to recreational and non-recreational visitors at USACE owned or operated property or facilities (e.g., cyclist injured on bike path) may, at the discretion of the FOA Commander, be reported if such reporting would be of benefit in accident trend analysis or result in improvements to the facility's design safety.

(4) Incidents of criminal acts or suspicious activity (e.g., murder, suicide, assault, vandalism, terrorist activity) not involving a Government employee shall be reported through security and law enforcement, not through safety and occupational health channels.

c. Recordability. Those accidents which result in fatal injury to recreation visitors at USACE owned or operated property or facilities are required to be recorded in the USACE accident reporting system as a public recreation accident. A preliminary accident notification (PAN) shall be initiated in ENGLink by project personnel as soon as reasonably possible, an accident investigation conducted, and an ENG Form 3394 (or Formal Accident investigation report when ASMIS is activated) completed and forwarded in a timely manner but no later than 7 days through the chain of Command to the local Command Safety and Occupational Health Office. A decision tree for recordable public accidents is attached for reference at Appendix D.

B-2. Examples of reportable non-recordable public visitor accidents. Examples are:

a. Accidents resulting in fatal injuries to non-recreational visitors at USACE owned or operated property or facilities (e.g., driver of vehicle proceeding through Corps property on a public road is injured when vehicle ran off road and into ditch during heavy rainstorm) are not recordable but may be reported

b. Public visitor fatalities resulting from acts of God such as lightning strikes are reportable but not recordable.

c. Public visitor deaths resulting from natural causes such as heart attacks are reportable but not recordable. (If the heart attack causes the person to fall into the lake and they drown, then the accident is recordable.)

B-3. Recreational Visitor. A recreational visitor is a member of the public present at a USACE owned or operated area and engaged in or intending to engage in any recreation activity commonly pursued at the USACE area such as swimming, boating, picnicking, camping, sightseeing, hunting, fishing, and hiking.

The source of the public visitation data is the Operations and Maintenance Business Information Link (OMBIL); <https://ombil.usace.army.mil/>

B-4. Public Fatality Rate. The public fatality rate is the number of public fatalities for each 1,000,000 visitor-days of exposure during a specified period. Only visitation to areas covered under Title 36 jurisdiction shall be considered visitation exposure. Any deaths occurring to members of the public while they are recreating at USACE water resource development projects as defined by Title 36, Chapter III Part 327 shall be counted:

$$\text{Fatality Rate} = [\text{Number of Public Fatalities} \times 1,000,000] / \text{Visitor-Days}$$

$$\text{Note: Visitor Days} = \text{Number of visitor hours} / 12$$

The following sample worksheet is provided for initial gathering of accident data.

**Initial Notification of Public Recreation Accident Work Sheet**

At an accident scene in a response mode, it is difficult to mentally recall the various data necessary to complete an initial notification and initiate an accident report. This worksheet is provided as a field tool to assist personnel to thoroughly document an accident.

Project Name: \_\_\_\_\_

Date of Accident: \_\_\_\_\_ Time of Accident: \_\_\_\_\_

**Location and Incident Information**

Location of Accident: \_\_\_\_\_

Inside Public Use Area: Yes/No      Fee Area: Yes/No      Inside a designated Swimming Area: Yes/No

Outgranted Area: Yes/No

Body Recovered: Yes/No      Alcohol Involved: Yes/No      PFD Available: Yes/No      PFD Worn: Yes/No

Property Involved: \_\_\_\_\_

Damage Estimate: \_\_\_\_\_

**Activity At Time of Accident**

**Water Related Recreation**

- Sailing
- Boating-powered
- Boating-unpowered
- Water Skiing
- Fishing from boat
- Fishing from bank/dock/pier
- Fishing while wading
- Swimming/supervised area
- Swimming/designated area
- Swimming/other area
- Underwater activities (scuba)
- Wading
- Attempted rescue
- Hunting from boat
- Other water related

**Non-Water Related Recreation**

- Hiking and walking
- Climbing
- Camping/picnicing authorized area
- Camping/picnicing unauthorized area
- Guided tour
- Hunting
- Playground equipment
- Sports/summer (baseball/football etc)
- Sports/winter (skiing, sledding, etc)
- Cycling (bicycle, motorcycle, scooter)
- Gliding
- Parachuting
- Other non-water related

**Other Activities**

- Unlawful acts (fights, vandalism, riots, etc.)
- Food Preparation/serving
- Food Consumption
- Housekeeping
- Sleeping
- Pedestrian struck by vehicle
- Pedestrian other acts
- Suicide
- "Other" activities

**Subject Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Age: \_\_\_\_\_       Child     Teen     Adult      DOB: \_\_\_\_\_

Race: \_\_\_\_\_      Gender: Male/Female

Nature of Injury (fracture, drowning, etc) \_\_\_\_\_      Body Part(s) Affected \_\_\_\_\_

Type of Injury (fall, struck, contacted, etc) \_\_\_\_\_      Source of Injury (walking surface, vehicle, etc) \_\_\_\_\_

Extent of Injury (fatality, disability, serious injury, etc) \_\_\_\_\_

Primary Language Spoken: \_\_\_\_\_      English Literate: Yes/No

**Incident Description:**

(Continue description on reverse side as needed)

Person Providing Information: \_\_\_\_\_      Title: \_\_\_\_\_

Agency: \_\_\_\_\_      Phone Number: \_\_\_\_\_

USACE Employee Filing Report: \_\_\_\_\_      Title: \_\_\_\_\_

Report Date: \_\_\_\_\_

Figure 3. Public Recreation Accident Worksheet (Front)

**Nature of Injury**

Permanent Disability	Drowning	Traumatic Respiratory (Carbon Monoxide)
Amputation	Fracture	Traumatic Injury Other(list)
Concussion	Laceration/Cut requiring stitches	
Dislocation of joint		

**Type of Injury**

Struck by/against	Caught on/in/between	Stung/bit by	Exposed
Fell/slipped/tripped	Punctured/lacerated	Contact with/by	Inhaled

**Severity of Injury**

Fatality  
 Permanent Disability  
 Other Serious(List)

**Source of Injury**

Building or other Area	Fire	Bicycle/Other non-motorized vehicle	Human (Violence)
Walking surface	Water	Carbon Monoxide	Diving Equipment
Electricity	Mechanical Equipment	Inanimate Object	Parachute
Temperature Extreme	Motor Vehicle/Cycle	Animal Insect	
Weather	Boat		

**Body Parts**

Arm or Wrist	Brain	Face	Vertebrae
Breast	Cranial Bones	Scalp	Trunk Bones other
Testicle	Teeth	Knee	Shoulder
Abdomen	Jaw	Leg	Lung
Chest	Throat/Larynx	Hip	Kidney
Lower Back	Mouth	Ankle	Heart
Penis	Nose	Buttock	Liver
Side	Tongue	Hand	Reproductive Organs
Upper Back	Head Other External	Feet	Stomach
Waist	Elbow	Collar Bone	Intestines
Trunk Other	Finger	Shoulder Blade	Trunk/internal
Ear	Thumb	Rib	
Eye	Toe	Sternum	

**Definitions of Serious Injuries**

Permanent Total Disability – Any non-fatal injury or illness that, in the opinion of competent medical authority, permanently and totally incapacitates a person to the extent that he or she cannot follow any gainful employment. (The loss of use of both hands, feet, eyes, or any combination thereof s a result of a single accident will be considered as permanent total disability.)

Permanent Partial Disability – Any injury or illness that does not result in death or permanent total disability but, in the opinion of competent medical authority, results in the loss or permanent impairment of any part of the body, with the following exceptions: teeth, finger/toenails, loss of the tip of fingers or toe without bone involvement, inguinal hernia if it is repaired, disfigurement, sprains or strains that do not cause permanent limitation of motion.

Other Serious Injury – Injury that has resulted or may result in an amputation, concussion, dislocation of joint, fracture, laceration/cut serious enough to require stitches, traumatic respiratory impairment (carbon monoxide), near-drowning and other injuries of similar severity.

Reverse

Figure 3. Public Recreation Accident Worksheet (Reverse)





## APPENDIX C

## OSHA Recordkeeping Requirements

C-1. Summary. OSHA requires Federal agency compliance with the accident recordkeeping requirements contained in 29 CFR 1904. Provisions of 29 CFR 1904 are summarized below as they relate to the DA.

C-2. Training. 29 CFR 1904.35 requires training for all Department of the Army Civilian (DAC) employees on the agency's occupational safety and health program, with emphasis on employee rights and responsibilities which includes how and when to report work related injuries and illnesses.

C-3. Work-Relationship.

a. In accordance with 29 CFR 1904.5(a) Commands must consider an injury or illness to be work-related if an event or exposure in the work environment either caused or contributed to the resulting condition. Work-relatedness is presumed for injuries and illnesses resulting from events or exposures occurring in the work environment. Under this language, a case is presumed work-related if, and only if, an event or exposure in the work environment is a discernable cause of the injury or illness or of a significant aggravation to a pre-existing condition. The work event or exposure need only be one of the discernable causes; it need not be the sole or predominant cause.

b. A case is not recordable if it involves signs or symptoms that surface at work but result solely from a non-work-related event or exposure that occurs outside of the work environment. Regardless of where signs or symptoms surface, a case is recordable only if a work event or exposure is a discernable cause of the injury or illness or of a significant aggravation to a pre-existing condition.

c. If it is not obvious whether the precipitating event or exposure occurred in the work environment or elsewhere, Commands must evaluate the employee's work duties and environment to decide whether or not one or more events or exposures in the work environment caused or contributed to the resulting condition or significantly aggravated a pre-existing condition. This means that the Command must make a determination whether it is more likely than not that work events or exposures were a cause of the injury or illness, or of a significant aggravation to a pre-existing condition. If the Command decides the case is not work-related, and OSHA subsequently issues a "Notice of Unsafe or Unhealthful Working Conditions" for failure to record, OSHA will have the burden of proving that the injury or illness was work-related.

C-4. New Case. Only new cases are recordable. Work-related injuries and illnesses are considered to be new cases when the employee has never reported similar signs or

symptoms before, or when the employee has recovered completely from a previous injury or illness and workplace events or exposures have caused the signs or symptoms to reappear. In the case of previous injuries/illnesses, it is the responsibility of the local Command to update the OSHA Form 300 Log where the injury/illness was listed.

C-5. General Recording Criteria.

a. DA establishments must record new work-related injuries and illnesses that meet one or more of the general recording criteria or meet the recording criteria for specific types of conditions. Recordable work-related injuries and illnesses are those that result in one or more of the following:

- (1) Death
- (2) Days away from work
- (3) Restricted work
- (4) Transfer to another job
- (5) Medical treatment beyond first aid
- (6) Loss of consciousness
- (7) Diagnosis of a significant injury or illness

(8) Needle stick injuries and cuts from sharps that are contaminated with another person's blood or other potentially infectious material

(9) Medical removal under medical surveillance requirements of an OSHA Standard Occupational hearing loss if the employee has experienced a work-related standard threshold shift (STS) in hearing in one or both ears and the employee's total hearing level is 25 dB or more above audiometric zero in same ear(s) as the STS

- (10) Work-related tuberculosis Cases

b. DA must classify each case on the 300 Log in accordance with the most serious outcome associated with the case. The outcomes listed on the form are: death, days away, restricted work/transfer, and "other recordable." For cases resulting in days away or in a work restriction or transfer of the employee, the Command must count the number of calendar days (not work days) involved, and enter that total on the form. The Command may stop counting when the total number of days away, restricted or transferred reaches 180.

C-6. Restricted Work.

a. An employee's work is considered restricted when, as a result of a work-related injury or illness:

(1) the supervisor keeps the employee from performing one or more of the routine functions of his or her job (job functions that the employee regularly performs at least once per week), or from working the full workday that he or she would otherwise have been scheduled to work, or

(2) a physician or other licensed health care professional recommends that the employee not perform one or more of the routine functions of his or her job, or not work the full workday that he or she would otherwise have been scheduled to worked.

b. A case is not recordable as a restricted work case if the employee experiences minor musculoskeletal discomfort, a health care professional determines that the employee is fully able to perform all of his or her routine job functions, and the Command assigns a work restriction to that employee for the purpose of preventing a more serious condition from developing.

C-7. Medical Treatment. Medical treatment means the management and care of a patient to combat disease or disorder. For the purposes of 29 CFR 1904, medical treatment does not include:

a. Visits to a physician or other licensed health care professional solely for observation and counseling;

b. The conduct of diagnostics such as x-rays and blood tests, including the administration of prescription medications used solely for diagnostic purposes (e.g., eye drops to dilate pupils); or First Aid as defined below.

C-8. First Aid. First aid means only those treatments specifically listed in 29 CFR 1904.7. They are:

a. Using non-prescription medication at non-prescription strength (for medications available in both prescription and non-prescription form, a recommendation by a physician or other licensed health care professional to use a non-prescription medication at prescription strength is considered medical treatment for recordkeeping purposes);

b. Administering tetanus immunizations (other immunizations, such as Hepatitis B vaccine or rabies vaccine, are considered medical treatment);

c. Cleaning, flushing or soaking wounds on the surface of the skin; Using wound

coverings such as bandages, Band-Aids™, gauze pads, etc.; or using butterfly bandages or Steri-Strips™ (other wound closing devices such as sutures, staples, etc., are considered medical treatment);

d. Using hot or cold therapy;

e. Using any non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc. (devices with rigid stays or other systems designed to immobilize parts of the body are considered medical treatment for recordkeeping purposes);

f. Using temporary immobilization devices while transporting an accident victim (e.g., splints, slings, neck collars, back boards, etc.).

g. Drilling of a fingernail or toenail to relieve pressure, or draining fluid from a blister;

h. Using eye patches;

i. Removing foreign bodies from the eye using only irrigation or a cotton swab;

j. Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means;

k. Using finger guards;

l. Using massages (physical therapy or chiropractic treatment are considered medical treatment for recordkeeping purposes); or

m. Drinking fluids for relief of heat stress.

C-9. Diagnosis of a Significant Injury or Illness. A work-related cancer, chronic irreversible disease such as silicosis or byssinosis, punctured eardrum, or fractured or cracked bone is a significant injury or illness that must be recorded when diagnosed by a physician or a licensed health care professional.

C-10. Recording Injuries and Illnesses to Soft Tissues. Work-related injuries and illnesses involving muscles, nerves, tendons, ligaments, joints, cartilage and spinal discs are recordable under the same requirements applicable to any other type of injury or illness. There are no special rules for recording these cases: if the case is work-related and involves medical treatment, days away, job transfer or restricted work, it is recordable.

C-11. Employee Privacy.

a. Commands must protect the privacy of injured or ill employees when recording cases. The Command may not enter the injured or ill employee's name on the 300 Log in the following types of cases: Injury or illness to an intimate body part or the reproductive system; An injury or illness resulting from a sexual assault; Mental illnesses; HIV infection, hepatitis, or tuberculosis; Needle stick injuries and cuts from sharp objects that are contaminated with another person's blood or other potentially infectious material (see 29 CFR 1904.8 for definitions); and other illnesses, if the employee voluntarily requests that his or her name not be entered on the log.

NOTE: This is a comprehensive list of all injuries and illnesses considered privacy concern cases for 29 CFR 1904 purposes.

b. Instead, the Command shall simply enter "privacy case," in the space where the employee's name would normally appear and keep a separate, confidential list containing the identifying information. If the Command provides the OSHA records to anyone who is not entitled to access to the records under the rule, the names of all injured and ill employees generally must be removed before the records are turned over.

C-12. Employee Involvement. Each Command must set up a way for employees to report work-related injuries and illnesses, and each employee must be informed about how he or she is to report an injury or illness. Employees, former employees, and employee representatives also have a right to access the public records, and an employer must provide copies of certain records upon request.

C-13. Access to Records for Employees.

a. The Command shall provide copies of OSHA Form 300 Logs to any employee, former employee, personal representative, or authorized employee representative by the end of the next business day.

b. The Command shall provide authorized government representatives (OSHA) copies of records kept under 29 CFR 1904 within 4 business hours.

c. When an employee, former employee, or personal representative requests a copy of a specific OSHA 301 Incident Report (or its equivalent, if used) describing an injury or illness to that employee or former employee, the Command must give the requester a copy of the OSHA 301 Incident Report containing that information by the end of the next business day.

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d. When an authorized employee representative asks for copies of all OSHA 301 Incident Reports for an establishment where the agent represents employees under a collective bargaining agreement, the Command must give copies of those forms to the authorized employee representative within 7 calendar days. The Command is only required to give the authorized employee representative information included in the OSHA 301 Incident Report section titled "Information about the case." The Command must remove all other information from the copy of the OSHA 301 Incident Reports or the equivalent substitute form that it gives to the authorized employee representative.

C-14. Maintenance of Injury/Illness Records. OSHA injury/illness records shall be maintained at the local Command Safety and Occupational Health Office. The Command must be able to give employees or their representative copies of current or stored OSHA Logs by the end of the next business day. The Command must also be able to give authorized employee representatives copies of OSHA 301 Incident Reports within 7 calendar days. Further, the Command must provide an authorized government representative (OSHA) copies of records kept under 29 CFR 1904 within 4 business hours.

C-15. Procedures for Recording Occupational Exposure to Blood borne Pathogens. Commands may use the OSHA 300 Log and 301 forms to meet the sharps injury log requirement of 29 CFR 1910.1030(h)(5), if the Command enters the type and brand of the device causing the sharps injury on the 300 Log, and maintains the records in a way that segregates sharps injuries from other types of work-related injuries and illnesses, or allows sharps injuries to be easily separated.

C-16. Recording Criteria for Occupational Exposure to Tuberculosis (TB). Commands shall record cases of occupational exposure to TB on the OSHA 300 Log by checking the "respiratory condition" column when an employee has been exposed to someone with a known case of active TB, and that employee subsequently develops a TB infection, as evidenced by a positive skin test or diagnosis by a physician or other licensed health care professional.

C-17. Recording Criteria for Cases Involving Medical Removal. Commands shall record the case on the OSHA 300 Log if an employee is medically removed under the medical surveillance requirements of an OSHA standard. Currently the medical surveillance requirements of the following standards have medical removal requirements:

a. Benzene. General industry standard (§1910.1028(i)); Shipyard standard (§1915.1028); and Construction standard (§1926.1128)

b. Cadmium. General industry standard (§1910.1027(l)); Shipyard standard (§1915.1027); and Construction standard (§1926.1127)

c. Formaldehyde. General industry standard (§1910.1048(l)); Shipyard standard (§1915.1048); and Construction standard (§1926.1148)

d. Lead. General industry standard (§1910.1025); Shipyard standard (§1915.1025); and Construction standard (§1926.62)

e. Methylenedianiline. General industry standard (§1910.1050(m)); Shipyard standard (§1915.1050); and Construction standard (§1926.60(n))

f. Methylene Chloride. General industry standard (§1910.1052(j)); Shipyard standard (§1915.1052); Construction standard (§1926.1152)

g. Vinyl Chloride. General industry standard (§1910.1017(k)); Shipyard standard (§1915.1517); and Construction standard (§1926.1117)

C-18. Physician or Other Licensed Health Care Provider's Opinion. In cases where two or more physicians or other licensed health care providers make conflicting or differing recommendations, the Command must make a decision as to which recommendation is the most authoritative (best documented, best reasoned, or most persuasive), and record based on that recommendation.

C-19. Prohibition Against Discrimination. Commands shall not discriminate against any employee for reporting a work-related fatality, injury, or illness; filing a safety and health complaint; asking for access to 29 CFR 1960 records; or otherwise exercising any rights afforded by the OSH Act.

C-20. Frequently Asked Questions regarding 29 CFR 1904. “Accident Recording and Recordkeeping Requirements” (adapted for Federal Agency Implementation). The following questions and answers have been prepared to address enforcement issues concerning the new Recordkeeping Rule.

a. General Guidance.

(1) Question 1. Why has OSHA changed Part 1960 to comply with the 1904 regulation? OSHA revised the rule to collect better information about the incidence of occupational injuries and illnesses, improve employee awareness and involvement in the recording and reporting of job-related injuries and illnesses, simplify the injury and illness recordkeeping system for Federal Agencies, and permit increased use of computers and telecommunications technology.

(2) Question 2. What recordkeeping actions took place on January 1, 2005? A number of actions took place on January 1, 2005, including: The revised 29 CFR Part

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1960, entitled “Recording and Reporting Occupational Injuries and Illnesses,” took effect. Three new recordkeeping forms are to be used:

(a) OSHA Form 300, “Log of Work-Related Injuries and Illnesses”.

(b) OSHA Form 300A, “Summary of Work-Related Injuries and Illnesses”. (The 300 and 300A forms replaced the former OSHA Form 200, “Log and Summary of Occupational Injuries and Illnesses”)

(c) OSHA Form 301, “Injury and Illness Incident Report”. (The 301 form replaced the former OSHA Form 101, “Supplementary Record of Occupational Injuries and Illnesses”)

The Bureau of Labor Statistics (BLS)/OSHA publications: “Recordkeeping Guidelines for Occupational Injuries and Illnesses, 1986” and “A Brief Guide to Recordkeeping Requirements for Occupational Injuries and Illnesses, 1986” have been withdrawn.

All letters of interpretation regarding the former rule's injury and illness recordkeeping requirements have been withdrawn and put into the OSHA Archive Set.

(3) Question 3. How can I get copies of the forms? Copies of the forms can be obtained on OSHA's web site at <http://www.osha.gov> or from the OSHA publications office at (202) 693-1888.

(4) Question 4. Can I compare injury and illness rates generated from my OSHA form 300, and the revised regulation, to injury and illness rates generated from my OSHA 200 Log under the old rule (i.e., compare 2004 data with 2005 data)? The revised recordkeeping rule changes some of the criteria used to determine which injuries and illnesses are entered into the records and how they are entered. Therefore, Commands should use reasonable caution when comparing data produced under the old 29 CFR 1960 regulation with data produced under the new rule.

(5) Question 5. Are the recordkeeping requirements the same now for Federal agencies as those for the private sector? Yes, the new recordkeeping rule changes to 29 CFR 1960, with only minor exceptions (e.g., the definition of establishment) are the same as the requirements for the private sector.

b. Specific Guidance Referenced to 29 CFR 1904.

(1) 29 CFR 1904.0 -- Purpose.



(2) Question 1. Why are employers required to keep records of work-related injuries and illnesses? The OSH Act of 1970 requires the Secretary of Labor to produce regulations that require employers to keep records of occupational deaths, injuries, and illnesses. The records are used for several purposes. Injury and illness statistics are used by OSHA. OSHA collects data through the OSHA Data Initiative (ODI) to help direct its programs and measure its own performance. Inspectors also use the data during inspections to help direct their efforts to the hazards that are hurting workers. The records are also used by employers and employees to implement safety and health programs at individual workplaces. Analysis of the data is a widely recognized method for discovering workplace safety and health problems and for tracking progress in solving those problems. The records provide the base data for the BLS Annual Survey of Occupational Injuries and Illnesses, the Nation's primary source of occupational injury and illness data.

(3) Question 2. What is the effect of workers' compensation (OWCP) reports on the OSHA records? Recording an injury or illness on the OSHA 300 Log neither affects a person's entitlement to workers' compensation nor proves a violation of an OSHA rule. The rules for compensability under Federal workers' compensation do not have any effect on whether or not a case needs to be recorded on the OSHA 300 Log. Many cases are OSHA recordable and compensable under Federal workers' compensation. However, some cases are compensable but not OSHA recordable, and some cases are OSHA recordable but not compensable under Federal workers' compensation.

c. 29 CFR 1904.4 - Recording Criteria. Does an employee report of an injury or illness establish the existence of the injury or illness for recordkeeping purposes? No. In determining whether a case is recordable, the Command must first decide whether an injury or illness, as defined by the rule, has occurred. If the Command is uncertain about whether an injury or illness has occurred, the Command may refer the employee to a physician or other health care professional for evaluation and may consider the health care professional's opinion in determining whether an injury or illness exists. [Note: If a physician or other licensed health care professional diagnoses a significant injury or illness within the meaning of 29 CFR 1904.7(b)(7) and the Command determines that the case is work-related, the case must be recorded.]

d. 29 CFR 1904.5 -- Determination of Work-Relatedness.

(1) Question 1. If a maintenance employee is cleaning the parking lot or an access road at an USACE facility and is injured as a result, is the case work-related? Yes, the case is work-related because the employee is injured as a result of conducting Command business in the work environment. If the injury meets the general recording criteria of 29 CFR 1904.7 (death, days away, etc.), the case must be recorded.

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(2) Question 2. Are cases of workplace violence considered work-related under the update to the recordkeeping portion of 29 CFR 1960? The recordkeeping portion of the rule contains no general exception, for purposes of determining work-relationship, for cases involving acts of violence in the work environment. However, some cases involving violent acts might be included within one of the exceptions listed in 29 CFR 1904.5(b)(2). For example, if an employee arrives at work early to use a Command conference room for a civic club meeting and is injured by some violent act, the case would not be work-related under the exception in 29 CFR 1904.5(b)(2)(v).

(3) Question 3. What activities are considered "personal grooming" for purposes of the exception to the presumption of work-relatedness in 29 CFR 1904.5(b)(2)(vi)? Personal grooming activities are activities directly related to personal hygiene, such as combing and drying hair, brushing teeth, clipping fingernails and the like. Bathing or showering at the workplace when necessary because of an exposure to a substance at work is not within the personal grooming exception in 29 CFR 1904.5(b)(2)(vi). Thus, if an employee slips and falls while showering at work to remove a contaminant to which he has been exposed at work, and sustains an injury that meets one of the general recording criteria listed in 29 CFR 1904.7(b)(1), the case is recordable.

(4) Question 4. What are "assigned working hours" for purposes of the exception to the presumption in 29 CFR 1904.5(b)(2)(v)? "Assigned working hours," for purposes of 29 CFR 1904.5(b)(2)(v), means those hours the employee is actually expected to work, including overtime.

(5) Question 5. What are "personal tasks" for purposes of the exception to the presumption in 29 CFR 1904.5(b)(2)(v)? "Personal tasks" for purposes of 29 CFR 1904.5(b)(2)(v) are tasks that are unrelated to the employee's job. For example, if an employee uses a facility break area to work on his child's science project, he is engaged in a personal task.

(6) Question 6. If an employee stays at work after normal work hours to prepare for the next day's tasks and is injured, is the case work-related? For example, if an employee stays after work to prepare geophysical monitoring equipment for use the next day and is injured, is the case work-related? A case is work-related any time an event or exposure in the work environment either causes or contributes to an injury or illness or significantly aggravates a pre-existing injury or illness, unless one of the exceptions in 29 CFR 1904.5(b)(2) applies. The work environment includes the establishment and other locations where one or more employees are working or are present as a condition of their employment. The case in question would be work-related if the employee was injured as a result of an event or exposure at work, regardless of whether the injury occurred after normal work hours.

(7) Question 7. If an employee voluntarily takes work home and is injured while working at home, is the case recordable? No. Injuries and illnesses occurring in the home environment are only considered work-related if the employee is being paid or compensated for working at home and the injury or illness is directly related to the performance of the work rather than to the general home environment.

(8) Question 8. If an employee's pre-existing medical condition causes an incident which results in a subsequent injury, is the case work-related? For example, if an employee suffers an epileptic seizure, falls, and breaks his arm, is the case covered by the exception in 29 CFR 1904.5(b)(2)(ii)? Neither the seizure nor the broken arm is recordable. Injuries and illnesses that result solely from non-work-related events or exposures are not recordable under the exception in 29 CFR 1904.5(b)(2)(ii). Epileptic seizures are a symptom of a disease of non-occupational origin, and the fact that they occur at work does not make them work-related. Because epileptic seizures are not work-related, injuries resulting solely from the seizures, such as the broken arm in the case in question, are not recordable.

(9) Question 9. This question involves the following sequence of events: Employee A drives to work, parks her car in the Government parking lot and is walking across the lot when she is struck by a car driven by employee B, who is commuting to work. Both employees are seriously injured in the accident. Is either case work-related? Neither employee's injuries are recordable. While the employee parking lot is part of the work environment under 29 CFR 1904.5, injuries occurring there are not work-related if they meet the exception in 29 CFR 1904.5(b)(2)(vii). 29 CFR 1904.5(b)(2)(vii) excepts injuries caused by motor vehicle accidents occurring on the Government parking lot while the employee is commuting to and from work. In the case in question, both employees' injuries resulted from a motor vehicle accident in the Government parking lot while the employees were commuting. Accordingly, the exception applies.

e. 29 CFR 1904.6 -- Determination of New Cases. How is a Command to determine whether an employee has "recovered completely" from a previous injury or illness such that a later injury or illness of the same type affecting the same part of the body resulting from an event or exposure at work is a "new case" under 29 CFR 1904.6(a)(2)? If an employee's signs and symptoms disappear for a day and then resurface the next day, should the Command conclude that the later signs and symptoms represent a new case? An employee has "recovered completely" from a previous injury or illness, for purposes of 29 CFR 1904.6(a)(2), when he or she is fully healed or cured. The Command must use best judgment based on factors such as the passage of time since the symptoms last occurred and the physical appearance of the affected part of the body. If the signs and symptoms of a previous injury disappear for a day only to reappear the following day, that is strong evidence the injury has not properly healed. The Command may, but is not required to, consult a physician or other licensed health care provider

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(PLHCP). Where the Command does consult a PLHCP to determine whether an employee has recovered completely from a prior injury or illness, it must follow the PLHCP's recommendation. In the event the Command receives recommendations from two or more PLHCPs, the Command may decide which recommendation is the most authoritative and record the case based on that recommendation.

f. 29 CFR 1904.7 -- General Recording Criteria.

(1) Question 1. The old 29 CFR Part 1904 rule required the recording of all occupational illnesses, regardless of severity. For example, a work-related skin rash was recorded even if it didn't result in medical treatment. Does the rule still capture these minor illness cases? No. Under the new rule, injuries and illnesses are recorded using the same criteria. As a result, some minor illness cases are no longer recordable. For example, a case of work-related skin rash is now recorded only if it results in days away from work, restricted work, transfer to another job, or medical treatment beyond first aid.

(2) Question 2. Does the size or degree of a burn determine recordability? No, the size or degree of a work-related burn does not determine recordability. If a work-related first, second, or third degree burn results in one or more of the outcomes in 29 CFR 1904.7 (days away, work restrictions, medical treatment, etc.), the case must be recorded.

(3) Question 3. If an employee dies during surgery made necessary by a work-related injury or illness, is the case recordable? What if the surgery occurs weeks or months after the date of the injury or illness? If an employee dies as a result of surgery or other complications following a work-related injury or illness, the case is recordable. If the underlying injury or illness was recorded prior to the employee's death, the Command must update the 300 Log by lining out information on less severe outcomes, e.g., days away from work or restricted work, and checking the column indicating death.

(4) Question 4. An employee hurts his or her left arm and is told by the doctor not to use the left arm for one week. The employee is able to perform all of his or her routine job functions using only the right arm (though at a slower pace and the employee is never required to use both arms to perform his or her job functions). Would this be considered restricted work? No. If the employee is able to perform all of his or her routine job functions (activities the employee regularly performs at least once per week), the case does not involve restricted work. Loss of productivity is not considered restricted work.

(5) Question 5. Are surgical glues used to treat lacerations considered "first aid?" No, surgical glue is a wound closing device. All wound closing devices except for butterfly and Steri-Strips are by definition "medical treatment," because they are not included on the first aid list.

(6) Question 6. An item on the first aid list is "drinking fluids for relief of heat stress." Does this include administering intravenous fluids? No. Intravenous administration of fluids to treat work-related heat stress is medical treatment.

(7) Question 7. Is the use of a rigid finger guard considered first aid? Yes, the use of finger guards is always first aid.

(8) Question 8. For medications such as Ibuprofen that are available in both prescription and non-prescription form, what is considered to be prescription strength? How is a Command to determine whether a non-prescription medication has been recommended at prescription strength for purposes of 29 CFR 1904.7(b)(5)(i)(C)(ii)(A)? The prescription strength of such medications is determined by the measured quantity of the therapeutic agent to be taken at one time, i.e., a single dose. The single dosages that are considered prescription strength for four common over-the-counter drugs are:

- (a) Ibuprofen (such as Advil™) - Greater than 467 mg
- (b) Diphenhydramine (such as Benadryl™) - Greater than 50 mg
- (c) Naproxen Sodium (such as Aleve™) - Greater than 220 mg
- (d) Ketoprofen (such as Orudus KT™) - Greater than 25mg

To determine the prescription-strength dosages for other drugs that are available in prescription and non-prescription formulations, the employer should contact OSHA, the United States Food and Drug Administration, their local pharmacist or their physician.

(9) Question 9. If an employee who sustains a work-related injury requiring days away from work is terminated for drug use based on the results of a post-accident drug test, how is the case recorded? May the Command stop the day count upon termination of the employee for drug use under 29 CFR 1904.7(b)(3) (vii)? Under 29 CFR 1904.7(b)(3)(vii), the Command may stop counting days away from work if an employee who is away from work because of an injury or illness leaves the Command for some reason unrelated to the injury or illness, such as retirement. However, when the Command conducts a drug test based on the occurrence of an accident resulting in an injury at work and subsequently terminates the injured employee, the termination is related to the injury. Therefore, the Command must estimate the number of days that the employee would have been away from work due to the injury and enter that number on the 300 Log.

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(10) Question 10. Once a Command has recorded a case involving days away from work, restricted work or medical treatment and the employee has returned to his regular work or has received the course of recommended medical treatment, is it permissible for the Command to delete the 300 Log entry based on a physician's recommendation, made during a year-end review of the 300 Log, that the days away from work, work restriction or medical treatment were not necessary? The Command must make an initial decision about the need for days away from work, a work restriction, or medical treatment based on the information available, including any recommendation by a physician or other licensed health care professional. Where the Command receives contemporaneous recommendations from two or more physicians or other licensed health care professionals about the need for days away, a work restriction, or medical treatment, the Command may decide which recommendation is the most authoritative and record the case based on that recommendation. Once the days away from work or work restriction have occurred or medical treatment has been given, however, the Command may not delete the 300 Log entry because of a physician's recommendation, based on a year-end review of the 300 Log, that the days away, restriction or treatment were unnecessary.

(11) Question 11. 29 CFR 1904.7(b)(5)(ii) of the rule defines first aid, in part, as "removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means." What are "other simple means" of removing splinters that are considered first aid? "Other simple means" of removing splinters, for purposes of the first-aid definition, means methods that are reasonably comparable to the listed methods. Using needles, pins or small tools to extract splinters would generally be included.

(12) Question 12. How long must a modification to a job last before it can be considered a permanent modification under 29 CFR 1904.7(b)(4)(xi)? 29 CFR 1904.7(b)(4)(xi) of the rule allows a Command to stop counting days of restricted work or transfer to another job if the restriction or transfer is made permanent. A permanent restriction or transfer is one that is expected to last for the remainder of the employee's career. Where the restriction or transfer is determined to be permanent at the time it is ordered, the Command must count at least one day of the restriction or transfer on the 300 Log. If the employee whose work is restricted or who is transferred to another job is expected to return to his or her former job duties at a later date, the restriction or transfer is considered temporary rather than permanent.

(13) Question 13. If an employee loses his arm in a work-related accident and can never return to his job, how is the case recorded? Is the day count capped at 180 days? If an employee never returns to work following a work-related injury, the Command must check the "days away from work" column, and enter an estimate of the number of days the employee would have required to recuperate from the injury, up to 180 days.

(14) Question 14. If an employee who routinely works ten hours a day is restricted from working more than eight hours following a work-related injury, is the case recordable? Generally, the Command must record any case in which an employee's work is restricted because of a work-related injury. A work restriction, as defined in 29 CFR 1904.7(b)(4)(i)(A), occurs when the Command keeps the employee from performing one or more routine functions of the job, or from working the full workday the employee would otherwise have been scheduled to work. The case in question is recordable if the employee would have worked 10 hours had he or she not been injured.

(15) Question 15. If an employee is exposed to chlorine or some other substance at work and oxygen is administered as a precautionary measure, is the case recordable? If oxygen is administered as a purely precautionary measure to an employee who does not exhibit any symptoms of an injury or illness, the case is not recordable. If the employee exposed to a substance exhibits symptoms of an injury or illness, the administration of oxygen makes the case recordable.

(16) Question 16. Is a Command subject to an OSHA "Notice of Unsafe or Unhealthful Workplace" for violating 29 CFR 1904.7(b)(4)(viii) if an employee fails to follow a recommended work restriction? 29 CFR 1904.7(b)(4)(viii) deals with the recordability of cases in which a physician or other health care professional has recommended a work restriction. The section also states that the Command "should ensure that the employee complies with the [recommended] restriction." This language is purely advisory and does not impose an enforceable duty upon Commands to ensure that employees comply with the recommended restriction. [Note: In the absence of conflicting opinions from two or more health care professionals, the Command ordinarily must record the case if a health care professional recommends a work restriction involving the employee's routine job functions.]

g. 29 CFR 1904.8 -- Recording Criteria for Needlestick and Sharps Injuries. Can I use the OSHA 300 Log to meet the Bloodborne Pathogen Standard's requirement for a sharps injury log? Yes. You may use the 300 Log to meet the requirements of the sharps injury log provided you enter the type and brand of the device causing the sharps injury on the 300 Log and you maintain your records in a way that segregates sharps injuries from other types of work-related injuries and illnesses, or allows sharps injuries to be easily separated.

h. 29 CFR 1904.29 - Forms.

(1) Question 1. How do I determine whether or not a case is an occupational injury or one of the occupational illness categories in Section M of the OSHA 300 Log? The instructions that accompany the OSHA 300 Log contain examples of occupational injuries and the various types of occupational illnesses listed on the 300 Log. If the case you are dealing with is on one of those lists, then check that injury or illness category. If

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the case you are dealing with is not listed, then you may check the injury or illness category that you believe best fits the circumstances of the case.

(2) Question 2. Does a Command decide if an injury or illness is a privacy concern case? Yes. The Command must decide if a case is a privacy concern case, using 29 CFR 1904.29(b)(7), which lists the six types of injuries and illnesses the Command must consider privacy concern cases. If the case meets any of these criteria, the Command must consider it a privacy concern case. This is a complete list of all injury and illnesses considered privacy concern cases.

(3) Question 3. Under 29 CFR 1904.29(b)(9), the Command may use some discretion in describing a privacy concern case on the log so the employee cannot be identified. Can the Command also leave off the job title, date, or where the event occurred? Yes. OSHA believes that this would be an unusual circumstance and that leaving this information off the log will rarely be needed. However, if the Command has reason to believe that the employee's name can be identified through this information, these fields can be left blank.

(4) Question 4. If an employee reports an injury or illness and receives medical treatment this year, but states that the symptoms first arose at some unspecified date last year, on which year's log do I record the case? Ordinarily, the case should be recorded on the 300 Log for the year in which the injury or illness occurred. Where the date of injury or illness cannot be determined, the date the employee reported the symptoms or received treatment must be used. In the case in question, the injury or illness would be recorded on this year's 300 Log because the employee cannot specify the date when the symptoms occurred.

i. 29 CFR 1904.31 -- Covered Employees.

(1) Question 1. How is the term "supervised" in 29 CFR 1904.31 defined for the purpose of determining whether the Command must record the work-related injuries and illnesses of employees obtained from a temporary help service? The Command must record the recordable injuries and illnesses of employees not on its payroll if it supervises them on a day-to-day basis. (See definition of Government Direct Contractor in Appendix I b.(2)). Day-to-day supervision occurs when "in addition to specifying the output, product or result to be accomplished by the person's work, the employer supervises the details, means, methods and processes by which the work is to be accomplished."

(2) Question 2. If a temporary personnel agency sends its employees to work in an establishment that is not required to keep OSHA records, does the agency have to record the recordable injuries and illnesses of these employees? A temporary personnel agency need not record injuries and illnesses of those employees that are supervised on a



day-to-day basis by another employer. The temporary personnel agency must record the recordable injuries and illnesses of those employees it supervises on a day to day basis, even if these employees perform work for a Command which is not covered by the recordkeeping rule.

j. 29 CFR 1904.32 - Annual Summary. How do I calculate the "total hours worked" on my annual summary when I have both hourly and temporary workers? To calculate the total hours worked by all employees, include the hours worked by salaried, hourly, part-time and seasonal workers, as well as hours worked by other workers you supervise (e.g., workers supplied by a temporary help service). Do not include vacation, sick leave, holidays, or any other non-work time even if employees were paid for it. If your establishment keeps records of only the hours paid or if you have employees who are not paid by the hour, you must estimate the hours that the employees actually worked.

k. 29 CFR 1904.35 -- Employee Involvement. How does a Command inform each employee on how he or she is to report an injury or illness? Commands are required to let employees know how and when to report work-related injuries and illnesses. This means that the Command must set up a way for the employees to report work-related injuries and illnesses and tell its employees how to use it. The Recordkeeping rule does not specify how the Command must accomplish these objectives, so Commands have flexibility to set up systems that are appropriate to their workplace. The size of the workforce, employee's language proficiency and literacy levels, the workplace culture, and other factors will determine what will be effective for any particular workplace.

l. 29 CFR 1904.39 -- Reporting Fatalities & Multiple Hospitalization Incidents to OSHA.

(1) Question 1. When a work-related heart attack occurs in the workplace and the employee dies one or more days later, how should the case be reported to OSHA? The Command must orally report a work-related fatality by telephone or in person to the OSHA Area Office nearest to the site of the incident. The Command must report the fatality within eight hours of the employee's death in cases where the death occurs within 30 days of the incident. The Command need not report a death occurring more than 30 days after a work-related incident.

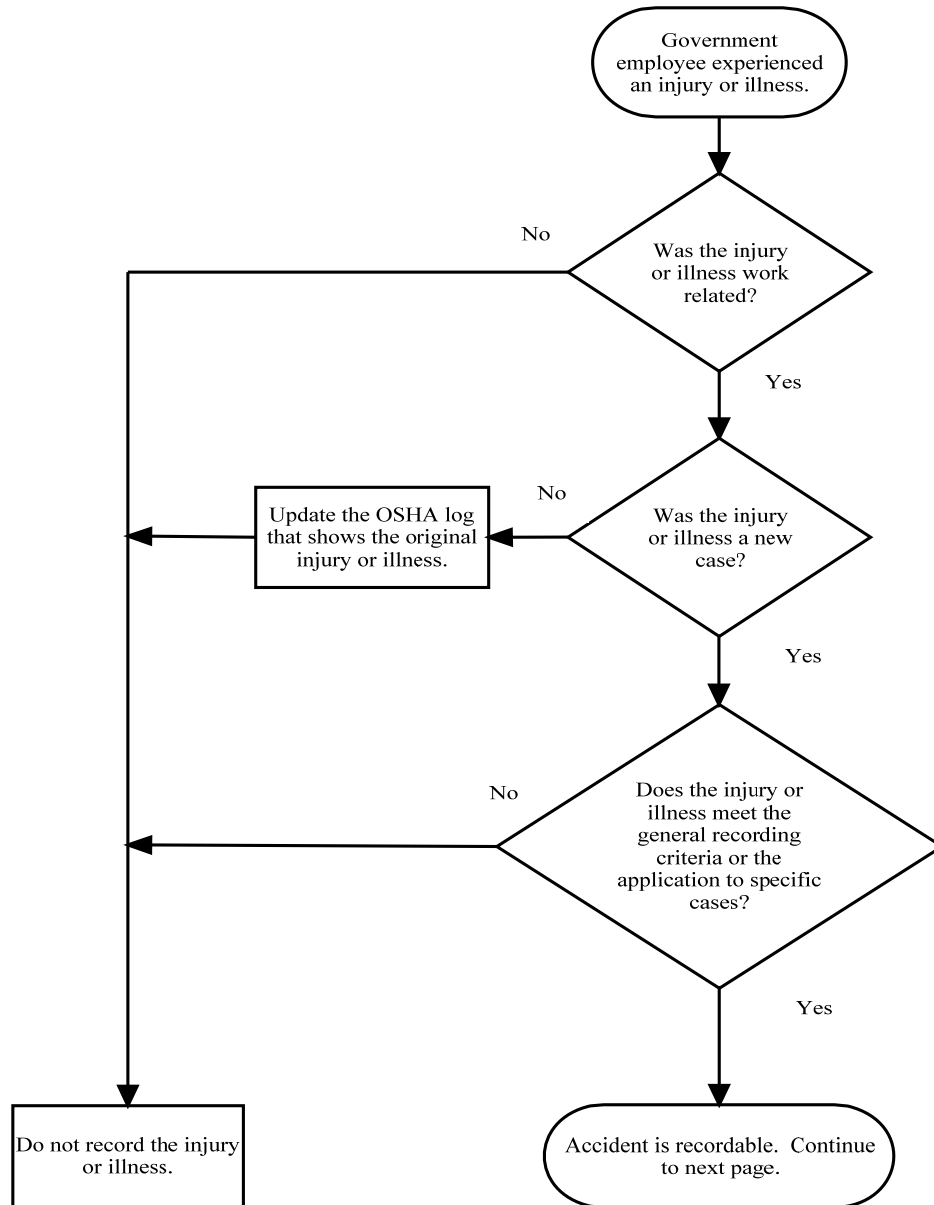
(2) Question 2. What is considered a "construction work zone" for purposes of 29 CFR 1904.39(b)(3)? A "construction work zone" for purposes of 29 CFR 1904.39(b)(3) is an area of a street or highway where construction activities are taking place, and is typically marked by signs, channeling devices, barriers, pavement markings and/or work vehicles. The work zone extends from the first warning sign or rotating/strobe lights on a vehicle to the "END ROAD WORK" sign or the last temporary traffic control device.

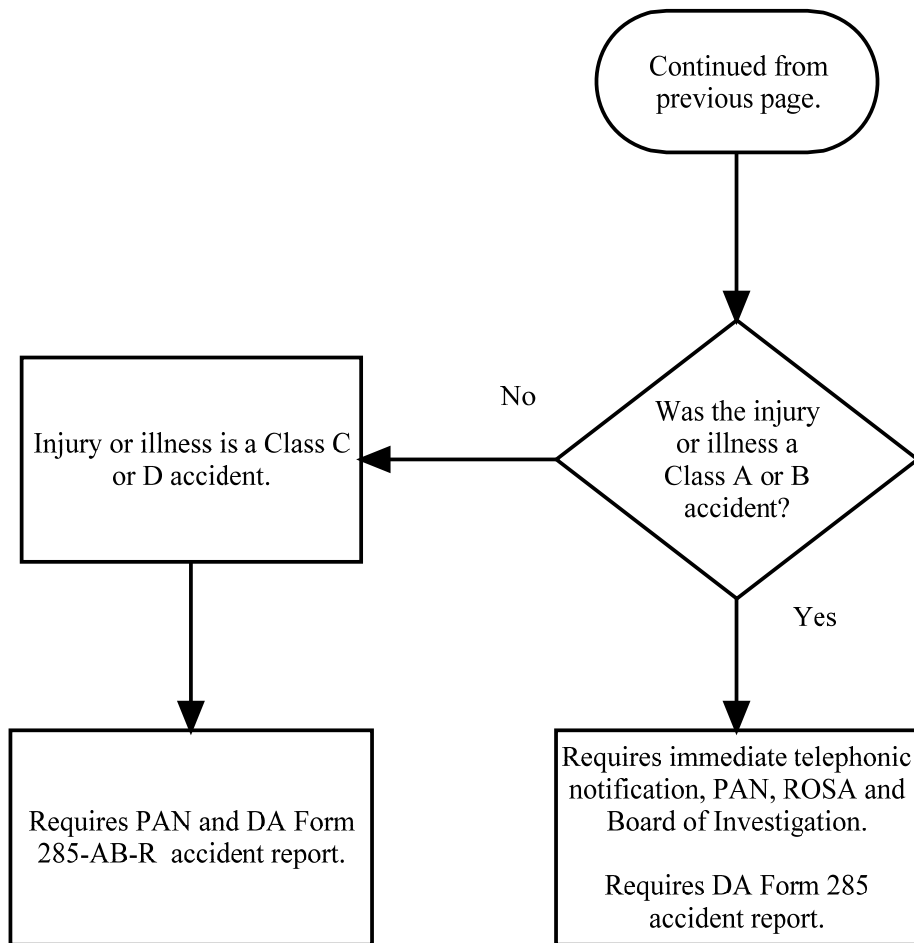


APPENDIX D

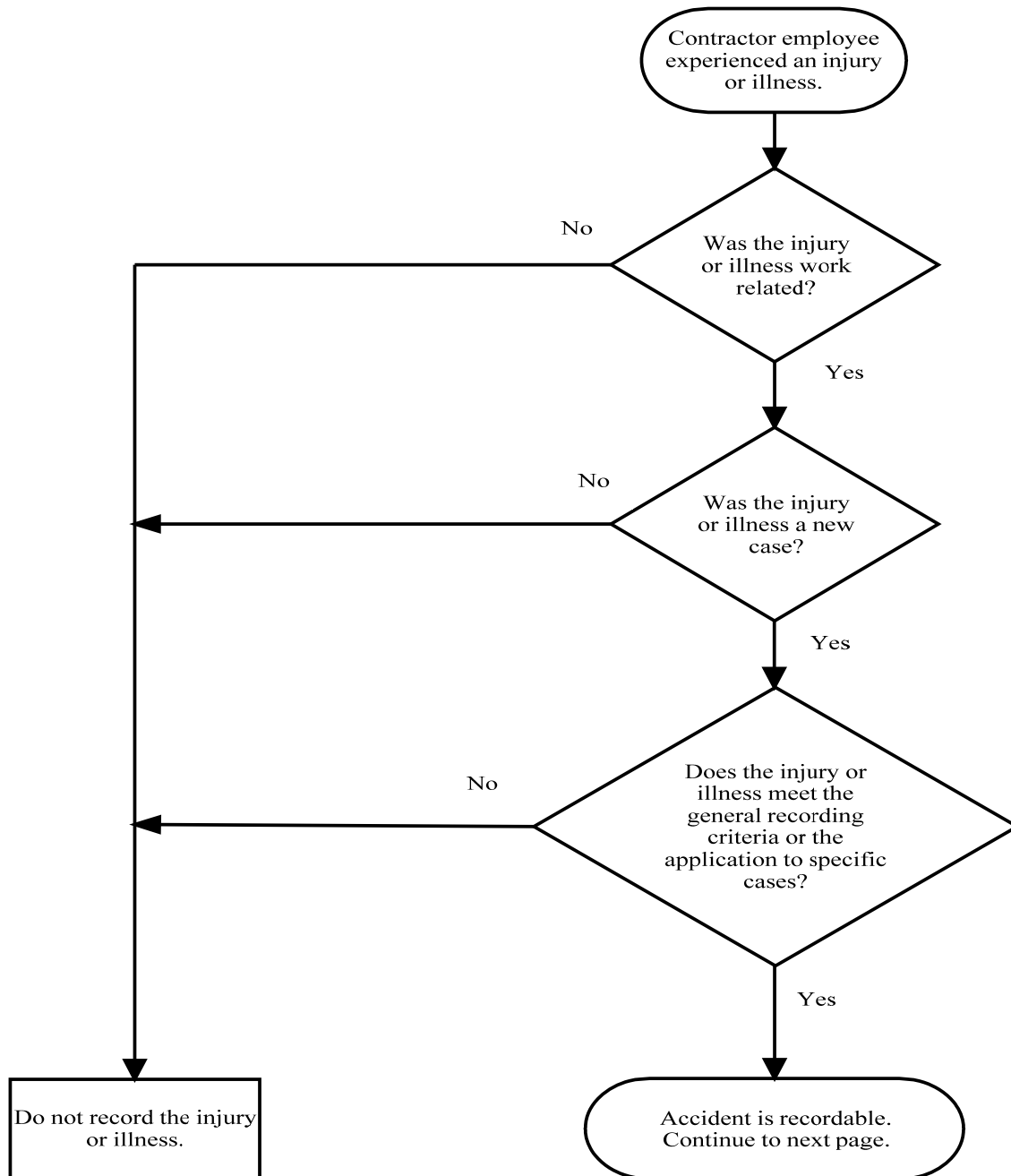
Accident Reporting Decision Matrixes

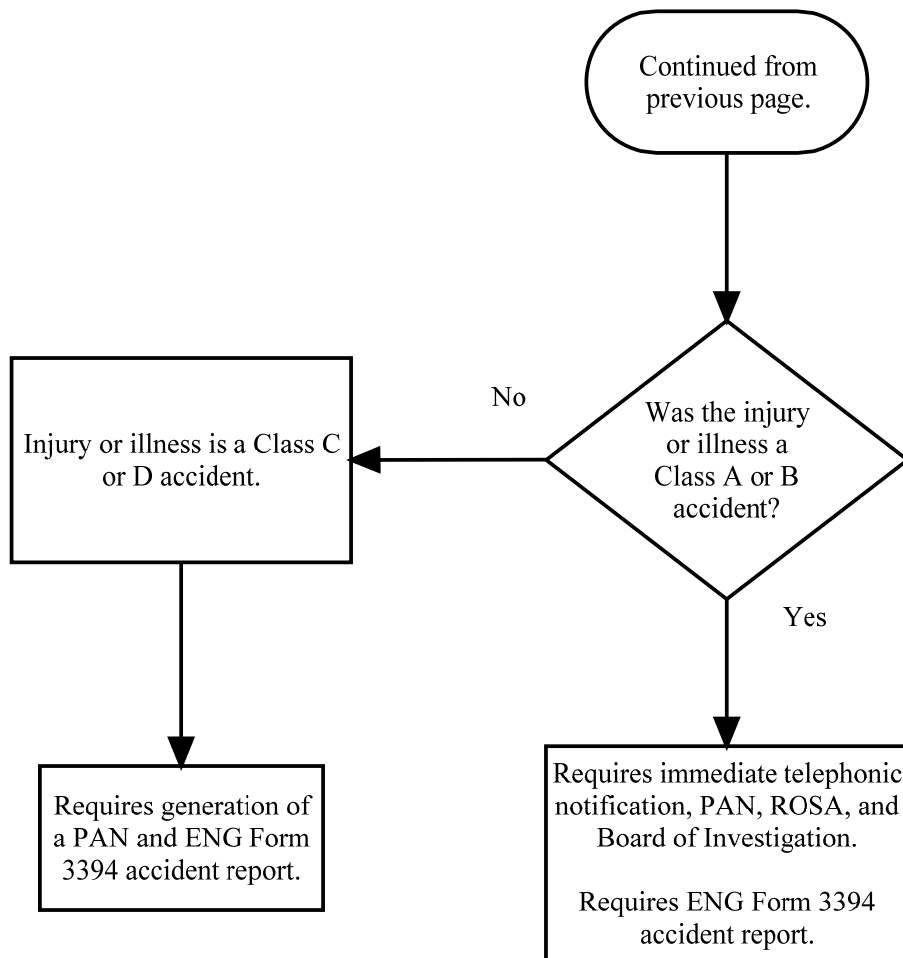
D-1. USACE Civilian Injury Decision Matrix. (When the Army Safety Management Information System (ASMIS) is deployed, the ENG 3394 and DA Form 285 will no longer be required in the following Matrixes.)



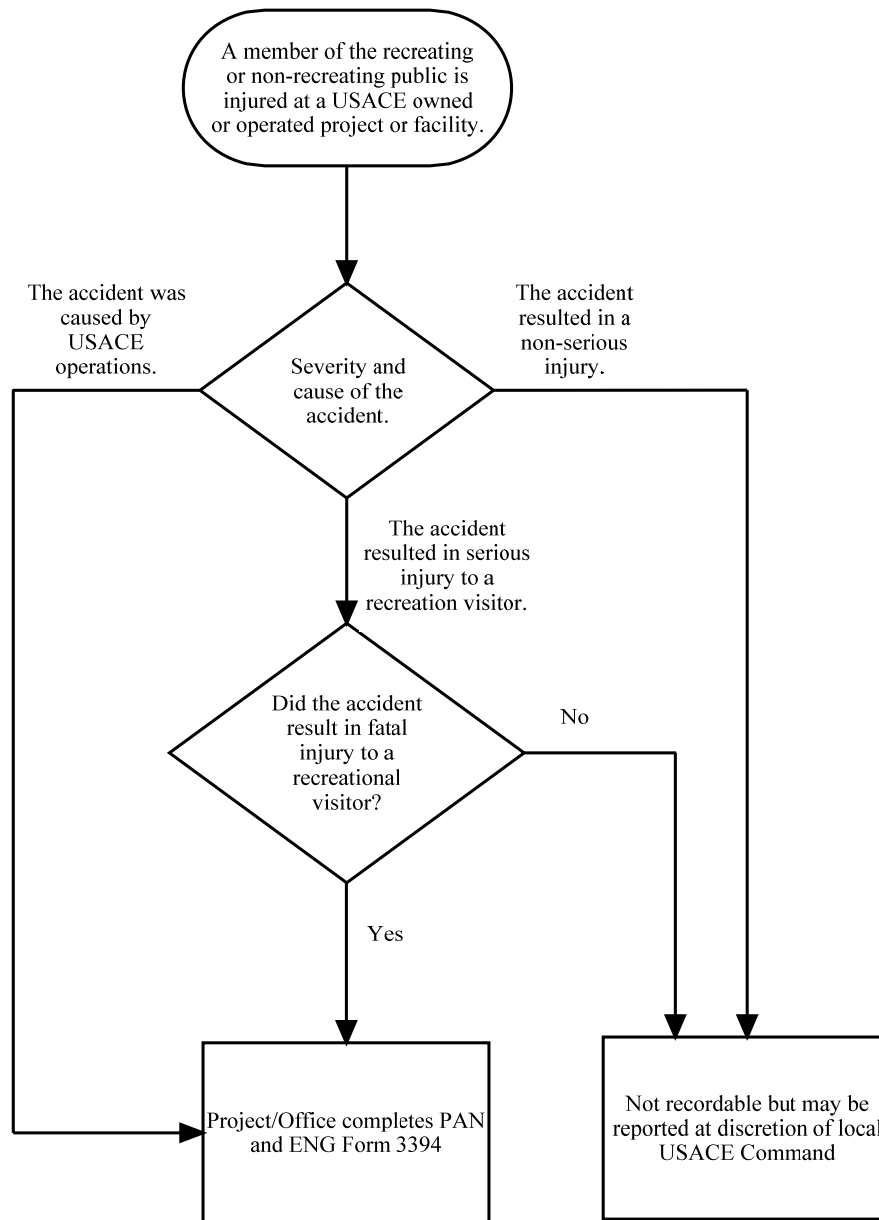


D-2. Contractor Injury Decision Matrix.

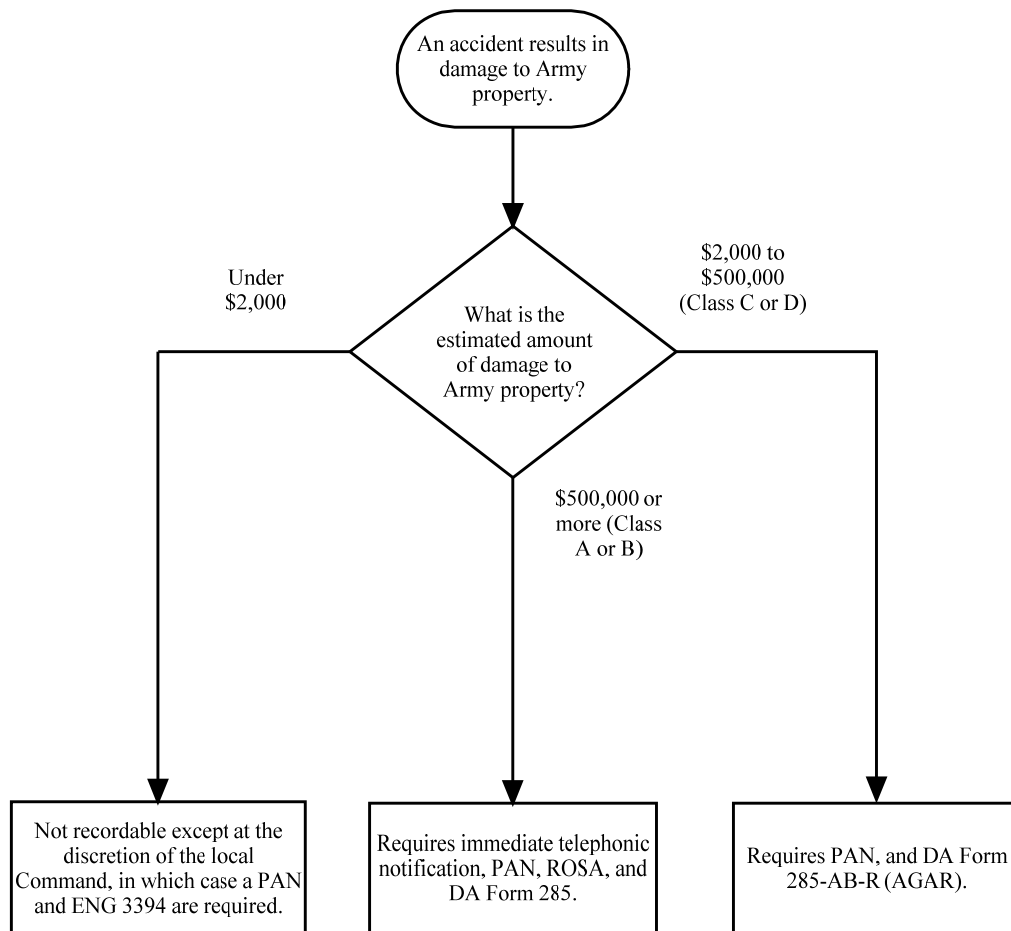




D-3. Public Recreation Accident Decision Matrix.

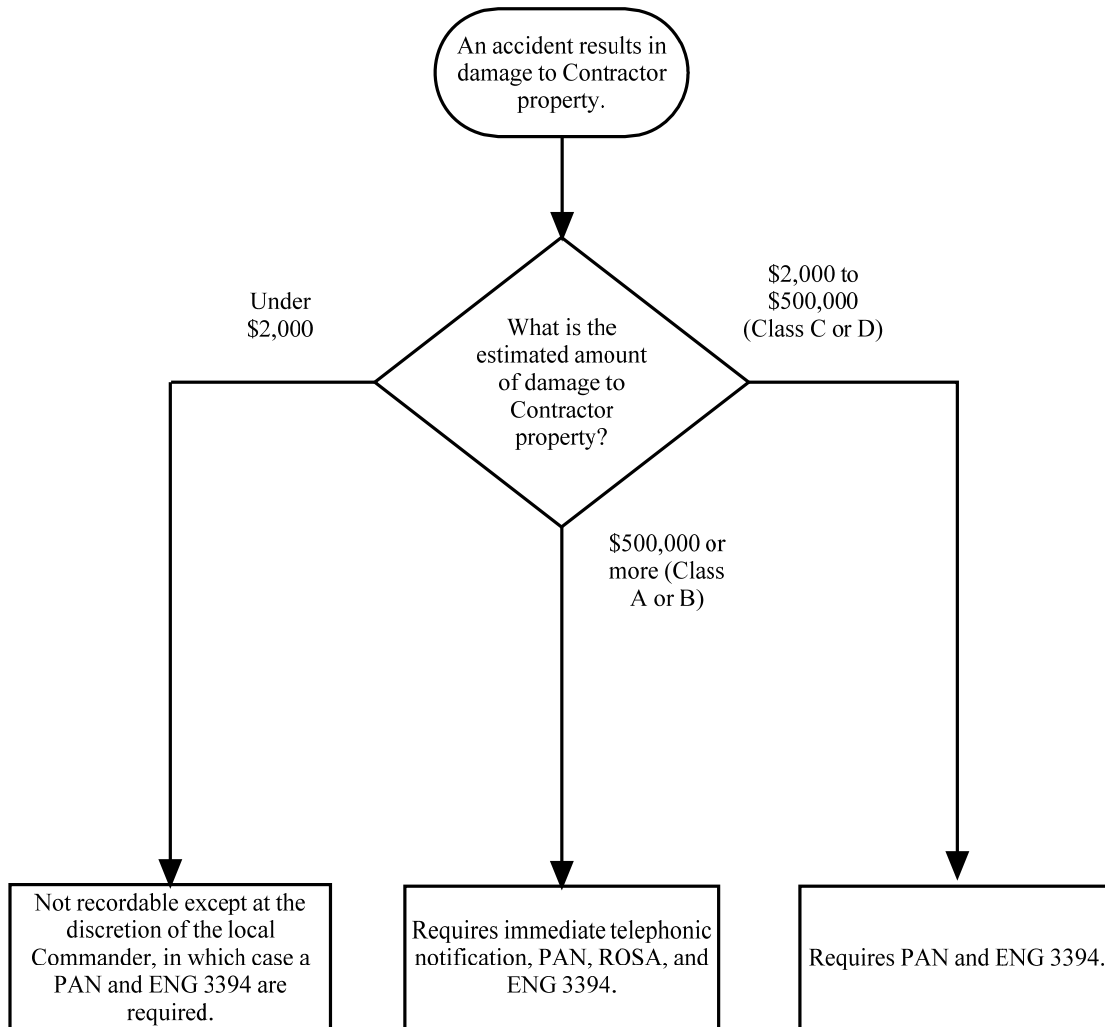


D-4. Government Property Damage Decision Matrix.

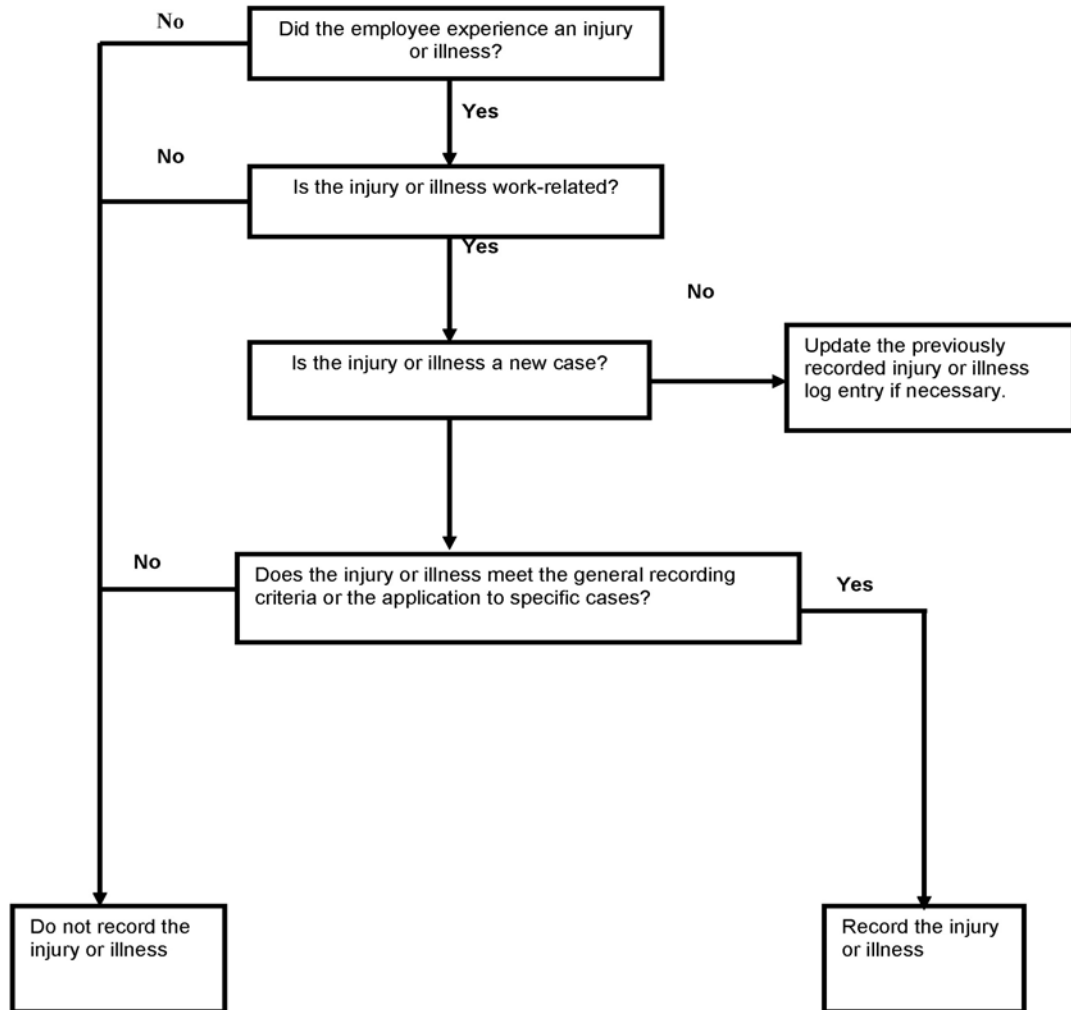




D-5. Contractor Property Damage Decision Matrix.



D-6. OSHA LOG Injury / Illness Recordability Decision Matrix.



The decision matrix for recording work-related injuries and illnesses below shows the steps involved in making this determination.

## APPENDIX E

## Notification and Reporting Requirements Matrix

Accident Class	Accident Type	Immediate notification by phone to CESO & CRSC by local Command	Notify OSHA within 8 hrs	PAN & ROSA	Appoint a BOI within 12 hrs of notification of accident	Prepare and send BOI report with abstract to CESO within 45 days of accident	Complete and route Eng 3394	Complete and route DA Accident Form
A	Gov	Yes	Yes	Yes, no later than 8 hrs of accident	Yes	Yes	No	DA 285 NLT 45 days
	Contractor	CESO only	No				ENG 3394 NLT 45 days	No
B	Gov	Yes	Yes	Yes, no later than 8 hrs of accident	Yes	Yes	No	DA 285 NLT 45 days
	Contractor	CESO only	No				ENG 3394 NLT 45 days	No
C	Gov	No	No	PAN only NLT 7 days of accident	No	No	No	AGAR (DA Form 285-AB-R) NLT 7 days
	Contractor						ENG 3394 NLT 45 days	No
D	Gov	No	No	PAN only NLT 7 days of accident	No	No	No	AGAR (DA Form 285-AB-R) NLT 7 days
	Contractor						ENG 3394 NLT 45 days	No
E	Aviation accident/incident - see AR 385-10, Chapter 3							
F	Aviation incident - see AR 385-10, Chapter 3							
Recordable Public Fatality		No	No	PAN only NLT 7 days of accident	No	No	ENG 3394 NLT 7 days	No
Recordable Public Injuries/Property Damage Accidents	Due to Corps/Contractor Operations	No	No	PAN only NLT 7 days of accident	As determined by Cmdr/ MSC/CESO	As determined by Cmdr/ MSC/CESO	ENG 3394 NLT 45 days	No
Reportable Public Accidents	Serious Public Injury	No	No	PAN only NLT 7 days of accident	As determined by Cmdr/ MSC/CESO	As determined by Cmdr/ MSC/CESO	As determined by Cmdr/ MSC/CESO	No
Other Reportable Accidents		No	No	PAN only NLT 7 days of accident	As determined by Cmdr/ MSC/CESO	As determined by Cmdr/ MSC/CESO	As determined by Cmdr/ MSC/CESO	No

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NOTES:

AGAR – DA Form 285-AB-R, Abbreviated Ground Report

CESO PHONE Numbers 202-761-8600/8566/8567

CRSC Phone Numbers 334-255-2660/2539/3410 or DSN 558-2660/2539/3410

Contractor notifies OSHA of his serious accidents

Overseas accidents are not reported to OSHA

Class A – Gov or contractor fatality, or permanent total disability,  $\geq$  \$2,000,000 property damage, or USACE aircraft destroyed, missing, or abandoned

Class B – Gov or contractor permanent partial disability, in-patient hospitalization of 3 or more persons, or  $\geq$  \$500,000 < \$2,000,000 property damage

Class C – Gov or contractor lost workday, or  $\geq$  \$50,000 < \$500,000 property damage

Class D – Gov or contractor non-fatal injury or illness that results in restricted work or job transfer, medical treatment greater than first aid, needle sticks from potentially infectious material, medical removal, occupational hearing loss, & work-related case or property damage  $\geq$  \$2,000 < \$50,000

Class E Accident – Aviation accident resulting in property damage < \$2,000

Class E Incident – Aviation incident resulting in mission interruption due to fair wear & tear or malfunction of a part

Class F – Aviation incident which results in turbine engine damage because of foreign object

Recordable Public Fatality – Member of public recreating fatality at Title 36 project.

Reportable Public Accidents – Serious injury to member of public recreating fatality at Title 36 project or injury/illness to member of public or damage to public/private property due to USACE/Contractor (on-site) operations.

Other Reportable Accidents – Any other accident Commander/MSA/CESO determines to investigate.

## GLOSSARY

Glossary 1. Abbreviations.

AGAR	Abbreviated Ground Accident Report (DA Form 285-AB-R)
AMV	Army Motor Vehicle
AR	Army Regulation
ASMIS	Army Safety Management Information System
BOI	Board of Investigation
CAI	Centralized Accident Investigation
CESO	HQUSACE Safety and Occupational Health Office
CFR	Code of Federal Regulations
CMR	Command Management Review
CRSC	U. S. Army Combat Readiness and Safety Center
DA	Department of the Army
DAC	Department of the Army Civilian
DA PAM	Department of the Army Pamphlet
DOD	Department of Defense
DODI	Department of Defense Instruction
DRU	Direct Reporting Unit
EM	Engineer Manual
EP	Engineer Pamphlet
ER	Engineer Regulation
FAIR	Formal Accident Investigation Report
FOA	Field Operating Activity
FOIA	Freedom of Information Act
HQUOC	Headquarters, USACE Operations Center
HQUSACE	Headquarters, U. S. Army Corps of Engineers
IAI	Installation Accident Investigation
IAW	In accordance with
IRS	Incident Reporting System
LRAS	Loss Reporting Automation System
MACOM	Major Army Command
MSC	Major Subordinate Command
NFPA	National Fire Protection Association
OPIM	Other Potentially Infectious Material
OSHA	Occupational Safety and Health Administration
PAN	Preliminary Accident Notification
PLHCP	Physician or Other Licensed Health Care Professional
POV	Personally Owned Vehicle
ROSA	Report of Serious Accident
SOH	Safety and Occupational Health
SOHO	Safety and Occupational Health Office
USACE	U. S. Army Corps of Engineers

Glossary-2. Terms.

**Abbreviated Ground Accident Report (DA Form 285-AB-R).** A two page fill-in-the-block/narrative form used for reporting specific Army ground accidents.

**Accident.** An unplanned event that causes personal injury or illness, or property damage.

**Accident Investigation Report.** Document of the accident investigation process. For example: ENG Form 3394, DA Form 285 series forms, Accident Board of Investigation Report, Formal Accident Investigation Report.

**Army accident.** An unplanned event, or series of events, which results in one or more of the following:

1. Occupational illness to Army military or DA Civilian personnel.
2. Injury to on-duty Army Civilian personnel.
3. Injury to Army military on- or off-duty.
4. Damage to Army property.
5. Damage to public or private property, and/or injury or illness to non-Army personnel caused by Army operations (the Army had a causal or contributing role in the accident).

**Army Civilian Personnel:**

1. Senior Executive Service, General Management, General Schedule, and Federal Wage System employees.
2. Corps of Engineers employees.
3. Army National Guard and Army Reserve technicians.
4. Non-appropriated fund employees (excluding part-time military).
5. Youth/Student Assistance and Temporary Program employees; Peace Corps and Volunteers in Service to America (VISTA) volunteers; Job Corps, Neighborhood Youth Corps, and Youth Conservation Corps Volunteers; Family Support Program volunteers.

**Army motor vehicle.** Any vehicle that meets the following criteria:

1. A vehicle that is owned, leased, or rented by the Department of the Army and/or Reserve components.
  2. A vehicle that is primarily designed for over-the-road operation.
  3. A vehicle whose general purpose is the transportation of cargo or personnel.
- Examples are passenger cars, station wagons, trucks, ambulances, buses, motorcycles, fire trucks, and refueling vehicles.

**Army property.** Any item of Army property, or property leased by the Army for which the Army has assumed risk of loss, such as an aircraft, a vehicle, a building, a structure, or a system.

**Aviation Accident.** Any aircraft flight/flight related accident.

**Centralized Accident Investigation.** An accident board of investigation conducted by the

**Combat Readiness and Safety Center.** See AR 385-10 Chapter 3-13 a.

**Competent medical authority.** Any duly qualified physician (Government or private) or registered professional medical personnel under the orders of a physician. "Competent medical authority" includes surgeons, podiatrists, dentists, clinical psychologists, optometrists, chiropractors, and osteopathic practitioners.

**Contractor accident.** An accident that occurs as a result of a Government contractor's operations in which there is damage to U.S. Government, Army, or contractor property or equipment, injury or occupational illness to contractor personnel, or other reportable event.

**Days away from work case.** An injury or illness which results in one or more (calendar) days away from work. A partial day of work is recorded as a day of job transfer or restriction for recordkeeping purposes, except for the day on which the injury occurred or the illness began.

**Establishment.** For the purposes of OSHA, Army, and USACE accident recordkeeping, HQUSACE and each division, district, and field operating activity is designated as an establishment.

**Fair wear and tear.** Loss or impairment of appearance, effectiveness, worth, or utility of an item that has occurred solely because of normal and customary use of the item for its intended purpose.

**First-aid.** First-aid is defined using a list of procedures that are all-inclusive and is not a recordable injury. If a procedure is not on the list, it is not considered first aid for recordkeeping purposes. The following are the procedures contained in the list:

1. Using nonprescription medication at nonprescription strength. However, if an employee is provided prescription medications or nonprescription medications at prescription strength, this is considered medical treatment.
2. Tetanus immunizations.
3. Cleaning, flushing, or soaking surface wounds.

4. Wound coverings, butterfly bandages, Steri-Strips. However, use of wound closure methods such as sutures, medical glues or staples is considered medical treatment.
5. Hot or cold therapy regardless of how many times it is used.
6. Non-rigid means of support.
7. Temporary immobilization device used to transport accident victims.
8. Drilling of fingernail or toenail, draining fluid from blister.
9. Eye patches.
10. Removing foreign bodies from eye using irrigation or cotton swab. However, use of other methods to remove materials from the eye is medical treatment.
11. Removing splinters or foreign material from areas other than the eye by irrigation, tweezers, cotton swabs or other simple means.
12. Finger guards.
13. Massages. Massage therapy is first aid, but physical therapy or chiropractic treatment is considered medical treatment.
14. Drinking fluids for relief of heat stress.

**Food/drink preparation.** Activities associated with preparing, cooking, and serving food/drinks. Examples: Preparing food, cleaning food preparation/serving equipment and facilities, cooking food, serving food.

**Government Direct Contractor.** Contractor employees who work under the direct day-to-day supervision of a USACE employee are considered USACE employees for OSHA accident recordkeeping purposes. Supervision means an individual employed by an agency has authority in the interest of the agency to hire, direct, assign, promote, reward, transfer, furlough, layoff, recall, suspend, discipline, or remove employees, to adjust their grievances, or to effectively recommend such action, if the exercise of the authority is not merely routine or clerical in nature but requires the consistent exercise of independent judgment...” [Title 5 U.S.C. Section 7103(a)(10)] Simply giving an order for a specific article or service to a contractor employee, with the right to reject the finished product or result, does not meet the definition of day-to-day supervision. The Federal Acquisition Regulations (FAR - 48 CFR 37.104) prohibit Federal agencies from awarding personal services contracts unless specifically authorized by statute (e.g., 5 U.S.C. 3109) to do so. The extent to which Government personnel supervise contractor employees is only one of several factors that must be considered in determining whether or not a contract constitutes personal services. Each contract arrangement must be judged in the light of its own facts and circumstances. Few contractor employees are directly supervised by DA employees. Examples of personal service contractor employees who may be directly supervised by DA employees include: consultants, experts, and contract students in research and development laboratories.



**Ground Accident.** Any accident exclusive of aviation (flight/flight related) for example AMV, ACV, POV, marine.)

**Hazard.** Any actual or potential condition that can cause injury, illness, or death of personnel or damage to or loss of equipment, property or mission degradation, or a condition or activity with potential to cause damage, loss, or mission degradation.

**Horseplay.** Spontaneous physical activities not required by duty or mission and not condoned by the Army.

**Hospitalization.** Admission to a hospital as an inpatient for medical treatment.

**Installation-Level Accident Investigation (IAI).** An accident board of investigation conducted by USACE. See AR 385-10 Chapter 3-13 b.

**Investigation.** A systematic study of an accident, incident, injury, or occupational illness circumstances.

**Job transfer.** When an employee/Soldier is assigned to a job other than his/her regular job for part of the day as a result of an injury or occupational illness.

**Medical treatment.** Any treatment (other than first aid) administered by a physician or by registered professional medical personnel under the orders of a physician.

**Motor vehicle.** Any vehicle that meets the following criteria:

1. A vehicle that is owned, leased, or rented by the USACE. This includes personally owned vehicles while used on official business.
  2. A vehicle that is primarily designed for over-the-road operation.
  3. A vehicle whose general purpose is the transportation of cargo or personnel.
- Examples are passenger cars, station wagons, trucks, ambulances, buses, motorcycles, fire trucks, and refueling vehicles.

**Occupational illness.** Non-traumatic physiological harm or loss of capacity produced by systemic infection; continued or repeated stress or strain; for example, exposure to toxins, poisons, fumes; or other continued and repeated exposures to conditions of the work environment over a long period of time. Includes any abnormal physical or psychological condition or disorder resulting from an injury, caused by long-or short-term exposure to chemical, biological, or physical agents associated with the occupational environment. For practical purposes, an occupational illness is any reported condition which does not meet the definition of an injury.

**Occupational injury.** A wound or other condition of the body caused by external force, including stress or strain. The injury is identifiable as to time and place of the occurrence and a member or function of the body affected, and is caused by a specific event or incident or series of events or incidents within a single day or work shift.

**Off-duty.** Army personnel are off-duty when they:

1. Are not in an on-duty status, whether on or off Army installations.
2. Have departed official duty station, temporary duty station, or ship at termination of normal work schedule.
3. Are on leave and/or pass.
4. Are traveling before and after official duties, such as driving to and from work.
5. Are participating in voluntary and/or installation team sports.
6. Are on permissive (no cost to Government other than pay) temporary duty.
7. Are on lunch or other rest break engaged in activities unrelated to eating or resting.

**On-duty.** Army personnel are on-duty when they are:

1. Physically present at any location where they are to perform their officially assigned work. (This includes those activities incident to normal work activities that occur on Army installations, such as lunch, coffee, or rest breaks, and all activities aboard vessels).
2. Being transported by DOD or commercial conveyance for the purpose of performing officially assigned work. (This includes reimbursable travel in POVs for performing TDY, but not routine travel to and from work.)
3. Participants in compulsory physical training activities (including compulsory sports).

**Other Potentially Infectious Material (OPIM).**

1. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids;
2. Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and
3. HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organ, or other tissues from experimental animals infected with HIV or HBV.

**Permanent partial disability.** Any injury or occupational illness that does not result in death or permanent total disability but, in the opinion of competent medical authority, results in the loss or permanent impairment of any part of the body, with the following exceptions:

1. Loss of teeth.
2. Loss of fingernails or toenails.
3. Loss of tip of fingers or tip of toe without bone involvement.
4. Inguinal hernia, if it is repaired.
5. Disfigurement.
6. Sprains or strains that do not cause permanent limitation of motion.

**Permanent total disability.** Any nonfatal injury or occupational illness that, in the opinion of competent medical authority, permanently and totally incapacitates a person to the extent that he or she cannot follow any gainful employment. (The loss or loss of use of both hands, feet, eyes, or any combination thereof as a result of a single accident will be considered as permanent total disability.)

**Personal hygiene, food/drink consumption, and sleeping.** Activities associated with taking care of personal requirements. Examples: Personal cleaning, grooming, eating, drinking, sleeping/resting.

**Physician or Other Licensed Health Care Professional.** A physician or other licensed health care professional is an individual whose legally permitted scope of practice (i.e., license registration, or certification) allows him or her to independently perform, or be delegated the responsibility to perform, the activities described by this regulation.

**Pre-existing physical condition.** A medical condition that existed prior to the occurrence of the accident.

**Recordable accident.** A reportable accident that meets the minimum criteria stated in this regulation for Class A-E accidents, Class E and F incidents, and recordable public fatalities.

**Recreating Visitor.** A member of the public present at a USACE owned or operated area (see definition below) and engaged in or intending to engage in any recreation activity commonly pursued at the USACE area such as swimming, boating, picnicking, camping, sightseeing, hunting, fishing, and hiking.

**Reportable accident.** All occurrences that cause injury, illness, or property damage of any kind must be reported to the soldier's/employee's/unit's servicing/supporting safety office.

**Restricted Work.** An employee's work is considered restricted when, as a result of a work-related injury or illness, (A) the USACE Command supervisor keeps the employee from performing one or more of the routine functions of his or her job (job functions that the employee regularly performs at least once per week), or from working the full workday that he or she would otherwise have been scheduled to work, or (B) a physician or other licensed health care professional recommends that the employee not perform one or more of the routine functions of his or her job, or not work the full workday that he or she would otherwise have been scheduled to worked.

**USACE Accident.** An unplanned event, or series of events, which results in one or more of the following:

1. Occupational illness to USACE Military or Civilian personnel.
2. Injury to on-duty USACE Civilian personnel.
3. Injury to Army Military on- or off-duty.
4. Damage to Army property.
5. Damage to public or private property, and/or injury or illness to non-Army personnel caused by Army operations (the Army had a causal or contributing role in the accident).
6. Injury or occupational illness to on-duty contractors supervised by Army personnel on a day to day basis.
7. Injury or occupational illness to on-duty contractors/sub contractors or damage to contractor/sub contractor property, which occurs on-site and where accident reporting to the Army is contractually required.
8. Injury or occupational illness to on-duty contractors/subcontractors or damage to contractor/subcontractor property, which occurs on-site and accident reporting to USACE is contractually required.
9. Injury or death to members of the public who are recreating at USACE-owned or operated areas where CFR Title 36, Chapter III, Part 327, Parks, Forests, and Public Property is applicable.

**USACE Owned or Operated Areas.** Those areas where CFR Title 36, Chapter III, Part 327, "Parks, Forests, and Public Property" is applicable. This includes:

1. The water areas of any water resources development project administered by the Chief of Engineers and authorized under CFR Title 36 without regard to ownership of underlying land.
2. All lands owned in fee by the Federal Government and administered by USACE.
3. All facilities therein of any such water resources project, including state parks, marinas, etc.

**Workplace.** A place (whether or not within or forming part of a building, structure, or vehicle) where any person is to work, is working, for the time being works, or customarily works, for gain or reward; and in relation to an employee, includes a place, or part of a place, under the control of the employer (not being domestic accommodation provided for the employee).

**Work-related injuries.** Injuries or occupational illnesses incurred while performing duties in a in an on-duty status.