NAVY OCCUPATIONAL SAFETY AND HEALTH PROGRAM
FY 1997 AGENCY ANNUAL OSHA REPORT

Name of Agency	Department of the Navy
Name of Component	U.S. Navy
Address	The Pentagon Washington, D.C. 20350-2000
Number of employees covered by this report	192,402 (Civilian Workforce, Approximate)
Number of activities covered by this report	490 (Approximate)
Name of individual responsible for the Navy Occupational Safety and Health Program	VADM James F. Amerault, USN Deputy Chief of Naval Operations, (Logistics) (N4)

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NAVY OCCUPATIONAL SAFETY AND HEALTH PROGRAM

I. *REPORT COVERAGE*. The statistical aspects of this report cover the U. S. Navy's shore installations in the United States and the Navy's civilian employees within the United States. Notable afloat initiatives are also mentioned in the report. The Navy is a significant industrial employer with numerous operations, processes, work environments, and occupations. During FY 1997, the Navy employed approximately 192,402 civilian employees at approximately 490 installations, including naval shipyards, aviation repair activities, and construction sites.

II. *PROGRAM PERFORMANCE*.

A. LOST-TIME INJURY AND ILLNESS RATES AND COSTS

1. *How are your lost-time injury and illness rates and Workers' Compensation costs proceeding over time?*

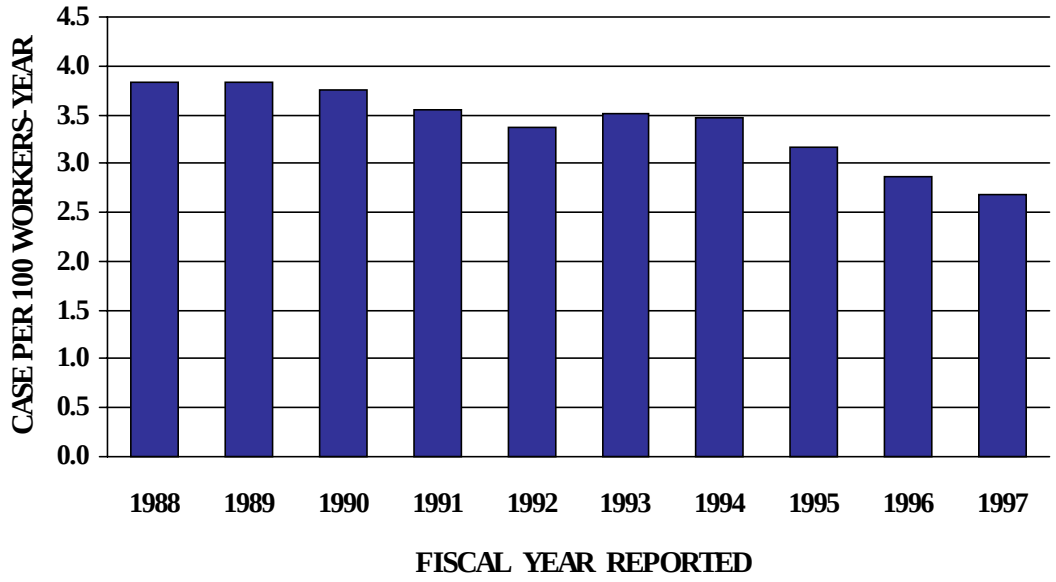
a. *Is the long-term trend (past 10 years) up or down?*

The long-term trend since 1988 is down for the *Lost Time Case Rate*. The long-term trend for Workers' Compensation costs during the same period was up from 1988 until 1994, peaking in 1994, then flat or declining since 1994. Refer to Tables 1 through 3 and Graphs 1 through 4.

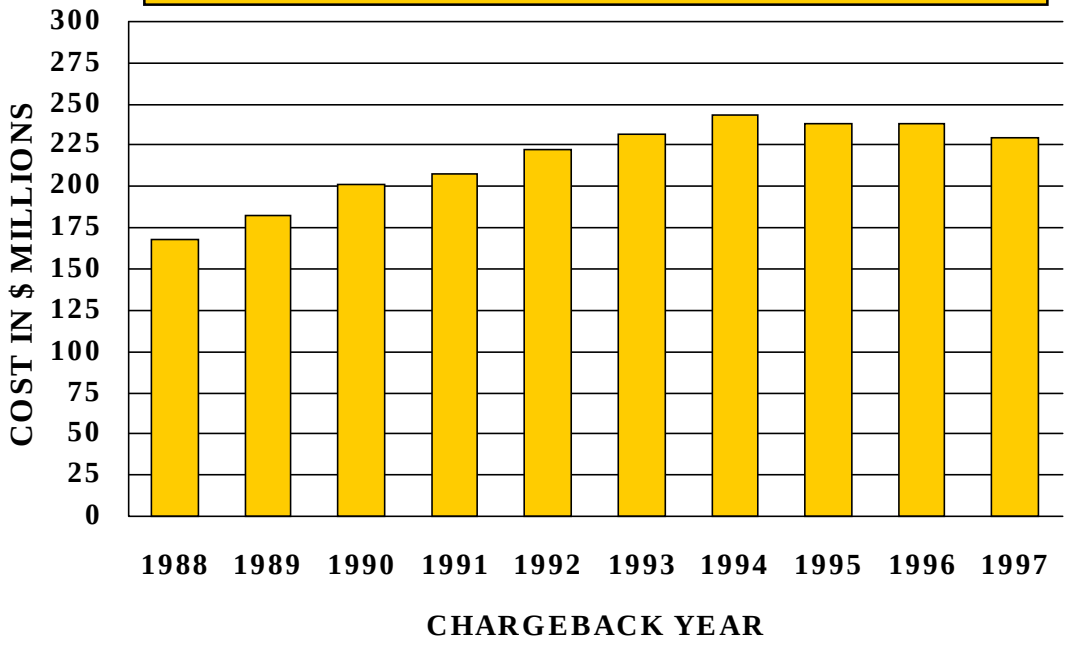
Table 1: FY 1997 INJURY AND ILLNESS CASES

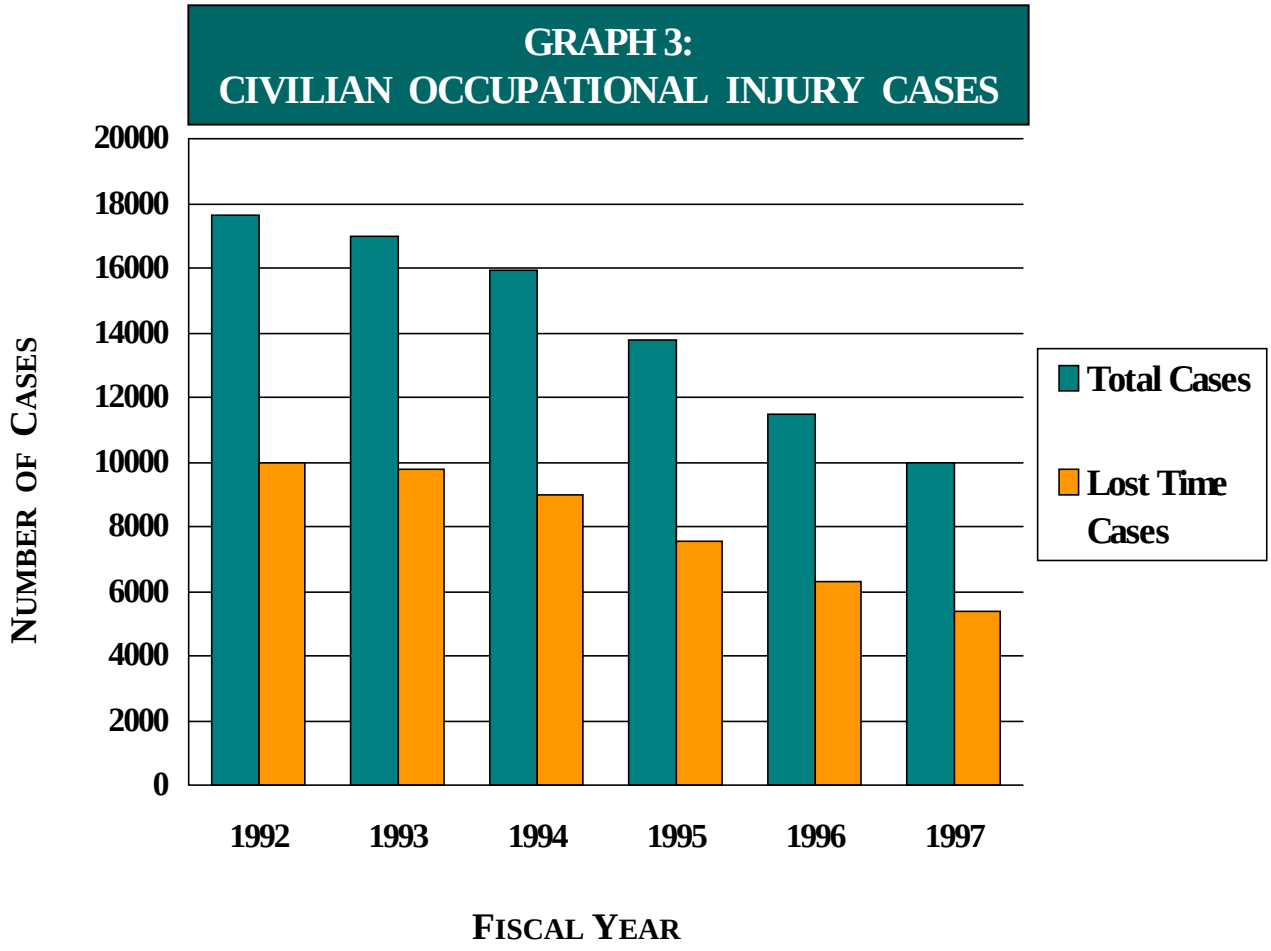
Fiscal Year	Lost Time Case Rate (cases per 100 worker-years)	Chargeback Year	Workers'Compensation Costs ($Millions)
1997	2.69	1997	229.4
1996	2.86	1996	237.8
1995	3.16	1995	237.6
1994	3.47	1994	243.2
1993	3.51	1993	232.3
1992	3.38	1992	222.5
1991	3.56	1991	207.9
1990	3.75	1990	201.1
1989	3.83	1989	182.2
1988	3.84	1988	168.1

GRAPH 1: CIVILIAN WORKERS' COMPENSATION LOST TIME CASE RATE (LTCR)



GRAPH 2: CIVILIAN WORKFORCE WORKER'S COMPENSATION COSTS




GRAPH 3:
CIVILIAN OCCUPATIONAL INJURY CASES
20000
18000
16000
14000
12000
10000
8000
6000
4000
2000
0
NUMBER OF CASES
1992
1993
1994
1995
1996
1997
FISCAL YEAR
Total Cases
Lost Time Cases

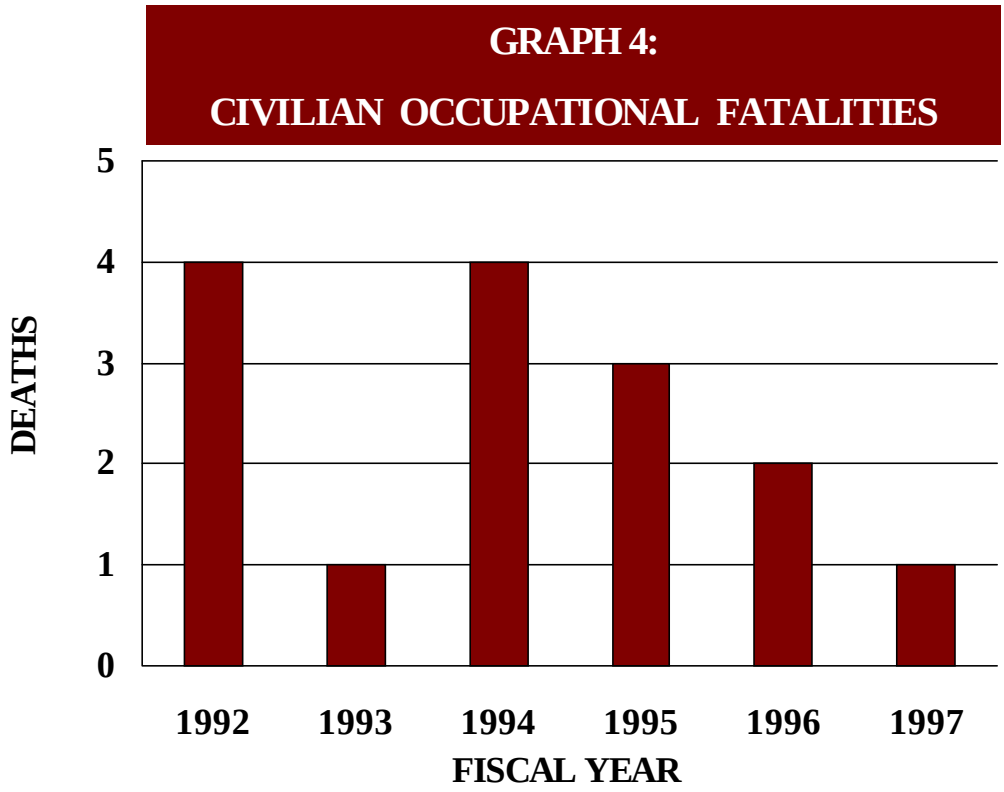

GRAPH 4:
CIVILIAN OCCUPATIONAL FATALITIES
5
4
3
2
1
0
DEATHS
1992
1993
1994
1995
1996
1997
FISCAL YEAR

TABLE 2: WORKERS' COMPENSATION CASES

CATEGORY	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
Total Injury/Illness Cases*	**17,663**	**16,980**	**15,948**	**13,788**	**11,507**	**9,973**
Fatalities**	**4**	**1**	**4**	**3**	**2**	**1**
Lost Time Cases	**9,950**	**9,741**	**8,955**	**7,526**	**6,270**	**5,375**
Number of Employees***	**282,751**	**266,512**	**247,707**	**228,726**	**210,583**	**192,402**

Source of Data: * Department of Labor, Office of Workers' Compensation Program FECA Cases filed during fiscal year
** Naval Safety Center Occupational Injury Database
*** Navy Civilian Personnel Data System (NCPDS)

TABLE 3: OWCP* RATES OF INJURIES AND ILLNESSES PER 100 EMPLOYEES

CATEGORY	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
OWCP Total Case Rate	**6.00**	**6.13**	**6.19**	**5.79**	**5.25**	**4.98**
OWCP Lost Time Case Rate	**3.38**	**3.51**	**3.47**	**3.16**	**2.86**	**2.69**

* Office of Workers' Compensation Program (OWCP)

b. Is the short-term trend (past 3 years) up or down?

The short-term trend is down for the *Lost Time Case Rate*. See subsection IIA1a, above.

2. Why are these trends occurring?

The decreasing trend in both the long-term and short-term Lost Time Case Rates is due, at least in part, to the effectiveness of initiatives the Navy has successfully implemented in its *Navy Occupational Safety and Health (NAVOSH) Program Manual*, OPNAVINST 5100.23D. The NAVOSH program has proven successes and is regularly evaluated to identify additional opportunities for program improvement. In addition, the Navy has experienced an overall reduction in heavy industrial operations due to military *Base Realignment and Closure* (BRAC) legislation that has resulted in the elimination of numerous military facilities and the outsourcing of depot-level maintenance.

a. What processes were changed?

The following subsection illustrates the improvement initiatives in FY 1997 under the NAVOSH Strategic Plan and through mishap reduction initiatives:

(1) The NAVOSH Strategic Plan: Since 1993, we have undertaken substantial initiatives to develop and implement a strategic plan for the NAVOSH program. The NAVOSH Quality Council was established as a component of the planning process, and membership is representative of industrial hygiene and safety professionals throughout the Navy. The NAVOSH Quality Council developed the initial NAVOSH Strategic Plan in December 1993 and oversaw its implementation. The original NAVOSH Strategic Plan was updated in October 1994 and again in November 1996. It contains our mission statement and strategies for NAVOSH, its guiding principles, and its long-term vision. A copy of the 1996 NAVOSH Strategic Plan is provided as Attachment 1.

(a) The NAVOSH Strategic Plan encompasses five (5) major strategies. Specific goals and objectives were developed, and a timetable was established for accomplishment of each strategy. The five strategies are:

(i) Communications and information systems;
(ii) Process review and measurement;
(iii) OSH integration into the planning, engineering, and acquisition system;
(iv) Training and education; and
(v) Occupational health support.

(b) A Quality Management Board (QMB) was established for each of the five strategies. Process Action Teams (PATs) were appointed to facilitate development and implementation of each strategy and to expedite meeting its goals.

(c) The NAVOSH Strategic Plan provides program goals and objectives for the subsequent five (5) fiscal years. During FY 1997, the QMBs and NAVOSH Quality Council met regularly to accomplish implementation of goals and objectives. A summary of significant accomplishments under the NAVOSH Strategic Plan during FY 1997 follows:

(i) Communications and information systems issues constitute an important strategy. During FY 1997, we completed a survey to revalidate the information needs of the Navy's OSH community. We continued to standardize an automated data management system for industrial hygiene and established a PAT to evaluate OSH office automation. We developed modules for occupational injury and illness record keeping, training, personal protective equipment, and medical surveillance record keeping. The QMB also evaluated the Internet as an OSH information resource.

(ii) The Planning, Engineering, and Acquisition QMB developed, completed, and distributed an Automated Hazard Analysis System (AHAS). The AHAS was designed for engineers and designers to integrate occupational safety and health considerations into the facility design process. Training was provided to AHAS users, and efforts were initiated to monitor its use and effectiveness. The QMB is now reviewing ship weapons systems and design issues that affect occupational safety and health.

(iii) The Process Review and Measurement (PR&M) QMB completed its review of the current NAVOSH Program Manual and provided recommendations to simplify requirements, remove redundancies, and eliminate unnecessary and non-value added requirements. The QMB's recommendations were incorporated into the draft revision of the NAVOSH Program Manual that is currently in a review cycle. The PR&M QMB also completed work on development of a performance measurement system for shore installations. The Navy Occupational Safety and Health Oversight Inspection Unit (NOIU) has incorporated this measurement system into its inspection process.

(iv) The NAVOSH Training QMB has four (4) PATs that represent the four Navy communities – aviation, surface ships, submarines, and shore activities. The Training QMB determines NAVOSH training requirements through the PATs and includes them in the Naval Training Plan (NTP) for development and implementation. Several changes, based on reviews and recommendations made by the PATs, were incorporated into the NTP action plan during FY 1997. Through these initiatives, we continue to fine-tune OSH training programs for military and civilian personnel in aviation, on surface ships, on submarines, and at shore installations.

(v) The Occupational Health Support QMB continued to identify key processes for standardization and measurement. We continued to review and redefine roles and responsibilities within the Navy's occupational health program.

(2) Mishap Reduction Initiatives: In addition to initiatives developed under the NAVOSH Strategic Plan, we integrate quality management concepts into OSH program improvement. The principal reduction initiative at commands and activities involves development of annual OSH Program Improvement Plans (OSHPIPs) that are linked to mishap reduction. As reported to OSHA in prior years, the OSHPIP process requires each command to identify its program deficiencies and mishap trends and to develop strategies and mechanisms to improve programs and processes.

In FY 1997, we completed the eighth year of this program. Through OSH quality management boards and process action teams, the Navy has made substantial progress in controlling hazards at industrial installations. The following is a summary of some corporate-level initiatives that focus on reducing mishaps and reducing Workers' Compensation claims along with the costs associated with mishaps, injuries and illnesses:

(a) Quarterly Mishap Reports: Navy headquarters (CNO/N454) continued to develop and provide quarterly performance reports on overall mishap reduction goals. The reports include performance charts and provide guidance for goal attainment. We continued to monitor mishap performance each calendar quarter and provided revised performance charts to major commands. These reports focus management's attention on installations that are successful in reducing mishaps and which serve as examples for others to follow. Quarterly Mishap reports also include information on activities that have not reduced their mishap rates.

(b) CNO Mishap Review Board: The CNO Mishap Review Board, which convenes as needed, and at least annually, consists of representatives within the chain of command of an activity where a fatality has occurred and from each major command. Following any fatality or major mishap, a thorough, professional NAVOSH investigation is conducted to identify root causes and interventions needed. The commanding officer, the highest-ranked military leader at the field activity, often participates on the board and, as a result of the experience, frequently becomes a strong proponent of occupational safety and health. Following an appearance before a mishap review board, one executive officer spoke at the FY 1997 NAVOSH Professional Development Conference, concerning his command's experience with a mishap review board and the *lessons learned.* He also addressed several *Prospective Commanding Officer/Prospective Executive Officer (PCO/PXO)* courses during the year. His presentations were consistently well received and stimulated discussion concerning the role of upper management in mishap prevention.

The mishap review process has proven beneficial to the Navy. We recommend OSHA consider a similar process to ascertain *lessons learned* from other federal agencies under its purview.

(c) Navy Corporate Ergonomics Plan: The Navy's ergonomics program was initiated in 1989 as a back injury prevention policy and was expanded in 1994 to include ergonomics. Commands, especially industrial installations, have been actively involved in implementing ergonomics program requirements. These programs have been highly successful, especially the Total Quality Management (TQM) concepts and the employee participation components. Our most successful ergonomics programs have included collaboration between management and workers in identifying risk factors and development of ergonomic solutions. As a result of these successes, we developed a *Corporate Ergonomics Plan* in FY 1995 and selected sites for a pilot project to determine the cost effectiveness of ergonomic programs in the Navy. Six (6) shore installations and one (1) ship are currently participating in the pilot project, which is scheduled for completion in FY 1999.

The Navy Corporate Ergonomics Plan emphasizes training of managers, ergonomics coordinators, and worker ergonomics teams. Ergonomic processes will be implemented at targeted activities through these teams. The Plan also emphasizes the importance of management support, worker involvement, and strong oversight and facilitation; it also includes data collection requirements and measurements of effectiveness. The Navy has assigned an ergonomics expert to visit the pilot project sites to assist in program implementation and to monitor implementation of the ergonomic process. To date, on-site training has been conducted, teams have been established, and ergonomic processes have been initiated. Following completion of the pilot project, ergonomics will be considered for implementation Navy-wide. As a component of the pilot ergonomics project, we also inaugurated an ergonomics information publication, *Ergo News*, as an educational and promotional tool. A sample copy of an edition of *Ergo News* is provided as Attachment 2.

(d) Occupational Safety & Health System (OSHSYS): The Navy completed the first phase of development of OSHSYS, an automated program for analyzing the effectiveness of reducing the costs of mishaps. The first phase is an automated compilation of FECA information, which was developed by professional actuaries and is available on compact disk. The program provides standardized analytical screens and equations for normalizing data to allow comparison of Workers' Compensation information between and among activities and organizations. We believe this program has value for the Navy and recommend it be evaluated by other Federal agencies. A copy of the most recent OSHSYS is provided as Attachment 3.

Other cost reduction initiatives are being evaluated at the activity level. These include *Return To Work* programs, occupational health nurse interventions, investigations of suspect Workers' Compensation claims, limited duty and restricted duty programs, redefinition of long term compensation rolls, providing guidance on FECA to local health care providers, and increased utilization of Naval medical facilities. These initiatives have made a significant contribution to the recent downward trend in Workers' Compensation costs.

(e) NAVOSH Training: The Navy Occupational Safety and Health, and Environmental Training Center (NAVOSHETC) provides economical, high-quality training to the Navy's OSH professionals and others. The Navy Environmental Health Center (NEHC) offers a weeklong Occupational Health and Preventive Medicine Workshop on an annual basis. In addition to OSH and preventive medicine professionals from the Navy, this highly respected conference also draws attendees from our sister services and Canadian forces.

During FY 1997, we continued to emphasize professional training at the Naval bases with the greatest demand. The NAVOSH training schedule included instruction of 6,573 personnel in 293 classroom sessions of the 35 formal classes offered in FY 1997. NAVOSHETC also conducted its annual NAVOSH Professional Development Conference (PDC) in Norfolk, Virginia in FY 1997, that was attended by 270 personnel.

(f) Operational Risk Management: The Navy issued OPNAV Instruction 3500.39, *Operational Risk Management (ORM)* in FY 1997. This Instruction describes a 5-step process to maximize informed risk management decisions. The five steps are Hazard Identification, Hazard Analysis, Risk Decision, Implementation of Controls, and Monitoring. This Instruction is an important milestone for the Navy since it requires the military to consider risk reduction in operational settings, such as wartime, as well as in peacetime support operations. The ORM Instruction is in the process of implementation throughout the Navy. A copy of OPNAV Instruction 3500.39 is provided as Attachment 4.

(b) *How did these changes affect your rates?*

The intent of all NAVOSH initiatives is to reduce mishap rates, to prevent work-related injuries and illnesses, and to improve the work environment. However, correlation of a specific initiative with mishap reduction or prevention of occupational injuries or illnesses is complex due to the influence of numerous changes throughout the Navy. For example, in recent years, the Navy has closed four shipyards, three aviation depots, and various other industrial installations. These closures have substantially reduced the number of hazards that had previously accounted for the preponderance of our mishaps and Workers' Compensation claims.

During the same period, additional, non-industrial risk factors, such as ergonomic hazards and indoor air quality issues, have been identified in medical and administrative spaces. Furthermore, ongoing industrial activities have implemented process changes, such as mechanical aids and new equipment, to improve productivity. An added benefit has been a reduction in the number of mishaps the Navy has experienced.

(c) *What are the five top causes of injuries and illnesses*?

Mishap reports compiled by the Naval Safety Center during FY 1997 provide data on the most frequently reported occupational mishaps, injuries and illnesses. Table 4, below, provides information on the five (5) leading causes of occupational injuries and illnesses by Mishap Type, Source of Mishap, Type of Injury, and Body Part Injured.

TABLE 4:
FY 1997 FIVE LEADING CAUSES OF OCCUPATIONAL INJURIES AND ILLNESSES

MISHAP TYPE	No.	SOURCE OF MISHAP	No.	TYPE OF INJURY	No.	BODY PART	No.
Mishap/Stores Handling	**343**	**Overexertion**	**428**	**Strain/Sprain**	**581**	**Back**	**352**
Walking/Stepping	**330**	**Fall, Same Level**	**258**	**Fracture**	**197**	**Knee**	**176**
Equipment Installation/ Removal	**137**	**Fall From Elevation**	**154**	**Contusion**	**125**	**Hand**	**110**
Office Work	**109**	**Struck By**	**94**	**Muscle Tear**	**100**	**Ankle**	**100**
Equipment Operation	**97**	**Caught In, Under or Between**	**71**	**Laceration**	**67**	**Shoulder**	**92**

In addition to the five leading causes of injuries and illnesses, Charts 1 through 4, on the next two pages, show the causes of the 1,203 occupational injuries reported in FY 1997 by Mishap Type, Source of Mishaps, Type of Injury, and Body Part Injured.

CHART 1: FY 1997 MISHAPS BY MISHAP TYPE: 1,203 INJURIES

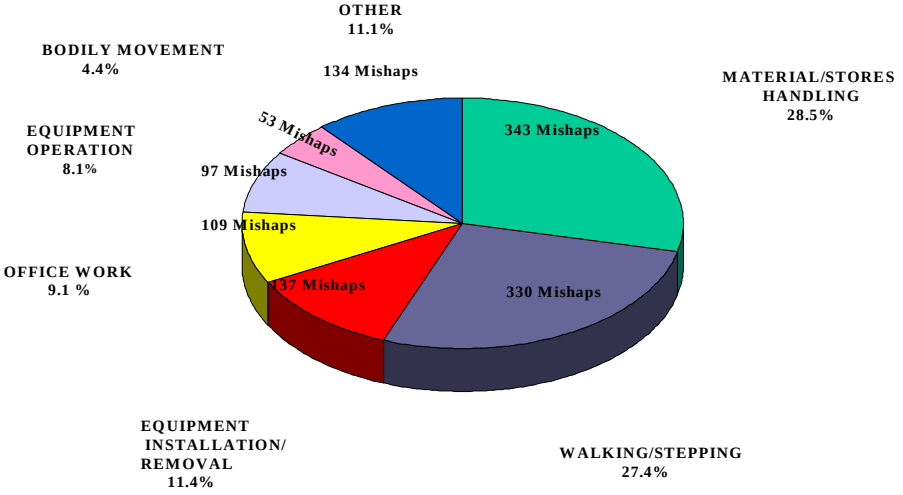


CHART 2: FY 1997 MISHAPS BY SOURCE OF MISHAPS: 1,203 INJURIES

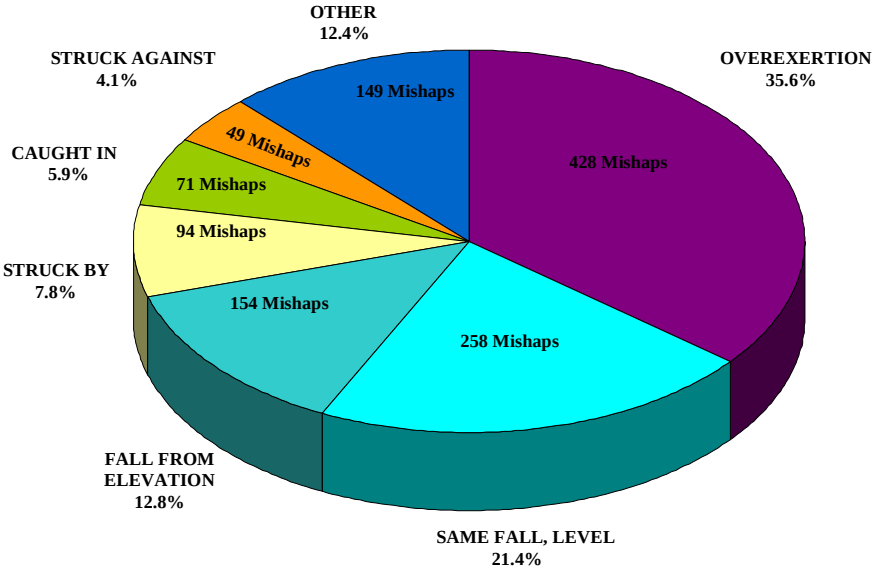


CHART 3: FY 1997 MISHAPS BY TYPE OF INJURY: 1,203 INJURIES

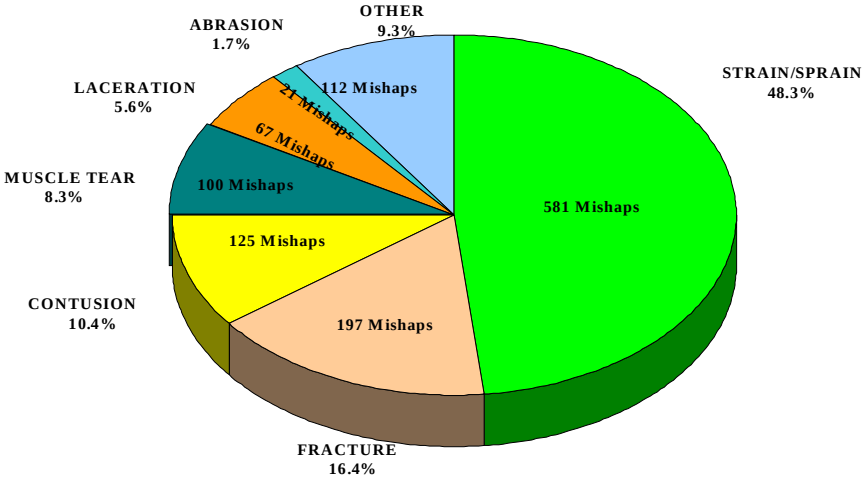
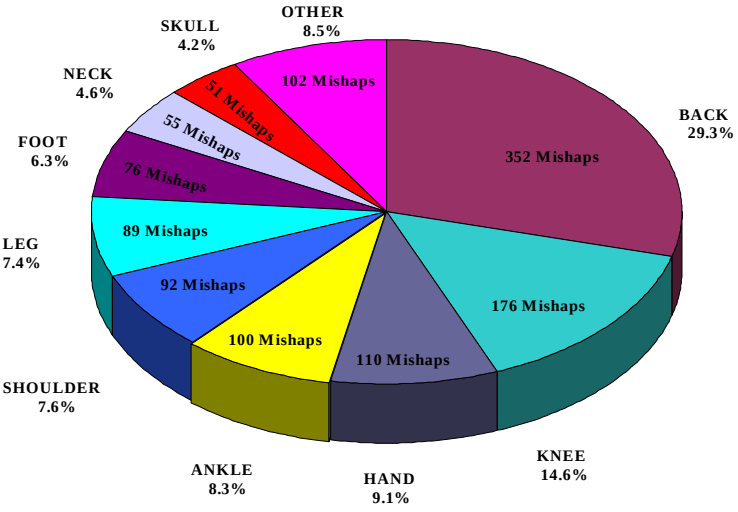


CHART 4: FY 1997 MISHAPS BY BODY PART INJURED: 1,203 INJURIES



B. HAZARD ABATEMENT

1. *Does your agency have an active program to recognize, evaluate, and control workplace safety and health hazards? If so, please describe.*

The Navy has an extensive hazard abatement program that fully complies with the requirements of 29 CFR 1960. Our program was developed to enhance the recognition, evaluation, and control of occupational safety and health hazards. The Navy's hazard abatement program is described in the NAVOSH Program Manual, Chapter 9, *NAVOSH Inspection Program* and Chapter 12, *Deficiency (Hazard) Abatement Program*. A copy of the NAVOSH manual had previously been provided to OSHA, however a compact disk of the NAVOSH manual is provided as Attachment 5 to this report. Note that the NAVOSH Policy Instruction is currently undergoing extensive review and is scheduled for reissue in FY 1999.

Since FY 1995, the Navy has been developing innovative methods for correction of occupational hazards in a timely manner. These successful undertakings continued through FY 97. Rather than relying exclusively on conventional engineering design and construction contracts, the Navy also uses in-house public works, base operating support, and job order contracts, to effect rapid turnaround and efficient hazard abatement. We continue to prioritize correction of the most hazardous conditions first rather than managing them chronologically.

Expenditures in FY 1997 under the centrally funded NAVOSH Hazard Abatement Program were $13.4 million for 93 projects that included facilities projects and program improvement studies and projects. From 1979 through 1997, over $304 million has been expended under our centrally managed program to abate workplace hazards, including more than 1,660 large facility projects. These included asbestos abatements, industrial ventilation upgrades, abatement of life safety hazards, elimination of electrical safety hazards, management of hazardous materials, and implementation of fall protection. Several successful pilot projects that were initiated in FY 1997 will be continued in FY 1998. They include:

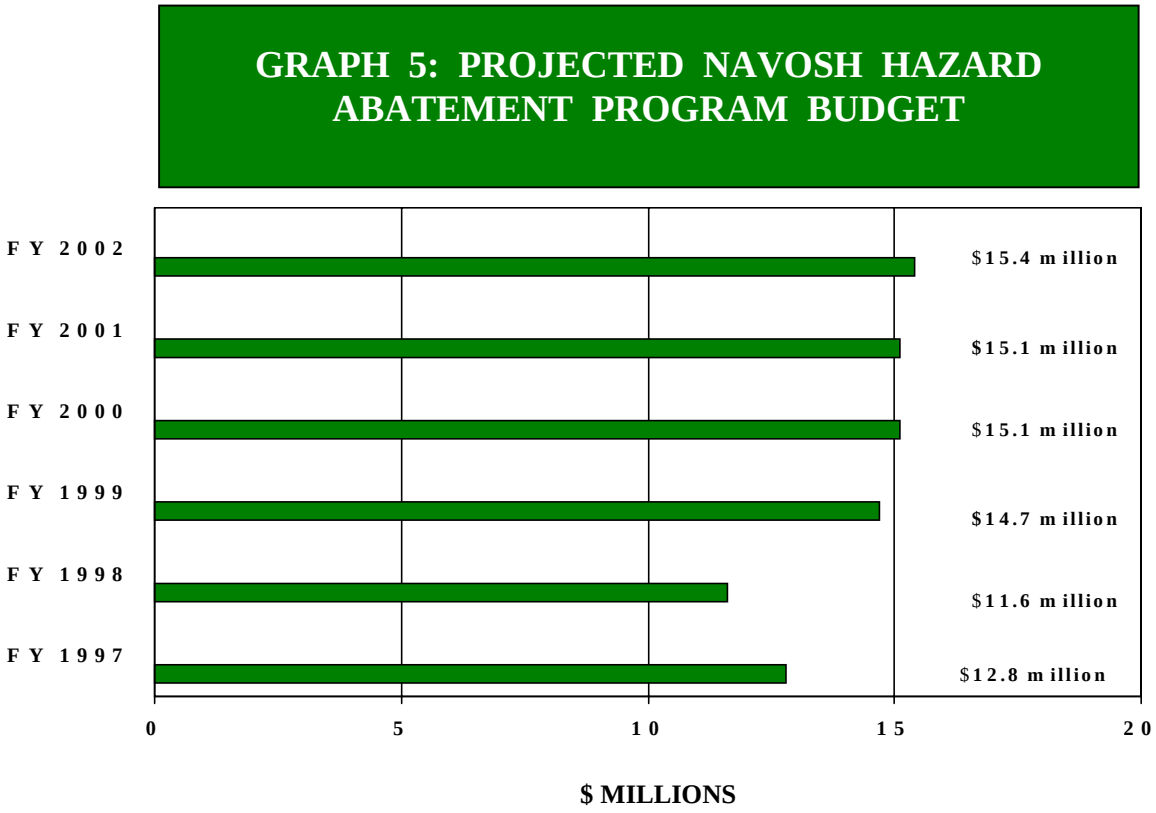
(a) Consolidation of hazard abatement project management within the United States from 16 managers to 10, with funding distributed directly for the most efficient hazard abatement methods.

(b) Establishment of a hazard abatement project round table for presentation of information on hazardous projects to a panel of industrial hygiene and safety experts for resolution.

(c) In a partnering venture, a Navy and Industry Task Group headed by the Naval Sea Systems Command prepared a report that addresses technical and economic considerations of new and anticipated reductions in Permissible Exposure Limits (PELs). To assist OSHA in understanding shipyard operations, the Navy invited the agency to view our operations and to discuss data related to hexavalent chromium and manganese fume exposures and welding processes.

(d) In another partnering venture, The Navy Environmental Health Center is collaborating with the Air Force Armstrong Laboratory's Human Systems Center to conduct a field study on isocyanate exposures, including an epidemiological study. A task force is developing criteria for side by side sampling, using two different sampling methods, in Navy and Air Force work areas as a coordinated effort to answer questions regarding isocyanate exposures.

The budget for the NAVOSH hazard abatement program for FY 1997 and target projections for the following five (5) fiscal years are presented in Graph 5.



The NAVOSH hazard abatement program focus in FY 1998 will continue to provide services:

- To assist shore activities in managing hazard abatement projects;
- To streamline the process of acquisition and distribution of funds;
- To continue prioritization of deficiencies; and
- To identify the most cost-effective and efficient methods for managing hazard abatement projects.

2. *How does management assure that abatement has taken place?*

Commanding officers of shore activities are responsible for the correction of workplace hazards. The NAVOSH manual, Chapter 12, *Deficiency (Hazard) Abatement Program*, defines responsibilities for tracking safety and health hazards to confirm abatement of hazards. Responsibilities include establishing and maintaining an up-to-date hazard abatement plan, updating project priorities, and ensuring periodic review of open projects.

(a) *Please describe or attach a description of your automated abatement tracking system.*

The Navy does not maintain a Navy-wide automated abatement tracking system. Individual activities are tasked with developing their tracking internal systems.

(b) *How do you track abatement due dates?*

Procedures for tracking abatement due dates vary from activity to activity. Navy policy requires interim control measures to protect workers and others at risk, as described in subsection IIB2c, below. Correction of hazards and improvements to the workplace are discussed in the NAVOSH Program Manual, Chapter 12, *Deficiency (Hazard) Abatement Program*. The Navy's process for central funding of hazard abatement projects is described in subsection IIB3, below.

(c) *How do you record actual correction dates?*

NAVOSH deficiencies assigned RACs of 1, 2, or 3 are reported to higher echelon OSH management in NAVOSH Deficiency Notices that are processed by the activity's OSH office. The official in charge of the cited operation is required to initiate corrective action within 30 days of the date of the notice. Interim protective measures are required, pending permanent abatement. The notice also indicates the status of the deficiency, whether the deficiency has been corrected, the specific abatement actions taken, and the date of correction.

3. *Do you prioritize the abatement actions? Please explain the hazard abatement and funding priorities to fix the backlogs.*

The Navy developed a systematic methodology for prioritizing NAVOSH projects since backlogs of deficiencies may deplete available funding before the end of a fiscal year. Funding priorities are categorized as *locally funded* and *centrally funded*. Centrally funded NAVOSH hazard abatement projects are assigned a hazard control assessment (HCA) which is used to prioritize projects prior to requesting centrally managed funds. The HCA is a 3-digit dimensionless number, the digits in decreasing order of priority. The NAVOSH manual describes the process of hazard control assessment in Chapter 12, Section 1204, *Hazard Abatement Project Development*.

A reporting system was established by the Navy Facilities Engineering Command to notify activities and major claimants of the HCAs assigned to their hazard abatement projects. Each validated hazard that cannot be immediately corrected is assigned a Risk Assessment Code (RAC) by the activity's OSH office. The RAC represents the degree of risk associated with the hazard and the probability of a mishap resulting from that hazard. It is also used to assign an abatement priority for that hazard.

A RAC of 1, 2, or 3 is reported in a NAVOSH Deficiency Notice, which is forwarded to the official in charge of that operation. A copy is posted in the location of the hazard until that hazard has been abated. The Deficiency Notice is updated periodically to verify the status of abatement and interim controls. The head of the activity reviews the abatement plan at six-month intervals to verify prioritization and the progress of corrective actions.

Projects that do not meet the criteria for centrally managed funding under NAVOSH Hazard Abatement Program guidelines are prioritized internally by the activity, based on hazard abatement priority guidelines and on assigned RACs. The activity OSH office prioritizes multiple projects with identical RACs according to the estimated number of persons exposed to the hazard and the projected cost of hazard abatement.

C. SAFETY AND HEALTH PROGRAM MEASUREMENT AND EVALUATION

1. *How do you evaluate/measure the success or failure of field unit accident, injury, and illness prevention programs?*

The Navy measures the performance of its Occupational Safety and Health Program through a three-tiered program evaluation system that has been designed both to ensure compliance with Federal and Navy standards and policies and to assess overall program effectiveness.

a. *Audits against the requirements of 29 CFR 1960. Conducted by headquarters? Conducted by field units?*

The following is a description of the three-tiered audit system defined in subsection IIC1, above:

(1) Field Unit (tier one) safety and health program self-evaluations are required at each activity. Qualified industrial hygiene and safety professionals perform these self-evaluations at least annually. Workplace hazards identified during these inspections must be recorded and entered into the hazard abatement program for abatement. Activities must also conduct internal reviews of program effectiveness.

(2) Headquarters (tier two) safety and health evaluations are required at least triennially as management evaluations by commands for their subordinate commands. Commands also follow-up to ensure subordinate commands take action to correct deficiencies identified during their tier one self-evaluations.

(3) The Naval Inspector General's (NAVINSGEN) NAVOSH Oversight Inspection Unit (NOIU) performs Inspector General (tier three) safety and health evaluations as agency oversight evaluations. NAVINSGEN's position as a component of the Secretary of Navy allows evaluations to be carried out independent of the chain of command, across the full spectrum of Navy shore establishments. NOIU uses a compliance-based quantitative measurement system to rate the effectiveness of each activity's program and to provide a means of monitoring the effectiveness of corrective actions between inspections. Oversight inspections evaluate program administration as well as compliance in the work place. Each activity receives separate quantitative scores for program administration and for work place compliance. The two grades are averaged to calculate a final score and rating. Commands receiving a final score of 75 percent or higher receive a *Satisfactory* rating; those scoring below 75 percent receive a rating of *Unsatisfactory*. Oversight inspection reports are published under NAVINSGEN's signature as a forwarding memorandum to the Secretary of Navy with copies to the Chief of Naval Operations (CNO) and to the chain of command of the inspected activity. NOIU also reports inspection trends and finding summaries to CNO (N454) semiannually, so that program guidance can be initiated toward resolution of systemic problems.

NOIU tracks activity level program correction of deficiencies identified during NAVINSGEN oversight inspections. Activities required to submit semiannual implementation status reports to NOIU until all identified deficiencies have been reported as corrected. NOIU confirms reported corrective actions during subsequent oversight inspections.

TABLE 5: NAVINSGEN OSH OVERSIGHT INSPECTIONS

Fiscal Year	Satisfactory	Marginal	Unsatisfactory	Conditional
1983	56 (64.3%)	13	18	
1984	70 (76.9%)	10	11	
1985	80 (80.8%)	9	10	
1986	82 (81.2%)	15	4	
1987	87 (82.9%)	13	5	
1988	88 (87.2%)	7	6	
1989	94 (94.0%)	1	5	
1990	93 (96.9%)		3	
1991	93 (91.2%)		9	
1992	98 (95.1%)		5	
1993	99 (97.0%)		3	
1994	96 (97.0%)		3	
1995	85 (95.5%)		4	
1996	62 (98.4%)	1		
1997	58 (93.6%)	2		1*

* Conditional classification given to an activity which rated an *Unsatisfactory* rating, but which was due for closure. The Conditional classification was given with the understanding that the deficiencies be corrected prior to closure.

b. *Injury and illness reports?*

The Navy's evaluation of occupational injury and illness reports as a measure of success of field units' injury and illness prevention programs is described in subsection IIA2 of this report.

2. *What action(s) does the DASHO take if a problem is indicated by the information obtained above?*

Previously reported deficiencies found on subsequent Naval Inspector General (NAVINSGEN) oversight inspections to be uncorrected or recurrent are treated as repeat findings, and additional penalty points are subtracted from the OSH Program score. Activities rated *Unsatisfactory* on oversight inspections are subject to multiple actions. The Naval Inspector General sends a letter describing the deficiencies to the activity's headquarters with copies to the Chief of Naval Operations (CNO) and the remaining chain of command. The Naval Inspector General reinspects the activity within 15 months to verify correction of deficiencies. The DASHO addresses systemic deficiencies through policy directives, special interest items to be evaluated during the command's internal inspections, and through the centralized NAVOSH hazard abatement project funding process.

3. *How was occupational safety and health addressed in your agency's strategic plan to address the Government Performance and Results Act?*

The overall Navy Strategic Plan does not include a sufficient level of detail to single out occupational safety and health. Furthermore, the strategic plan for the Chief of Naval Operations Logistics Directorate, CNO/N4, where occupational safety and health and OSH policy and program oversight resides, does not include occupational safety and health.

Due to the size and complexity of the Navy, and because its primary mission is warfighting and peacekeeping, integration and documentation of occupational safety and health at senior leadership levels is a formidable task. Therefore, the NAVOSH Quality Counsel developed the NAVOSH Strategic Plan, which meets the intent of the Government Performance and Results Act. The Strategic Plan includes a Process Review and Measurement System (PRMS) that uses performance indicators to measure overall NAVOSH performance. PRMS is used by the Naval Inspector General in conducting oversight inspections. This system focuses on realignment and protection of our people and core processes in the OSH program. PRMS also emphasizes performance outcomes, proactive strategies, and the overall effectiveness of OSH processes. Continued achievements are being realized in this effort. Specific achievements during FY 1997 include:

a. An automated system has been developed to assist in the management of industrial hygiene support at Navy shore installations. Using existing industrial hygiene automation concepts and input from Navy activities, this methodology is undergoing beta testing at seven locations. Completion of system testing and modification is targeted for 30 September 1998.

b. Based on an extensive zero-based review of Navy shore activity occupational safety and health policy, we are developing a major revision to the NAVOSH manual. The revision will consolidate guidance by referring users directly to OSHA regulations. The revised NAVOSH manual is expected to be less than one-half the size of the current version. Draft changes to the Instruction are under review by Navy headquarters commands prior to issuance in FY 1999.

c. The Navy has completed a pilot review of a system for evaluating OSH performance at Navy activities. This system considers the OSH process as well as compliance status at shore activities as a measure of occupational safety and health readiness. Implementation of this system for evaluating our more industrialized activities will be initiated in FY 1998.

d. The Navy has developed a reporting system for improving incorporation of OSH considerations into the design of ships and shipboard systems. The Naval Sea Systems Command, which is responsible for the design, construction, alteration, and maintenance of ships, will use the system to modify current shipboard safety and health applications. The Navy also continues to identify other initiatives for incorporation into the design and acquisition of weapons systems to enhance occupational safety and health.

e. An effort is underway to evaluate existing occupational health support services and to provide the highest quality of service to ships and shore activities within available constraints.

f. Major progress continues toward providing quality occupational safety and health training for our people. We are expanding electronic training opportunities to maximize audience size per training class. The Navy's P*rofessional Development Guide* for occupational safety and health professionals has been updated to include requirements for industrial hygienists and OSH managers. This guide will enhance the Navy's goal of providing the right training to the right people at the right time.

g. The Navy is in the second year of a multi-year pilot ergonomics project. Its purpose is to demonstrate that instituting ergonomics programs at industrial activities makes good business sense. Initial data from the pilot activities shows increased worker productivity, reductions in costs, and improved quality of life for workers.

In FY 1998, the Navy plans an environmental scan to review the capability of our NAVOSH Strategic Plan to address the changing occupational safety and health environment. This effort will culminate in the revision to the NAVOSH Strategic Plan.

III. NAVY OCCUPATIONAL SAFETY AND HEALTH PROGRAM ACCOMPLISHMENTS

PLEASE DESCRIBE THE MAJOR SUCCESS STORY OF OCCUPATIONAL SAFETY AND HEALTH IN YOUR AGENCY DURING THE REPORTING PERIOD.

The Navy Occupational Safety and Health Program has achieved numerous successes in FY 1997. The singular success story that stands out from the rest is that of the people who, day to day, make a positive difference at all levels of the chain of command. Downsizing, outsourcing and changing missions present increasing challenges to the Navy. Retaining qualified professionals in this environment of change is no longer taken for granted, particularly as the debate on *inherently governmental functions* continues. We are proud of the high quality of our NAVOSH professionals who have mostly been silent heroes.

Along with recognition of the role of individual OSH professionals as integral to the Navy's successes, it should be noted that *teamwork* is a follow-on success story. The NAVOSH Strategic Plan and the numerous initiatives and partnerships described in this report have allowed us to leverage resources and achieve ever-greater successes. The NAVOSH team has been a key factor driving the downward trend in occupational injuries and illnesses and the costs associated with them.