

Included with Comments of the United Steelworkers International Union on Occupational Safety and Health Administration's (OSHA's) proposed rule: Improve Tracking of Workplace Injuries and Illness Docket Number OSHA-2013-0023 (submitted on March 10, 2014):

- (2014) "Plant 2014 Gain sharing Plan". [payout pool of \$25,000 per quarter if there are zero OSHA recordable injuries]
- (2004) *Safety Pays: Workplace Incentives*. Retrieved from <http://www.safetypays.com> [Safety incentive program]
- "Plant Warning Notice" [Injury discipline practice]
- "Memorandum Re: Written Warning – Targeted Safety Training Notice" [Injury discipline practice]
- (2013). Group 1 Talking Points – Our Worst Safety Performers. [Injury discipline policy]
- "Accident Report Form" [for bee sting; see question #22] [Injury Discipline Policy]
- (2013) Accident Repeater Program. [Injury discipline policy]
- "State of Michigan, Michigan Administrative Hearing System: In the Matter of: Docket No.: 12-000674-MIOSHA" [ALJ decision in one of dozens of OSHA 11(c) cases filed by workers who suffered retaliation after reporting on-the-job injuries]
- United States. House of Representatives. Committee on Education and Labor. (2008, June). Report of. Report of Hidden Tragedy: Underreporting of Workplace Injuries and Illness. 14- 29.
- United States. Government Accountability Office. (2009, October). Report of Workplace Safety and Health to Enhancing OSHA's Record and Audit Process Could Improve the Accuracy of Worker Injury and Illness Data
- Rosenman, K et al. (2006). How Much Work-Related injury and Illness is Missed by the Current National Surveillance System? *Journal of Occupational and Environmental Medicine*, Vol. 48, Number 4
- Pransky, G et al. (1999). Under-reporting of Work-related Disorders in the Workplace: A Case Study and Review of the Literature. *Ergonomics*, Vol. 42, No. 1
- Azaroff, L et al. (2001). Occupational Injury and Illness Surveillance: Conceptual Filters Explain Underreporting. *Public Health Matters*, Vol. 92, No. 9
- Lipscomb, H, et al. (2012). Safety, Incentives, and the Reporting of Work-Related Injuries Among Union Carpenters: Your Pretty Much Screwed If You Get Hurt at Work. *American Journal of Industrial Medicine*.
- Lessin, N & McQuiston, T. (2013). An Inverse Relationship Between Injuries and Fatalities: What Is Surprising-And What is Not. *American Journal of Industrial Medicine*
- Publication of the American Public Health Association, 2013 Policy Statement: Support for Workplace Injury and Illness Prevention Programs [See 4th page "Action Steps," 5th recommendation regarding prohibition of employer policies, programs and practices that discourage workers from reporting job injuries and illnesses.]
- Brown, G & Barab, J. (2007). Cooking the Books – Behavior- Based Safety at the San Francisco Bay Bridge. *New Solutions*, Vol. 17(4), 311-324

- Greenhouse, S. (2009, November 17). "*Work Related Injuries Underreported.*" New York Times . Retrieved from <http://www.nytimes.com>
- Hagerty, J. (2013, July 22). *Workplace Injuries Drop, but Claims of Employer Retaliation Rise.* Wall Street Journal. Retrieved from <http://www.wsj.com>
- Written copies of oral comments presented by James Frederick and Nancy Lessin on January 9, 2014 at OSHA's hearing on its "Improve Tracking of Workplace Injuries and Illnesses" proposal.

Included with Comments of the United Steelworkers International Union on Occupational Safety and Health Administration Proposed Rule: Improve Tracking of Workplace Injuries and Illnesses, Docket Number OSHA-2013-0123, RIN 1218-AC49:

"In fact, there is a large and growing body of peer-reviewed academic studies and government reports documenting the nature, extent and impacts of employer policies, practices and programs that retaliate against and discourage workers from reporting injuries and illnesses. Among these academic and government studies and reports on practices that discourage injury and illness reporting are the following:"

Ruser J, Smith R. (1988) The effect of OSHA records-check inspections on reported occupational injuries in manufacturing establishments. *Journal of Risk and Uncertainty*: Study found consistent evidence that targeting schemes linking firms with higher reported injury rates with an increased chance of government inspections led firms to underreport injuries. The authors concluded that any system used for risk evaluation needs to draw on data from circumstances where the incentives to understate risk are counteracted or kept in check.

Pransky, G et al. (1999). Under-reporting of Work-related Disorders in the Workplace: A Case Study and Review of the Literature. *Ergonomics*, Vol. 42, (1): 171-82: This case study focused on safety incentive programs that provide rewards for reducing workplace injury rate. Authors found that while more than 85% of 98 employees in several industrial facilities experienced work-related illness or injury symptoms, and almost 50% had work-related health problems that lasted through the week, and 30% had lost time or faced work restrictions because of these problems; fewer than 5% of the workers had officially reported a work-related health problem. Among the reasons workers gave for not reporting were fear of discipline or of being labeled a complainer. Additional barriers to reporting included company goals of no reported injuries, reinforced by safety incentive programs that rewarded low numbers or rates of reported injuries and illnesses. The study concluded that corporate and facility safety incentives appeared to have an indirect but significant negative influence on the proper reporting of workplace injuries and illnesses by workers.

Azaroff, L et al. (2001). Occupational Injury and Illness Surveillance: Conceptual Filters Explain Underreporting. *Public Health Matters*, Vol. 92, No. 9: In the section of this study focusing on "Filters to Reporting to Supervisors" the study states, "Workers who report health problems to supervisors may risk disciplinary action, denial of overtime or promotion opportunities, stigmatization, drug testing, harassment, or job loss. Others may fear such outcomes even in the absence of demonstrable risk. Some safety incentive systems reward workers who do not report injuries with money, material goods, or recognition."

"United States. House of Representatives. Committee on Education and Labor Majority Staff Report: Hidden Tragedy: Underreporting of Workplace Injuries

and Illnesses. (2008). Pages 14-15 describe incentives for employers to underreport occupational injuries and illnesses; pages 15-29 provide extensive examples of methods used by employers to discourage accurate reporting of workplace injuries and illnesses and the impacts of those employer policies, practices and programs.

United States Government Accountability Office. (2009, October). "Workplace Safety and Health: Enhancing OSHA's Records Audit Process Could Improve the Accuracy of Worker Injury and Illness Data": A survey of 1,187 occupational health practitioners revealed that more than two-thirds of them observed workers who feared discipline or losing their jobs if they reported work-related injuries; over half said they were pressured by employers to downplay injuries to avoid them being OSHA recordable injuries; and one-third said they were pressured to provide insufficient treatment to injured workers to avoid an injury being classified as recordable. According to stakeholders and occupational health practitioners interviewed, many factors affect the accuracy of employers' injury and illness data including disincentives that may discourage workers from reporting work-related injuries and illnesses to their employers and disincentives that may discourage employers from recording them. The report found that workers did not report occupational injuries and illnesses because they feared being disciplined or fired, and also because they were concerned about fellow workers losing rewards where there were group-based safety incentive programs.

United States Government Accountability Office (2012) "Workplace Safety and Health: Better OSHA Guidance Needed on Safety Incentive Programs." This report underscored the pervasive nature of employer policies, programs and practices that discourage workers from reporting job injuries and illnesses. The report presents the results of a GAO survey of U.S. manufacturing companies that found that 75% of firms had safety incentive programs or other workplace safety policies that can affect workers' reporting of injuries and illnesses. The GAO recommended that OSHA assess the impacts of safety incentives and other safety and health programs on injury reporting, given their prevalence in today's workplaces.

Lipscomb, H, et al. (2012). Safety, Incentives, and the Reporting of Work-Related Injuries Among Union Carpenters: Your Pretty Much Screwed If You Get Hurt at Work. *American Journal of Industrial Medicine*. Authors conducted an anonymous survey of 1,020 carpenter apprentices to document prevalence of their exposure to programs offering rewards for 'improved safety records' or that punish workers in some way for reporting injuries. The study found 58% of respondents reported some safety incentive or negative consequence for reporting work-related injuries on their current jobsite. Reporting of work-related injuries was 50% less prevalent when workers were disciplined for injury experience. In addition, over 30% of respondents said injuries were almost never or rarely reported in their current workplace. The study concluded that there are multiple layers of disincentives to reporting work-related injuries.

American Public Health Association, 2013 Policy Statement: Support for Workplace Injury and Illness Prevention Programs: This policy statement includes a reference to the many practices, policies, and programs present in workplaces today that discourage workers from reporting injuries, illnesses, incidents, and accidents, and highlights concerns about their ability to obscure the hazards that cause and contribute to injuries and illnesses. It notes that workplaces in which all workplace injuries are reviewed with an eye toward specific infractions committed by the individual prior to the injury (rather than searching for root causes) and where any infractions are punished by point systems that lead to suspension or firing, reduce workers' willingness to report injuries as work related, thereby obscuring valuable information and data about health and safety. Similarly, the APHA policy statement notes that safety reward programs in which groups of workers are awarded incentives as small as a pizza party or as large as pick-up trucks and expense-paid vacations create peer pressure that again mitigates against reporting injuries. The policy statement makes the following recommendation: "OSHA and MSHA must strengthen legal requirements prohibiting employers from implementing or maintaining policies, programs, or practices that discourage employees from reporting work-related injuries and illnesses. These policies, programs, and practices include, but are not limited to, safety incentive programs that provide rewards to individual workers as well as groups of workers when there are few or no reports of injuries or illnesses; injury discipline policies wherein employees receive threats of or actual discipline when they report work-related injuries or illnesses; mandated post-injury drug testing for employees who report work-related injuries or illnesses; and programs that focus on worker behaviors as the primary cause of occupational injuries and illnesses."

