How to Avoid the Most Common OSHA Citations in Breweries

www.prometrixinc.com

glsierra@prometrixinc.com

(703) 638-8637

Twitter: @Prometrix

Facebook.com/Prometrix
Agenda

- OSHA Inspection Process Overview
- Avoid the Most Common Brewery Violations
- Recordkeeping: What You Don’t Know Will Hurt You
- Q&A
OSHA Inspection Process

- Target Selection
- Opening Conference
- Contest ("Appeal")
- Walk-Through
- Issue Citation
- Closing Conference
Existing Safety Program Standards

Most OSHA inspections are “partial inspections”
- Focused on a specific employee complaint issue or within the scope of a special emphasis program, but OSHA may expand the scope when warranted
- Some are “comprehensive inspections” (wall-to-wall)

Implementing the required safety programs greatly reduces your enforcement risk
- Standard specific written program requirements
  - LOTO, Confined Spaces, Hazcom, Bloodborne Pathogens
  - PPE, Respiratory Protection, Hearing Conservation
  - Grain Handling, Fall Protection, Emergency Action Plan
- Most OSHA State Plans specific written standards
- In some cases, citation settlement agreements
Agenda

- OSHA Inspection Process Overview
- *Avoid the Most Common Brewery Violations*
- Recordkeeping: What You Don’t Know Will Hurt You
- Q&A
Most Common Cited OSHA Violations:

<table>
<thead>
<tr>
<th>Standard</th>
<th># Violations</th>
<th>Total Penalty</th>
<th>Avg Penalty</th>
</tr>
</thead>
<tbody>
<tr>
<td>1910.212</td>
<td>2,773</td>
<td>$11,261,920</td>
<td>$4,061</td>
</tr>
<tr>
<td>1910.23</td>
<td>1,547</td>
<td>$5,665,117</td>
<td>$3,662</td>
</tr>
<tr>
<td>1910.147</td>
<td>3,445</td>
<td>$10,839,575</td>
<td>$3,146</td>
</tr>
<tr>
<td>1910.132</td>
<td>1,734</td>
<td>$3,617,293</td>
<td>$2,086</td>
</tr>
<tr>
<td>1910.178</td>
<td>3,203</td>
<td>$6,652,155</td>
<td>$2,077</td>
</tr>
<tr>
<td>1910.303</td>
<td>2,840</td>
<td>$5,064,365</td>
<td>$1,783</td>
</tr>
<tr>
<td>1910.1030</td>
<td>1,569</td>
<td>$2,712,367</td>
<td>$1,729</td>
</tr>
<tr>
<td>1910.305</td>
<td>3,545</td>
<td>$5,804,070</td>
<td>$1,637</td>
</tr>
<tr>
<td>1910.134</td>
<td>3,249</td>
<td>$3,276,808</td>
<td>$1,009</td>
</tr>
<tr>
<td>1910.1200</td>
<td>5,160</td>
<td>$4,426,206</td>
<td>$858</td>
</tr>
</tbody>
</table>

All industries -- Most cited General Industry standards ranked by average penalty
Easiest to Cite Requirements...

- No written safety program (or procedures)
  - In most State Plan states: overall safety program
  - LOTO, Hazcom, Confined Space, Resp Protection
  - Bloodborne Pathogens, Noise Conservation, etc.

- Effectiveness of employee training
  - Simple OSHA test ... ‘quiz’ the employees during interviews to ascertain level of understanding

- Language barriers

- Temporary workers
  - OSHA views them to be the same as company workers
Most Frequently Cited Violations in **Breweries**

Some of the most frequently cited standards

- Process Safety Management (PSM)*
- Respiratory Protection / PPE
- Lockout / Tagout (LOTO)
- Confined Spaces
- Hazard Communications
- Machine / Equipment Guarding
- PITs (Forklifts)
- Walking & Working Surfaces
- Safety Showers

* Choice of refrigerant can trigger PSM
Most Commonly Cited Provisions

1910.151(C) First Aid [Safety Showers]:

Where the eyes or body of any person may be exposed to injurious corrosive materials, suitable facilities for quick drenching or flushing of the eyes and body shall be provided within the work area for immediate emergency use.

1910.147(c)(4)(1) LOTO:

Procedures shall be developed, documented and utilized for the control of potentially hazardous energy when employees are engaged in the activities covered by this section.

1904(b)(3) Recordkeeping:

How do I certify the annual summary? A company executive must certify that he or she has examined the OSHA 300 Log and that he or she reasonably believes, based on his or her knowledge of the process by which the information was recorded, that the annual summary is correct and complete.

1910.1200(e)(1) Hazard Communication:

Employers shall develop, implement, and maintain at each workplace, a written hazard communication program which at least describes how the criteria specified ... for labels and other forms of warning, safety data sheets, and employee information and training will be met...
Most Commonly Cited Provisions

1910.120(q)(1) Hazardous Waste & Emergency Resp:

Emergency response plan. An emergency response plan shall be developed and implemented to handle anticipated emergencies prior to the commencement of emergency response operations. The plan shall be in writing and available for inspection and copying by employees, their representatives and OSHA personnel. Employers who will evacuate their employees from the danger area when an emergency occurs, and who do not permit any of their employees to assist in handling the emergency, are exempt from the requirements of this paragraph if they provide an emergency action plan in accordance with 29 CFR 1910.38.

1910.23(c)(1) Guarding Floor & Hole Openings:

Every open-sided floor or platform 4 feet or more above adjacent floor or ground level shall be guarded by a standard railing (or the equivalent as specified in paragraph (e)(3) of this section) on all open sides except where there is entrance to a ramp, stairway, or fixed ladder. The railing shall be provided with a toeboard wherever, beneath the open sides...

1910.212(a)(1) Machine Guarding:

Types of guarding. One or more methods of machine guarding shall be provided to protect the operator and other employees in the machine area from hazards such as those created by point of operation, ingoing nip points, rotating parts, flying chips and sparks. Examples of guarding methods are - barrier guards, two-hand tripping devices, electronic safety devices, etc.
Most Commonly Cited Provisions

1910.134(c)(1) Respiratory Protection:
In any workplace where respirators are necessary to protect the health of the employee or whenever respirators are required by the employer, the employer shall establish and implement a written respiratory protection program with worksite-specific procedures. The program shall be updated as necessary to reflect those changes in workplace conditions that affect respirator use. The employer shall include in the program the following provisions of this section, as applicable...

1910.132(d)(1)&(2) PPE:
(1) Select PPE that properly fits each affected employee.
(2) The employer shall verify that the required workplace hazard assessment has been performed through a written certification that identifies the workplace evaluated; the person certifying that the evaluation has been performed; the date(s) of the hazard assessment; and, which identifies the document as a certification of hazard assessment.

1910.146(c)(1) Confined Spaces:
The employer shall evaluate the workplace to determine if any spaces are permit-required confined spaces.
Agenda

- OSHA Inspection Process Overview
- Avoid the Most Common Brewery Violations
- Recordkeeping: What You Don’t Know Will Hurt You
- Q&A
New OSHA reporting requirements became effective on Jan 1, 2015 ("serious reportable injury rule")

Requires employers to notify OSHA when there is:
- Fatality within 8hrs (no change)
- Notify OSHA within 24 hours when there is:
  - 1 in-patient hospitalization (previously 3 hospitalizations)
  - Amputation (new)
  - Loss of eye injury (new)

Call OSHA at: 1-800-321-OSHA(6742)
  Or electronic submission through www.osha.gov

OSHA instituted “triage process” to determine which reports get inspected: Cat 1, Cat 2, Rapid Response

~12,000 cases / year run rate

ALL brewers must comply
Is Brewery Industry Injury Data Reliable?

Over-Reporting or Real Problem???

~42% increase in # of craft brewers 2012-2014

Not surprising: OSHA “injury recordability” regulations are among the most nuanced and complicated to understand!
Why is Accurate Reporting Important?

- OSHA presumes under-reporting is a serious problem while ignoring the realities of over-reporting.
- New reporting requirements coming soon which could require some brewers to report their OSHA logs every year.
- Reported injury data can (is) used by OSHA for inspection targeting purposes.
- Accurate data is needed for the brewer to be able to assess their safety programs, performance, etc.
- Review of one brewery client revealed multiple years of over-reporting of First Aid cases as Recordable.
- Although a couple examples of unknowingly under-reporting found, virtually EVERY brewery client had at least several over-recorded cases.
Reference Resource: Recording Criteria

Regulations 1904.5 through 1904.11 define which incident cases should or should not be recorded in the OSHA forms 300, 300A, 301

- **1904.4** Recording criteria
- **1904.5** Work-relatedness
- **1904.6** New case
- **1904.7** General recording criteria
- **1904.8** Needlesticks/sharps
- **1904.9** Medical removal
- **1904.10** Hearing loss
- **1904.11** Tuberculosis (TB)

OSHA Forms

- OSHA 300: Log of Work-Related Injuries and Illnesses
- OSHA 300A: Summary of Work-Related Injuries and Illnesses
- OSHA 301: Injury and Illness Incident Report
- Link to [300/300A/301 Worksheets](#)
5 Step Determination Process if Recordable Injury (OSHA 300/300A/301 Logs)

1. Did the employee experience an injury or illness?
   - **YES**

2. Is the injury or illness work-related?
   - **YES**

3. Is the injury or illness a new case?
   - **YES**

4. Does the injury or illness meet the general Criteria or the application to specific cases?
   - **YES**

5. **RECORD THE INJURY OR ILLNESS**
What is First Aid?

- Using non-prescription medications at nonprescription strength;
- Administering tetanus immunizations;
- Cleaning, flushing, or soaking wounds on the skin surface;
- Using wound coverings, such as bandages, band-aids, gauze pads, or using SteriStrips or butterfly bandages.
- Using hot or cold therapy;
- Using any totally non-rigid means of support, such as elastic bandages, wraps, non-rigid back belts, etc.;
- Using temporary immobilization devices while transporting an accident victim (splints, slings, neck collars, or back boards).
- Draining fluids from blisters;
- Using eye patches; using simple irrigation or a cotton swab to
- Remove foreign bodies not embedded in or adhered to the eye;
- Using irrigation, tweezers, cotton swab or
- Other simple means to remove splinters or foreign objects
Process for Determining a Recordable

Did the employee experience an injury or illness?

YES

Is the injury or illness work-related?

YES

Is the injury or illness a new case?

YES

Does the injury or illness meet the general Criteria or the application to specific cases?

YES

RECORD THE INJURY OR ILLNESS

All Yeses:
Record the injury or illness!

If ALL previous questions are “Yes” then it is a recordable which must be logged on OSHA 300/300A/301.

Logs must be kept 5 years.

Signed by a brewery executive.

Must log injuries within 7 days (can remove later after investigation)

Post annual 300A (summary) from Feb 1 to Apr 30.

When in doubt, record the injury and delete later if it’s not a recordable.
**Exceptions that Prove the Rule**

<table>
<thead>
<tr>
<th>1904.5(b)(2)</th>
<th>You are not required to record injuries and illnesses if...</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i)</td>
<td>At the time of the injury or illness, the employee was present in the work environment as a member of the general public rather than as an employee.</td>
</tr>
<tr>
<td>(ii)</td>
<td>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.</td>
</tr>
<tr>
<td>(iii)</td>
<td>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.</td>
</tr>
<tr>
<td>(iv)</td>
<td>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.</td>
</tr>
<tr>
<td></td>
<td><strong>Note:</strong> 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.</td>
</tr>
<tr>
<td>(v)</td>
<td>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.</td>
</tr>
<tr>
<td>(vi)</td>
<td>The injury or illness is solely the result of personal grooming, self medication for a non-work-related condition, or is intentionally self-inflicted.</td>
</tr>
<tr>
<td>(vii)</td>
<td>The injury or illness is caused by a motor vehicle accident and occurs on a company parking lot or company access road while the employee is commuting to or from work.</td>
</tr>
<tr>
<td>(viii)</td>
<td>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).</td>
</tr>
<tr>
<td>(ix)</td>
<td>The illness is a mental illness. Mental illness will not be considered work-related unless the employee voluntarily provides the employer 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.</td>
</tr>
<tr>
<td>1904.5(b)(6)</td>
<td>If the employee has . . .</td>
</tr>
<tr>
<td>--------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>(i)</td>
<td>checked into a hotel or motel for one or more days.</td>
</tr>
<tr>
<td>(ii)</td>
<td>taken a detour for personal reasons.</td>
</tr>
</tbody>
</table>
Actual Injury Log Scenarios... Recordable?

- Head brewer got grain dust in his eye. Used nearby eyewash to get it out. Eye was irritated but no treatment was needed.

- Brewery employee was struck by a piece of equipment. Got a bruise and a small cut (no stitches). Neosporin and band-aid. No medical treatment was needed.

- An employee was mugged while performing work duties away from the brewery, he went home due to distress and a sore shoulder but no doctor was visited. Went to work next day.

- Employee leaves work on the back of (intoxicated) boyfriend’s motorcycle. They crash in the parking lot requiring medical treatment.

- Employee stung by bee at an event.
What is the effect of workers’ compensation reports on the OSHA records? Can I use WC logs as OSHA logs?

Who is responsible for recording injuries of temporary or staffing agency employees?

How do I handle a case if it is not obvious whether the precipitating event or exposure occurred in the work environment or occurred away from work?
# OSHA’s Form 300 (Rev. 01/2004)

## Log of Work-Related Injuries and Illnesses

You must record information about every work-related death and about every work-related injury or illness that involves loss of consciousness, restricted work activity or job transfer, days away from work, or medical treatment beyond first aid. You must also record significant work-related injuries and illnesses that are diagnosed by a physician or licensed health care professional. You must also record work-related injuries and illnesses that meet any of the specific recording criteria listed in 29 CFR Part 1904.8 through 1904.12. Feel free to use two lines for a single case if you need to. You must complete an Injury and Illness Incident Report (OSHA Form 301) or equivalent form for each injury or illness recorded on this form. If you’re not sure whether a case is recordable, call your local OSHA office for help.

### Identify the person

<table>
<thead>
<tr>
<th>(A) Case no.</th>
<th>(E) Employee’s name</th>
<th>(C) Job title</th>
<th>(D) Date of injury or onset of illness</th>
<th>(E) Where the event occurred</th>
<th>(F) Describe injury or illness, parts of body affected, and object/stance that directly injured or made person ill</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mark Bagin</td>
<td>Welder</td>
<td>5/25</td>
<td>basement</td>
<td>feature, left arm and left leg, fell from ladder</td>
</tr>
<tr>
<td>2</td>
<td>Shara Alexander</td>
<td>Foundry man</td>
<td>7/25</td>
<td>painting dock</td>
<td>poisoning from lead fumes</td>
</tr>
<tr>
<td>3</td>
<td>Sam Sanders</td>
<td>Electrician</td>
<td>8/25</td>
<td>2nd floor stairway</td>
<td>broken left foot, fell over box</td>
</tr>
<tr>
<td>4</td>
<td>Ralph Bivenss</td>
<td>Laborer</td>
<td>9/17</td>
<td>packaging dept</td>
<td>Back strain lifting boxes</td>
</tr>
<tr>
<td>5</td>
<td>Jarrod Daniels</td>
<td>Machine ops.</td>
<td>10/23</td>
<td>production floor</td>
<td>dust in eye</td>
</tr>
</tbody>
</table>

### Describe the case

<table>
<thead>
<tr>
<th>(A) Case no.</th>
<th>(B) Employee’s name</th>
<th>(C) Job title</th>
<th>(D) Date of injury or onset of illness</th>
<th>(E) Where the event occurred</th>
<th>(F) Describe injury or illness, parts of body affected, and object/stance that directly injured or made person ill</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Mark Bagin</td>
<td>Welder</td>
<td>5/25</td>
<td>basement</td>
<td>feature, left arm and left leg, fell from ladder</td>
</tr>
<tr>
<td>2</td>
<td>Shara Alexander</td>
<td>Foundry man</td>
<td>7/25</td>
<td>painting dock</td>
<td>poisoning from lead fumes</td>
</tr>
<tr>
<td>3</td>
<td>Sam Sanders</td>
<td>Electrician</td>
<td>8/25</td>
<td>2nd floor stairway</td>
<td>broken left foot, fell over box</td>
</tr>
<tr>
<td>4</td>
<td>Ralph Bivenss</td>
<td>Laborer</td>
<td>9/17</td>
<td>packaging dept</td>
<td>Back strain lifting boxes</td>
</tr>
<tr>
<td>5</td>
<td>Jarrod Daniels</td>
<td>Machine ops.</td>
<td>10/23</td>
<td>production floor</td>
<td>dust in eye</td>
</tr>
</tbody>
</table>

### Classify the case

<table>
<thead>
<tr>
<th>(K) Days away from work</th>
<th>(L) Job transfer or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 days</td>
<td>15 days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(M) Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Injury</td>
</tr>
<tr>
<td>(2) Injury Site/Location</td>
</tr>
<tr>
<td>(3) Injury Treatment</td>
</tr>
<tr>
<td>(4) Work Location</td>
</tr>
<tr>
<td>(5) Nature</td>
</tr>
</tbody>
</table>

### Enter the number of days the injured or ill worker was

<table>
<thead>
<tr>
<th>(K) Days away from work</th>
<th>(L) Job transfer or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 days</td>
<td>15 days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(M) Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Injury</td>
</tr>
<tr>
<td>(2) Injury Site/Location</td>
</tr>
<tr>
<td>(3) Injury Treatment</td>
</tr>
<tr>
<td>(4) Work Location</td>
</tr>
<tr>
<td>(5) Nature</td>
</tr>
</tbody>
</table>

### Check the “Injury” column or choose one type of illness

<table>
<thead>
<tr>
<th>(K) Days away from work</th>
<th>(L) Job transfer or restriction</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 days</td>
<td>15 days</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(M) Injury</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Injury</td>
</tr>
<tr>
<td>(2) Injury Site/Location</td>
</tr>
<tr>
<td>(3) Injury Treatment</td>
</tr>
<tr>
<td>(4) Work Location</td>
</tr>
<tr>
<td>(5) Nature</td>
</tr>
</tbody>
</table>
OSHA's Form 301
Injury and Illness Incident Report

This Injury and Illness Incident Report is one of the first forms you must fill out when a recordable work-related injury or illness has occurred. Together with the Log of Work-Related Injuries and Illnesses and the accompanying Summary, these forms help the employer and OSHA develop a picture of the extent and severity of work-related incidents.

Within 7 calendar days after you receive information that a recordable work-related injury or illness has occurred, you must fill out this form or an equivalent. Some state workers' compensation, insurance, or other reports may be acceptable substitutes. To be considered an equivalent form, any substitute must contain all the information asked for on this form.

According to Public Law 91-596 and 29 CFR 1904, OSHA's recordkeeping rule, you must keep this form on file for 5 years following the year to which it pertains.

If you need additional copies of this form, you may photocopy and use as many as you need.

---

Information about the employee

1) Full name ____________________________________________

2) Street ____________________________________________

City __________________________ State ________ ZIP ________

3) Date of birth _____ / _____ / _____

4) Date hired _____ / _____ / _____

☐ Male  ☐ Female

Information about the physician or other health care professional

5) Name of physician or other health care professional ____________________________________________

6) If treatment was given away from the worksite, where was it given?

Facility ____________________________________________

Street ____________________________________________

City __________________________ State ________ ZIP ________

7) Was employee treated in an emergency room?

☐ Yes  ☐ No

8) Was employee hospitalized overnight as an in-patient?

☐ Yes  ☐ No

---

Information about the case

10) Case number from the Log _____________________ (Transfer the case number from the Log after you record the case.)

11) Date of injury or illness _____ / _____ / _____

12) Time employee began work _____ / _____ AM / PM

13) Time of event _____ / _____ AM / PM  ☐ Check if time cannot be determined

14) What was the employee doing just before the incident occurred? Describe the activity, as well as the tools, equipment, or material the employee was using. Be specific. Examples: "climbing s ladder while carrying roofing materials"; "spraying chlorine from hand sprayer"; "daily computer key-entry."

15) What happened? Tell us how the injury occurred. Examples: "When ladder slipped on wet floor, worker fell 20 feet"; "Worker was sprayed with chlorine when garden hose broke during replacement"; "Worker developed asthma in spite of use of respirator."

16) What was the injury or illness? Tell us the part of the body that was affected and how it was affected; be more specific than "knee" or "pain" or "sore." Examples: "strained back"; "chemical burn, hand"; "carpal tunnel syndrome."

17) What object or substance directly harmed the employee? Examples: "concrete floor"; "chlorine"; "radial arm saw." If this question does not apply to the incident, leave it blank.

18) If the employee died, when did death occur? Date of death _____ / _____ / _____

---

Public reporting burden for this collection of information is estimated to average 22 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Persons are not required to respond to this collection of information unless it displays a current valid OMB control number. If you have any comments about this estimate or any other aspect of data collection, including suggestions for reducing this burden, write to U.S. Department of Labor, OSHA Office of Statistics, Room N-2514, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed forms to this office.

https://www.osha.gov/recordkeeping/RKforms.html
OSHA's Form 300A (Rev. 01/2004)

Summary of Work-Related Injuries and Illnesses

All establishments covered by Part 1904 must complete this Summary page, even if no work-related injuries or illnesses occurred during the year. Remember to review the Log to verify that the entries are complete and accurate before completing this summary.

Using the Log, count the individual entries you made for each category. Then write the totals below, making sure you’ve added the entries from every page of the Log. If you had no cases, write “0.”

Employees, former employees, and their representatives have the right to review the OSHA Form 300 in its entirety. They also have limited access to the OSHA Form 301 or its equivalent. See 20 CFR Part 1904.35, in OSHA’s recordkeeping rule, for further details on the access provisions for these forms.

<table>
<thead>
<tr>
<th>Number of Cases</th>
<th>Total number of deaths</th>
<th>Total number of cases with days away from work</th>
<th>Total number of cases with job transfer or restriction</th>
<th>Total number of other recordable cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>(6)</td>
<td>(4)</td>
<td>(1)</td>
<td>(6)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Number of Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of days away from work</td>
</tr>
<tr>
<td>(K)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Injury and Illness Types</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of . . . (M)</td>
</tr>
<tr>
<td>(1) Injuries</td>
</tr>
<tr>
<td>(2) Skin disorders</td>
</tr>
<tr>
<td>(3) Respiratory conditions</td>
</tr>
</tbody>
</table>

Post this Summary page from February 1 to April 30 of the year following the year covered by the form.

Public reporting burdens for this collection of information is estimated to average 30 minutes per response, including time to review the instructions, search the data needed, and complete and review the collection of information. Persons are not required to respond to the collection of information unless it displays a currently valid OMB control number. If you have any comments about this estimate or any other aspect of the data collection, contact: U.S. Department of Labor, OSHA Office of Statistical Analysis, Room N 3644, 200 Constitution Avenue, NW, Washington, DC 20210. Do not send the completed form to this office.

Agenda

- OSHA Inspection Process Overview
- Avoid the Most Common Brewery Violations
- Recordkeeping: What You Don’t Know Will Hurt You
- Q&A
Contact Information

Prometrix Consulting
(800) 638-9718

glsierra@prometrixinc.com
www.prometrixinc.com

Twitter: @Prometrix
Facebook.com/Prometrix

Other Resources:

OSHA Recordable Manual:
www.prometrixinc.com (email: glsierra@prometrixinc.com)

OSHA’s Enforcement Webpage:
https://www.osha.gov/dep/index.html

OSHA’s Small Business Webpage:
https://www.osha.gov/dcsp/smallbusiness/index.html