Dear Employer:

Department of Workforce Services – OSHA has a program which we feel will be both acceptable and advantageous to you. This program is the Employer Voluntary Technical Assistance Program, or EVTAP.

The program is administered by our Consultation Division. They can provide many health and safety consultation services to you and your employees absolutely free. They will provide program assistance and surveys with no penalty, including on-the-spot field consultation and recommendations, designed to bring you into voluntary compliance with recognized health and safety practices and standards. This is an entry level program for companies that want to build a better safety culture along with working to lower their Workers' Compensation premiums.

How do you enroll in EVTAP? Submit the application in this package. Mobile sites such as construction projects, oil drilling rigs, and oil servicing rigs are not eligible for this program. You will be scheduled for an on-site health and safety survey and program assistance.

If you agree to be a part of the EVTAP program, a health and safety consultant will be assigned to work with you and your company to address your needs in job health and safety matters.

The attached package covering the EVTAP program is provided for your information. If you have any questions, please call 777-7786 and ask to speak to the Consultation Division. Please remember, our goal is to help you prevent accidents and injuries to your employees.

Sincerely,

Karen Godman
OSHA Program Manager
Department of Workforce Services - OSHA Division

Enclosures
1. The Employer Voluntary Technical Assistance Program (EVTAP) is designed to provide a more healthful and safe work environment for employees through the cooperation of employers, employees, and Department of Workforce Services – OSHA. This will be accomplished by the employer's commitment and willingness to establish a health and safety program and hazard-free workplace, and by OSHA providing technical assistance and consultation services to businesses in the private or public sectors. The ultimate purpose of the program is to ensure that each establishment in the program reaches a level of self-sufficiency in the area of health and safety so as to be self-policing with little or no guidance from OSHA. Once this level is achieved, entry into one of our Federal OSHA recognition programs (SHARP or VPP) can be achieved.

2. Employers of fixed establishments, under the following stipulations, may participate in EVTAP.
   a. The program is on an individual site basis, i.e., each site requires its own agreement, on-site consultation activity, and participation.
   b. Participation is for one year from the date of the closing conference and renewable annually for a total of three years participation. Renewals must be requested by the employer and are not automatic.

GENERAL PROGRAM REQUIREMENTS AND ELEMENTS

1. The employer must request in writing entry into the Employer Voluntary Technical Assistance Program, and agree to fulfill the obligations and responsibilities of EVTAP. (See attached Application and Agreement)

2. Upon approval of an employer's request for entry, the OSHA Consultation Division will accomplish the following actions and program elements.
   a. Assign a health and safety consultant to work with and help the employer meet the requirements of Wyoming Occupational Health and Safety standards and EVTAP.
   b. Schedule and perform a comprehensive health and safety survey of the facility/site. This survey will be in-depth and conducted to identify the health and safety hazards that may exist within the workplace.
   c. Provide health and safety program assistance to the employer. Any in-place programs will be reviewed for adequacy. The need for additional programs, required by the standard but not implemented by the company, will be determined. If the employer does not have a comprehensive health and safety program, assistance will be provided in developing an effective one for the
establishment. Training on hazard recognition and the requirements of the various programs will be given to the employer or his/her representative.

d. Review the company's OSHA Form 300 injury log and other accident/injury/illness records to identify causes and trends.

e. Conduct a closing conference with the employer where all program deficiencies, identified hazards, and possible means of correction are discussed, and due dates are established.

f. Furnish to the employer a written consultation report that includes the information in paragraph (e) above. Monitor the due dates for completion of required action and provide additional assistance that may be needed by the employer in correcting the hazards.

g. Provide an approval letter and a Certificate of Participation to the employer upon correction of all hazards and health and safety program deficiencies noted during the consultation visit, plus implementation of the additional basic comprehensive program elements. Participation in EVTAP is for one year from the date of the closing conference.

3. EVTAP is a program where the employer must have the willingness and the commitment to expend the time and effort associated with developing programs and correcting any identified hazards. Employer's responsibilities and requirements for participation in EVTAP are as follows:

a. The employer must ensure that employees, including new hires, are aware of and understand what the program is all about. Employee involvement is a key element to the success of implementing the various program requirements.

b. The Notice of Intent to Participate must be posted in a location accessible to the employees. (See attached Notice of Intent to Participate)

c. The on-site survey and program assistance will be scheduled as convenient as possible considering the employer's schedule. The employer or a representative must be available to accompany the consultant during the course of the consultation. Consultants may also confer with employees privately.

d. The employer must agree to correct all hazards identified, to initiate all required programs and program elements, and to confer with the consultant on correction due dates. Extensions to due dates must be requested in writing. A report/letter specifying method and correction dates must be returned to the OSHA Consultation Division not later than the correction date.

e. The List of Hazards (or copies) must be posted where they can be readily observed by the affected employees for three days or until corrected, whichever is longer.

f. If the employer does not have a comprehensive health and safety program, the consultant will assist the employer in developing and establishing a basic program
(See the discussion on health and safety programs highlights and details in the next section).

g. The employer must maintain the OSHA Form 300, Log of Occupational Injuries and Illnesses, during the time that they are in the program. This is required even if the business would normally be exempt from this record keeping requirement due to size or type of business.

h. The employer must implement and document a monthly self-inspection program.

i. The employer must establish and implement a training program for supervisors and employees. Training must be documented.

j. Procedures must be established for employees to report any unsafe or other hazardous conditions within the workplace. Employees reporting such conditions must be free from any reprisal discriminatory action for legitimate activities associated with the program. (This is actually a right of employees given to them by the Wyoming Occupational Health and Safety Act.)

k. The employer may withdraw from the program at any time through notification by letter to OSHA.

l. An employer who withdraws their request after the site survey has been completed must still correct all serious conditions that have been identified

m. An employer who refuses to correct serious conditions may have their case file referred to the Wyoming OSHA Program Manager for possible Compliance action.
1. Entry into EVTAP will be granted subsequent to a comprehensive health and safety survey of the establishment, and the employer's commitment to fulfill the requirements of the program.

2. A comprehensive (in-depth, wall-to-wall) health and safety survey of the establishment will be made to identify any hazards that may exist. All hazards identified will be classified as serious, non-serious, regulatory, or recommendation. Correction dates will be discussed and mutually agreed upon for all deficiencies noted. The employer will be furnished a copy of the consultant's "field notes" and subsequently a written consultation report of all hazards and program deficiencies identified.

3. The program assistance element of the consultation will center on a review and evaluation of the individual specific programs currently required by OSHA, such as Hazard Communication, Lockout/Tagout, Confined Space Entry, etc., that may be applicable to the business.

4. In addition, a comprehensive written Health and Safety Program, if not already in place, must be established and implemented by the company. This health and safety program is not currently required by standard but is a basic requirement of EVTAP. The health and safety program must contain four essential elements, identified and discussed below. The form and complexity of these elements will depend on the size of the workplace and the nature of the potential hazards there. Certain core requirements (which will be identified and discussed with you by the consultant) must be completed before initial participation into EVTAP is approved.

   a. **Management Commitment.** This commitment involves:

      - A clearly stated written safety and health policy from management to employees.
      - Definition and delegation of authority, responsibility, and accountability for health and safety for all levels of management, supervision, and employees.
      - Adequate resources necessary to institute and maintain the health and safety program.
      - Management involvement in employee health and safety concerns.

   b. **Hazard Assessment.** This element includes:

      - An ongoing monthly self-inspection program to keep those hazards from reoccurring and/or identify any new or transient hazards that may show up. These monthly self-inspections must be documented by the employer.
      - A reliable procedure for employees to report possible hazardous conditions with no fear of reprisal.
• Investigations of accidents/incidents and "near miss" incidents so that causes and means of prevention may be identified; analyze injury/illness records so that patterns with common causes can be identified and prevented.

c. Hazard Correction and Control. The written program must address:

• A system to correct hazardous conditions identified through surveys, self-inspections, employee reporting or other means.

• Implementation or use of engineering, administrative, or personal protective equipment controls to reduce exposure to hazardous substances/conditions.

• Health and safety rules and work procedures established and implemented within the workplace.

• System for rule enforcement and disciplinary action for supervisors and employees established and carried out.

• A facility and equipment preventive maintenance program so that hazardous breakdown is prevented.

• Emergency planning, procedures, and drills as needed.

d. Safety and Health Training. Training programs must ensure that:

• Supervisors can explain rules, procedures, and work practices for hazard control; and how they teach and enforce the rules.

• Employees are taught hazard recognition and safe work procedures to protect themselves at the same time they are taught to do a job.

• Where personal protective equipment is required, employees know what, why, and how to use it, its limitations and maintenance.

• Annual training is conducted to review/reinforce earlier training, and documented.

5. During follow-up and renewal visits and/or reviews, the consultant will evaluate the employer's program to ensure that protection of the employees is being provided and that all parties are adhering to the terms of the agreement. If the consultant becomes convinced that the employer has no intention of correcting all hazards noted during a consultation visit, he/she will notify the Consultation Division supervisor of the actions that were taken to resolve the problem. Failure of an employer to fulfill and maintain the obligations and responsibilities within the program will result in termination from the program. The supervisor will prepare a letter notifying the employer that no further follow-up will be made and that the employer is still responsible for correcting the serious violations of OSHA rules and regulations.
6. The employer may request renewal in EVTAP towards the end of each one year period. Participation is limited to three years (initial year plus two renewals).

- Continuation in EVTAP will be at the option of OSHA.

- Consultation Division will schedule and conduct another consultation visit to the facility for the purpose of program review and assistance and a health and safety survey.

- The renewal is dependent upon correction of all noted hazards and recommendations prior to the renewal.

- The review of the OSHA Form 300 log and accident/injury/illness records must show the lost work day injury rate to be below the national average for the industry involved or a decrease from the previous year in the program.

7. Compliance enforcement activity. During Consultation’s “Visit in Progress” (from the opening conference to the end of the correction due dates including extensions), Wyoming Compliance may not conduct any programmed enforcement activity of the EVTAP worksite. However, during this same time frame, they can investigate any imminent danger, complaint, fatality, or catastrophe situation received by Compliance.

8. The Consultation Division can provide assistance in the correction of hazards noted during a survey, in the establishment and maintenance of an effective health and safety program and in training and educating the company's employees. As is true with all of OSHA's consultation activities, services are free of charge.

Enclosures

1. Application and Agreement
2. Notice of Intent to Participate
Application and Agreement
Employer Voluntary Technical Assistance Program (EVTAP)

Company Name: Phone:
Mailing Address:
Street Address:
Facility/Site Address (If Different):

Type of Business: Number of Employees

Request that the facility, location, or site referenced above be approved for participation in the Employer Voluntary Technical Assistance Program (EVTAP). By signing this document, I agree to fulfill my obligations as follows:

(1) Correct all hazards cited by the consultant during the inspection. They must be corrected by the date mutually agreed upon by yourself and the consultant, or an approved extension date.

(2) Involve employees in the program by making them aware of the program, establishing an internal safety hazard reporting procedure with no fear of reprisal, and ensuring newly hired employees are made aware of the program.

3) Develop and implement all safety and health programs required by the consultant including:

   * Written comprehensive health and safety program; core requirements.
   * Annual/recurring training of supervisors and employees; documented.
   * Monthly health and safety self-inspections; documented; hazards corrected.

4) List of Hazards identified during the survey must be posted where it will be readily observed by the affected employees for three days or until correction, whichever is longer.

5) The Notice of Intent to Participate must be posted next to the Wyoming Occupational Health and Safety Poster and accessible to the employees. Also the OSHA 300 Form needs to be maintained regardless of size or business type exemption.

By not completing any of the above requirements, I understand that I may be removed from EVTAP. If identified serious hazards are not corrected, the case file may be referred to the Wyoming OSHA Program Manager for possible compliance action.

Signature: ____________________________ ____________________________
Printed Name: ____________________________
Position: ____________________________
Email: ____________________________

(Approval means that your request for entry has been approved. Exemption status is not granted until all program elements are met.)
NOTICE OF INTENT TO PARTICIPATE IN THE

EMPLOYER VOLUNTARY TECHNICAL

ASSISTANCE PROGRAM (EVTAP)

This is to notify all affected employees of my intention to participate in the Employer Voluntary Technical Assistance Program in cooperation with Wyoming Department of Workforce Services. A complete on-site health and safety survey will be accomplished by a representative of the program, and I have agreed to voluntarily eliminate all of the hazards identified.

In order to provide you with a more healthful and safe work environment, I will implement and continue to maintain a health and safety program in accordance with guidelines provided under the Employer Voluntary Technical Assistance Program.

____________________________________
Signature of Employer

____________________________________
Title

____________________________________
Date

POST ON EMPLOYEE BULLETIN BOARD AT YOUR PLACE OF EMPLOYMENT