

Reminder: An Annual OSHA Requirement Kicks in February 1 Every Year

OSHA requires many employers to post Form 300A, Summary of Work-Related Injuries and Illnesses, each year starting Feb. 1 through the end of April. The summary is for the previous calendar year (2016). Employers should post the form in a common area like a break room or cafeteria where notices for employees are usually found. If requested, copies of the records must be provided to current and former employees, or their representatives.

Posting your OSHA injury log (Form 300) is not required.

On the form, employers must record the total number of:

- Deaths
- cases with days away from work
- cases with job transfer or restriction
- other recordable cases
- days away from work
- days of job transfer or restriction
- injuries
- skin disorders
- respiratory conditions
- poisonings
- hearing loss, and
- all other illnesses.

If you had no injuries in 2016 you still have to post Form 300A and fill it out with zeros to reflect that you didn't have any injuries.

Employers must also include a description of their industry, their SIC or NAICS number, their average number of employees during 2016, and the total hours worked by all employees last year.

OSHA has worksheets available online to help calculate those numbers.

Companies with fewer than 10 employees and those in specific low-hazard industries are exempt from federal OSHA injury and illness recordkeeping, including the Form 300A requirement. The last time OSHA revised the list of exempt industries was Jan. 1, 2015.

Fines are possible if an employer is inspected by OSHA and hasn't kept proper injury records.

OSHA's Form 300A (Rev. 12/15)
Summary of Work-Related Injuries and Illnesses
Year 2016
U.S. Department of Labor
Occupational Safety and Health Administration

Establishment Information
Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Mailing Address (if different): _____
NAICS Code: _____
SIC Code: _____
Employer's OSHA 300 Log ID: _____
Employer's OSHA 300 Log URL: _____
Employer's OSHA 300 Log Email: _____
Employer's OSHA 300 Log Phone: _____
Employer's OSHA 300 Log Fax: _____
Employer's OSHA 300 Log Website: _____
Employer's OSHA 300 Log Other: _____

Number of Cases
Total number of cases with days away from work: _____
Total number of cases with job transfer or restriction: _____
Total number of other recordable cases: _____
Total number of deaths: _____

Number of Days
Total number of days away from work: _____
Total number of days of job transfer or restriction: _____

Injury and Illness Types
Total number of: _____
a) Skin Disorders: _____ b) Respiratory Conditions: _____
c) Poisonings: _____ d) Hearing Loss: _____
e) All Other Illnesses: _____

Sign Here
Employer's Signature: _____
Date: _____
Supervisor's Signature: _____
Date: _____

If you have any questions, please contact The Redstone Group at 614-763-5034 x7007