

BLS Task Order 19

SOII Respondent Follow-up Survey Final Report

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Executive Summary

The Survey of Occupational Injuries and Illnesses (SOII) is a mandatory establishment survey, conducted by the Bureau of Labor Statistics (BLS) to obtain the number of work-related illnesses and injuries. Research has suggested that employer-reported cases (as collected by the SOII) undercount the actual number of work-related injuries and illnesses. The BLS contracted with Westat to conduct follow-up interviews with selected respondents to the 2013 SOII to gain insight as to reasons for underreporting.

Westat conducted an expert review of the draft instrument, and two rounds of telephone pretest interviews with respondents recruited from a file of respondents to the 2013 SOII. Westat made recommendations after the expert review and each round of testing.

When the instrument was finalized, Westat conducted a pilot test of the Re-contact Survey on a sample of 3,703 business locations. Prenotification emails (where possible) or letters (where the sample file did not list a valid email address) alerted the contacts of the upcoming survey. Contacts responsible for multiple locations contained in the sample were interviewed once for all locations. Contacts responsible for over 5 locations were sent a script via email to obtain verification of demographic information (locations, number of employees, etc.) for each location, and were later called to complete the non-location-specific items. Westat also requested copies of each location's OSHA 300 logs from respondents completing the interview.

Westat completed interviews representing 1,852 locations, and collected 777 OSHA log reports comprising 16,425 injury and illness cases. Westat delivered interim and final data files and codebooks for the CATI and OSHA data, as well as PDF files of all received OSHA log reports.

Recommendations for future administrations of the SOII Re-contact Survey include:

- Build sufficient time into the schedule to accommodate both in-person and telephone pretesting;
- Improve the SOII contact information in the sample file to maximize the chances of reaching the correct respondent;
- Determine strategies for handling multi-unit locations early in the process to maximize time for response;
- Streamline the survey instrument for units with no reported injuries or illnesses;

- Conduct data collection earlier in the year, to avoid conflicts with end-of-year reporting and vacation schedules; and
- Encourage respondents to submit electronic versions of OSHA reports, and standardize the OSHA log forms.

Background

The Occupational Safety and Health Administration (OSHA) relies on the Bureau of Labor Statistics (BLS) to collect data on occupational injuries, illnesses and fatalities in the United States. The Survey of Occupational Injuries and Illnesses (SOII) is a comprehensive statistical program that reports on work-related injuries and illnesses in private industry and in State and Local Governments. A key part of this data collection relies on employers to maintain and submit to BLS accurate records of workplace injuries and illnesses. Employers submit their SOII data using a form called the OSHA 300 log.

Recent evidence from independent studies has demonstrated that the current SOII results in a significant undercount of work-related injuries and illnesses. This suggests that the health of American workers is not as good or robust as the official data suggest. Workers may not report a work-related injury or illness because they fear job loss; they fear retribution; or they fear loss of privilege based on low injury and illness rates. Employers may not record injuries or illnesses because they fear increased insurance rates or loss of contracts for future work.

The SOII is used to allocate prevention resources in hundreds of industries and occupations. Inaccurate injury and illness data can lead to:

- Bad research on occupational hazards;
- Badly-designed systems to prevent and lessen occupational hazards; and
- Some businesses being affected economically more than others.

Research by BLS suggests that differences exist between SOII data and workers' compensation data and other health administrative records, and that this might account for some of the differences that are sometimes attributed to the undercount. In general, the previous research pointed to a need to better understand the ways that employers' practices might generate differences between SOII and workers' compensation data.

BLS contracted with Westat to conduct follow-up interviews with a sample of selected private sector respondents to the 2013 SOII to gain insight as to reasons for underreporting. This study was designed to examine the extent to which employers add or update injury and illness information on

their OSHA 300 log in the year following the SOII survey. It was also designed to determine whether there are explanations for non-matched injury and illness cases identified in previous research.

Pretest

Prior to release of the task order, BLS had developed a draft questionnaire and recruitment scripts. The draft questionnaire contained items on:

- Background and Company Demographics;
- Worker Characteristics;
- Workers Compensation;
- General Injury and Illness Reporting;
- The Company Respondents;
- OSHA Injury Illness Reporting;
- Late Cases;
- Updated Records; and
- Recordkeeping Knowledge.

BLS had conducted one round of eight in-person pretest interviews and then conducted a second round of seven pretest interviews via telephone. Westat conducted review and pretest activities on the instrument coming out of the BLS pretests. Westat conducted eight telephone interviews in the first round of pretesting, and ten telephone interviews in the second round of pretesting, and made recommendations on retention of items and on item wording and ordering at the end of each round of pretesting.

Expert Review

Westat conducted an expert review of the draft survey instrument. Two senior survey methodologists and the task leader reviewed the pretest questionnaire, examining it for issues in wording, flow, clarity, and consistency. BLS also interviewed the Westat staffer responsible for injury and illness tracking, with Westat project staff observing the interview. Based on these activities, Westat made recommendations on wording and ordering.

Pretest Sample

BLS pulled a sample of 100 establishments from the 2013 SOII frame for pretest interviews. Westat reviewed the sample, and referred back to BLS specific establishments with missing/out-of-date information. BLS later provided a supplemental pretest file containing an additional 48 establishments from 10 different companies. Each company in this supplemental pretest file had a designated contact responsible for reporting injury and illness data to SOII for multiple company establishments

OMB Submission

Following expert review and completion of BLS' pretest interviews, BLS submitted the SOII Re-contact Survey instrument and materials for OMB approval. BLS received notice of OMB approval January 20, 2015.

Round 1 Pretesting

Pretesting activities began after BLS received OMB approval for the survey. Westat randomly selected 25 establishments from the pretest sample to contact for the Round 1 pretest. Most (23) were sent a prenotification letter via email; two establishments did not have a contact email address listed, and were sent a letter via U.S. Mail. After allowing time for contacts to receive and read the email, Westat staff made recruiting calls to the contacts. Table 1 shows the outcome of the calls, including 8 completed interviews.

Table 1. Disposition of calls, round 1 pretest

Result	N
No phone number/invalid number	2
Left repeated messages, no response	6
Not available/not interested	8
Agreed to participate, did not meet appointment	1
Completed pretest interview	8

Round 1 interviews were conducted via telephone February 20-26, 2015. Westat survey methodologists conducted the interview as written, then asked follow-up questions on specific

items/responses. Westat utilized retrospective probing, as another purpose of the pretest was to determine length of the interview.

Westat made several recommendations to BLS following the first round of pretesting. These included:

- Redesigning the question set on how the company keeps track of injury/illness data;
- Rewording several items to avoid confusion;
- Adding introductory text to clarify questions on the company respondent and on OSHA illness and injury recordkeeping; and
- Further investigation of issues identified in the reporting scenarios.

Round 2 Pretesting

After BLS and Westat agreed to changes based on the first round, Westat randomly selected 30 establishments from the pretest sample to contact for the Round 2 pretest. Most (25) were sent a prenotification letter via email; five did not have an email listed, and were sent a letter via U.S. Mail. After allowing time for contacts to receive and read the email, Westat staff made recruiting calls to the contacts. As the pretest sample contained only one reporter responsible for multiple locations in the sample file, BLS provided a supplemental sample file with an additional ten reporters responsible for multiple sample file locations. Westat selected six of these for inclusion, and sent out prenotification emails, followed by recruiting calls. Table 2 shows the aggregate outcome of the calls for the two groups.

Table 2. Disposition of calls, round 2 pretest

Result	N
No phone number/invalid number	0
Left repeated messages, no response	11
Not available/not interested	2
Agreed to participate, did not meet appointment	0
Agreed to participate, ineligible*	1
Completed pretest interview	10

* The person had taken over the position less than 30 days prior to the interview, and did not yet know anything about her responsibilities. Westat decided to terminate the interview and replace the person with another from the pretest sample.

Westat ended recruiting calls once ten interviews were completed.

Round 2 interviews were conducted via telephone April 28–May 12, 2015. Westat survey methodologists conducted the interview as written, then asked follow-up questions on specific items/responses. Again, Westat utilized retrospective probing to facilitate estimating the time to conduct the interview.

Westat made several recommendations to BLS following the second round of pretesting. These included:

- Modifying the questions on general injury and illness reporting to allow respondents to report that they did not have any injuries or illnesses, which could make reporting easier for respondents who never had an injury occur at their company;
- Allowing respondents responsible for only one location to skip later items on whether he/she is responsible for other locations; and
- Treating respondents responsible for over five locations in the sample differently from respondents responsible for one to five locations in the sample, to reduce respondent burden and the chance of refusal.

Appendix A contains the final questionnaire and scripts.

After Westat and BLS agreed on changes to the survey instrument, Westat programmed the questionnaire into CATI and conducted the pilot survey.

Sample

BLS provided a sample to Westat with 3,588 establishment locations, each defined by a unique identification number called an LDB number. An additional 115 units were selected in the sample drawn by BLS but not included in the file sent to Westat, as BLS determined these units to be automatic refusals prior to data collection. The total pilot test sample, including the automatic refusal units, was 3,703 establishments.

Among other variables provided for each of these locations in the original sample file, one variable (UNIT_DESCRIPTION) provided a text based description of the intended scope of the establishment of interest. Across locations, this description included different types of scope, such as specific addresses, all employees working in a particular county or state, or employees doing a particular type of work for the company. This column in particular was reviewed and edited by Westat to be as informative as possible during the interview, allowing interviewers and respondents to accurately come to a shared understanding of the location of interest that was to be the focus of the interview. The most frequent edits were to change text of “Address Below” to the provided company address, and to write out abbreviations.

Of the 3,588 establishments in the sample file received by Westat, 332 locations had the same 2013 contact phone number as at least one other location. Westat grouped these locations by phone number to create a sample file with one row per respondent, with information about each of the multiple locations that the respondent was responsible for included in the row. The programming of the interview was such that a single company name and secondary name applied to each of multiple units, while the unit description distinguished each location from the others. Each of these variables was reviewed for the multi-unit groups to ensure accuracy and clarity. Following grouping of locations with the same respondent, a file with 3,363 respondent-level records was loaded for CATI (Computer Aided Telephone Interview) calling.

CATI Programming

Westat programmed the questionnaire following guidelines agreed upon by Westat and BLS. Programming for the Background and Company Demographics section allowed interviewers to ask the section for each location linked with the listed contact and contact telephone number. Each iteration of the section listed the location and employee data for that section.

Interviewer Training

The training protocol for the BLS SOII Re-Contact Survey produced well-trained interviewers with the skills to gain respondent cooperation, correctly answer questions about the study, and adeptly complete interviews. All interviewers completed individual self-paced training, group-based supervisor-led training, and role-play interviews monitored by supervisors. A customized learning management system controlled sequencing, assessment, and content management for the trainings, ensuring that each data collector received the same training. Interviewers were not approved to conduct interviews for the BLS SOII Re-Contact Survey until they successfully completed each portion of training, including quizzes demonstrating mastery of the material in the self-paced training, and supervisor approval of necessary content and skill mastery of the interview itself as demonstrated in the group-based and role-play interviews.

Over the course of the training, the interviewers for the BLS SOII Re-Contact Survey reviewed and practiced a variety of general interviewing skills that were reinforced through each phase, including standardized delivery of questions, protecting confidentiality, courteous and friendly tone, nondirective probing, recording responses exactly, determining eligibility, refusals, use of the CATI system, call disposition, setting callbacks, and refusal avoidance. In addition to these general skills, training also covered the particulars of the BLS SOII Re-Contact Survey, including understanding the importance of why the survey was being conducted, and being familiar with the accurate delivery of each question of the telephone survey. Appendix B contains copies of the interviewer training agendas.

Self-Paced Training. All interviewers had previously completed the general interviewer self-paced training. Following that general training, all interviewers selected for the BLS SOII Re-Contact Survey completed additional self-paced training through the learning management system that was customized to the BLS SOII Re-Contact Survey. This included learning about the background of the

Survey, answers to the questions that respondents might ask, and practicing key skills such as gaining respondent cooperation. This material was expected to take the interviewers approximately two hours to learn, including taking a quiz to demonstrate comprehension. The learning management system presented the content interactively to interviewers.

Group-Based Supervisor-Led Training. After interviewers completed the self-paced training, they were invited to the group-based supervisor-led training, conducted via WebEx. Interviewers selected one of two sessions, which were led by the same supervisor and covered the same material. Each group based session included a demonstration interview conducted by two supervisors, example interviews in the CATI (Computer Assisted Telephone Interview) system with the supervisor acting as a respondent and interviewers asking the questions, examples of different contact types including how to navigate through bureaucracies to reach the desired person, and an opportunity to discuss the FAQs in more detail. Each session was four hours long with a 15 minute break. The agenda for the first session is included in Appendix B. The second session was identical, but conducted on a different day and time.

Role-Play Interviews. Following the group-based training, interviewers were paired to practice the BLS SOII Re-contact Survey interview. Within the pair, the interviewers took turns serving as interviewers and respondents on two full interviews and additional practice with the initial contact portion of the interview. These practices were conducted using the CATI instrument. All responses for the interviewer serving as the respondent were scripted, so that a variety of situations were encountered during these role-plays. Supervisors monitored the role-plays in order to approve interviewers to begin conducting real interviews.

Westat invited 24 potential interviewers to training, 19 of who successfully passed each of the three stages of training and began conducting interviews.

Ongoing Training During Data Collection. Throughout the field period for the BLS SOII Re-Contact Survey, interviewers were unobtrusively monitored by supervisors approximately 10 percent of the time, with higher rates of monitoring for interviewers who were newer or had lower cooperation rates from respondents when calling to conduct interviews. Feedback was provided to interviewers following each monitoring session.

Interviewers who achieved the highest cooperation rates during the first few weeks of data collection received additional training on converting refusals into completed interviews, and were

responsible for calling back respondents who gave a mild (as opposed to hostile) refusal to participate when first reached.

Administration

Prenotification. Pre-notification emails or letters were sent to each respondent on Thursday October 1st, 2015. Both the letter and the email had the same content. The letter and email described the purpose of the study, let the respondent know that Westat would be calling, described some records that might be useful to have during the interview, and listed the establishment and specific location(s) that Westat would ask about during the interview. The letter also provided a toll-free number for respondents to reach Westat with any questions, or if respondents wanted to conduct the interview at their convenience. Appendix C contains a sample prenotification letter.

Establishments on the sample file with the same phone number for the 2013 contact were considered to be part of a multi-establishment company and were grouped prior to sending pre-notification letters, such that all establishments were listed together on the letter or email to the respondent.

If the sample file provided by BLS did not have an available email address, respondents were sent letters by USPS First Class mail. Each letter listed all locations that the respondent point of contact was responsible for, but if there were different mailing addresses for different locations, a copy of the letter was mailed to each unique address. A total of 358 letters were mailed on October 1st.

Westat sent the prenotification via email to all respondents with an email address listed in the sample file. Respondent points of contact who reported to SOII for multiple company establishments only received one email listing all these locations. A total of 3029 emails were sent on October 1st.

If the email bounced back as undeliverable, the contact was put on a temporary hold, so that a letter could be sent in the mail before calling began. An additional 240 letters were sent via USPS on Tuesday October 13th to respondents with undeliverable email addresses. If an automatic reply to the email indicated that the sampled respondent point of contact was no longer at the company, but provided new contact information, then the pre-notification information was sent to the new contact, and the new contact was added to the CATI record. Respondents sending back an email

indicating they did not wish to participate were classified as “hard” refusals, and were not contacted again.

During the course of interviewing, some respondents requested another copy of the pre-notification letter, which was sent by email on an ongoing basis.

CATI Call. Calling was conducted from 9am to 6pm EST each weekday from Tuesday, October 1st until Friday, December 18th. (On Tuesday, October 1st, calling began in the afternoon, following a final training in the morning). If respondents requested a scheduled appointment at a time outside of the regularly scheduled hours, this was accommodated by a supervisor.

Telephone numbers linked with sampled respondents were called up to four times before being held until later in the field period. These numbers were then released and called up to four additional times. Calls were placed on different days of the week, and at different times of day in order to maximize the chances of reaching the respondent. Telephone numbers for 2013 contacts that did not result in reaching someone were reviewed at the end of November, and updated with 2014 contact information if available, with calls through the end of the field period placed to the 2014 contact information instead.

When reaching someone at a sampled number, interviewers requested to speak with the contact currently on file. If the person answering the phone said that the contact was no longer with the company, interviewers requested to speak to the individual currently responsible for injury and illness record keeping.

Though interviewers always tried to conduct the interview when they reached a respondent on the phone, they scheduled appointments as needed, and these could be for a specific time, or for a more general time frame (for example, if the respondent said that in general, Tuesday afternoons were a good time). Appointments could also be set to finish an interview that was previously started, if the respondent was not able to complete the full interview in one session.

When an interviewer reached an answering machine, they left a message no more often than once every 10 days. The message gave an overview of the reason for the call, provided Westat’s toll-free number if the respondent wanted to participate at their convenience, and also indicated that Westat would call back again.

Respondents that initially refused were typically classified as “soft” refusals, and contacted again later in the field period in a second attempt to explain the study’s importance and obtain the respondent’s participation. If respondents were hostile in their initial refusal, then they were not contacted again.

On average, completed interviews took 19.39 minutes for single-unit establishments, and 24.93 minutes for multi-unit establishments.

Appointment Reminder. All respondents who had agreed to a specific appointment time with an interviewer were sent an email reminder the day before the appointment. The email included the day and time of the scheduled interview, and a list of the business location(s) the interviewer would be asking about.

Multi-Unit Contacts. The SOII collects data by establishment; this means that the contact for a given company may report for multiple sampled establishments/locations. The sample of establishments drawn for this survey included contacts who were responsible for reporting for as few as two and as many as 28 different establishments for their company. To reduce respondent burden and enhance cooperation, Westat instituted separate protocols for contacts responsible for 2–5 locations and contacts responsible for more than five locations. A total of 95 company contacts in the sample were responsible for 2–5 locations. These individuals were contacted by phone to complete a single interview about all locations, very similar to those contacts responsible for only one location. The locations were grouped together into a single person-level case, such that these contacts received one set of calls (following the procedures described above) total, not separate call attempts for each location.

When contacts responsible for 2–5 locations participated in the survey, they completed the first portion of the interview with details about each of the multiple locations. Questions were asked first overall, and then for specific locations as needed. For example, respondents were first asked “Does your company have part-time employees at any location?” and if so, were asked “Does your company have part-time employees at <location description for each of the 2–5 locations>”? If the company did not have part-time employees at any location, then the location-specific follow-up questions were not asked.

The interviewer then asked the questions in the second portion of the interview, about general record keeping practices, in the same way as they were asked to respondents with single locations. These questions were only asked of the respondent once, regardless of the number of locations.

For respondents with six or more sampled locations, the goal was to conduct the first part of the interview, with the location specific questions, by paper instead of by phone. Westat planned to hold these large multi-unit cases from calling until a paper version of the survey could be approved and sent to the respondents.

There were a total of 9 contacts responsible for 6–28 sampled locations. One contact in this group had previously been contacted for the pre-test, and was not contacted again during the main data collection phase.

Once the paper survey was approved, it was sent by email to respondents responsible for 6 or more locations. For those cases without an email address on file, or who did not respond to the email request, supervisors made follow-up phone calls.

Two contacts were inadvertently called prior to developing the paper survey and completed the CATI interview for five of their locations (the maximum number allowed in the CATI program), including both the location specific and the general record keeping sections of the interview. After the approval of the paper survey, these respondents were contacted again in an attempt to obtain information about the remaining locations.

Respondents who completed the paper survey, which covered the location specific portion of the interview, were then called to complete the record keeping portion of the interview by phone, using the same CATI survey instrument as other cases.

Data Editing and Data Delivery Preparation

In preparation for the interim and final deliveries, Westat ran and reviewed frequency distributions of all survey question variables, as well as select cross-tabulations. Staff reviewed the frequencies to ensure that all values fell within expected ranges, that “mark all that apply” variables reflected multiple responses where appropriate, and that text fields were not truncated. The cross-tabulations were used to check that skip patterns were enforced; for example, to confirm that where OSHALOG=1, follow-up variables OSHAPROG—OSHAPAPR were set, and where OSHALOG<>1, follow-up variables COMFORM—WCFORM were set. Staff also corrected “Other specify” text fields for spelling and, where needed, for clarity (e.g., to write out abbreviations that may not be comprehensible to non-interviewers). Personally identifiable information was

redacted in fields where names were not expected or requested. Other small corrections were made to the data based on problem sheets submitted by interviewers. All changes were made in a copy of the database in order to preserve a “back-up” of the data as originally submitted.

Westat staff ran additional checks on the final dataset after it was converted from company level to establishment level (by LDB number). These checks ensured that all expected variables were present and in an appropriate order, and that attributes such as variable length were as expected. Another round of frequency review made certain data were accurately transferred from company level to establishment level, and that no mismatches of data had occurred. Establishment identification (LDB) numbers were checked for uniqueness and to make sure the expected number of records existed. The codebook was edited and refined to reflect the order and contents of the final dataset.

OSHA Logs

Requests. As the final part of the telephone interview, Westat telephone interviewers asked respondents to submit the most up-to-date copies of their 2013 OSHA 300 log or other injury and illness report for each location discussed in the interview. Respondents were given the option of submitting by email, fax, or mail. If the respondent selected submitting by email, the interviewer provided the email address for Westat’s dedicated project mailbox. If the respondent selected submitting by fax, the interviewer provided the number for a dedicated project fax line that electronically stored received files in a permission-only folder. If the respondent selected submitting by mail, the interviewer confirmed the respondent’s address, and Westat sent a postage-paid return envelope to the respondent to send the injury and illness report.

Revision. The original approach proposed by Westat assumed that the vast majority of injury and illness reports would be sent on the OSHA 300 logs themselves in a standard format, and could be scanned directly into TeleForm. After the start of the contract, Westat and BLS determined respondents might provide data in a wide variety of formats, which made direct scanning impractical. In addition, scanned forms, whether sent electronically or via mail, might not line up with the TeleForm programming. As a result, Westat developed forms to abstract the data from the received logs, which were then scanned into TeleForm. This added an unanticipated step in the process, and increased the level of effort. Appendix D contains an example of the abstraction form.

Receipt. Westat field room staff received the faxed, emailed, or hard-copy Log Forms and receipted those forms into the Survey Management System (SMS), by date, using each form's unique LDB-ID. The LDB-ID was identified by searching the original database by establishment name, location and contact information and verifying the total case count. Data managers tracked each received Log Form and unique case ID through the SMS to produce weekly production reports.

Abstraction. Receipt staff assigned cover sheets to each received Log form, documenting the LDB-ID along with the total number of log sheets received as a way to assure quality throughout processing. All pages contained within the packet were identified with the LDB-ID and page number. Abstractors keyed data exactly as recorded on the Log Forms directly into a Teleform scannable PDF for each LDB-ID. Abstraction staff created a decision log to document potential problem Log Forms, data issue decisions or pertinent comments made by respondents. A 25 percent quality control check was performed on abstracted data entry.

If a data value violated abstraction rules (such as marking more than one choice box in a mark-only question), the abstractors flagged the data item for review by the Quality Control team, who reviewed the form and resolved any discrepancies. Illegible entries were identified by using the word 'unreadable'. If the words 'privacy case' were noted in the employee's name field those fields were left blank.

Scanning. All completed Log Forms were electronically scanned to capture the reported data and images. Staff reviewed each BLS OSHA 300 log submission as it was prepared for scanning and data verification. The review included determining if the form was not scannable for any reason such as legibility. Light images were enhanced if possible. In some instances the original FAX or email from the respondent was included in the delivery of images.

The reviewed Log Forms were then sent through the high-speed TeleForm scanner to capture the responses. TeleForm read the form image files and extracted data according to rules established prior to the field period. Scanned data were then subject to validation according to specifications.

A 10 percent quality control check was then conducted on the scanned data and the electronic images of the data forms. Quality Assurance (QA) staff compared hard copy BLS OSHA 300 log submissions to the data captured in the database, item-for-item, and the images stored in the repository page-for-page to ensure all items were correctly captured. If needed, updates were made. ID reconciliation across the database, images, and the receipt system was completed to confirm data integrity.

Data Cleaning and Editing. Once scanned, the data were cleaned and edited. Customized range and logical inconsistency edits, following predetermined processing rules to ensure data integrity, were developed and applied against the data. Edit rules were created to identify and recode non-specific responses. For example, if data items K1 or L1 (see Appendix D) had a value of indefinite or a response with a '+' sign the value '999' was entered into those fields. During the course of the field period, data cleaning staff determined the order of questions K1 and L1 was not consistent across forms. Additional quality control review was performed to reduce potential errors.

Variables were designed to accommodate the responses given in the OSHA 300A Summary Forms for the reported summarized cumulative data.

Westat developed flag variables to indicate the following conditions within the data:

- **Cumulative Flag.** Form 300A was received from establishment. Verbatim within variable F1 will contain all information abstracted from the Form 300A.
- **Denied Flag.** Form states case was denied.
- **InvalidYear Flag.** There is a unique case indicating a year other than 2013.
- **MultiLocationNoCases Flag.** There are no cases for a specific location within a multi-location establishment.
- **NoCases Flag.** There are no cases reported for the LDB-ID.

Results

Westat completed interviews representing a total of 1,852 locations. Of these, 1,712 were with single-unit reporters, and 154 were with multi-unit reporters. The 115 establishments pre-coded by BLS as refusals were added to the denominator to calculate response rates.¹ Table 3 presents unadjusted (based on establishments called) and adjusted (including BLS automatic refusals) response rates.

Table 3. Response rates, pilot

	Unadjusted	Adjusted
Single-Unit	55.3%	55.3%
Multi-Unit	46.1%	33.6%
Overall	54.5%	52.7%

The response rate for multi-unit reporters was lower than for single unit reporters since, if a contact refused to participate or otherwise did not complete an interview, it affected from 2 to 28 locations. This response rate was further depressed by the fact that 113 of the 115 BLS automatic refusals were part of a multi-establishment company with a single contact responsible for reporting for two or more locations.

Westat received 777 OSHA 300 logs, or compatible reports, comprising a total of 16,425 injury or illness cases. This represented 41.6 percent of establishments about which data were collected during the CATI interview, and 21.0 percent of all establishments sampled. Table 4 presents how these reports were received.

Table 4. Mode of receipt of OSHA logs

Mode	N	%
Email	479	61.6
Fax	260	33.4
Mail	38	4.9
Total	777	99.9

Percents do not add to 100 due to rounding.

Westat created codebooks for both the survey data and OSHA log data. These codebooks define all variables, and provide for each variable the type and length of the variable and the question text.

¹ Response rates presented follow the guidelines set out by the American Association of Public Opinion Research (AAPOR).

Appendix E contains the codebook for the survey data, while Appendix F contains the codebook for the OSHA log data. Westat also created and delivered an abstracted Log Form (Appendix D, discussed above), which is annotated with variable names and allowable field length to support the usability of the delivered OSHA log data.

Recommendations

At the conclusion of the pilot test, Westat staff debriefed the interviewers for their experiences and suggestions. While the interviewers generally reported positive experiences and exchanges with contacts, they did mention a number of issues:

- Reaching the correct contact was more difficult when the sample file contained the contact’s first name only.
- If the company situation has changed (sold, merged, etc.) since completing the SOII, the contact may no longer have the records to verify the employment information.
- Repeating the company location (used to identify the location/unit selected) sometimes became counter-productive.
- Small companies were more likely to report problems with recording their injury data.
- Questions on injuries were confusing if the company/location had no injuries in the reporting period.
- Some respondents became confused when asked if in the abstract if they would be willing to send updates, only to have the interviewer later request copies of their OSHA logs. While this did not as a rule appear to affect their decision whether or not to send copies of their OSHA logs, it did adversely affect the interview process.
- Refusals to provide copies of their OSHA logs were often due to concerns over PII (particularly employee names).
- The interviewers were occasionally told the company was “exempt from the OSHA form”.

Recommendations for Future Administrations

As noted above, the interviewers reported generally positive experiences, and that most reporters would be willing to participate in future iterations of the Re-Contact Survey. However, several steps could be taken to improve the process should BLS administer the Re-Contact Survey in the future.

Coordinate Testing Schedules. The project timeline should include time for all pretesting, both pretest interviews conducted by BLS staff and those conducted by the contractor.

Improve Contact Information. The contact information in the sample, while generally very good, was inconsistent in quality. As noted by the interviewers, some locations had only the first name for the listed contact. In the case of multi-unit reporters, different locations had variations on the person's name, requiring unplanned-for cleaning and standardization on the part of Westat. If the SOII could collect more complete and standardized contact information, it will improve the efficiency and effectiveness of the Re-Contact Survey.

Determine Multi-Unit Strategy Early in the Process. The statement of work did not mention multi-unit reporters. While Westat and BLS developed a strategy to deal with this group, it complicated the programming and training. In addition, the decision to split the interviews with contacts responsible for more than five locations was made late in the field period. This meant that, after the time required to decide on a strategy and develop and send out the script, there was not sufficient time to properly handle nonresponses by this group. The decision on how to handle the various groups of multi-unit reporters should be made early in the process, and any special scripts sent out near the start of the field period.

Streamline the Survey Instrument for Units with No Reported Injuries or Illnesses. The interviewers noted some confusion on the part of reporters who did not have any occupational injuries or illnesses to report. Future administrations should modify the questionnaire so that these individuals skip items which are not relevant.

Conduct Data Collection Earlier in the Year. The field period was originally scheduled for Spring 2015. Delays due to testing, finalizing the questionnaire, and OMB approval meant that the field period slipped to October–December 2015. This caused conflicts with end-of-year reports and holidays. Future administrations should be planned for earlier in the year (taking into consideration administration of the SOII), accounting for predecessor activities.

OSHA Log Processing. Establishments should be encouraged to complete the OSHA 300 Log electronically to alleviate unreadable and truncated data. Submitting the OSHA 300 Log as an Excel spreadsheet via email would minimize the problems associated with scanned and faxed forms. Although this would require changes by OSHA, we suggest the Log forms be revised to include a response field for the LDB-ID and standardization of questions K1 and L1. Question K1 was associated with 'Days Away From Work' on some forms and 'Days On Job Transfer or Restriction' on other forms and likewise for question L1.

Appendix A

Questionnaire and Script

Appendix A

Questionnaire and Script

SOII Re-Contact Study: Phone Call Recruitment Script

1. Call person completing the SOII survey for the 2013 reference year.
2. Hello, my name is (NAME). I am calling on behalf of the U.S. Department of Labor, Bureau of Labor Statistics. Is (INITIAL CONTACT NAME) there? Our records show that you are the person that completed the 2013 Survey of Occupational Injuries and Illnesses. Are you the person who prepares this report?

- YES
- NO [*If no, ask to speak to the person who completed the 2013 SOII. If unavailable, ask for his/her contact information. If he/she no longer works at the company, try to interview the person currently responsible for the company's injury and illness recordkeeping.*]

The U.S. Department of Labor, Bureau of Labor Statistics (BLS) is conducting a study to better understand workplace injury and illness recordkeeping. We need your help to make our data better and more complete.

[*If applicable: You may have received a letter or an email with information about this study in the past week and we're calling to follow-up.*]

This study is not part of any type of enforcement action and we are not conducting an OSHA inspection. Per federal law, we will not and cannot share any information with OSHA. We are interested in talking to you about your experiences with the BLS survey, how your company tracks and records injuries and illnesses, and your experiences completing our survey for the 2013 calendar year.

I realize you are probably very busy, but it would be very valuable to us if we could talk on the phone with you. We estimate it will take you an average of 20 minutes to participate in this research. Do you have time for us to get started now? We can always stop and finish later if you have to leave.

[*Continue to instrument if respondent agrees to begin. Go to 3 if respondent needs to set up an appointment; read the additional information below as needed.*]

As you may know, the Bureau of Labor Statistics is an independent statistical agency and will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act (Title 5 of Public Law 107-347), the information you provide to the BLS will not be disclosed in identifiable form without your informed consent.

Again, your participation in this research project is voluntary, and you can decline to answer any questions. The information that you provide to us is very important. There are no right or wrong answers. We're just interested in gathering information about people's experience completing the survey and how to improve the survey and our data. We thank you very much for your time and willingness to help BLS improve its data on workplace injuries and illnesses.

SOII Re-Contact Study: Phone Call Recruitment Script

3. IF RESPONDENT AGREES:

- One of the interviewers from our research team will call you over the telephone. Which day between [date] and [date] would be best for you?

APPT DAY: _____

- What might be the best time of day for our phone call?

APPT TIME: _____(about 20 minutes)

- I called [PHONE NUMBER]. Is this the best phone number to use to reach you?

Yes

No → Correct the information here: _____

- *If respondent email address is on file:* I have [EMAIL ADDRESS] on file. Is this the best email to use to reach you?

- *If no respondent email address is on file:* What is the best email address to contact you about this study? _____

- If you need to reach us for any reason, you can call the research team at 855-405-5849. Again, my name is [name]. Do you have any questions for me? Thank you very much for your time. We look forward to talking with you.

CONTACT NAME, TITLE COMPANY DATE: TIME: PHONE, x EXTENSION«TELEPHONE_EXTENSION»

Introduction

Thank you for agreeing to participate in our study of workplace injury and illness recordkeeping. We are talking with people about how companies gather, record, and use information about workplace injuries and illnesses. We will start out by discussing your company's general recordkeeping practices, and then ask some questions specifically about recordkeeping during the 2013 calendar year and the 2013 BLS Survey of Occupational Injuries and Illnesses (SOII). We will use the information you provide us to improve the BLS survey. The information you provide us today is very important.

Everything we discuss today is strictly confidential and your participation is voluntary. The Bureau of Labor Statistics, its employees, agents, and partner statistical agencies, will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 (Title 5 of Public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent.

This survey is being conducted under OMB Control Number 1220-0045. We estimate it will take an average of 20 minutes to complete this study.

Our records show that you are the person that completed the 2013 BLS Survey. Could you confirm with me your job title and department so we can verify our records?

- Job Title: _____
- Department: _____

Background and Company Demographics

First, I have a few questions on your company location, employees, and workplace injury compensation practices.

[IF MORE THAN ONE LOCATION LISTED, VERIFY Q1 AND Q2 ANSWERS FOR EACH]

- 1.) The location we selected for this survey is [SAMPLED LOCATION]. We show the 2013 annual average employment at this location is N. Does that sound correct?
 - Yes
 - No, specify: _____
 - DK

- 2.) Are all the **N** employees at [**SAMPLED LOCATION**] or does this number also include employees at other locations?
- Sampled Unit Description/Address
 - Other/Multiple locations
 - DK

[IF MORE THAN ONE LOCATION LISTED, VERIFY Q3 & Q4 FOR EACH]

- 3.) Do you have other locations in [**STATE**]?
- Yes
 - No
 - DK

- 4.) Do you have locations in other states?
- Yes
 - No
 - DK

[For Q5-Q8 if the contact is responsible for multiple company locations/units, ask about entire company and not a specific unit/location. If respondent answers “No” or “DK” move on to next question and record “No” or “DK” for all sampled units. If “Yes” probe to see if that applies to all units or only some of the units and record accordingly.]

- 5.) Does your company have part-time employees [at this location (if single unit)]?
- Yes
 - No
 - DK
- 6.) Are any employees covered by a union or collective bargaining agreement at [your company (if multi) / this location (if single unit)]?
- Yes
 - No
 - DK
- 7.) Does your company use temporary workers hired through a temp help or staffing agency [at this location (if single unit)]?
- Yes
 - No
 - Not now, but has in past
 - DK

- a. (If yes), How many temp help agency workers does your company have at any one time at this location [for multis, verify number for each unit/location]?

DK

- 8.) Can you tell me who completes or assists with Workers' Compensation (WC) claims [for your company (if multi) / at sampled location (if single unit)]? (CHECK ALL THAT APPLY, read response options)?

- You (respondent)
- Other company employees
- WC insurer
- Third Party Administrator (TPA)
- Other, specify: _____
- DK

- a. Is your company self-insured for workers' compensation?

- Yes
- Yes, through a group plan
- No
- Other, specify: _____
- DK

Recordkeeping and Recordkeepers

Great, thank you. Next I have some questions on workplace injury and illness tracking and recordkeeping in your company.

- 9.) Injury and illness recordkeeping sometimes involves use of the Occupational Safety and Health Administration Log of Work-Related Injuries and Illnesses, Form 300. In 2013, did your company use, maintain, or have the capacity to electronically generate the OSHA 300 Log?

- Yes (GO TO 10.1)
- No (GO TO 10.4)
- DK (GO TO 10.4)

10.) Can you tell me how your company tracks workplace injuries and illnesses? Does your company use...

		Yes	No	DK
1	A software program that can generate the OSHA 300 Log	Go to 12	Go to 10.2	Go to 10.2
2	An electronic OSHA 300 Log spreadsheet or pdf provided by OSHA	Go to 12	Go to 10.3	Go to 10.3
3	The paper OSHA 300 Log	Go to 12	Go to 11	Go to 11
4	Your company's own paper forms, electronic forms, and/or spreadsheets			
5	Insurance Company forms			
6	Workers Compensation forms			

11.) The OSHA 300 log includes information on the employee name and job title, type, date and location of injury, and whether the employee lost days of work or was assigned different work tasks due to the injury. Did your company maintain records or information during 2013 that could be used to complete the OSHA 300 log?

- Yes
- No
- DK

[IF Q9="YES", SAY "OSHA 300 LOG" IN Q12-12A; IF Q9="NO", SAY "INJURY AND ILLNESS"]

12.) Thank you. Now I have a few questions on company recordkeepers. Some companies have one and others have multiple persons to help with workplace injuries and illnesses reporting. (From the following list), can you tell me who typically completes or assists with the (OSHA 300 log / injury and illness) recordkeeping for (sample unit description/address)? (CHECK ALL THAT APPLY, read response options)

- You (respondent)
- Other company employees, specify: _____
- WC insurer
- TPA
- Someone else, specify: _____
- No one (Go to 14)
- DK (Go to 14)

- a. (If more than 1 in Question 12) Can you tell me who has primary responsibility for the (OSHA 300 log / injury and illness) recordkeeping for this location? (CHECK ONE)
- Respondent
 - Other company employees
 - WC insurer
 - TPA
 - Someone else
 - DK (Go to 14)

[IF Q9="YES", SAY "OSHA 300 LOG" IN Q12B; IF Q9="NO", SAY "KEPT TRACK OF WORKPLACE INJURIES AND ILLNESSES"]

- b. How long have (you/other person from 12a) been (an OSHA recordkeeper/kept track of workplace injuries and illnesses)?

_____ Years

- 13.) (If yes to 9) Have/has (you/person with primary responsibility) received formal training on OSHA recordkeeping, such as classes, seminars, or online courses?

- Yes (Go to 13a)
- No (Go to 14)
- DK (Go to 14)

- a. (If yes to question 13) Do you recall when (you/person with primary responsibility) last received formal OSHA recordkeeping training? (CHECK ONE, read response options)

- Within the past 12 months
- 1–5 years ago
- 6–10 years ago
- 10+ years ago
- DK

- 14.) Also focusing on recordkeepers, the 2013 BLS Survey of Occupational Injuries and Illnesses was completed for this location in [Year/Month of SOII Submission]. Can you tell me who completed or assisted with submitting the BLS survey? (CHECK ALL THAT APPLY, read response options)

- Respondent
- Other company employees
- WC insurer
- TPA
- Someone else, specify: _____
- Don't know or recall (Go to 15)

- a. (If more than 1 in question 14) Can you tell me who had primary responsibility for completing the BLS survey? (CHECK ONE; read response options)
- Respondent
 - Other company employees
 - WC Insurer
 - TPA
 - Someone else
 - DK

[IF Q 3=NO AND Q4=NO, SKIP TO Q14C]

- b. Are (you/other person in 14) responsible for completing the BLS Survey for any other company locations?
- Yes
 - No
- c. Was 2013 the first time (you've personally/other person in 14) completed the BLS Survey at (LOCATION)?
- Yes
 - No
 - DK
 - Other, specify: _____
- d. What information sources were used to complete the 2013 BLS Survey? (CHECK ALL THAT APPLY, read response options)
- OSHA 300 Log
 - OSHA 301 Form
 - WC Data (e.g., claims, state first report)
 - Company injury and illness records (e.g., injury report forms, individual files on employees)
 - Other, specify: _____

(If yes to Q9): Now we have some general questions about OSHA 300 Log recordkeeping, or your records that can be used to maintain, generate, or complete the OSHA 300 Log. [Ask all questions in this section about the OSHA 300 Log].

(If no to Q9): Now we have some general questions about your experiences completing the BLS Survey. You completed this survey on [Year/Month of SOII Submission].

[Ask all questions in this section about the 2013 BLS Survey]

[IF Q9="YES", SAY "OSHA 300 LOG" IN Q16-17; IF Q9="NO" or 'DK', SAY "BLS SURVEY"]

[IF Q9="YES", ASK Q15; ELSE SKIP TO Q16]

15.) In general, how long after an injury or illness is reported to your company does it get recorded on the OSHA 300 log? (Check one; read response options)

- Within 1 week (includes immediately or within 1 day)
- Within 1 month
- End of year
- Other, specify: _____
- DK

16.) Where does your company usually get the number of days away from work for the (OSHA 300 log / BLS Survey)? (CHECK ALL THAT APPLY, read response options)

- Doctor's report/note
- Payroll data
- Attendance records/timekeeping
- WC Time loss data
- TPA
- From employee
- Supervisor
- Other, specify: _____
- DK

17.) Does the number of days away from work (for the OSHA log / on the BLS Survey) include all calendar days, or only days in which the employee was scheduled to work?

- Calendar days
- Scheduled days/shifts
- DK
- Other, specify: _____

[IF Q9 = "YES", ASK Q18; ELSE SKIP TO INTRO TO Q19]

18.) Does your company add or update cases on the previous year's OSHA 300 log?

- Yes
- No
- (if offered by respondent) No, I've never needed to
- DK

Now I have some general questions about recordkeeping practices for the BLS Survey (SOII) at your company.

Since the BLS survey covers one calendar year, and your company receives and returns the survey early the following year, there are a number of common reasons the survey may miss some injury and illness cases. For example, sometimes injuries and illnesses happen late in the calendar year when information on them is not complete, cases may be pending in the workers' compensation system, employees may delay in reporting injuries and illnesses, or an injury may change and become more serious over time.

- 19.) Do you recall whether any of these types of timing issues have ever occurred at any point in time at your company that could have resulted in the BLS survey missing injury or illness cases?
- Yes [note example(s) if the respondent provides any]: _____
 - No
 - DK

BLS Survey-specific questions

We are interested in learning about possible timing issues for the BLS Survey of Occupational Injuries and Illnesses. It may be useful to refer to your records for these questions, such as the OSHA 300 log or the BLS survey.

- 20.) Here's a list of some common examples of timing issues that could prevent including an injury or illness case on the BLS Survey. I'll go through the list, and let me know if any of these timing issues have occurred at your company before.

		(Do not ask this column if YES to Q14c)... Has this ever happened?	(if yes) ...Did it happen in 2013?
i.	An injury or illness was reported or discovered after submitting the BLS Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
ii.	An injury or illness occurring in November or December had incomplete information and was not included on the BLS Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
iii.	An employee stopped working at your company, then reported an injury or illness to you, and the case was not included on the BLS survey	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
iv.	An injury worsened and became recordable after submitting the BLS survey and was not included on the survey	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
v.	A claim was pending WC at the time of submitting the BLS survey and was not included	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
vi.	An employee was put on job transfer or restriction (light duty), but the injury worsened and resulted in days away from work after you submitted the BLS Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A – Company doesn't accommodate DJTR (skip to next item) <input type="checkbox"/> DK	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK

[IF Q9="YES", ASK a. IF Q9="NO" or 'DK', ASK b.]

- a. BLS does not currently request updates of the OSHA 300 logs. However, if asked, do you have or could you generate an updated OSHA 300 log that would include 2013 cases additions or updates?
- Yes
 - No
 - DK

- b. BLS does not currently request updates on reported injury or illness data. However, if requested, could you provide BLS with additional or updated information on 2013 cases that are added or change?
- Yes
 - No
 - DK
- c. (If yes to 20 a/b) What would be the easiest way to provide BLS with the additions/updates? (CHECK ALL THAT APPLY, read response options)
- Send BLS the updated OSHA 300 log
 - Send BLS updated injury and illness records
 - Provide BLS the information over the telephone
 - Other, specify: _____
 - DK

Temp worker questions

(Complete this section only if Yes to Q7) Now we have a few questions about temp agency workers and recordkeeping.

- 21.) (If yes to Q7) Would you ever include a temp agency worker on your BLS survey?
- Yes
 - No
 - DK)
- a. What types of tasks do temp workers do? Would you say you use them for... (CHECK ALL THAT APPLY)
- Labor
 - Office work
 - Other, specify: _____
 - DK
- b. Would you say that temp workers experience more, less, or about the same number of injuries and illnesses as permanent employees?
- More
 - Less
 - About the same
 - DK

- c. In 2013, did any temp workers experience injuries or illnesses?
- Yes (go to 21d)
 - No (go to 22)
 - DK (go to 22)
- d. (If yes to 21c), How many?
- # _____ / % _____ (go to 21e)
- DK (go to 22)
- e. (If provided answer to 21d) How many of the injured/ill temp workers had to take days off from work because of their injury/illness??
- # _____ / % _____
- DK

Recordkeeping vignettes

Now we have a few questions about different possible scenarios on recordkeeping practices that may be related to timekeeping issues, and what decisions your company might make in the following situations.

[IF Q9="YES", SAY "consider this an OSHA recordable injury" in Q22a and Q23-; IF Q9="NO" or 'DK', SAY "include this injury on the BLS Survey"]

- 22.) Let's say an employee sprained their ankle at work on Friday. The doctor recommended they take 2 days off from work. They were not scheduled to work on the weekend, and returned to work on Monday.
- a. Would your company (consider this an OSHA recordable injury / include this injury on the BLS Survey?)
- Yes
 - No
 - DK
- b. (If yes) would you record any days away from work?
- Yes
 - No
 - DK
- c. (if yes) How many? _____

- 23.) Let's say a worker broke their arm at work, saw their family doctor and did not file a WC claim, instead using their personal medical insurance. Would your company (consider this an OSHA recordable injury / include this injury on the BLS Survey?)
- Yes
 - No
 - DK
 - Other, specify: _____

[IF Q9="YES", SAY "OSHA 300 Log" for Q24-; IF Q9="NO" or 'DK', SAY "BLS Survey"]

- 24.) For the (OSHA 300 Log / BLS Survey), you are asked to classify either Days Away From Work (DAFW) or Days with Job Transfer or Restriction (DJTR) as the most serious outcome of the case. Let's say a worker was injured, and the doctor recommended 2 days away from work and 10 days of modified or restricted job duties. Would your company classify this as a 'days away from work' case or a 'days of job transfer and restriction' case on the (OSHA 300 Log / BLS Survey)?
- DAFW
 - DJTR
 - Other: _____
 - DK

[GO TO OSHA 300 LOG REQUEST SCRIPT.]

SOII Follow-Back Survey OSHA Form 300 Request Script

Thank you for your participation in our follow-back survey. To conclude, we are requesting the most up to date copy of your [OSHA Form 300/other recordkeeping form] used track your establishment's injuries and illnesses in 2013. With receipt of this form, we can verify that our data accurately reflect what you have recorded.

After making a copy of your [*Log of Work-Related Injuries and Illnesses* (OSHA Form 300) or other form], if you could, please fax, mail, or email this copy to us. The BLS will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act of 2002 and other applicable Federal laws, your responses will not be disclosed in identifiable form without your consent.

INSTRUCTIONS FOR SENDING FORMS

- WILL FAX → READ BLOCK A
- WILL EMAIL → READ BLOCK B
- WILL MAIL → READ BLOCK C
- REFUSED → READ BLOCK D

BLOCK A

Please fax your copies to (301) 251-xxxx. Please mark the attachment to the attention of [YOUR NAME].

As a participant in a BLS statistical survey, you should be aware that use of electronic transmittal methods in reporting data involves certain inherent risks to the confidentiality of those data. Further, you should be aware that responsible electronic transmittal practices employed by the BLS cannot completely eliminate those risks. The BLS is committed to the responsible treatment of the data you report and will take appropriate steps within our ability to protect the confidentiality of those data.

Thank you for helping us collect accurate information and for helping in the effort to make America's work places safer and healthier. [END INTERVIEW]

BLOCK B

You may scan your copies and email them as attachments to xxx@westat.com. Please indicate on the subject line "SOII STUDY".

As a participant in a BLS statistical survey, you should be aware that use of electronic transmittal methods in reporting data involves certain inherent risks to the confidentiality of those data. Further, you should be aware that responsible electronic transmittal practices employed by the BLS cannot completely eliminate those risks. The BLS is committed to the responsible treatment of the data you report and will take appropriate steps within our ability to protect the confidentiality of those data.

Thank you for helping us collect accurate information and for helping in the effort to make America's work places safer and healthier. [END INTERVIEW]

BLOCK C

We will be happy to provide you with a postage paid envelope. Can we verify your correct mailing address?

Thank you for helping us collect accurate information and for helping in the effort to make America's work places safer and healthier. [END INTERVIEW]

BLOCK D

Thank you for helping us collect accurate information and for helping in the effort to make America's work places safer and healthier. [END INTERVIEW]

Appendix B

Telephone Interviewer Training Agendas

Appendix B

Telephone Interviewer Training Agendas



BLS TASK ORDER 19 SOII TRAINING AGENDA

Westat Self-paced Using LMS
Length: Up to 2 Hours

Hand Outs

- Agenda
- Introduction and Background
- FAQ's
- Answering machine message
- VOXCO Result codes and explanation of codes
- Problem Sheet Instructions
- Gaining Cooperation
- Neutral Probing
- Charge Codes/toll free number
- Pre-Notification Letter

Review

Quiz

**BLS to 19 OSHO SOII Respondent Re-Contact
Survey Training**

1		First Session (4 hours)	
WebEx	4 hours		
Training		2:00–2:15pm – Welcome & Introductions	<ul style="list-style-type: none">▪ FAQs▪ Mail out documents▪ 855 #/▪ website doc
Session		2:30–4:20pm – Interactives 1 & 4 1 Demo, 1 Company & Multiple 1 Comp (101–200) Multiple 4 – (201–300)	
		4:20–4:30pm – Break	
		4:30–5:15pm – Contacts and Interactive with 2 companies (301-400)	
		5:15–6:00pm – Gaining Cooperation with Gatekeepers & Administrative Assistants/Secretaries & FAQ's	
		6:00–6:15pm – Demo Role Play & Connections	

Appendix C

Advance Letter

Appendix C

Advance Letter



U.S. Department of Labor

Bureau of Labor Statistics
2 Massachusetts Ave. N.E.
Washington, D.C. 20212

{COMPANY_NAME}
{SECONDARY_NAME} {CONTACT_NAME_2013}
{STREET_ADDRESS} {STREET_ADDRESS2}
{CITY}, {STATE_ABBREVIATION} {ZIP}

Dear {CONTACT_NAME_2013_SAL}:

The U.S. Department of Labor, Bureau of Labor Statistics (BLS) has partnered with the research firm Westat to conduct interviews with businesses across the nation to better understand the types of injuries and illnesses experienced by our country's workforce. As a company that participated in the BLS Survey of Occupational Injuries and Illnesses (SOII) in 2013, we appreciate your efforts that make this important data available to help make our workforce safer and healthier.

To better understand the data collected in the survey, we would like to speak with you to discuss your thoughts and experiences with completing the survey and recordkeeping practices for injuries and illnesses.

In the next few days, a Westat staff member will call you to conduct a phone interview. This one-time phone interview will last approximately 20 minutes. You can set up an appointment to complete it later if you are reached at an inconvenient time. The phone interview is directed to the person who was responsible for completing your company's survey for the year **2013**. If the person who completed the 2013 survey is no longer available, we'd like to speak with the person currently responsible for the company's injury and illness recordkeeping.

This study is not part of any type of enforcement action and we are not conducting an OSHA inspection or audit. Per federal law, we will not and cannot share any information with OSHA. The BLS will use the information you provide for statistical purposes only and will hold the information in confidence to the full extent permitted by law. In accordance with the Confidential Information Protection and Statistical Efficiency Act (Title 5 of public Law 107-347) and other applicable Federal laws, your responses will not be disclosed in identifiable form without your informed consent.

We hope you will participate in this study and help to refine efforts to accurately reflect the experiences of employers like yourself. **Westat will contact you shortly by telephone to discuss this study further.** It may be helpful to have any injury and illness records from 2013, such as the BLS survey, OSHA logs, or Workman's Compensation data, available at that time. If you have any questions, or would like to complete the interview at your convenience, you can call Westat about this study at 855-405-xxxx. Thank you for your time and consideration.

Sincerely,

A handwritten signature in black ink, appearing to be "G. S. J.", written in a cursive style.

Hilery Z. Simpson

Assistant Commissioner
Office of Safety, Health and Working Conditions
Bureau of Labor Statistics

During the interview, we will ask about the following business location(s):

{COMPANY_NAME}; {SECONDARY_NAME}; {LOCDEP}; LDB NUMBER: {LDB_NUMBER}

{COMPANY_NAME2}; {SECONDARY_NAME2}; {LOCDEP2}; LDB NUMBER: {LDB_NUMBER2}

{COMPANY_NAME3}; {SECONDARY_NAME3}; {LOCDEP3}; LDB NUMBER: {LDB_NUMBER3}

{COMPANY_NAME4}; {SECONDARY_NAME4}; {LOCDEP4}; LDB NUMBER: {LDB_NUMBER4}

{COMPANY_NAME5}; {SECONDARY_NAME5}; {LOCDEP5}; LDB NUMBER: {LDB_NUMBER5}

{COMPANY_NAME6}; {SECONDARY_NAME6}; {LOCDEP6}; LDB NUMBER: {LDB_NUMBER6}

{COMPANY_NAME7}; {SECONDARY_NAME7}; {LOCDEP7}; LDB NUMBER: {LDB_NUMBER7}

{COMPANY_NAME8}; {SECONDARY_NAME8}; {LOCDEP8}; LDB NUMBER: {LDB_NUMBER8}

{COMPANY_NAME9}; {SECONDARY_NAME9}; {LOCDEP9}; LDB NUMBER: {LDB_NUMBER9}

{COMPANY_NAME10}; {SECONDARY_NAME10}; {LOCDEP10}; LDB NUMBER: {LDB_NUMBER10}

{COMPANY_NAME11}; {SECONDARY_NAME11}; {LOCDEP11}; LDB NUMBER: {LDB_NUMBER11}

{COMPANY_NAME12}; {SECONDARY_NAME12}; {LOCDEP12}; LDB NUMBER: {LDB_NUMBER12}

Appendix D

BLS OSHA Abstract

Appendix D BLS OSHA Abstract

Uniqueid OSHA's Form 300 Abstract LDB #

YEAR
 Year 20

ESTBSTATE

ESTBNAME 100A/N ESTBCITY 100A

Establishment Name City State

A.

Case no.

B. Employee's name

First Name M.I. Last Name

C. Job title (e.g., Welder)

C1 50A/N

D. Date of injury or onset of illness

/

D1MM D1DD
Month Day

E. Where the event occurred (e.g., Loading dock north end)

E1 250A/N

F. Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., Second degree burns on right forearm from acetylene torch)

F1 500A/N

Mark only one box for each case based on the most serious outcome for that case:

Remained at work

G. Death **H.** Days away from work **I.** Job transfer or restriction **J.** Other recordable cases

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

K. Days away from work **L.** Days on job transfer or restriction

M. Mark the "injury" box OR choose one type of illness:

1. Injury
 2. Skin disorder
 3. Respiratory condition
 4. Poisoning
 5. Hearing loss
 6. All other illnesses

AI Abstractor's initials
 AIMM / / A1DD A1YY
 Month Day Year

PAGE TOTALPG
 Page of

DeniedFlag
 CumulativeFlag
 MultiLocationNoCases
 NoCases
 InvalidYearFlag

1963

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Appendix E

CATI Survey Data Codebook

Appendix E

CATI Survey Data Codebook

LDBNUM

Location LDB number, a unique location identifier of sampled location.

VOXCOID

Company's Westat ID

ESTBNAME

Company name

RESPEMAL

Email address of respondent

PHON2013

Phone number of 2013 respondent

PHTYP2013

Phone type of 2013 respondent

HOME.....	1
WORK.....	2
CELL.....	3
OTHER.....	4

EXT2013

Phone extension of 2013 respondent

DISPEX13

Does the 2013 phone number have an extension? [for display purposes only]

YES	1
NO.....	2

NAME2013

First and last name of 2013 respondent

JOBT2013

Job title of 2013 respondent

EMAL2013

Email address of 2013 respondent

PHON2014

Phone number of 2014 respondent

PHTYP2014

Phone type of 2014 respondent

HOME.....	1
WORK.....	2
CELL.....	3
OTHER.....	4

EXT2014

Phone extension of 2014 respondent

DISPEX14

Does the 2014 phone number have an extension? [for display purposes only]

YES	1
NO.....	2

NAME2014

First and last name of 2014 respondent

JOBT2014

Job title of 2014 respondent

EMAL2014

Email address of 2014 respondent

ESTBSECD

Secondary company name

DISPEST2

Does the company have a secondary name? [for display purposes only]

YES	1
NO.....	2

SAMPSTR1

Company street address or address line 1, where letter was mailed

SAMPADD2

Company street address line 2

SAMPCITY

Company city

SAMPSTAT

Company state

ALASKA.....	AK
ALABAMA.....	AL
ARKANSAS.....	AR
ARIZONA	AZ
CALIFORNIA	CA
COLORADO	CO
CONNECTICUT.....	CT
DISTRICT OF COLUMBIA	DC
DELAWARE.....	DE
FLORIDA	FL
GEORGIA	GA
HAWAII	HI
IOWA	IA
IDAHO	ID
ILLINOIS.....	IL
INDIANA.....	IN
KANSAS	KS
KENTUCKY	KY
LOUISIANA	LA
MASSACHUSETTS.....	MA
MARYLAND	MD
MAINE.....	ME
MICHIGAN.....	MI
MINNESOTA	MN
MISSOURI.....	MO
MISSISSIPPI	MS
MONTANA	MT
NORTH CAROLINA.....	NC
NORTH DAKOTA.....	ND
NEBRASKA.....	NE
NEW HAMPSHIRE	NH
NEW JERSEY	NJ
NEW MEXICO	NM
NEVADA	NV
NEW YORK	NY
OHIO	OH
OKLAHOMA.....	OK
OREGON.....	OR
PENNSYLVANIA	PA
PUERTO RICO	PR
RHODE ISLAND.....	RI
SOUTH CAROLINA	SC
SOUTH DAKOTA	SD
TENNESSEE	TN

TEXAS	TX
UTAH	UT
VIRGINIA	VA
VERMONT	VT
WASHINGTON	WA
WISCONSIN	WI
WEST VIRGINIA	WV
WYOMING	WY

SAMPZIP

Company zip (5 digits)

SAMPZIP

Company zip '+4' (4 digits)

SIZECODE

Size of the company, # of employees

1-10 EMPLOYEES	1
11-49 EMPLOYEES	2
50-249 EMPLOYEES	3
250-999 EMPLOYEES	4
1000 OR MORE EMPLOYEES	5

PROCDATE

The date the survey response was processed by BLS

[M/D/YYYY]

MULITND

Indicates a multi-location bundle. The value represents the bundle number. All locations in that bundle have the same MULITND.

LOCDEP

Location unit description of sampled location.

LOSTAT

State of sampled location

AVGEMP

Reported average annual employment of sampled location

RESPSTAT

2013 respondent 01
2014 respondent 02
New respondent 03

LOCANUM

Number of locations for this company included in the survey

RESPNAME

First, I'd like to confirm some information about you so that we can correct our records if needed.

NAME:

RESPTITL

JOB TITLE:

RESPCOMP

COMPANY NAME:

REMAIL1

EMAIL ADDRESS:

REMAIL2

[RE-ENTER EMAIL ADDRESS TO CONFIRM.]

R_ EMAVER

[IF REMAIL1 <> REMAIL2:] I may have made a mistake. Which is the correct email address?

<REMAIL1>..... 01
<REMAIL2>..... 02
NEITHER, NEW ENTRY..... 03
REFUSED -7
DON'T KNOW -8

REMAIL3

[RE-ENTER EMAIL ADDRESS]

EMPNUM

First, I have a few questions on your company location, employees, and workplace injury compensation practices. The first location we selected for this survey is <ESTBNAME>: <LOCDEP>. We show the 2013 annual average employment at this location is <AVGEMP>. Does that sound correct?

YES	01	
NO	02	=> EMPNOS
REFUSED	-7	
DON'T KNOW	-8	

EMPNOS

What was the 2013 annual average employment at <LOCDEP>?

[1 – 99,999]

REFUSED	-7
DON'T KNOW	-8

EMPLOC

Is the one employee / are all the <N> employees located at <LOCDEP> <? / or does this number also include employees at other locations?>

<YES / THIS LOCATION ONLY>	01
<NO / INCLUDES OTHER/MULTIPLE LOCATIONS>	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

SAMSTA

Do you have other locations in <LOSTAT>?

YES	01
NO	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

OTHERLOC

Do you have locations in other states? [Other than <LOSTAT for all associated locations>.]

YES	01
NO	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

COMPARTT

Does your company have part-time employees at any location?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

PARTIM

Does your company have part-time employees at <LOCDEP>?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

COMUNION

Are any employees covered by a union or collective bargaining agreement at any company location?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

UNION

Are any employees covered by a union or collective bargaining agreement at <LOCDEP>?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

COMTWORK

Does your company use temporary workers hired through a temp help or staffing agency at any location?

YES	01
NO.....	02
NOT NOW, BUT HAS IN THE PAST.....	03
REFUSED	-7
DON'T KNOW	-8

TEMPWK

Does your company use temporary workers hired through a temp help or staffing agency at <LOCDEP>?

YES	01
NO.....	02
NOT NOW, BUT HAS IN THE PAST.....	03
REFUSED	-7
DON'T KNOW	-8

TEMNUM

How many temp help agency workers does your company have at any one time at this location?

[1 – 99,999]

REFUSED -7
DON'T KNOW -8

WCASRESP

Can you tell me who completes or assists with Workers' Compensation claims for your company?

Is it you?

YES 01
NO 02
REFUSED -7
DON'T KNOW -8

WCASEMPL

[Can you tell me who completes or assists with Workers' Compensation claims for your company?]

Is it other company employees?

YES 01
NO 02
REFUSED -7
DON'T KNOW -8

WCASINSU

[Can you tell me who completes or assists with Workers' Compensation claims for your company?]

Is it a Workers' Compensation insurer?

YES 01
NO 02
REFUSED -7
DON'T KNOW -8

WCASADMN

[Can you tell me who completes or assists with Workers' Compensation claims for your company?]

Is it a Third Party Administrator or TPA?

YES 01
NO 02
REFUSED -7
DON'T KNOW -8

WCASOTH

[Can you tell me who completes or assists with Workers' Compensation claims for your company?]

Is it someone else?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

LOOTHOST

[OTHER SPECIFY text field for WCASOTH=01]

LOCCLAMM01 – LOCCLAMM05

[APPLIES TO MULTI-ESTABLISHMENT LOCATIONS WHERE MORE THAN ONE RESPONSE OPTION WAS ANSWERED 'YES' AT WCASRESP – WCASOTH]

Can you tell me who completes or assists with Workers' Compensation claims for your company at <LOCDEP>?

[CODE ALL THAT APPLY. First response option chosen is in LOCCLAMM01, second is in LOCCLAMM02, etc.]

RESPONDENT	01
OTHER COMPANY EMPLOYEES.....	02
WORKER'S COMPENSATION INSURER	03
THIRD PARTY ADMINISTRATOR (TPA).....	04
SOMEONE ELSE.....	91
REFUSED	-7
DON'T KNOW	-8

LOCCLAMMT0

[OTHER SPECIFY text field for LOCCLAMM01-M05=91]

SELFCOMP

Is your company self-insured for workers' compensation?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

GRUPCOMP

[SELF-INSURED FOR WORKERS' COMPENSATION] Is this through a group plan?

YES	01
NO.....	02
SOMETHING ELSE	91
REFUSED	-7
DON'T KNOW	-8

GRUPCOMPT

[OTHER SPECIFY text field for GRUPCOMP=91]

SELFLOC

Is <LOCDEP> self-insured for workers' compensation?

YES 01
 NO 02
 REFUSED -7
 DON'T KNOW -8

GRUPLOC

[SELF-INSURED FOR WORKERS' COMPENSATION] Is this through a group plan?

YES 01
 NO 02
 SOMETHING ELSE 91
 REFUSED -7
 DON'T KNOW -8

GRUPLOCT

[OTHER SPECIFY text field for GRUPLOC=91]

OSHALOG

In 2013, did your company use, maintain, or have the capacity to electronically generate the OSHA 300 Log?

YES 01
 NO 02 => COMFORM
 REFUSED -7 => COMFORM
 DON'T KNOW -8 => COMFORM

OSHAPROG

Can you tell me how your company tracks workplace injuries and illnesses?

Does your company use a software program that can generate the OSHA 300 Log?

YES 01 => COMPINTR
 NO 02
 REFUSED -7
 DON'T KNOW -8

OSHAIEC

[Can you tell me how your company tracks workplace injuries and illnesses?]

Does your company use an electronic OSHA 300 Log spreadsheet or pdf provided by OSHA?

YES 01 => COMPINTR
 NO 02
 REFUSED -7
 DON'T KNOW -8

OSHAPAPR

[Can you tell me how your company tracks workplace injuries and illnesses?]

Does your company use the paper OSHA 300 Log?

YES	01	=> COMPINTR
NO.....	02	=> RECINFO
REFUSED	-7	=> RECINFO
DON'T KNOW	-8	=> RECINFO

COMFORM

Can you tell me how your company tracks workplace injuries and illnesses?

Does your company use your company's own paper forms, electronic forms, or spreadsheets?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFORM

[Can you tell me how your company tracks workplace injuries and illnesses?]

Does your company use Insurance Company forms?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

WCFORM

[Can you tell me how your company tracks workplace injuries and illnesses?]

Does your company use Workers' Compensation forms?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

RECINFO

The OSHA 300 log includes information on the employee name and job title, type, date and location of injury, and whether the employee lost days of work or was assigned different work tasks due to the injury. Did your company maintain records or information during 2013 that could be used to complete the OSHA 300 log?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

COMPRESP

Some companies have one and others have multiple persons to help with workplace injuries and illnesses reporting. Can you tell me who of the following people typically completes or assists with the <OSHA 300 log / injury and illness> recordkeeping for this location?

Do you typically complete or assist with the < OSHA 300 log / injury and illness> recordkeeping?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

COMPINSU

[Some companies have one and others have multiple persons to help with workplace injuries and illnesses reporting. Can you tell me who of the following people typically completes or assists with the <OSHA 300 log / injury and illness> recordkeeping for this location?]

Does a Workers' Compensation insurer?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

COMPADMN

[Some companies have one and others have multiple persons to help with workplace injuries and illnesses reporting. Can you tell me who of the following people typically completes or assists with the <OSHA 300 log / injury and illness> recordkeeping for this location?]

Does a Third Party Administrator (TPA)?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

COMPEMPL

[Some companies have one and others have multiple persons to help with workplace injuries and illnesses reporting. Can you tell me who of the following people typically completes or assists with the <OSHA 300 log / injury and illness> recordkeeping for this location?]

Do some other employees at your company?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

COMPEMOST

[OTHER SPECIFY text field for COMPEMPL=01]

Who at your company typically completes or assists with <OSHA 300 log / injury and illness> recordkeeping?

COMPOTH

Does anyone else typically complete or assist with the <OSHA 300 log / injury and illness> recordkeeping for this location?

- YES 01
- NO 02
- REFUSED -7
- DON'T KNOW -8

COMPOTHT

[OTHER SPECIFY text field for COMPOTH=01]

COMPNONE

Just to confirm, no one completes or assists with <OSHA 300 log / injury and illness> record-keeping for this location?

- NO ONE COMPLETES OR ASSISTS WITH RECORD-KEEPING 01
- SOMEBODY COMPLETES OR ASSISTS WITH RECORD-KEEPING 02
- REFUSED -7
- DON'T KNOW -8

RECKPRIM

Can you tell me who has primary responsibility for the <OSHA 300 log / injury and illness> recordkeeping for this location? Is it...

- you 01
- other company employees 02
- a worker compensation insurer..... 03
- a third party administrator 04
- <COMPOTHT> 05
- REFUSED -7
- DON'T KNOW -8

LONGRECD

How long <have you / has another company employee / has the workers compensation insurer / has the third party administrator / has someone else> <been an OSHA record-keeper / kept track of workplace injuries and illnesses>? [RESPONSE IN WHOLE YEARS. IF 6 MONTHS OR MORE ROUND UP TO NEXT WHOLE YEAR.]

- [00 – 25]
- REFUSED -7
- DON'T KNOW -8

TRANOSHA

<Have you / has the other company employee / has the workers' compensation insurer / has the third party administrator / has someone else> received formal training on OSHA recordkeeping, such as classes, seminars, or online courses?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

LASTTRAN

Do you recall when <you / the other company employee / the worker's compensation insurer / the third party administrator / someone else> last received formal OSHA recordkeeping training? Was it...

within the last 12 months,	01
1 to 5 years ago,	02
6 to 10 years ago, or	03
more than 10 years ago?	04
REFUSED	-7
DON'T KNOW	-8

SUBRESP

Also focusing on record-keepers, the 2013 BLS Survey of Occupational Injuries and Illnesses was completed for this location on <PROCDATE>. Can you tell me who completed or assisted with submitting the BLS survey? Was it you?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

SUBEMPL

[Can you tell me who completed or assisted with submitting the BLS survey?]
Was it other company employees?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

SUBINSU

[Can you tell me who completed or assisted with submitting the BLS survey?]
Was it a Workers' Compensation insurer?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

SUBADMN

[Can you tell me who completed or assisted with submitting the BLS survey?]
Was it a Third Party Administrator (TPA)?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

SUBOTH

[Can you tell me who completed or assisted with submitting the BLS survey?]
Was it someone else?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

SUBOTOST

[OTHER SPECIFY text field for SUBOTH=01]

PRIMSUB

Can you tell me who had primary responsibility for completing the BLS survey? Is it...

you	01
other company employees	02
a worker compensation insurer.....	03
a third party administrator	04
<SUBOTOST>.....	05
REFUSED	-7
DON'T KNOW	-8

RESPLOCS

<Are you / are other company employees / is the worker's compensation insurer / is the third party administrator>
responsible for completing the BLS Survey for any other company locations?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

FRSTCOMP

Was 2013 the first time <you / other company employees / the worker's compensation insurer / the third party administrator / someone else> completed the BLS Survey at this location?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFO300L

What information sources were used to complete the 2013 BLS Survey?
Did you use the OSHA 300 Log?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFO301F

[What information sources were used to complete the 2013 BLS Survey?]
Did you use the OSHA 301 Form?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFOWCDT

[What information sources were used to complete the 2013 BLS Survey?]
Did you use Workers' Compensation data such as claims or the state first report?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFOCHR

[What information sources were used to complete the 2013 BLS Survey?]
Did you use company injury and illness records, such as injury report forms or individual files on employees?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFOOTHR

[What information sources were used to complete the 2013 BLS Survey?]
Were any other information sources used?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFOOTOST

[OTHER SPECIFY text field for INFOOTHR=01]

AFTERINJ

In general, how long after an injury or illness is reported to your company does it get recorded on the OSHA 300 log? Is it recorded...[IF R SAYS "IMMEDIATELY" OR "WITHIN ONE DAY" CODE WITHIN ONE WEEK.]

within one week	01
within one month,	02
at the end of the year, or.....	03
some other time?	91
REFUSED	-7
DON'T KNOW	-8

AFTRINOST

[OTHER SPECIFY text field for AFTERINJ=91]

DOCNOTE

Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?

From a doctor's report or note?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

PAYROLL

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From payroll data?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

ATTRECD

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From attendance records or timekeeping?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

WCADATA

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From Worker’s compensation time loss data?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

TPADATA

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From the Third Party Administrator (TPA)?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

EMPLOYEE

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From the employee?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

SUPERVIS

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From the supervisor?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

AWAYOTHR

[Where does your company <usually> get the number of days away from work for the <OSHA 300 log / BLS Survey>?]

From some other source?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

AWAYOTOST

[OTHER SPECIFY text field for AWAYOTHR=01]

What other source does your company <usually> use to get the number of days away from work for the <OSHA 300 log / BLS Survey>?

DAYSAWAY

Does the number of days away from work <for the OSHA 300 Log /on the BLS Survey > include all calendar days, or only days in which the employee was scheduled to work?

- CALENDER DAYS 01
- SCHEDULED DAYS/SHIFTS..... 02
- OTHER SPECIFY 91
- REFUSED -7
- DON'T KNOW -8

DAYSAWOST

[OTHER SPECIFY text field for DAYSAWAY=91]

UPDATLOG

Does your company add or update cases on the previous year's OSHA 300 log?

- YES 01
- NO..... 02
- NO, I'VE NEVER NEEDED TO 03
- REFUSED -7
- DON'T KNOW -8

MISSINJ

Do you recall whether any of these types of timing issues have ever occurred at any point in time at your company that could have resulted in the BLS survey missing injury or illness cases?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

MISSINOST

[OTHER SPECIFY text field for MISSINJ=01]

Are you able to provide any details?

AFTERSUB

An injury or illness was reported or discovered after submitting the BLS Survey. Has this ever happened?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

ASUB2013

[An injury or illness was reported or discovered after submitting the BLS Survey.]
Did this happen in 2013?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INCOINFO

An injury or illness occurring in November or December had incomplete information and was not included on the BLS Survey. Has this ever happened?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

INFO2013

[An injury or illness occurring in November or December had incomplete information and was not included on the BLS Survey.]

Did this happen in 2013?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

STOPWORK

An employee stopped working at your company, then reported an injury or illness to you, and the case was not included on the BLS survey. Has this ever happened?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

STOP2013

[An employee stopped working at your company, then reported an injury or illness to you, and the case was not included on the BLS survey.]

Did this happen in 2013?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

WORSEINJ

An injury worsened and became recordable after submitting the BLS survey and was not included on the survey.
Has this ever happened?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

WRSE2013

[An injury worsened and became recordable after submitting the BLS survey and was not included on the survey.]
Did this happen in 2013?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

PENDING

A claim was pending for Worker's Compensation at the time of submitting the BLS survey and was not included.
Has this ever happened?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

PEND2013

[A claim was pending for Worker's Compensation at the time of submitting the BLS survey and was not included.]
Did this happen in 2013?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

TRANWRSE

An employee was put on job transfer or restriction or light duty, but the injury worsened and resulted in days away from work after you submitted the BLS Survey. Has this ever happened?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8

TRAN2013

[An employee was put on job transfer or restriction or light duty, but the injury worsened and resulted in days away from work after you submitted the BLS Survey.]

Did this happen in 2013?

- YES 01
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

OSHAUPD

BLS does not currently request updates of the OSHA 300 logs. However, if asked, do you have or could you generate an updated OSHA 300 log that would include 2013 cases additions or updates?

- YES 01 => EASYUPDT
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

DATAUPD

BLS does not currently request updates on reported injury or illness data. However, if requested, could you provide BLS with additional or updated information on 2013 cases that are added or change?

- YES 01 => EASYUPDT
- NO..... 02
- REFUSED -7
- DON'T KNOW -8

EASYUPDT

What would be the easiest way to provide BLS with the additions and updates? Would you say...

- sending BLS the updated OSHA log, 01
- sending BLS updated injury and illness records,..... 02
- providing BLS the information over the telephone, or 03
- some other way? 91
- REFUSED -7
- DON'T KNOW -8

EASYUPOST

[OTHER SPECIFY text field for EASYUPDT=91]

INCLTEMP

Now we have a few questions about temp agency workers and recordkeeping. Would you ever include a temp agency worker on your BLS survey?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

TEMPLAB

What types of tasks do temp workers do? Would you say you use them for...labour?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

TEMPOFFW

[What types of tasks do temp workers do? Would you say you use them for...] office work?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

TEMPOTHR

[What types of tasks do temp workers do? Would you say you use them for...] something else?

YES	01
NO.....	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

TEMPOTOST

[OTHER SPECIFY text field for TEMPOTHR=01]

What other types of tasks do temp workers do?

TEMPEXP

Would you say that temp workers experience more, less, or about the same number of injuries and illnesses as permanent employees?

MORE	01
LESS	02
ABOUT THE SAME	03
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

TEMPINJ

In 2013, did any temp workers experience injuries or illnesses?

YES	01
NO	02
REFUSED	-7
DON'T KNOW	-8
NOT ASCERTAINED	-9

INJAMT

How many [temp workers experienced injuries or illnesses]?

[00000 – 99999]	
REFUSED	-7
DON'T KNOW	-8

INJUNIT

Is this the number of workers or percentage of workers?

NUMBER OF WORKERS.....	01
PERCENTAGE OF WORKERS	02

DOFFAMT

How many of the injured and ill temp workers had to take days off from work because of their injury or illness?

[00000 – 99999]	
REFUSED	-7
DON'T KNOW	-8

DOFFUNIT

Is this the number of workers or percentage of workers?

NUMBER OF WORKERS.....	01
PERCENTAGE OF WORKERS	02

ANKINCL

Let’s say an employee sprained their ankle at work on Friday. The doctor recommended they take 2 days off from work. They were not scheduled to work on the weekend, and returned to work on Monday.

Would your company <consider this an OSHA reportable injury / include this on the BLS Survey>?

YES	01	
NO	02	=> ARMINCL
REFUSED	-7	=> ARMINCL
DON'T KNOW	-8	=> ARMINCL

ANKDAYS

[Let’s say an employee sprained their ankle at work on Friday. The doctor recommended they take 2 days off from work. They were not scheduled to work on the weekend, and returned to work on Monday.]

Would you record any days away from work?

YES	01	
NO	02	=> ARMINCL
REFUSED	-7	=> ARMINCL
DON'T KNOW	-8	=> ARMINCL

ANKDNUM

[Let’s say an employee sprained their ankle at work on Friday. The doctor recommended they take 2 days off from work. They were not scheduled to work on the weekend, and returned to work on Monday.]

How many days?

[01 – 04]

REFUSED	-7
DON'T KNOW	-8

ARMINCL

Let’s say a worker broke their arm at work, saw their family doctor and did not file a Worker's Compensation claim, instead using their personal medical insurance. Would your company <consider this an OSHA reportable injury / include this on the BLS survey>?

YES	01
NO	02
REFUSED	-7
DON'T KNOW	-8

CONSDDAY

For the <OSHA 300 Log / BLS Survey>, you are asked to classify either Days Away From Work or Days with Job Transfer or Restriction as the most serious outcome of the case. Let’s say a worker was injured, and the doctor recommended 2 days away from work and 10 days of modified or restricted job duties. Would your company classify this as a ‘days away from work’ case or a ‘days of job transfer and restriction’ case on the <OSHA 300 Log / BLS Survey>?

DAYS AWAY FROM WORK (DAFW)	01
DAYS OF JOB TRANSFER AND RESTRICTION (DJTR)	02
OTHER.....	91
REFUSED	-7
DON'T KNOW	-8

CONSDYOST

[OTHER SPECIFY text field for CONSDDAY=91]

SENDCOPY

How would you like to send your <OSHA Form 300 / injury and illness report>?

WILL FAX	01	=> SENDFAX
WILL EMAIL.....	02	=> SENDEMAL
WILL MAIL.....	03	=> SENDTOPO
REFUSED	-7	

SEDNFAX

Please fax your copies to 888-249-7253.

CONTINUE.....	01
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SENDEMAL

You may scan your copies and e-mail them as attachments to BLSSOIIRecontact@westat.com. Please indicate on the subject line "SOII STUDY".

CONTINUE.....	01
---------------	----

SENDTOPO

We will be happy to provide you with a postage paid envelope. What is your mailing address?

[ARE YOU RECORDING P.O. BOX?]

YES	01	=> SENDPOBX
NO.....	02	=> SENDANUM

SENDPOBX

[We will be happy to provide you with a postage paid envelope. What is your mailing address?]
P.O. BOX:

SENDPOCY

CITY:

SENDPOST

STATE:

SENDPOZP

ZIP:

SENDPZP4

ZIP4:

SENDANUM

[We will be happy to provide you with a postage paid envelope. What is your mailing address?]
[<SAMPSTRT> MUST BE RETYPED IN APPROPRIATE FIELDS. VERIFY SPELLING. RECORD CHANGES
OR TAB IF NO CHANGE.]

STREET #:

SENDSTRT

STREET NAME:

SENDSTTY

STREET TYPE:

SENDADD2

ADDRESS LINE 2:

SENDCITY

CITY:

SENDSTAT

STATE:

SENDZIP

ZIP:

SENDZIP4

ZIP4:

REASREF1M01 – REASREF1M04

[FIRST REFUSAL]

WHY IS THE RESPONDENT REFUSING?

[CODE ALL THAT APPLY. First response option chosen is in REASREF1M01, second is in REASREF1M02, etc.]

- HUNG-UP WITH NO COMMENT 01
- TOO BUSY 02
- NOT INTERESTED 03
- OTHER..... 04

NIRFRES1

WHAT DID THE R SAY AND/OR WHAT DID YOU SAY? WHAT WERE YOU READING WHEN THE R REFUSED?

..... 1 DO

NIRFRES1T

[Text field for NIRFRES1]

REASREF2M01 – REASREF2M04

[SECOND REFUSAL]

WHY IS THE RESPONDENT REFUSING?

[CODE ALL THAT APPLY. First response option chosen is in REASREF2M01, second is in REASREF2M02, etc.]

- HUNG-UP WITH NO COMMENT 01
- TOO BUSY 02
- NOT INTERESTED 03
- OTHER..... 04

NIRFRES2

WHAT DID THE R SAY AND/OR WHAT DID YOU SAY? WHAT WERE YOU READING WHEN THE R REFUSED?

..... 1 DO

NIRFRES2T

[Text field for NIRFRES2]

REASREF3M01 – REASREF3M04

[THIRD REFUSAL]

WHY IS THE RESPONDENT REFUSING?

[CODE ALL THAT APPLY. First response option chosen is in REASREF2M01, second is in REASREF2M02, etc.]

- HUNG-UP WITH NO COMMENT 01
- TOO BUSY 02
- NOT INTERESTED 03
- OTHER..... 04

NIRFRES3

WHAT DID THE R SAY AND/OR WHAT DID YOU SAY? WHAT WERE YOU READING WHEN THE R REFUSED?

..... 1 DO

NIRFRES3T

[Text field for NIRFRES3]

ResCallCount

Number of calls

ResLastCallDate

Last date called

ResCodeResult

FINAL RESULT CODE

INTERVIEW COMPLETE C1
 INELIGIBLE..... IE
 FINAL LANGUAGE PROBLEM..... LP
 MAX CALLS..... MC
 NEVER CONTACTED (REFIELED)..... N2
 NEVER ANSWERED.....NA
 NOT AT THIS NUMBER, NO NEW NUMBER AVAILABLE NL
 NEVER CONTACTED (INCLUDES AM) NM
 LOADED AS INELIGIBLE NO
 NON-WORKING..... NW
 OUT OF BUSINESSOB
 FINAL REFUSAL RB
 FINAL REFUSAL DO NOT CALL.....RD
 HOSTILE REFUSALRH
 REFUSAL MAX CALLS.....RM

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Appendix F
OSHA Log Data Codebook

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OSHA Log Data Codebook

TF_Variable	Type	Length	Label
UNIQUEID	char	12	UNIQUEID
LDBID	char	9	LDBID
YEAR	numeric	2	Year 20
ESTBNAME	char	100	Establishment Name
ESTBCITY	char	100	CITY
ESTBSTATE	char	2	STATE
A1	char	3	Case No.
B1FN	char	30	Employee's Name First Name
B1MI	char	1	Employee's Name Middle Initial
B1LN	char	30	Employee's Name Last Name
C1	char	50	Job title (e.g., Welder)
D1MM	numeric	2	Date of injury or onset of illness Month
D1DD	numeric	2	Date of injury or onset of illness Day
E1	char	250	Where the event occurred (e.g., Loading dock north end)
F1	char	500	Describe injury or illness, parts of body affected, and object/substance that directly injured or made person ill (e.g., second degree burns on right forearm from acetylene torch)
GJ1	numeric	1	Mark only one box for each case based on the most serious outcome for that case:
			1 = Death
			2 = Days away from work
			3 = Job transfer or restriction
			4 = Other recordable cases
K1	numeric	3	Enter the number of days the injured or ill worker was: Days away from work (value of 999 designates indefinite number)
L1	numeric	3	Enter the number of days the injured or ill worker was: Days on job transfer or restriction (value of 999 designates indefinite number)
M1	numeric	1	Mark the "injury" box OR choose one type of illness:
			1 = Injury
			2 = Skin disorder
			3 = Respiratory condition
			4 = Poisoning
			5 = Hearing loss
			6 = All other illnesses

TF_Variable	Type	Length	Label
AI	char	3	Abstractor's initials
AIMM	numeric	2	Abstractor input date Month
AIDD	numeric	2	Abstractor input Day
AIYY	numeric	2	Abstractor input Year
PAGE	numeric	3	Page number
TOTALPG	numeric	3	Page total
DeniedFlag	numeric	1	Denied comment
CumulativeFlag	numeric	1	LDBID reports cumulative data
MultiLocationNoCases	numeric	1	LDBID reports no cases at this location
NoCases	numeric	1	LDBID reports no cases
InvalidYearFlag	numeric	1	Invalid year noted