

# Independent Assessment of Occupational Injury and Illness Recordkeeping and Reporting by Consolidated Nuclear Security, LLC at the Pantex Plant

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Office of Enterprise Assessments U.S. Department of Energy

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### Acronyms

CAIRS Computerized Accident/Injury Reporting System CDC Centers for Disease Control and Prevention

CFR Code of Federal Regulations

CNS Consolidated Nuclear Security, LLC CRAD Criteria and Review Approach Document

CY Calendar Year

DAW Day Away from Work

DART Days Away, Restricted or Transferred

DOE U.S. Department of Energy EA Office of Enterprise Assessments

EHSS Office of Environment, Health, Safety and Security

ERMS Electronic Records Management System

JCDC John C. Drummond Center

NNSA National Nuclear Security Administration

NPO NNSA Production Office
OHS Occupational Health Services
OII Occupational Injury and Illness

OSHA Occupational Safety and Health Administration

OTC Over the Counter Pantex Pantex Plant

RWD Restricted Workday
SME Subject Matter Expert
STS Standard Threshold Shift

# INDEPENDENT ASSESSMENT OF OCCUPATIONAL INJURY AND ILLNESS RECORDKEEPING AND REPORTING BY CONSOLIDATED NUCLEAR SECURITY, LLC AT THE PANTEX PLANT

### **Executive Summary**

The U.S. Department of Energy (DOE) Office of Enterprise Assessments (EA) conducted an independent assessment of occupational injury and illness (OII) recordkeeping and reporting by Consolidated Nuclear Security, LLC (CNS) at the Pantex Plant (Pantex) on June 13-16, 2022. The assessment evaluated the OII recordkeeping program and accuracy of case records at Pantex. DOE relies on the accuracy of contractor OII reporting to evaluate safety performance and assess the overall effectiveness of the Department's safety and health programs.

EA identified the following strengths, including one best practice:

- CNS's overall recordkeeping and reporting process is well organized and comprehensive, involving necessary management and subject matter experts.
- The CNS process for tracking case files in the Occupational Safety and Health Administration (OSHA) 300 log and use of a digital records management system provides real-time status of OII cases, supports timely Computerized Accident/Injury Reporting System (CAIRS) case updates, and establishes consistent auditable OII case records. (Best Practice)

### EA identified the following three weaknesses:

- CNS does not ensure that subcontractors maintain OSHA 300 logs and 300A summaries for OII recordable cases that occur at Pantex, contrary to 10 CFR 851, *Worker Safety and Health Program*, and DOE Order 231.1B, *Environmental Safety and Health Reporting*.
- CNS misclassified 17 of the 42 OII cases reviewed by EA as not work-related, accounting for the
  majority of the 12 cases that were omitted from or inappropriately recorded in CAIRS or the OSHA
  logs.
- CNS did not include sufficient detail in 11 of the 16 reviewed COVID-19 (Coronavirus Disease 2019) contact tracing cases to support the work-relatedness determinations.

In summary, CNS has developed and implemented a satisfactory recordkeeping program that guides management in adequately identifying, investigating, and classifying OII cases to maintain quality records. However, CNS made some errors in determining work-relatedness. Until the concerns identified in this report are addressed or effective mitigations are put in place, CNS OII records will not accurately represent the number of work-related injuries and illnesses at Pantex.

### INDEPENDENT ASSESSMENT OF OCCUPATIONAL INJURY AND ILLNESS RECORDKEEPING AND REPORTING BY CONSOLIDATED NUCLEAR SECURITY, LLC AT THE PANTEX PLANT

### 1.0 INTRODUCTION

The U.S. Department of Energy (DOE) Office of Worker Safety and Health Assessments, within the independent Office of Enterprise Assessments (EA), assessed the effectiveness and accuracy of occupational injury and illness (OII) recordkeeping and reporting by Consolidated Nuclear Security, LLC (CNS) at the Pantex Plant (Pantex) pursuant to requirements established by 10 CFR 851, *Worker Safety and Health Program*, and DOE Order 231.1B, *Environment, Safety and Health Reporting*. DOE relies on the accuracy of contractor OII reporting to evaluate safety performance and assess the overall effectiveness of the Department's safety and health programs. This assessment also evaluated the oversight provided by the National Nuclear Security Administration (NNSA) Production Office (NPO).

This assessment was focused on the accuracy of recordkeeping and reporting of DOE work-related COVID-19 respiratory disease cases and was requested by NPO. Document collection began in May 2022, and the onsite assessment was conducted on June 13-16, 2022.

### 2.0 METHODOLOGY

The DOE independent oversight program is described in and governed by DOE Order 227.1A, *Independent Oversight Program*, which is implemented through a comprehensive set of internal protocols, operating practices, assessment guides, and process guides. This report uses the terms "best practices, deficiencies, findings, and opportunities for improvement" as defined in the order.

As identified in the assessment plan, *Plan for the Independent Assessment of Occupational Injury and Illness Recordkeeping and Reporting by Consolidated Nuclear Security, LLC at the Pantex Plant, June 2022*, this assessment considered requirements related to DOE OII recordkeeping as required by 10 CFR 851, *Worker Safety and Health Program*. EA used sections of Criteria and Review Approach Document (CRAD) EA-32-07, *Occupational Injury/Illness Recordkeeping*, dated April 14, 2022. In addition to the CRAD, EA used criteria contained in a letter from the Director of the Office of Environment, Health, Safety and Security (EHSS) (formerly the Office of the Associate Undersecretary for Environment, Health, Safety and Security), dated October 6, 2020, *Guidance and FAQs for Recording and Reporting COVID-19 Cases*, to assess the implementation of DOE OII recordkeeping directions for recording work-related COVID-19 cases.

Prior to the onsite assessment, the CNS-maintained injury and illness spreadsheets identified a total of 257 cases from calendar year (CY) 2020 through the first quarter of CY 2022, of which 46 cases were identified as Occupational Safety and Health Administration (OSHA)-recordable OII cases and reported in the Computerized Accident/Injury Reporting System (CAIRS). For the detailed review of OII cases, EA conducted comprehensive reviews of 42 OII cases of the 257 total OII cases based on EA's experience for potential OSHA misclassification and recordkeeping issues. EA also selected 33 COVID-19 case files for initial review. During pre-site and onsite activities, EA reviewed the selected OII case files in detail and interviewed 20 available workers about their cases. In addition, EA reviewed 16 COVID-19 case files and interviewed the workers associated with the cases. EA also interviewed key personnel responsible for identifying, investigating, and classifying OII cases and reporting records in DOE's CAIRS and examined key documents, such as procedures and training records. Furthermore, EA

evaluated the CNS and subcontractor OII case files and the corresponding CAIRS logs (OSHA Forms 300, Log of Work-Related Injuries and Illnesses, and 300A, Summary of Work-Related Injuries and Illnesses) for consistency. The members of the assessment team, the Quality Review Board, and management responsible for this assessment are listed in appendix A. Appendix B summarizes the results of EA's case file reviews.

There were no previous findings for follow-up addressed during this assessment.

### 3.0 RESULTS

### 3.1 Program Administration

This portion of the assessment evaluated the CNS program documents that govern the identification, classification, and determination of recordability for prime contractor and subcontractor OII cases and the reporting of case records in CAIRS by trained and authorized OII case managers.

CNS program documents are satisfactory for identifying, classifying, and accurately determining recordability of OII cases and reporting case records in CAIRS. MNL-352253, Pantex Safety Program, and Work Instruction 02.02.02.02.03, Reporting and Processing On-the-Job Injury or Illness, provide satisfactory procedures for reporting prime contractor and subcontractor injuries and illnesses to CNS's Industrial Safety organization for OII case management. MNL-00018, Pantex Employee Manual, provides employees with clear instruction for reporting injuries and illnesses and interacting with the Occupational Health Services (OHS) department, the fire department, and Industrial Safety. Pamphlet-040, Occupational Injury/Illness, is provided to each injured employee, lists the approved medical providers for workers' compensation, and provides instructions on retrieving case-related medical information for the OHS and the two OII case managers in the Industrial Safety office. MNL-293131, CNS Pantex Plant Occupational Health Services Manual, provides appropriate requirements for providing OII-related medical treatment and employee work restrictions to the Industrial Safety case managers for classification purposes. These procedures, in conjunction with the OSHA Recordkeeping Handbook and OSHA case classification interpretations, are generally effective in the classification of work-related OII cases (when properly determined to be work-related) with some implementation weaknesses identified in section 3.2 and appendix B of this report. In addition, CNS has established appropriate CAIRS organizational reporting codes for all CNS work activities at Pantex. These organizational reporting codes cover prime contractor production and security work, construction subcontractors, the food service subcontractor, and NNSA roof asset management project work.

Subcontractors are appropriately required by subcontract document DIV-01500, Construction Management Master Specifications Division 1 (Safety and Health) to provide immediate notification of injuries to CNS and provide a monthly report of injuries as well as subcontractor work hours. However, contrary to 10 CFR 851.26(a)(2) and DOE Order 231.1B, att. 1, sec. 2.a.(3), CNS does not require subcontractors to maintain an OSHA 300 log or OSHA 300A summary for recordable cases occurring at Pantex. (See **Deficiency D-CNS-1**.) Without this requirement, subcontractors may provide inaccurate safety performance records for future contract bids or for use in safety performance analyses. While EA was on site, CNS started corrective actions to amend DIV-01500 so that subcontractors would be required to submit OSHA 300 logs and 300A summaries to CNS.

Training records demonstrate that the two case managers assigned to OII recordkeeping are sufficiently trained in OII recordkeeping and case classification requirements and CAIRS direct entry. The Office of Environment, Safety, and Health Reporting and Analysis (EHSS-23) records identify that both CNS case managers are authorized to manage CNS OII data in CAIRS.

### **Program Administration Conclusions**

CNS program documents are satisfactory for identifying, classifying, and accurately determining recordability of OII cases and reporting case records in CAIRS using trained and authorized case managers. Also, most OII reporting, and work hour requirements are adequately flowed down to subcontractors and sub-tier contractors. However, CNS does not require subcontractors to maintain OSHA 300 logs and 300A summaries.

### 3.2 Case Classification and Recording

This portion of the assessment evaluated CNS's classification and recording of workplace injury and illness cases.

CNS organizations respond appropriately to employee OIIs. All the interviewed workers reported that they received quality care from OHS and support from their supervisors and the Industrial Safety organization's subject matter experts (SMEs) immediately after the events as well as during their restricted duty periods. Interviewed workers also confirmed that they could report injuries without fear of retaliation.

The CNS process for classifying and recording cases of workplace injury and illness is effectively organized and comprehensive. Of note is the CNS process for tracking case files in the OSHA 300 log and digital record management. This process is cited as a **Best Practice** for its unique ability to provide real-time status of OII cases, support timely CAIRS case updates, and establish consistent auditable OII case records. Versatile Electronic Record Management System (ERMS<sup>TM</sup>) is used to store comprehensive OII case information as digital records designed to protect personnel/sensitive information and is made available only to those authorized for case management, audit, and performance analysis purposes. Interviews and document reviews revealed that the CNS classification process is transparent, and all necessary senior managers and SMEs are appropriately involved in the decision-making process.

Appendix B of this report provides an evaluation of each of the 42 selected CNS OII case classifications based on the OSHA 29 CFR 1904 recordkeeping standard supplemented by pertinent OSHA interpretations. The 42 OII records were selected from 257 cases that CNS recorded on its injury and illness spreadsheet from CY 2020 to the first quarter of CY 2022. Overall, the case files reviewed by EA were complete, auditable, and sufficient for making OSHA classification decisions. Twenty-five of the 42 reviewed OII cases were classified and recorded correctly. These 25 cases demonstrated that CNS's classification of the cases that were properly determined to be work-related was generally adequate. However, CNS's determination of work-relatedness was not adequate. Contrary to 10 CFR 851.23(a)(2) and DOE Order 231.1B, att. 3, sec. 1.b, 1.c, and 1.d, CNS did not properly classify 17 of the 42 reviewed cases as work-related, and this misclassification was the main cause of 12 OII cases being improperly recorded or not being recorded on the OSHA 300 log or in CAIRS. (See **Deficiency D-CNS-2**.) Misclassifying OII cases minimizes the severity of injuries and illnesses and limits feedback for targeting needed safety improvements. Specifically:

- CNS did not appropriately classify 17 cases as work-related (per OSHA 29 CFR 1904.5), resulting in
  eight unrecorded OII cases, of which four were standard threshold shift/hearing loss cases, two were
  Days Away, Restricted or Transferred (DART) cases with restricted workdays (RWDs), and two were
  medical treatment only cases.
- CNS did not consider any injury or illness occurring during the commute to or from work in the John C. Drummond Center (JCDC) parking lot as work-related (per OSHA 29 CFR 1904.5), even though CNS leases the entire JCDC area for DOE activities, controls access to the area, and maintains the

- property by funding the landlord's contractor operational plan. Three of the 17 improperly classified cases occurred in the JCDC parking lot.
- CNS did not classify cases as DART with RWDs when injured employees could not perform one or
  more routine functions (per OSHA 29 CFR 1910.7), resulting in four cases that were classified as
  work-related that should have also been recorded as DART cases with RWDs, and two cases being
  improperly classified as not work-related that should have been classified as work-related DART
  cases with RWDs.

### **Case Classification and Recording Conclusions**

All interviewed workers reported satisfaction with CNS's response to their OIIs. Interviewed workers also confirmed that they could report injuries without fear of retaliation. Additionally, CNS's overall process for gathering, tracking, documenting, and reviewing OII cases is considered a **Best Practice**. EA's evaluation of 42 selected CNS OII case classifications demonstrated that CNS's classification of the cases that were properly determined to be work-related was generally adequate. However, CNS made errors in determining work-relatedness.

### 3.3 Records Quality

This portion of the assessment evaluated work hour exposure reporting, OII case OSHA recording, CAIRS reporting, and quarterly quality checks.

### **Work Hour Exposure Reporting**

CNS work hour exposure reporting for the calculation of OII case incidence rates is adequate. CNS appropriately uses human resource records and monthly reports from subcontractors to determine actual prime contractor and subcontractor work hours of exposure. Additionally, the reviewed CAIRS records demonstrate that CNS reported work hours in CAIRS by the 10<sup>th</sup> of the month following each calendar quarter, as required by DOE Order 231.1B, att. 3, sec. 1.e. Work hours recorded in CAIRS and on the signed/certified CY 2020 and 2021 OSHA 300A summaries are consistent and appropriate for the size of the workforce.

### **OII Case OSHA Recording**

CNS maintained adequate OSHA 300 logs (using spreadsheets) for identifying all injuries and illnesses occurring at Pantex and recording the cases that were classified as OSHA recordable, notwithstanding the misclassified cases identified in section 3.2 of this report. In addition, the CNS OSHA 300A annual summaries for CYs 2020 and 2021 were consistent with the OSHA 300 logs and were appropriately certified by the CNS Pantex site manager in a timely manner.

### **OII Case CAIRS Reporting**

CNS reporting of all OII case information in CAIRS was consistently timely for the review period. For the recorded cases, CNS adequately updated additional DART days in CAIRS as they occurred rather than waiting to report by the 10<sup>th</sup> of the month following each calendar quarter, as required.

### **Quarterly Quality Checks**

CNS has established adequate procedures to perform quality checks regarding the thoroughness, accuracy, and consistency of required OII records that are locally maintained (OSHA Forms 300 and

300A) and reported in CAIRS. The required quarterly checks were performed on time and clearly documented on the OSHA 300 spreadsheet. The quarterly checks effectively ensured that the OII records met the following quality criteria:

- The OSHA 300 log includes cases that CNS classified as recordable and accurate records of DART days.
- The OSHA 300 log recordable case data is consistent with cases reported in CAIRS.

The results of quarterly quality checks recorded on the OSHA 300 log spreadsheet are appropriately shared with NPO. Each case is identified with a unique number in the Versatile ERMS, providing NPO with transparent access to the status of each case, classification decisions, and all records needed for audit.

### **Records Quality Conclusions**

CNS adequately determined work hours for OII case incidence rate calculation in CAIRS and on its OSHA 300A summary. Quarterly quality checks ensured that OII records were maintained adequately. CNS appropriately shares quarterly quality check results with NPO and provides NPO access to each OII case file.

### 3.4 COVID-19 Work-Related Determinations

This portion of the assessment evaluated CNS's determination of COVID-19 work-related cases.

CNS implements an adequate process for recording COVID-19 work-related OII cases. SO-PX-20-001, *COVID-19 Workplace Safety Plan*, provides guidance for minimizing risk during the COVID-19 pandemic. MNL-293131, *CNS Pantex Plant Occupational Health Services Manual*, guides OHS in protecting the health and well-being of personnel and providing adequate healthcare and rehabilitation of occupationally ill and injured personnel. The *OHS COVID-19 Guidance* appropriately uses Centers for Disease Control and Prevention (CDC) COVID-19 isolation/quarantining guidance for employees exposed to COVID-19.

OHS generally conducts contact tracing for CNS employees who are symptomatic and/or test positive for COVID-19 to identify close contacts at the workplace. OHS's two full-time contracted nurses who are dedicated to the management of COVID-19 cases are adequately trained in contact tracing and proficient in using the OHS Covid Case Tracer database. Additionally, contact-tracing trained OHS nurses, physical therapists, and doctors supported COVID-19 case management during the COVID-19 pandemic. CNS uses the "occupational close contact of COVID-19 case information" provided by OHS to determine whether a COVID-19 case is "likely" or "unlikely" work-related by applying the DOE Environment, Health, Safety, and Security Guidance and Frequently Asked Ouestions for Recording and Reporting COVID-19 Cases. CNS determined that two COVID-19 cases for the assessment period were likely work-related. CNS had initially entered 33 cases in CY 2020, three cases in CY 2021, and zero cases in CY 2022 in the OSHA 300 logs as potential work-related cases and determined that most COVID-19 cases were unlikely work-related after completing its investigation of work-relatedness. During CY 2020, CNS followed the CDC contact tracing guideline's definition of close contact; mask wearing was not taken into consideration to determine close contact. Towards the end of CY 2020, CNS's determination of work relatedness took mask wearing into consideration to determine close contacts. This inclusion contradicted CDC guidance and contributed to a decrease in the number of close contacts identified and missed potential work-related COVID-19 cases.

Sixteen employees from the selected 24 cases were interviewed and their records were analyzed for the adequacy of contact tracing, and the following gaps were found:

- Close contacts were not identified for five cases.
- One case was most likely work-related due to the nature of the work; however, the employee refused to provide the names of close contacts.
- Five cases were missed for which the primary exposures were likely at work. CNS incorrectly classified one of the cases as unlikely work-related; the information gathered by EA from interviewing the worker indicates that the case should have been classified as likely work-related.

Inadequate contact tracing may have resulted in additional missed work-related close-contact cases and inaccurate work-related COVID-19 determinations.

### **COVID-19 Work-related Determinations Conclusions**

Overall, CNS appropriately applied DOE guidance to determine whether a particular case of COVID-19 was reportable as work-related. However, inadequate contact tracing and inappropriate application of CDC close contact guidance may have prevented identification of potential work-related close contacts and recording of COVID-19 work-related OII cases.

### 3.5 NNSA Production Office Oversight

This portion of the assessment evaluated the competency and experience of NPO's OII oversight staff and NPO's oversight of the CNS OII recordkeeping and reporting programs.

NPO has a technically competent and experienced SME who oversees CNS's OII recordkeeping and reporting, along with an assigned back-up who assists with data entry into CAIRS. The NPO SME has adequate training in DOE/OSHA recordkeeping requirements and DOE CAIRS reporting and has significant experience in DOE prime contractor and subcontractor OII recordkeeping activities.

NPO provides acceptable oversight of CNS OII recordkeeping and reporting. The NPO SME appropriately conducts assessments, such as ASRP-NPO-60-ESH-2.62020-870342, Enterprise Level review of CNS injury/illness records, COR-NPO-60 ESH-4.3.2018-787034, FY2018 Enterprise Level Assessment of CNS Injury/Illness Recordkeeping and Reporting, and an enterprise-level assessment for CYs 2020 and 2021, Integrated Safety Management/Activity-Level Work Planning and Control-Implementation of Flow Down of Safety Requirements to Subcontractors, a portion of which is a review of the flow down of subcontractor OII documentation and requirements. In addition, CNS performs operational awareness oversight, including monthly reviews of CNS's Performance Objective, Measures and Commitments dashboards, quarterly quality assurance checks, and daily emails from the plant shift superintendent that contain information and updates on CNS OII records in real time.

At the onset of the COVID-19 pandemic, an NPO assistant manager had daily oversight of CNS COVID-19 activities, including OII recordkeeping and contact tracing. Over the course of a year, the assistant manager reviewed every quarantined and diagnosed case. The plant shift superintendent emails and COVID-19 work group meetings provided daily status information to the senior manager, and as the pandemic progressed, NPO staff reviewed COVID-19 activities at least weekly.

### **NNSA Production Office Oversight Conclusions**

NPO uses a technically competent and experienced SME to oversee CNS OII recordkeeping and reporting effectively. NPO maintains consistent oversight of CNS OII recordkeeping and reporting, including COVID-19 and subcontractor recordkeeping and reporting.

### 4.0 BEST PRACTICES

Best practices are safety-related practices, techniques, processes, or program attributes observed during an assessment that may merit consideration by other DOE and contractor organizations for implementation. The following best practice was identified as part of this assessment:

• The CNS process for tracking case files in the OSHA 300 log and use of a digital records management system provides real-time status of OII cases, supports timely CAIRS case updates, and establishes consistent auditable OII case records.

### 5.0 FINDINGS

No findings were identified during this assessment.

### 6.0 DEFICIENCIES

Deficiencies are inadequacies in the implementation of an applicable requirement or standard. Deficiencies that did not meet the criteria for findings are listed below, with the expectation from DOE Order 227.1A for site managers to apply their local issues management processes for resolution.

### Consolidated Nuclear Security, LLC

**Deficiency D-CNS-1**: CNS does not ensure that subcontractors maintain OSHA 300 logs and 300A summaries. (10 CFR 851.26(a)(2) and DOE Order 231.1B, att.1, sec. 2.a.(3))

**Deficiency D-CNS-2**: CNS did not properly classify 17 cases and did not record, or improperly recorded, 12 OII cases on its OSHA 300 log and in CAIRS. (10 CFR 851.23(a)(2) and DOE Order 231.1B, att. 3, sec. 1.b, 1.c, and 1.d)

### 7.0 OPPORTUNITIES FOR IMPROVEMENT

No opportunities for improvement were identified during this assessment.

## Appendix A Supplemental Information

### **Dates of Assessment**

Onsite Assessment: June 13-16, 2022

### Office of Enterprise Assessments (EA) Management

John E. Dupuy, Director, Office of Enterprise Assessments
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### **Quality Review Board**

William F. West, Advisor Kevin G. Kilp, Chair Jason T. Capriotti Joseph W. Demers Michael A. Kilpatrick

### **EA Assessment Team**

Kimberly G. Nelson, Lead Nimalan Mahimaidoss Thomas M. Wirgau Terry E. Krietz

# Appendix B Results of Case File Reviews

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
1	1/7/2020 (received) M20-008	Non-occupational  Office of Enterprise Assessments (EA) Note: Not recorded on Occupational Safety and Health Administration (OSHA) 300 log.	An employee in the hearing conservation program experienced a standard threshold shift (STS) in their left ear with a total hearing level of more than 25 decibels (dB) above audiometric zero.  Required Classification: Work-related, Recordable STS		
2	2/3/2020 (received) M20-004	No Injury/Illness  EA Note: Although not recordable, it was work-related.	An employee in the hearing conservation program experienced an STS in their right ear; however, the employee did not have a total hearing level of at least 25 dB above audiometric zero in the same ear.  Required Classification: Work-related, Not Recordable		
3	2/12/2020 FA20-006	First Aid	An employee exiting their vehicle in the 12-103 parking lot slipped and fell. The employee landed on their tailbone and struck their head against a running board and the asphalt pavement. Over the counter (OTC) medication was dispensed, and per the case manager, restrictions did not interrupt routine activities.  Required Classification: Not Recordable, First Aid		
4	2/26/2020 20-005	Recorded on OSHA 300 log as Days Away, Restricted or Transferred (DART) case with 39 Days Away from Work (DAWs) and 0 Restricted Workdays (RWDs); reported in the Computerized Accident/Injury Reporting System (CAIRS)	An engineering technician sustained a cut to the head when they fell from a stool and struck their head. The employee was transported to the emergency room, diagnosed with a concussion, treated with staples, and prescribed medicine. The employee returned to work on April 6, 2020.  Required Classification: Recordable, DART case with 39 DAWs		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
5	3/10/2020 M20-007	Non-occupational  EA Note: Although not recordable, it was work-related.	An employee fell outside an entrance to the building. A safety representative instructed the employee to notify their supervisor and report to Occupational Health Services (OHS) for evaluation. The employee was diagnosed with right shoulder and right knee pain and provided with first aid and OTC medication.  Required Classification: Work-related, Not Recordable, First Aid		
6	3/19/2020 M20-009	Non-occupational  EA Note: Although not recordable, it was work-related.	An employee fell after their shift in the John C. Drummond Center (JCDC) parking lot. No prescription medication was dispensed, and no restrictions applied.  Required Classification: Work-related, Not Recordable, First Aid		
7	5/4/2020 20-008	Recorded on OSHA 300 log as medical treatment; reported in CAIRS  EA Note: RWDs were not recorded on OSHA 300 log.	An employee strained their shoulder while releasing a lock on a machine. The employee was treated with a Toradol injection, ice, and a sling and given work restrictions from May 14, 2020, through September 14, 2020.  Required Classification:		
8	5/12/2020 20-009	Recorded on OSHA 300 log as medical treatment case; reported in CAIRS  EA Note: RWDs were not recorded on OSHA 300 log.	Recordable, DART case with 123 RWDs  An employee twisted their left ankle, which occurred when they were standing up from a seated position. They were seen in OHS and diagnosed with a sprained/strained left ankle. The employee received first aid and was given work restrictions from May 21, 2020, through July 8, 2020. The employee returned to work on July 20, 2020, with no restrictions.  Required Classification: Recordable, DART case with 27 RWDs		
9	6/4/2020 M20-012	Non-occupational	An employee slipped on a pebble and fell. No medication was dispensed, and no restrictions applied.  Required Classification: Not Work-related, Not Recordable		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
10	7/8/2020 M20-016	Non-occupational	An employee was typing when they felt the need to "pop" the joint in their right index finger. The employee experienced pain notified their supervisor and was escorted to OHS for evaluation and diagnosed with joint pain/arthritis.  Required Classification:		
11	10/6/2020 FA20-047	First Aid	Not Work-related, Not Recordable  After replacing lamps in the fan room, an electrician stepped down to a lower roof level and twisted their left knee. The employee was seen in OHS the following day due to discomfort and was diagnosed with contusions, bruises, and soreness in the left knee. Medical records indicate that the employee was given work restrictions that were within normal work activities.  Required Classification:		
12	11/13/2020 20-019	Recorded on OSHA 300 log as medical treatment case; reported in CAIRS	Not Recordable, First Aid  An employee was carrying a metal box and dropped it onto their left foot, lacerating the second toe. The employee was referred to OHS and diagnosed with a cut, laceration, and puncture to the left toe. The employee was referred to an outside medical provider for follow-up. Medical records indicate that upon return to OHS the employee had work restrictions that did not impact daily work activity.  Required Classification: Recordable		
13	11/12/2020 (received) M21-040	Non-occupational	An employee experienced STS in both ears. However, the employee was not exposed to noise levels greater than 85 dB in the work environment.  Required Classification: Not Work-related, Not Recordable		
14	1/6/2021 M21-001	Non-occupational  EA Note: Although not recordable, it was work-related.	An employee rolled their ankle in a work parking lot. The employee went to OHS and was diagnosed with a right ankle sprain.  Required Classification: Work-related, Not Recordable, First Aid		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
15	3/11/2021 21-003	Recorded on OSHA 300 log as medical treatment case	An employee was splashed in the eye by hand sanitizer at work. The Pantex Plant Fire Department was notified and dispatched an ambulance; the employee was subsequently transported to an emergency room. The treating medical provider prescribed medication.  Required Classification: Recordable		
16	3/15/2021 21-005	Recorded on OSHA 300 medical treatment; reported in CAIRS	An employee experienced numbness and tingling after applying a tourniquet during training. After three weeks, the symptoms did not completely resolve. The employee was prescribed medication to treat inflammation around the ulnar nerve.  Required Classification:		
17	3/18/2021 M21-006	Non-occupational (not work-related)	Recordable  An employee was walking in the JCDC parking lot when they slipped and fell on snow/ice. First aid, including ice and OTC medication, was provided.		
1,		EA Note: Although not recordable, it was work-related.	Required Classification: Work-related, Not Recordable		
18	3/18/2021 M21-007	Non-occupational (not work-related)	An employee was walking in the JCDC parking lot when they slipped and fell on snow/ice. No medication was dispensed, and no restrictions applied.		
10		EA Note: Although not recordable, it was work-related.	Required Classification: Work-related, Not Recordable		
19	3/24/2021 21-004	Recorded on OSHA 300 log as medical treatment case; reported in CAIRS  EA Note: 21 RWDs were not recorded on OSHA 300 log.	An employee sustained cuts on two fingers while dismantling parachutes in preparation for waste disposal. The employee was transported to an offsite facility and diagnosed with cuts/lacerations/punctures to two fingers on the left hand. The employee received sutures and prescription medication and then returned to work. The employee was given a work restriction from March 24, 2021, through April 15, 2021.		
			Required Classification: Recordable, DART case with at least 21 RWDs		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
20	3/24/2021 FA21-010	First aid  EA Note: Not recorded on OSHA 300 log	An employee strained their shoulder while they were replacing light bulbs. OHS evaluated the employee and diagnosed them with a right shoulder strain/sprain and provided first aid treatment. The employee was given work restrictions from March 24 through 31, 2021.  Required Classification:		
			Recordable, DART case with seven RWDs		
21	3/30/2021 FA22-015	First aid	As an employee was leaving the site, they tripped over an irregular concrete surface and fell onto their knees. The employee was seen by OHS and diagnosed with contusions/bruises/soreness. No medication was dispensed, and no restrictions applied.		
			Required Classification: Not Recordable, First Aid		
22	4/7/2021 M21-008	Non-occupational	An employee tripped over a curb as they were leaving and fell, landing on their head and left knee. They were transported to the emergency room, where they were diagnosed with a concussion and abrasions. The injury was properly classified as non-occupational due to a personal medical condition.  Required Classification:		
23	4/30/2021 M21-009	Non-occupational	Not Work-related, Not Recordable  An employee's right eye appeared to be irritated when they arrived at work. The employee went to OHS and was diagnosed with eye irritation. First aid was provided.  Required Classification: Not Work-related, Not Recordable		
24	6/12/2021 21-007	Recorded on OSHA 300 log as medical treatment case; reported in CAIRS	As a maintenance mechanic was replacing an oil pan gasket on a generator, an oil pan guard fell onto their head, causing a laceration. The treating physician at the emergency room diagnosed the employee with a laceration and provided staples and prescription medication.  Required Classification: Recordable		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
25	6/15/2021 (reported) M21-025	Non-occupational  EA Note: STS was not recorded on OSHA 300 log.	An employee in the hearing conservation program experienced an STS in their left ear with a total hearing level of more than 25 dB above audiometric zero.  Required Classification: Work-related, Recordable STS		
26	8/6/2021 (reported) M21-044	Non-occupational  EA Note: STS was not recorded on OSHA 300 log.	An employee in the hearing conservation program experienced an STS shift in their right ear with a total hearing level of more than 25 dB above audiometric zero.  Required Classification: Work-related, Recordable STS		
27	8/18/2021 M21-020	Non-occupational  EA Note: Not recorded on OSHA 300 log	An employee fell while attempting to sit in their chair. Several hours after the event occurred, the employee began to experience pain/swelling and went to the emergency room, where they were diagnosed with a left wrist sprain. Prescription medication was prescribed to the employee.  Required Classification: Work-related, Recordable		
28	8/26/2021 (reported) M21-021	Non-occupational  EA Note: Although not recordable, it was work-related.	An employee in the hearing conversation program experienced an STS; however, the employee did not have a total hearing level of at least 25 dB above audiometric zero in the same ear.  Required Classification: Work-related, Not Recordable		
29	11/8/2021 M21-032	Non-occupational  EA Note: Not recorded on OSHA 300 log	An employee lost their balance and fell while filing documents. The employee was transported to the emergency room per request, treated, and released. The employee was diagnosed with lumbar radiculopathy and prescribed medications to treat the injury.  Required Classification: Work-related, Recordable		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
30	11/12/2021 M21-033	Non-occupational  EA Note: Although not recordable, it was work-related.	An employee hurt their back when they placed a rifle magazine on a table/stand. The employee leaned to the side from a standing position and felt sharp pain in their lower back. The employee was seen in OHS, diagnosed with back pain/strain, and given first aid.  Required Classification: Work-related, Not Recordable, First Aid		
31	11/12/2021 (reported) M21-041	Non-occupational	An employee in the hearing conservation program experienced an STS in their left ear with a total hearing level of more than 25 dB above audiometric zero; however, the employee did not have significant noise exposure at work for over five years.  Required Classification: Not Work-related, Non-occupational		
32	11/12/2021 (received) M21-042	Not work-related	An employee in the hearing conservation program experienced an STS in their left ear with a total hearing level of more than 25 dB above audiometric zero.  Required Classification:  EA could not make a factual determination on recordability in this case. The employee was not available to be interviewed to clarify case documentation.		
33	11/12/2021 (reported) M21-046	Non-occupational  EA Note: STS was not recorded on OSHA 300 log.	An employee in the hearing conversation program experienced an STS in their right ear with a total hearing level of more than 25 dB above audiometric zero.  Required Classification: Work-related, Recordable STS		
34	12/13/2021 (received) M21-045	Non-occupational	An employee experienced an STS in the right ear. However, the employee was not exposed to noise levels greater than 85 dB(A) in the work environment.  Required Classification: Not Recordable, Non-occupational		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
35	12/16/2021 FA-21-055	First aid	An employee was performing a training exercise and a finger on their left hand was struck with the blunt end of an axe. The employee was seen by OHS and diagnosed with a contusion and laceration to a finger on their left hand and provided with first aid.  Required Classification:  Not Recordable, First Aid		
36	12/21/2021 (reported) M21-039	No injury/illness	An employee in the hearing conservation program experienced an STS in their right ear; however, the employee did not have a total hearing level of at least 25 dB above audiometric zero in the same ear.  Required Classification: Work-related, Not Recordable		
37	1/4/2022 M22-002	Non-occupational  EA Note: Not recorded on OSHA 300 log	A production technician (PT) walking to a bay after a meeting experienced right knee pain and could not continue to walk. The PT was transported off site to a local emergency room where they were diagnosed with a right knee strain by the offsite medical provider. The PT was seen by OHS on January 7, 2022 and placed on restricted duty for seven days. The case was listed on the event log, and the worker compensation indemnity was paid, but the PT was not available for an EA interview. The case was not recorded on the OSHA 300 log.  Required Classification: Work-related, Recordable, DART with seven RWDs		
38	1/17/2022 22-001	Recorded on OSHA 300 log as DART case with 0 DAW and 3 RWDs; reported in CAIRS	An employee scraped their knuckles while using a battering ram. The employee was seen in OHS and diagnosed with an abrasion to their right hand. They received first aid treatment and were given one work restriction from January 17 through 18, 2022, and a second work restriction from January 21 through 23, 2022.  Required Classification:		

	Results of Case File Reviews				
#	Injury Date/Case Number	Consolidated Nuclear Security, LLC (CNS) Classification*	Case Summary and Required Classification		
39	1/20/2022 M22-003	Not work-related  EA Note: Although not recordable, it was work-related.	An employee began to feel faint/dizzy while performing work-related training. The employee was taken to OHS for further evaluation and diagnosed with dizziness/fatigue. OHS established that it was personal illness.  Required Classification: Work-related, Not Recordable, First Aid		
40	1/26/2022 M22-006	Non-occupational	An employee was walking back to their car from a change house, tripped on a curb, and fell. The employee was seen by OHS and diagnosed with contusions/bruises/soreness to the chest.  Required Classification: Not Work-related, Not Recordable		
41	2/4/2022 M22-007	Non-occupational  EA Note: Not recorded on OSHA 300 log	An employee slipped and fell as they were walking into a change room. They were seen in OHS and diagnosed with a right knee abrasion and left shoulder strain, prescribed medication, and given a work restriction from February 4 to 8, 2022.  Required Classification: Work-related, Recordable, DART with four RWDs		
42	2/4/2022 FA22-006	First aid	An employee received a laceration to their right hand while trying to close a bay door. They were seen in OHS and diagnosed with a cut/laceration/puncture to right palm, no medication was dispensed, and the medical restriction did not impact the employee's routine duties.  Required Classification: Not Recordable, First Aid		

<sup>\*</sup>As denoted in CNS case records